Challenges facing children from child-headed households in the Eastern Cape, South Africa

Paper presented by

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I. Introduction to the Study

There is a noteworthy increase of child-headed households in South Africa. Such households result from the rapid increase in numbers of parental deaths leading to the overburdening of the capacity of relatives to fulfil their traditional role of caring for orphans (Foster, Makufa, Roger & Kralovec, 1997). This is considered an indicator of the erosion of the traditional safety nets in sub-Saharan African countries and a direct consequence of the increasing number of orphans in the region (Ciganda, Gagnon, & Tenkorang, 2012). It is anticipated that the human immune virus and the acquired immune deficiency syndrome (HIV/AIDS) pandemic in South Africa will progressively increase the number of children who live in child-headed households (Donald & Clacherty, 2005:21; Whiteside, 2008:13). It would seem that we are only beginning to understand how these realities and consequences are specific to children living in child-headed households as opposed to other vulnerable children living in adult headed households (Wilson, Giese, Meintjies, Croke & Chamberlain, 2002).

Sub-Saharan Africa has the largest number of people living with human immune virus (HIV). Whiteside (2008: 6). It has been revealed that 64% of infected people and three quarters of all infected women were living in the region and by 2007 the HIV/AIDS epidemic had created 12 million orphans in sub-Saharan Africa (Kidman, Petrow & Heymann, 2007:326). South Africa’s antenatal clinic survey recorded an increased prevalence from 29% in 2004 to 30.2% in 2005 (Whiteside, 2008:6). The HIV prevalence in Southern Africa has reached levels considerably higher than had previously been thought possible. The incidence is so high that statistics on the number
of people dying due to HIV are no longer routinely collected, except in well-resourced countries. Donaldson (2005:13) cites a damning UNICEF report that while life expectancy in South Africa increased from 53 years in 1970 to 62 in 1980, it has since dropped dramatically to just 47 years in 2004. Similarly, the crude death rate has risen from 14 per 1000 in 1970 to 18 in 2004. These statistics “illustrate the tragic impact of the AIDS pandemic on the country” (Donaldson, 2005:13). Although HIV seems to be controllable, UNICEF’s Regional Update Report reveals that 5.6 million people in South Africa are infected by HIV/AIDS (UNICEF, 2012). The death of parents and the paucity of caregivers from the extended family lead to children caring for themselves. This is the creation of child headed households. As much as medical science has moved swiftly in controlling HIV/AIDS, we are still yet to see death of parents and the further burgeoning of child-headed households.

It is precisely the escalating number of parenting youths that concern the researcher. It would seem that these children are at risk since they grow up without any biological or substitute parental care and are exposed to countless negative elements. Despite these factors militating against them, these children seem to survive and so far it is unclear how they survive without parental care and what becomes of them once they outgrow childhood, become young adults and are no longer bound to the child-headed households which they either headed or were simply part of.

Children living in child-headed households have to endure various burdens of caring for each other. As such, much research has been confined to challenges facing children
within such households. None of the studies has addressed young adults emerging from child-headed households who carry with them “layers of hurt as well as accomplished ways in which they reconstitute the everyday [life]” into adulthood (Henderson, 2006, p. 322). There is therefore a visible absence of information and research on how these children survive during their stay in child headed households and what coping strategies they employ once they have gone through and left the child-headed households. This illustrates a gap in the literature which the present study attempts to address.

HIV/AIDS has left many children without parents and this pattern is bound to continue for many years and that we are still to see many child-headed households escalating in South Africa. Germann (2005) notes a distressing consequence of the HIV/AIDS pandemic and of the increasing numbers of orphans and decreasing numbers of caregivers as well as the emergence in ever larger numbers of child-headed households. As such much research has focused on needs of orphaned children and is confined to children within the system and other challenges facing children within the child-headed households. Examples of this include Habte’s (2004) study on limitations of the extended family in dealing with HIV/AIDS orphans; vulnerability of children in child-headed households (Chikwendu, 2004); men who are not caring for their families because they are irresponsible and profligate (Montgomery, Hosegood, Busza, & Timæus, 2006). None of the studies has addressed young adults’ emotions since entering the child-headed household and how they emerge from these child-headed households. There is therefore a visible absence of information and research on
children who have gone through and left the child-headed households. This illustrates a gap in the literature which the present study attempts to address.

The study specifically aimed to address the following objectives:

- To explore the experiences of children living in child-headed households;
- To find out their survival strategies in the child-headed household which constitutes the transition into adulthood;
- To examine how the young adults have progressed since leaving the child-headed households;
- To examine the role of social service practitioners in dealing with children in child-headed households.

II. Research methodology

Research methodology includes detailed information about how the study will be carried out, with whom, how the data will be collected and the standards that the researcher will use in interpreting the data (Welman, Kruger & Mitchell, 2006). The research setting: The data were collected within a radius of 45km from the University of Fort Hare. This is a semi-urban area with very limited resources which fell under the Ciskei homeland during the apartheid era. The study applied the qualitative research design and employed the exploratory approach in an attempt to study human action from the insider’s perspective (Merriam, 2004). The exploratory design explores and focuses on the exploration of a relatively unknown area to obtain new insights (Babbie, 2005; van der Merwe, 1996) and concerned with uncovering the lived experiences of the subjects (Durheim, 2004).

The population was made up of young adults emerging from child-headed households who had been out of such a household for a minimum of two years. These were black
youngsters residing in the Nkonkobe District of the Eastern Cape who would be 20 years and older but not exceeding 30 years of age. The second population constituted of social service providers in the Nkonkobe District. Two sets of samples were employed: young adults emerging from child-headed households as well as social service providers who were chosen by the researcher and made up of adults familiar with the children and their situation. Non-probability sampling – specifically availability sampling – was employed for both samples.

A total of 22 participants were selected for the study. These were drawn from two universes: the first sample was made up of fourteen young adults who have lived in child-headed households and have been out of the child-headed household for a minimum of two years. These were involved in an in-depth one-on-one interview. Availability sampling was applied with the assistance of social workers and child care workers who are associated with child-headed households. The second sample was made up of a total of eight social service providers who are familiar with and are closely linked to the sample: 2 social workers; 3 caregivers and 3 high school teachers (one of the teachers being a priest). They participated in a focus group discussion. The use of multiple sources (Willis, 2007) triangulates the data, which promotes the study’s trustworthiness – a qualitative equivalent of validity. The essential idea of triangulation is to find multiple sources of confirmation when the researcher wants to draw a conclusion (Krefting, 1991; Willis, 2007). Interviews with 14 young adults (11 females and 3 males) emerging from child-headed households were held in the form of face-face-face individual interviews. The responses were recorded by means of an audio-recorder and
permission for the use of recording equipment was sought from the participants before the interview took place during the recruitment phase. A semi-structured interview schedule was used, thus living room for further probing (Bernard & Ryan, 2010) where possible. The researcher asked analytical questions which gave focus to data collection and also helped organise it as the research proceeded. In accordance with qualitative research, the researcher’s pre-understanding formed the basis of the interview guide and the areas focussed on included: the experience of living in a child headed household; the effects of such living; how they were affected by living in a child-headed household; their perceptions of coping; their views on what might improve the situation; exploring their functioning as children living without the supervision of an adult; the challenges they encountered and how they dealt with these in order to survive. Another interview schedule was drawn up for an 8 member focus group comprising service providers. The same process applied in the young adults emerging from child-headed households will apply to the referees or significant others.

Grounded theory was applied for data analysis. Grounded theory looks rigorously at qualitative data with the aim of generating theory. Theory is generated from the ground up, that is, from the data without being influenced by pre-existing data – the idea being to start with an open agenda and allow the data to shape the theory (Van Breda, Marx & Kader, 2012). Grounded theory is thus focused on inductively derived theory (Ezzy, 2002:8). Merriam (2004) further contends that this is a process of systematically classifying data into some sort of schema consisting of categories, themes or types. The data were analysed manually which meant five concurrent flows of activity: (1)
collecting; (2) recording; (3) managing data; (4) reading and memoing; (4) describing, interpreting, representing, visualising and (5) concluding (Bernard & Ryan, 2010: 271; Brink, 2009:170; De Vos, 2005:334). The grounded theory used the interpretive approach. The individual interviews were triangulated with the focus group for richer information and to enhance trustworthiness. Direct quotations were applied and the researcher represented the main themes that were extracted from the quotations.

**Ethical considerations:** The following ethical considerations were taken to protect the participants:

- Pseudonyms were assigned to their real names and no names of places are mentioned
- The names of real places have not been used
- They were at liberty to refuse participation
- They signed a consent form and were informed about how to find access to the results.
- The details and purpose of the research were explained during the recruitment stage and recapped before the interview.

**III. Definition of terms**

The following terms, which have significance in the study, need to be explained: Child-headed household, the concept child, nomenclature of child-headed household and fatherlessness.
Child-headed Household

The term child-headed household is viewed and interpreted by different authors in an inconsistent manner to an extent that its meaning tends to be broad, sometimes fuzzy and nebulous. Along with this comes a plethora of euphemisms. Francis-Chimosoro (2007) contends that it is difficult to define an orphan. Similarly, there is confusion and inconsistency in the literature over definitions of CHHs. The problem of the definition of a CHH is related to the general problems of conceptualising children and childhood, head of household and household. The discussion will now look at the concepts child, and child-headed household.

The concept Child: The conception of child comes with its own controversies in both theory and practice. The Convention on the Rights of the Child (1989) defined a child as any person below the age of 18. The definition adopted by many countries helps to identify children by categorizing them statistically and associating persons with similar characteristics within a particular framework of age. Nonetheless, laws in some countries have tended to offer varying definitions of a child. In Malawi, for instance, different laws provide for various definitions of the child so as to suit a specific situation. Section 23 of the Constitution of Malawi (1995) defines a child as a person up to the age of 16. This definition becomes useful in Malawi for purposes of labour which suggests that a child below 16 years of age may not be employed and may therefore not join the labour force. For marriage purposes the age is set at 15 years. The various definitions based on age create confusion in implementing child welfare programmes as much as at times they offer flexibility in focusing on specific groups of children.
The South African perspective simply defines a child as a young human being below the age of puberty or below the age of majority. A child, whether male or female, becomes a major upon reaching the age of 18 years (Children’s Act 38/2005). The Act further stipulates that a child has a “need to remain in the care of his or her parent, family and extended family; to maintain a connection with his or her family, extended family or tradition….” Section 17 of the Act further specifies that “Every child has responsibilities appropriate to the age and ability towards his or her own family, community and the state”. This explanation makes it clear that a child needs to be cared for by an adult related to the child concerned. For our purposes, a child is a person who is e18 years or younger.

**Nomenclature of child-headed household:** There are many names offered by different scholars in an attempt to explain child-headed households and they seem unable to reach a complete consensus. These explanations include adolescent-headed household (Foster *et al.*, 1997); youth-headed households (Thurman *et al.*, 2006); junior-headed households (Kuhanen *et al.*, 2008); ‘child only’ units (Francis-Chimosoro, 2008); youth-headed family as a new kind of alternative family (Bartoszuk & Pitmann, 2010); young-adult headed household (Ciganda, Gagnon & Tenkorang, 2012); sibling-headed household as well as families headed by young people (Mukashema, 2014). The author would like to include the terms differently-headed households, parenting youths and non-adult-headed households. This abundance of nomenclature presents difficulty in choosing which term best explains the situation of a family headed by a non-
adult. Moreover, Mukashema (2014:356) argues that these households form a “family” that provides support and continuity:

(T)hey deal with the adult responsibilities of supporting themselves at an age when the care and protection of an adult are normally needed; and they assume an anthropological and psychological position for which they were never prepared.

A distinction between two basic types of child-headed households, namely the accompanied and unaccompanied is often made (Foster et al., 1997; Germann, 2005; Mukashema, 2014). An accompanied child-headed household has one or more adult members, who, because of illness or incapacity, do not contribute to the running of the household, but who do require shelter, support and care. An unaccompanied child-headed household has no adult member and denotes a situation where children are living with other children. What came out of the study is that the grandmothers who form an accompanied household assist financially by contributing from their old age pension.

However, the term “child-headed household” here means a household headed by a person who is under the age of 18 (i.e. a legal minor) in terms of the Children’s Act (2005). The present study will therefore retain and employ the term “child-headed household” as referring to a household headed by a non-adult. Furthermore, the term “child-headed household” is most widely used in literature.

In Namibia for instance, the age of legal majority is 21, although a person can vote at age 18. In many instances people aged 18 or above are considered adults, while those who have not yet reached 18 are considered to be children (Kuhanen et al., 2008).
Table 1: Definitions of Orphan from Selected African Countries

<table>
<thead>
<tr>
<th>Name of Country</th>
<th>Orphan Definition</th>
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<tbody>
<tr>
<td>Namibia</td>
<td>A child under the age of 18 who has lost a mother, a father, or both – or a primary caregiver – due to death, or a child who is in need of care.</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>A child less than 18 years of age who has lost both parents, regardless of how they died.</td>
</tr>
<tr>
<td>Botswana</td>
<td>A child below 18 years who has lost one (single parents) or two (married couples) biological or adoptive parents.</td>
</tr>
<tr>
<td>Uganda</td>
<td>A child below the age of 18 years who has lost one or both parents.</td>
</tr>
<tr>
<td>Rwanda</td>
<td>A child who has lost one or both parents [no upper age of childhood stipulated]</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>A child below the age of 18 year who has lost one or two parents.</td>
</tr>
<tr>
<td>South Africa</td>
<td>A child who has lost both parents. A child who has no surviving parent caring for him or her under the age of 18 years (Children’s Act, 2008)</td>
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(Adapted from: Smart *et al.*, 2003:3)

Germann (2005) developed a matrix of the types of child-headed households. (See Table 1 below) A report by the University of South Africa (UNISA) (2008) explains Germann’s (2005) matrix as allowing one to incorporate the different contextual features that characterize a child-headed households and assists in identifying different types of these households. The report concurs with Germann and also differentiates between adolescent-headed and child-headed by indicating the different social sub-systems within such households based on the ages of the affected children.

Table 2  Matrix of the types of child-headed households

<table>
<thead>
<tr>
<th>TYPE OF HOUSEHOLD</th>
<th>DESCRIPTION</th>
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<tbody>
<tr>
<td>Adolescent-headed households</td>
<td>- Is a household headed by a 16-20 year old</td>
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<tr>
<td>CHH</td>
<td>Is a household headed by a person younger than 16 years old. Once such a head turns 16 the household becomes an adolescent headed household.</td>
</tr>
<tr>
<td>Accompanied CHH</td>
<td>A child or adolescent headed household which includes an adult in need of</td>
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care such as:
- any aged grandparent or guardian in need of care and unable to provide child care, income or household supervision
- An adult who is mentally unstable and in need of care
- Any other adult in need of care and unable to provide child care, income or supervision

<table>
<thead>
<tr>
<th>Unaccompanied CHH</th>
<th>A child or adolescent-headed household where there is no adult residing in the household</th>
</tr>
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<tbody>
<tr>
<td>Supported CHHs</td>
<td>- Extended family regularly visits the household&lt;br&gt;- Neighbours support and supervise the households&lt;br&gt;- A community care programme for orphans provides monitoring and support visits to the household&lt;br&gt;- Household receives ongoing support from local church or philanthropic groups or from NGOs.</td>
</tr>
</tbody>
</table>

(Adapted from Germann, 2005)

**Fatherlessness:** The issue of fatherlessness is contentious one. Some studies conclude that such a situation has a negative effect on the child while others see no such effects. The results of a study of children raised by female-headed families (Golombok, & Badger, 2009) found more similarities with children from traditional families on a range of measures of quality of parenting. Differences that were identified were on family types, which pointed to more positive family relationships and greater psychological wellbeing among young adults raised in female-headed homes. However, a study conducted in South Africa by Manana (2012) concludes that children who grow up without a father suffer emotionally, intellectually, socially and in terms of behaviour. Girls, on the one hand, suffer from low self-esteem, have higher levels of risky sexual behaviour, have more difficulties forming and maintaining stable sexual relationships problem for children of both sexes but more so for boy-children. Girls become prone to falling pregnant early and as single parents. Boys who grow up without a father, on the other hand, are more likely to engage in over-compensatory masculine behaviour later on in life. Another worrying factor, according to Manana (2012) is the increase in absent
but living fathers. Empirical findings tend to paint a gloomy and complicated picture of fatherless children. The following are just some of the examples of more than half the sample who do not know their fathers.

Siboniso does not know his father as mother never told him who it was. This bothers him but there is nothing much he can do about it. He just wonders. Akhona also does not know her father and has never seen him – she only knows that he was somewhere in Gauteng. Mother never explained anything about him. The same applies to the other siblings about their fathers. Bongani (22 years old) was brought up by his maternal grandmother though his mother was alive. However maternal grandmother passed on while he was still very young. He also does not know his father. Another respondent does not know her father as her mother never talked about him. "I am told that he denied paternity. Life was good with my mother as I grew up like any other child – playing with other children and having fun". Khayakazi lamented: "I feel horrible that I don’t know who my father was. If he was around he would be playing his role by taking care of us now that mother is no more. My elder sister also does not know who her father was". Xiza was informed that father tried to establish contact with him without success. His whereabouts are unknown. He only knows his first name but does no know his surname and clan name life. This does not seem to auger well with the development of the individual.

**IV. Economy of the CHH**
The Eastern Cape Province is one of the poorest nine provinces in South Africa. By comparison, Blaauw et al. (2011:151) found in Gauteng Province, which is the richest Province, that:

The income available to child-headed households varies between no income [at all] and R3 000 per month. The average monthly income of a child-headed household .... is estimated as amounting to R1 221, and the median is R1 000 per month.

The Eastern Cape Province, on the other hand, is marked by poverty and joblessness (Seekings & Nattrass, 2005). The rural areas – such as the one where the study was done – do not have any industrial areas that can offer employment. It was previously used as a pool for migrant mine workers. The majority of these families survive on one of the following: foster care grant, childcare grant and earnings from menial services rendered. The main method to achieve this was by providing Foster Care Grant (FCG), which the government offers as an incentive to encourage people from the community or extended family to take care of orphans. According to the Black Sash (2014) all children under 18 in need of parental care may be fostered, A child between 16 to 18 years old, and is recognized by the provincial Department of Social Development as the head of a household, can receive the foster child grant through the supervision of an adult. From 1 April 2014, the grant amount was R830.00 a month per child.

Similarly, a child support grant (CSG) of R320.00 is payable by the South African Social Security Agency (SASSA) to assist the plight of destitute children. Children between 16 and 18 years old who are heading households can apply for the grant with the support of a supervising adult. The Child Support Grant (CSG) aims at supporting caregivers of children aged between 0 and 15 years. The FCG is increasingly criticised, however.
Although initially intended for children in need of care (Child Care Act, 2008), a broad category that does not automatically include orphaned children. The FCG has particularly been promoted by social workers handling the cases of orphaned children, which has encouraged a perception that these children’s needs are primarily material, that they are “in need of cash” (van Dijk & van Driel, 2009). Dumont & Sumbulu (2010) give a succinct illustration of the role of social workers during the apartheid era in assisting substitute parents. They had pity for the pittance recommended by the state for substitute parents to accept the lesser child care grant instead of foster care grant which was substantially more – as it is still the case. The government had stringent policies controlling the issuing of the foster care grant thus encouraging the payment of the lesser child care grant to the disadvantage of the child concerned. Furthermore, there needs to be an adult figure in order for a family to qualify for the grant. The Child Support Grant is paid monthly to support to adults in need who care for children who are born after 31 December 1994 (age 18 and under). Children between 16 and 18 years old who are heading households can apply for the grant with the support of a supervising adult (Black Sash, 2014). The grant system has become a way of earning a living to many families due economic hardships and has become the sole source of income (Gutura & Tanga, 2014).

The poverty experienced by the CHHs is expressed in many different ways by the respondents. One respondent s unemployed and survives on her grant. Business is a bit slack and she finds herself taking from her profit and using it on buying food. She stopped her business because she found herself using all her profit on household effects. Another respondent is unemployed and survives on her grant. Business is a bit
slack and she finds herself taking from her profit and using it on buying food. She stopped her business because she found herself using all her profit on household effects. Khayakazi feels that life improved when she started receiving a foster care grant as this allowed her to budget and buy food. There is no other person assisting in any way whatsoever – not even her partner. The grant she is earning cannot begin to meet some of her aspirations such as building a better home, living comfortably, etc. Thandiswa was assisted by a neighbour to apply for both an ID and a childcare grant. The grant is therefore her sole source of income. There is no hope that she could marry her boyfriend as they don’t see eye-to-eye. Another respondent declared that her financial situation was so bad that that before she received the grant she did consider suicide as they would go for days without food. She had a handful of her epileptic sister’s pills.

V. Everyday life

What has emerged is that Akhona (who is now the foster mother of her two siblings) hands over the entire grant that she draws to the foster child who uses it as at will. They discussed this with the social worker who said that the grant should be given to the foster child to save in the bank. She has to make do with the R900,00 she earns as a cook at the local school as well as senile grandmother’s pension from which she buys food for all. The money she gets is used for personal upkeep, supporting the family and her child’s needs as the father does not maintain the child. She consoles herself by saying: “I know he (the boyfriend) does casual work which he denies. I don’t bother because this is my child” (There was a twinkle in her eyes when talking about her child).
She has visited social work offices and they ended up asking a lot of questions and promised to visit—but never turn up. There is also another organization known as "Never Give Up". They promise follow-up visits which they do, only to ask the same questions over and over again. The same respondent received counselling after a gang rape ordeal. Social workers took her for counselling and she could not continue with follow-up sessions as did not have money. No social worker showed up.

**All In a day’s life:** The everyday life experienced by the young adults gives an idea of what they have gone through and what meaning is attached to such events. Included here is leisure and pastime, relationship with neighbours, relationships the importance of work, suicide and violence.

**Leisure and Pastime:** Social gatherings include the activities in which they participate in the community. What emerged is that their time is divided between going to church and attending cultural events. Khayakazi spends every Monday at church from 1pm to 5pm and comes back late afternoon to prepare supper. “On other days I visit friends and chat till late”. Very emphatically: “I do not go to taverns. I do not drink”. Siyanda spends a lot of her time at church and was saved at one time until she met her boyfriend. Two of the three male respondents play soccer during weekends and are quite passionate about their participation. Akhona on the other hand said about church: “I go to church Sundays for the sake of going. I do not have a singing voice like other people”. She frequently visits her aunt in another part of the township. She rarely visits me as she has swollen legs and therefore has difficulty in walking. She spends most of her time at the gym as she is an ardent rugby player.
Another interesting aspect is that all respondents - except one, Siyanda - believe and practice Christianity. Parallel to this they are also tenaciously holding on to their cultural values and practices. Their parents were also ardent practitioners of amasiko (ancestral worship). This seems to form a very strong point of their lifestyle. Siboniso for instance ad libbed his paternal ancestry up to about seven generations. Christianity played a meaningful role for Bongi’s mother “lcawe ibinednima kumama ngoba kuqala before akhonze umama ubesela engakhathelelanga nto. Kodwa ekuhambeni kwethuba wayeka waziqonda uba unabantwana makakahthelelela abantwana bakhe”. (Her mother drank profusely but this habit stopped when she embraced Christianity). A similar thing applies to Xiza: “Amasiko abalulekile coz nam xa ndilele apha endlini, mhlambi kuvese kubekho lo mbono, womntu ngathi uzandikrwitsha ebusuku, or ndivezelwe ngaye uba uzakwenzinto. Ndingayibhilivi le nto but xa ndinyuka ilali emini nanku lo mntu esenza la nto”. (His dreams have a habit of becoming a reality and he believes this is associated with his cultural disposition). This dual belief system is quite prevalent. In explaining this the Rt. Rev. Dwane (1999: 66) sums this up:

In traditional religion, the various ceremonies and rituals harness the individual to his or her lineage, and to the network of human relationships, in which the lineage is caught up. To be human in the African sense, is … to be a magnet which interacts, and forms with them a magnetic field. It is by means of ritual that a newly born baby is incorporated into the life of the family, and brought into a vital relationship with its ancestry, a process by which it is humanized. Ritual is the means by which persons are made to belong and so become fully human. Through ritual, the highly esteemed ‘ubuntu’ values are celebrated, so as to give families and communities sense of purpose. Zionist churches have for this reason a strong appeal to many African people, especially in times of crises (iinkathazo). Their use of of rituals which are in harmony with African beliefs, speak directly to the condition of those who are faced with trials of this kind. There is a consensus of opinion that many Christians who belong to the ‘mission’ churches, find a home in Christian churches, when for instance they have ukuthwasa condition (the call to be a diviner), because their emotional and spiritual
needs are understood there, and given a caring concern. The underlying reason for this is that the Bishop or Prophet in Zionism is usually someone who has himself been apprenticed to a qualified to a diviner, and certified as a diviner at the end of the training. Consequently, Zionism is able to blend the old and the new religions in such a way that the requirements of the new do not alienate a person from the old.

**Survival:** The survival tactics applied by the respondents are their adaptations to their tough life. These coping mechanisms come in different forms and are now discussed. One of the things which make Siyanda feel comfortable and encouraged is the behaviour of her charges: they respect her and listen to her. She enjoys her work and derives great pleasure out of it. One of her greatest rewards comes when a child at work reports back that she is viewed as a role model by the learners. In this way “Umsebenzi uyandivuselela” (In this way work energises me). Siboniso’s survival is based on the belief that everything shall come to pass. “Akukho mntu owayedalelwe ukuhlupheka (Nobody was born to be poor). God knows what He has in store for me. I should hang in there. Akunamsebenzi noba silele sichubelene ngentwala”. (It doesn’t matter whether we go to bed with a meal as little as nothing). “I sometimes appeal to Khaya’s mother for assistance”. Akhona finds solace by going to church Sundays and feels spiritually refreshed afterwards. She feels encouraged when the children go to school. What keeps her going is “Getting hold of yourself, being strong and knowing what poverty and struggling for survival mean; knowing difficulties and praying”. The two young women (Zanele and Nosana) still at school live with the purpose of achieving the ultimate goal of passing and not disappoint their family. Nosana has class mates as friends but does not fraternise over weekends. “What make me survive? It is my siblings. When I write a test I have in mind that I am doing this for them”. For Zanele:
“My (late) grandmother’s teachings and discipline. She greatly encouraged me by showing interest in my schooling as well as the confidence in me by saying that she could see that I could make it at school. She encouraged not dropping out of school”.

“My brother and sister keep me going in that whatever I do I always have them in mind. When my parents died I did not know what I was living for. So I had to take parenting role which I think I played well. I am able to tell them that there’s no way that we can change - we need to find ourselves. Even the youngest understands as he is growing now”. Khayakazi said: “We told ourselves that life should go on. We need to work in harmony, hand in hand and that we would be like any other parented family”. Phumelela consoles herself: “I have never been right since my mother passed on. I even failed my class after her death. Now I am trying to pick up (the pieces) but not quite strong enough. I tell myself that I need to be strong and tell myself that’s life and there is no way that I can bring them back”. The respondents seem to show a lot of resilience which is explained by (Cyrulnik, 2011: 5) as

The ability to succeed, to live and to develop in a positive and socially acceptable way, despite the stress or adversity that would normally involve the real possibility of a negative outcome.

Concern about siblings: Nosana recounted an event that touched her concerning her younger brother. “What bothered me is that one night we were together at home and we were informed that some boys in the village had stolen a pot of cooked meat meant for a celebration. All the boys in the village were rounded up and shambkked, including my brother who was with me all day long. This left him with a horrible scar on his face. We laid a charge with the Police but we were told (by the community) to withdraw the
charges or face the expulsion of all the boys from the village. That hurt me profoundly. *My heart still aches when I think of that event*."

Could this be the scapegoating and abuse of defenceless, parentless children; blaming the defenceless. During the focus group discussion it was felt that some community members take advantage of children from CHH. This is more like a self-fulfilling prophecy where such children are expected to show deviant behaviour. However, it is shocking when such children are well behaved – a point also illustrated by Cyrulinik, (2010)

“I don’t feel sorry for them (siblings) – I love them! I hurt when I think about my mother (voice shaky or croaky as if holding back a cry). When I consider the hurt I endure when missing my mother, I just wonder how much more it hurts with them”. Yet another one declared: “I can’t abandon my siblings. I love them. They are my mother’s children”. [This possessiveness about her siblings: Is it really concern for them or could it be that she feels safe and protected by their presence. In other words is she not clinging onto them for selfish reasons?] Thandiswa, on the other hand, has one sister of her mother and many other half-siblings from her father’s side. She is nonplussed (not bothered) about her siblings as she expressed no particular concern about all of them. Similarly, Lusanda’s siblings are all over and are employed and never bothered about their home except for the youngest that is staying with her. She has no time for them as much as they don’t have time for her. Nobody is bothered about the other. Phumelela had a very good and cordial relationship with her younger brother who addressed her as “mother”. She too, on the other hand, treated him like her son to an extent that she arranged for his passage to the initiation school. Phumelela revealed that “*His unbecoming
behaviour (dropping out of school and dagga smoking) forced me to tell him that I am not his mother.

**Suicide:** A few of the respondents have had serious suicidal thoughts and one actually attempted suicide. “I had thoughts of committing suicide a lot. But my Aunt took me to the hospital social workers for counselling because I was hospitalised after my mother’s death due to stress. Do I still think about that? Not anymore. I don’t know what helped me. But I think verbalising your thoughts – talking about your feelings to friends helps. I kept telling my friends at school that I have no parents. They never believed me” (Nosana). Before Siyanda received the grant she did consider suicide as they would go for days without food. She had a handful of her epileptic sister’s pills. She prayed that night and questioned God about the situation He had subjected her to. In this “dialogue” with God she had a vision and saw the image of her younger sibling appearing as a baby. God simply asked, what about the “children” (siblings) who have no hope? She eventually fell asleep. This message gave her hope and strength. This was the only time in her life that she had such a thought.

Siboniso has considered suicide but “I thought God would give me a beating as I did not know what tomorrow holds. I also think that is the reason that made them to arrange for sending me to the circumcision school – they had (correctly) thought I was suicidal. They must have thought of another young man who committed suicide because he was not sent to the mountain. Phumlela said. “I do have such thoughts. I never asked to be a parent to my brother. Now things have changed. I have to think hard before I can take any action. If I take my life I shall be subjecting myself to the same predicament I find myself in. If I commit suicide I shall leave my child with many questions: “But why would
my mother have taken her life? Does this mean that my mother did not want me?” God has a plan for everything. He placed me where I am. He will create an opportunity for me in the future”

Relationships: The majority of the respondents have ongoing relationships The researcher asked Nosana to tell him about her boyfriend. She quipped: “You ask the questions and I will answer”! They have been dating for 4 years and they both come from the same community. They are both studying in different towns. They meet during holidays and visit each other at home. She draws a lot of support from him. One of the respondents openly declared that she has two boyfriends. She explained: “Presently I have to prostitute in order to make a living. I am in a relationship with a man who has to maintain me. After spending a night with a man I have to ask for money the following morning. That is prostitution. Kufuneka ndiroshile… being in love (deliberately) with a rich man is prostituting”.

Akhona does not care that much for friends as she constantly reminds herself that she has three children to look after and that friends might deprive her the time to care for her “children”. (The “chidren” include her siblings). Siyanda believes that “Friends are not good as they could lead you astray. If it was not for friends I would have completed my studies. I did time in prison because of friends. I do have friends but I don’t trust them. Friends cannot be trusted and can be two-faced and talk bad about you behind your back. They can lead you astray”. Sandile on the other hand is cautious about friends: “Friends are not good as they could lead you astray. If it was not for friends I would have completed my studies. I did time in prison because of friends. But I do have friends
but I don’t trust them. Friends cannot be trusted and can be two-faced and talk bad about you behind your back. They can lead you astray”.

VI. Resilience and Implications for social work

Children in child-headed households have had to traverse a long and arduous road in their fast-tracked life into parenthood. They had to navigate somewhat uncharted ground without road signs, i.e. without parents to guide, love, direct and discipline them. This is a “learn-as-you-go” type of experiential learning curve. They grow up in poverty and have to survive with almost nothing as Siboniso puts it: *Akunamsebenzi noba silele sichubelene ngentwala*. (It doesn’t matter whether we go to bed with a meal as little as nothing). There is a whole range of hurdles that they have to overcome: losing parents, fatherlessness, attempting to administer discipline to younger siblings, taunted and abused by community. The hurdles they have to overcome are quite cumbersome and need a strong willed person. Heading a household and taking care of siblings is a very “un-childlike” behaviour yet this is a growing phenomenon. Most of them cope and plod along life regardless of the many stumbling blocks. This seems to validate the fact that they have strengths or resilience.

Resilience is sometimes referred to as the strengths perspective (van Breda, 2001; Saleeby, 2002). It is defined as the ability to remain task focused and productive while experiencing tough times. Goldstein (1997) views it as the “self-righting tendencies” of the person, “both the capacity to be bent without breaking and the capacity, once bent, to spring back” to life. Resilience has the ability to enable people to pull through after experiencing stressful life events such as significant change in life, loss, stress,
adversity and hardship at work or home including those experienced by children in CCHs. It incorporates the concept of emerging from the adversity stronger and more resourceful (Warner, 2009: 54).

For social work practitioner/researcher, the shift from vulnerability to resiliency mirrors a shift in social work theory from an interest in problems and deficiencies, to an interest in resiliency and strengths of the individual (Rak & Patterson & O’Leary, 1998; Saleeby, 2008:). The outstanding aspect of this theory is its deviation from the pathological point of view, which focuses on the problems, weaknesses and deficiency of an individual (Saleeby, 2013). It is therefore not surprising that they can overcome these challenges. It might be a worthwhile exercise to see what happens to them much later in life as a follow-up study. Would this experience scar their lives for ever or would it be a passing phase? Cyrulinik’s (2010) observations are that many people who have had tough encounters in life do become better people while others just deteriorate.

The current study would seem to have a bearing on policy matters relating to the “familiness” of the living conditions of these young people. The Department of Social Development has moved in strides in an attempt to make provisions for them. In 200 it introduced the National Integrated Plan for Children Infected and Affected by HIV/AIDS (NIP) which paved the way for the introduction of the Children’s Act (2007). The Act recommended the involvement of the extended family and the community in their care. In 2012 it introduced (2012) the. White Paper on Families in South Africa. Department of Social Development had the intention of investigating whether the CHH, among
others, can be regarded as a family. Presently the extended family is already overstretched due to the expected increase in the death rate of child bearing females; community members are not quite able to take up the task. What some of them do is to ask “What’s in it for me”? The grant money that is paid satisfies mostly their personal needs.

Many types of family structures have been developing over the years such as female-headed families, lesbian and gay families, and now the child and youth headed family. But can children be a family? As much as Comaroff & Comaroff (2005) paint a picture of evolving youth exposed to cyberspace, this might not be quite true for certain areas in South Africa, least of all the Eastern Cape Province which has been ravaged by poverty, rural and a neglected part due to apartheid. A lot of dynamics are at play here which make the researcher doubt if young people can be a family.

It has been noted that the services offered by the practising social workers does not reach out as much as it would be desired. This is understandable for two reasons: (1) They are understaffed and might not have adequate transport to make the necessary visits. As a matter of fact the National Department of Social Development has commissioned the Department of Social Work at the University of Fort Hare to offer a training programme for their Auxiliary Social Workers. (2) Social work was declared a scarce skill in South Africa. This resulted in the government fast-tracking the training of social workers to meet the demand. This had a negative impact on the training institutions as they had to dramatically increase their intake. Social work is a practical
discipline which calls for strict supervision during training and this could not be achieved due to inadequate resources, viz. human resources and space. The direct consequence of these factors is poor quality of the product which is reflected in the poor service delivery by such social workers. The poor service delivery was noted by the participants in the focus group discussion.

VII. Conclusion

The fact that many mothers prefer not to disclose the paternity to their children is of concern and seems to be contrary to the values of the African culture. The lineage of family or clan plays an important role in the child’s (specifically the boy child. Siboniso for instance proudly ad libbed his paternal lineage for many generations something that gave him a sense of worth and belonging. Fatherlessness would seem to present a gloomy picture on the esteem of the child and has been known to result in parent-hunting malaise. O'Shaughnessy (1994: 119) refers to the term genealogical bewilderment as referring to the plight of children who have uncertain, little, or no knowledge of one or both of their natural parents. The sad end of genealogical bewilderment is that it might result in parent-hunting malaise (Boult & Cunningham, 1992). Failure to tell a child about his past can have a negative impact on the child as Berger & Hodges (1982:27) argued that there is plenty evidence that “…not telling by the parents has detrimental effects on the adopted person and their relationships with their parents”.

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The child-headed household, with all its short-comings, seems to be here to stay. One question that arises is whether the child-headed households can be regarded as “families”: is it possible to have a child being in charge of a family? This is debatable and might need further attention. The swift action of the National Department of Social Development is quite commendable in showing its concern for these children. However, statistics seem to suggest a significant increase of these households in the future despite the use of Anti-Retroviral drugs to contain HIV/AIDS which is the greatest cause of death of the child bearing population. Furthermore, the practising social workers need to rededicate themselves in the execution of their duties by revising their ethical code of ethics as well as the batho pele principles. They need to keep a track record of the children who have exited the CHH and form stronger outreach programmes in order to maintain contact with them.

Reference List


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