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***THE LIFE EXPERIENCES OF AIDS ORPHANS IN MALAWI: A CASE OF
AREA 23, KALOLO AND TSABANGO VILLAGE IN LILONGWE DISTRICT***

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ABSTRACT

Keywords: HIV/AIDS, orphan, child

This thesis reports on qualitative life history interviews of orphaned children who have lost both of their parents due to death by HIV/AIDS in Malawi. The focus is on double orphans who are between the ages of 15 and 17 years. The purpose is to explore and analyse the life experiences of orphans in Lilongwe in order to understand how they construct their social world.

Methodologically, the study uses biographical or life history approach because it offers means to make links between the orphans lived experiences and the wider context of social, historical, cultural processes in the society. This helps to deeply understand the meanings that children attach to their stories.

The stories of orphans depict that sickness and death of both parents' leads to loss of money and property, which is affecting their access to basic needs such as food and education, for instance. Their poor economic situation is exacerbated by stigma attached to HIV/AIDS, which also affect the extent by which they are accepted or rejected by relatives. Workload is a common experience affecting them. The workload puts them at a disadvantage in school and free time. Though in this situation, orphans have formed solidarity among themselves. They love, understand and help each other both physically and psychologically and this keeps them together. They also have ambitions and aspirations for a better life in future.

The thesis aims at presenting the overall analysis of the biographies of orphans and thereby also showing the implications of their experiences.

ABBREVIATIONS

CBO	Community Based Organisation
CRC	UN Convention on the Rights of Children
DSWO	District Social Welfare Office
HIV/AIDS	Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome
MDG	Millennium Development Goals
UNAIDS	United Nations Programme on HIV/AIDS
UNICEF	United Nations Children's Fund

CHAPTER 1

INTRODUCTION

In my experience both as a sociologist and a social worker, I have always been keen and interested to question the world around me, and to theorise why certain things happen and how. It is out of this interest that I came up with my study on experiences of children who are orphaned by AIDS in Malawi. This desire was also compounded because AIDS orphanhood is the biggest problem my country is currently facing and addressing.

Many children in Malawi are facing various traumatic and painful experiences in their lives when their parents die. They are either left to stay alone or go to live with relatives. Often, these children are at risk of exploitation, neglect, stigma and discrimination in the society and all aspects of their lives. The belief that childhood should be a safe haven makes adults unwilling to recognise the pain and confusion in such children. Usually people take it for granted that children do not realise and understand their life situation, for instance, when they lose their parents, which is not true. On the other hand social scientists have tendency to consult adults rather than children themselves whenever they are conducting research about the children. Probably this could also justify why there is limited research that has been done pertaining to the children's life experiences. There is little attention given by empirical social science researchers in Malawi to children's experience of parental illness and death in general let alone with regard to HIV/AIDS more specifically. Many studies are concentrating on the socio-economic impact of AIDS to the society in general and not on the life experiences as per se. It is also out of this reason that I was personally interested to know more from the orphans themselves about their life course when they lose their parents.

Therefore my main research issue was: how is it like being an orphan? This question was answered by interviewing orphans themselves, using life history interviews that helped to gather the experiences of children from the time they lose their parents. A total number of five girls and two boys from Area 23, Kalolo and Tsabango village in Lilongwe district were interviewed.

The thesis has five chapters; the introduction (chapter 1), the background (chapter 2) which describes the profile of Malawi, the situation of AIDS orphans in Malawi, and an overview of theories to provide a wider context of analysis. Chapter 3 discusses the research methodology including data collection and sampling. The analysis (chapter 4) discusses the experiences from interview with orphans and lastly chapter 4, conclusion, gives an overview of the implications of the study.

The aim of study

The main aim of my study was to explore and analyse the life experiences of orphans in Lilongwe district in Malawi.

Exploring of life experiences enables to understand how the children subjectively describe their individual life events or situations and their own constructions of the social world.

Research question

The study gathered life experiences of orphans by answering this main question:

How is it like being an orphan?

Additional general guiding questions were developed to further explore the issue. These were developed to further achieve the aim of the study and they were as follows:

What challenges do orphans face in their lives?

How do orphans deal with challenging situations?

How do they think about their future?

Definition of terms

(a) An orphan

The definition of an orphan varies from place to place. But in all, the definition depends on how the variables of age and parental loss are valued. In Malawian context, the definition of an orphan is adopted from the Convention on the Rights of Children (CRC) and the National Policy of Orphans. An orphan is defined as a child who has lost one or both parents and is under the age of 18 years.

But in this thesis I am focusing on children who are orphaned because of HIV/AIDS. I specifically focus on double orphans i.e., those children who have lost both of their parents due to HIV/AIDS.

(b) A child

This concept is also defined depending on the context it is being defined. In Malawi, various laws provide the definition of a child. The national laws and the Constitution do not have one definition of a child and thus they do not uniformly comply with the CRC nor do they uniformly define a child. For example, the Constitution of Malawi defines children for purposes of human rights as persons less than 16 years. This definition contradicts with the definition outlined in the CRC, which is the basis of most intervention for children in Malawi. The CRC and National Policy of Orphans and Other Vulnerable Children define a child as a person below the age of 18 years. This study also adopts the same definition.

However, it must be noted that this definition has some weaknesses of which this study is aware. Firstly, it ignores some socio-cultural categories of age that are relevant in some societies in Malawi, for example, a married young person or one with a child, at the age of 16 or 17 even below, may not be regarded as a child. He/she would be regarded as an adult. Secondly, the use of chronological age in defining an orphan ignores many people who are above 18 years whose parents are deceased and they are bereft of family support. Their plight may not be any different from those below that age and in similar situations. The definition implies a dangerous transition from orphanhood to non-orphanhood at the attainment of the majority age of 18 years. In Malawian context it is not a usual phenomenon for a 19 or 20 year old to be independent, as the society still regards them as being young and in need of their support.

CHAPTER 2

BACKGROUND

Malawi at a glance

Malawi is a small country located in the southern part of Africa. It is usually referred to as the 'Warm Heart of Africa' (Malawi draft CRC report, 2003). It is landlocked by Mozambique in the south and east, Zambia to west and Tanzania to east and north. It covers an area of 119,140 square kilometres of which 20.6 percent is water. The country is divided in three administrative regions: Northern, Central and Southern regions with a total of 31 districts.

Malawi has a total population of about 10.8 million people. From this figure, 45 percent represents people in the age group of 0 – 14; 52 percent of 15 – 64; and finally 3 percent represents those within age group of 65 – over. About 90 percent of the total population live in rural areas and 10 percent live in urban areas.

Being land locked, Malawi largely depends on rain-fed agriculture for economic growth, which is mainly done by smallholder farmers. Agriculture contributes about 35 percent to GDP.

Poverty is deep and severe in Malawi. According to the United Nations Human Development Report, it ranks 163 out of 174 countries. About 65 percent of the whole population live below poverty line, which represents 6.3 million people. Out of this 28.2

percent live in dire poverty. The most affected segment of this population is women in female-headed households and children. Some of the causes of poverty include limited access to land, illiteracy, severe gender imbalances, climatical changes (droughts and floods), unemployment and HIV/ AIDS just to mention a few.

The Situation of AIDS Orphans in Malawi

As said earlier, HIV/AIDS is one of the major drawbacks to the development of Malawi because it is killing the productive age group. It has currently reduced life expectancy to 36 years. The first HIV/AIDS confirmed case was diagnosed in 1985. Since then the pandemic has tragically claimed a lot of lives. Many people in the productive age group of 15 to 49 years are becoming ill and die leaving behind children and old people to fend for themselves (National Policy on Orphans and Vulnerable Children 2003). This is presenting a daunting development challenge as formal and informal sectors are losing human capacities that would contribute to national development. On the other hand, the young population left behind is of major concern by government as regards to future development of the nation. According to Malawi Government reports, about a total of 1 million children are orphaned in Malawi.

These children, who are orphaned by AIDS, undergo various traumatic situations in their lives when their parents die. They are either left to stay alone or go to live with relatives. Often, they are at risk of exploitation, stigma, and discrimination in the society and all aspects of their lives. They experience a major transition in their lives, as they have to adjust to new life situations without their parents.

A study done by Save the Children in Malawi in 2000 shows that orphans living in extended families where resources are poor are more vulnerable to ill treatment than those where resources are adequate (Ewing, 2004). They are at risk of abuse, neglect and exploitation. Orphans tell of being expected to work harder than the other children in the family and of being last to get food or school fees. The same study shows that orphaned children, who were interviewed in Blantyre in Malawi, revealed startling patterns of abuse and discrimination at household level. Some of the gross examples are; the child is treated as unpaid domestic worker while the guardian's biological children are able to rest and play at leisure; the orphaned child is the only one who does not attend school; a girl is sent out to find a husband so that someone else will be responsible for her care; a girl is told to "go and find soap (a euphemism for becoming a prostitute) so that she can earn her keep." As long as the families cannot meet the needs of their children, girls will have to get married young even before they have breasts.

Researchers from UK's Brunel University, Nicola Ansell and Lorraine Young, did a study in 2004 in rural and urban areas in Malawi to find how orphans cope with death of parents due to AIDS. It showed that most children found movements from one home to another as traumatic in the short term. They are often treated differently from the family's 'biological' children, particularly if resources are scarce. They may experience jealousy and rivalry from the other children, for example, unavoidable problems such as the outbreak of war. Some have to drop out of school and work for their keep. If they do go to a new school, they may need to follow a different curriculum or learn a new language (Ansell & Young 2004). The child is seen as an investment, either for labour in relatives home if a girl, or for income generating or agricultural work outside the home if a boy. Usually they are treated as having lower status than other children in the family, are expected to do more work, get less food, are not able to attend school and are subject to more violence

The orphans have also been viewed as a threat to the normal functioning of the society. The generalised statements and predictions have been made in literature about the future of orphans. They have been condemned, blamed and discriminated, so to say, for being in their situation as the following quotations says:

“... If these needs of orphans are not met they are likely to turn to delinquency, prostitution and subject to exploitation, sexual abuse and violence” (AIDS in Africa-UNAIDS 1998 cited by the National Policy of Orphans, 2003, Malawi Government)

“We are talking about the unsocialised, uneducated, and in many instances unloved children struggling to adulthood. The costs to them remain unmeasured. The costs to wider society are potentially enormous and are already being seen and felt” (Stein 2003).

“Children orphaned by AIDS will have no role model in future and they will resort to crime to survive”. (Stein 2003)

Therefore, this situation of orphans in Malawi shows why it was important to carry out this study. It will help to deepen our understanding of individual orphans' perspectives as they are telling stories about their own life and how they construct their social world. Hopefully, the insights from this study might be of interest to those who are working with these children, and to policy makers who frame policies and programmes for them in Malawi as well as adding to literature in social sciences.

Role of extended family and community

Malawi is not a welfare state and as such caring for the orphans is mainly a responsibility for the extended families and the communities. Traditionally in Malawian societies, childcare is both a collective family and a community responsibility. The typical, traditionally brought up Malawian child is a product of this system. He or she has several "mothers," "fathers," "uncles", "brothers," "sisters" and "grandparents" besides the biological relations, who take part in his/her socialization and upbringing. Concepts such as "mother" or "father" or "brother" are not restricted to biological or blood relations but also to non blood relations. It is then expected that these relations play the social roles implied by the relationship, relative to the child.

This fundamental philosophy is the basis of childcare in Malawi and applies to all children regardless of their status. In this context, orphanhood did not cause any serious problems even for infants, because the orphan would already have been enjoying such (parental) relationships with his other "mothers" or "fathers" etc. as the case may be. These relations would replace and continue the role played by the biological parents during their absence or upon their death.

In patrilineal tribes the children were by custom to be under the custody of their paternal relations (fathers, brothers and uncles of their deceased father) while in matrilineal tribes it was the maternal relations who would exercise this authority and these included the deceased mother's uncles, parents, brothers and sisters depending on their ability to provide the require care.

However this system is currently slowly dying off due to HIV/AIDS. In the past, deaths of parents were few and families and communities were more able to deal with the needs of orphaned children than today. The increasing number of orphans is placing an increasing burden on extended families, which are caring for 90 percent of all orphans. Cook, Ali and Munthali cited in National Policy of Orphans (Malawi government, 2003) points out that poverty is endemic and affects the majority of both the rural and urban population in Malawi. High poverty levels and the rapid increase of the number of orphans are causing severe strains on limited available resources and the extended family coping mechanisms. This means that those living in poverty are pulled down below subsistence levels by the influx of orphans where they cannot be adequately cared for and supported.

Inheritance of property

According to the customary laws under patrilineal and matrilineal marriage systems in Malawi, if there is any property left behind by a spouse, it is supposed to be shared between children of the deceased and family members of the deceased. In matrilineal communities, such as Lilongwe, it is the maternal uncles who determine who the children are to stay with and preside over property sharing which takes place 30 days after the funeral. Again, in patrilineal communities it is the paternal uncles who determine whom the children are to stay with and preside over property sharing which takes place 30 days after the funeral¹. This law is also widely used in the traditional magistrate courts in Malawi.

However, the customary law is being questioned as to whether it complies with child-rights issues as stipulated in the CRC and in the National Constitution of Malawi.

¹ Gillian Mann (undated)

According to these, it would be in the best interests of the children if most of the property were left for them. The country is currently facing inheritance problem. Too often widows and children are chased away from their homes by relatives of the deceased husband through the use of physical or verbal violence. Within a week of the husband's death the children and their mothers are literally out on the street with nothing (Malawi CARER, 2002). On the other hand, this inheritance crisis can be traced from the persistent gender inequalities that come about due to differences in power relations that have been socially constructed by society. Most women lack economic muscle and this has been identified as one of the factors leading to gender inequality (Malawi Government National Gender Policy, 2000). If the family has made some investments, people regard them as being done by the man. Our culture also demands a woman to be totally dependent on the husband, and though she could be educated her contributions to her family will never be recognised by the society. This circumstance puts a woman and the children at risk when the man dies. The relatives of the man usually grab the property, which they say their relative had sweated for. Compounded with her lack of knowledge on rights, the woman and children become destitute. And this is made worse if the relatives of the man knew that their relative died of Aids. They will blame the woman for killing the man although it is usually the other way round. Hence the grabbing is taken as one way of punishing the woman and children. There is no doubt that the problem of property grabbing has been compounded by the HIV/Aids pandemic, with more and more people dying, property grabbing has become a source of hardship for widows. The children on the other hand are being punished for the sins committed by their mother. The conflicts between culture, the customary law, gender and HIV/AIDS compound the difficult situations that orphans are facing.

Role of government

There has been response to orphans situation by the government of Malawi. A number of international conventions have been signed and national policies developed, to ensure that the rights of children affected and infected by HIV/AIDS are protected. These

include the United Nations conventions such as Convention of the Rights of Children, the Convention on the Elimination of all forms of Discrimination Against Women, International Labour Organisation Convention on Child Labour, as well as the Organisation of African Unity on the Welfare and rights of a child, the National Policy on Orphans and Other Vulnerable Children, the Children's and Young Persons Act, and the HIV/ AIDS Policy. A lot of resources are being invested to implement programmes and activities that would protect such children. A lot is being done in supporting family structures so that they able to care for orphans (National Policy on Orphans 2003).

Theoretical overview

My thesis draws argument from the knowledge bases from social science theories that are important for understanding human behaviour. My argument is that in order to properly understand life experiences of orphans, it is important also to understand them with regard to their physical, biological, and cognitive as well as social environment of which they are part. The social environment in this case refers to societal institutions, culture and people with whom they interact.

The argument by social systems perspective is based on the philosophical viewpoint on the relationship of person with their social environment. A social system is composed of persons or group of persons, social institutions and culture just to mention a few. These parts usually interact, are interdependent and mutually influence each other. Thus to properly understand an orphan it also requires the understanding of other parts such as family, culture, economy, education in which he or she forms part. These parts of the system influence him, just as he influences them. Therefore to understand him or her it needs the understanding of the whole system.

For example, Rankin (2001) points out that children are exposed to vulnerability in their lives because they are handicapped in their capacity to face environmental demands. Because of their age, physique and stage of development, they are not fully competent to determine and safe guard their own interests. Parents or adults are therefore responsible for the care of children. Rankin further says that parents' actions can become a threat or an opportunity to the child's future. He also argues that parents, though being natural protectors of children, they do not always succeed in doing so because they are also exposed to the kinds of adversarial circumstances making it impossible or difficult for them to fulfil their functions. For example, a family can be a victim of poverty, unemployment, unstable socio-economic conditions and a lot of other social problems. Thus, what happens in the social environment affects the internal functioning of the family, which in turn results into a family environment that is not conducive to proper care for children.

Newman (2004:5) argues that every social life- our thoughts, actions, feelings, decisions, interactions and so on- is the product of a complex interplay between societal forces and personal characteristics. Therefore to explain why people are the way they are, we must understand the interpersonal, historical, cultural, organisational, and global environments they inhabit. C.W. Mills cited by Newman also says that to understand either individuals or society we must understand both.

Similarly, the human development perspective indicates that every human being undergoes development over his or her life cycle both physically (i.e. from childhood to adulthood), cognitively and emotionally. Thus an individual's achievement of each stage of development, as Erik Eriksson's theory states, depends on the interaction of the psychological and the social environment (Johnson 1998).

A concept of human diversity is primarily concerned with the effects of the social institutions on human behaviour (Johnson 1998). In the discussion of this concept, Ronald Federico sees behaviour as being influenced by genetic, cultural and societal factors. Genetic influences include mental and physical growth potential. Cultural influences include behavioural patterns, self-concepts and attitudes and ways of perceiving events. Social influences include social institutional structures, which comprise systems of socialisation, social control and social change. Because these sets of influences interact in complex manners, he argues that they are important for understanding human behaviour in society (Johnson, 1998).

Every human being is unique depending on the contexts of how these biological, psychological and sociological variables, for example, are shaping our lives and experiences. In this thesis, I particularly regarded endemic poverty, cultural factors, societal attitudes, age and policies just to mention a few as being important for understanding of life experiences of orphans. In other words, I consider the interrelations among these various elements and their influence on the individual child's life story.

CHAPTER 3: RESEARCH DESIGN AND METHODOLOGY

This chapter describes, explains and justifies the choice of my research design and methodology. It describes how interviewees and the site were selected including the challenges of the fieldwork as well as how data was analysed.

This study was based on qualitative life history interviews with 7 children between ages of 15 and 17. Data was collected through in-depth interviews.

Why was it a Qualitative Study?

The word qualitative itself implies emphasis on the qualities of entities and on the process and meaning that are not experimentally examined or measured. Qualitative researchers stress the socially constructed nature of reality, intimate relationship between researcher and what is studied and the situational constraints that shape inquiry (Denzin and Lincoln 2000). The method locates the observer in the world or a natural setting rather than in a laboratory. The method is pragmatic, interpretive and grounded in lived experiences of people (Marshall and Rossman 1999).

Marshall and Rossman (1999) points out that one cannot understand human actions without understanding the meaning that participants attribute to those actions- their thoughts, feelings, beliefs, values and assumptive worlds. The researcher therefore needs to understand the deeper perspectives captured through face-to-face interaction. Context is important because behaviour takes place within the context and meaning stems largely from that context (De Vaus 2001). The same behaviour can mean different things depending on its context. Actions have meaning to people performing those actions and

this must form part of the understanding of causes and meaning of behaviour. De Vaus (2001) points out that by just looking at behaviour and not how actions give meaning to their behaviour, is to leave out an important source for the understanding of human behaviour. The understanding of context and meaning is also crucial for the shaping of appropriate ways of intervention. For example to understand how orphans experience and understand their situation of orphanhood would help in shaping up policies on orphans including types of interventions in Malawi.

As opposed to quantitative research, qualitative methods give the opportunity to probe ("help me to understand why you feel that way"), thus enabling the researcher to reach beyond initial response and rationales. Qualitative research entails issues of empowerment of the excluded or marginalised groups of the society as they are talking and reflecting upon their situation (Marshall and Rossman 1999).

However, although qualitative research is very good at giving in-depth information about the research issue or questions, it has some challenges and these include:

- It is expensive to carry out in terms of time, money and other resources, especially if one to one interviews are conducted. It is time consuming to interview one person at a time.
- Qualitative research requires expertise in both the subject matter and human interaction; hence the lack of qualitative research skills would affect the whole study.

Why life history/ story approach

The term life history has meant many things to many people. Denzin & Lincoln (2000) note that life history is a biographical method. Watson and Watson-Franke 1985 cited by Denzin & Lincoln (2001, pg 539) state that a "life history is any retrospective account by the individual of his life in whole or part, in written or oral form, that has been elicited or prompted by another person". Life history makes sense of lives; creates context; prevents disembodiment of individuals into categories, types and issues.

The use of the approach is owed to a number of reasons. Firstly, I owe it to the social sciences and the study of society in general, and of people's lives in particular. Engelstad and Kalleberg cited by Sandvin (2003) point out that social sciences are about people's lives, and that people's lives are always located in social, cultural and historical processes. The studying of people's life courses, therefore, can be understood as interplay between changes taking place in the cultural, historical or social processes and individual actions.

Life history approach is a form of qualitative research that seeks to examine and analyse subjective experiences of individuals and their constructions of the social world (Jones 1983, cited by Marshall and Rossman 1999, pg 120). This approach gathers, analyses and interprets the stories people tell about their lives.

The approach is more than a retrospective interview. It goes beyond providing specific information about events in the past by showing how the individual creates meaning

within culture.

Life history approach provides a qualitative depth by allowing the respondents to talk about the subject within their own frames of reference. They are allowed to draw ideas and meanings with which they are familiar.

The approach hence fitted well with the aims of this study because it helped to grasp the meanings that orphans attach to both the past and present memories about events in their lives. Marshall and Rossman (1999) further points out that life history depicts actions and perspectives across social groups that may be analysed for comparative study. The approach also provides a fertile source of theory that may be further studied in future.

Why In-depth Interviews

In- depth interviews fitted well with my research question. It helped in exploring and understanding the life experiences of orphans based on the stories that they were telling. The stories could be difficult to obtain through structured interviews where rigid questioning prevents opportunities to pursue an interesting angle or call for elaboration.

In-depth interviews enable people to talk freely as opposed to structured interviews and this gives more room for discoveries. The researcher introduces a few general topics to uncover the participant's views but otherwise respects how the participant frames and structures the responses (Marshall and Rossman 1993). Burgess (1984) argues that in-depth interviews help to gain access to the biography or history of an individual. They obtain details of a person's life, which the researcher did not witness.

On the other hand, the weakness of this method is that it is time consuming as it gives an interviewer and interviewee freedom to talk freely and in detail. It also requires time to record, transcribe and analyse interviews. Long interviews can lead to fatigue of both parties, hence it is good to set time limit. Again, the way questions are phrased in an interview can also cause confusion between interviewer and interviewee due to lack of understanding the question. Burgess (1984), talks of problems of question wording in unstructured interviews. He argues that in order to avoid this, the researcher needs to constantly monitor the direction, depth and detail of the interview, the topic to include and topics to avoid.

Selection of Interviewees and site

I had devised criteria, which helped me to select my interviewees and site. The criteria was as follows:

- Double orphanhood due to HIV/ AIDS.
- I looked for orphans who were aged between 15 and 17 years, and had been double orphaned for no less than two years. Therefore I was interested to interview those orphans who were born between 1987 and 1989. The reason for choosing orphans of this age group, was that respondent of this age would be able to explain and give information without any difficulties, i.e., would easily construct the stories of their lives. It would also be easier for them to seek permission from their guardians than if I would get, for example, a child who is less than 10 years. Another reason for choosing the period being orphaned was an assumption that the longer the period of orphanhood the more the events or stories to tell.

- Because I wanted to understand how experiences might vary between girls and boys, I considered sex as part of the selection criteria. Originally, I planned to interview 8 orphans: 4 from urban and 4 from rural area. The sex composition was; 2 girls and 2 boys in each area. This changed in the field for the reasons to be explained later. So I interviewed 7 orphans; 2 girls and 1 boy in urban area; 3 girls and 1 boy in rural areas.
- Residential site was also a selection criterion as said earlier. The reason was to understand whether orphans experiences varied depending on residential area.

My field experience

As I have said earlier on, this study was conducted in urban and rural areas, namely, Area 23, Kalolo and Tsabango village in Lilongwe District in Malawi. Lilongwe is a capital city and is found in the central part of the country. The city is split into urban and rural areas. My reasons for choosing to do the study in Lilongwe and not in other districts of the country was unavailability of adequate resources i.e., money and time. I was expected to travel and sleep in the field most of the times so it was cheaper for me to study near where I stay. On the other hand, the course recommended doing the study in my own society, hence the choice.

My fieldwork started on 17th December 2004 and ended on 23rd January 2005. But before I had to gain consent from authorities to go to the study sites. So I visited Lilongwe District Social Welfare Office (DSWO), which is under the Department of Social Welfare in the Ministry of Gender, Children Affairs and Community Services to get their consent to work with the communities in their catchment areas. This office is responsible for the welfare of orphans and other vulnerable children in Lilongwe district.

The office introduced me to the chairpersons of the Community Based Organisations (CBOs) whom I was working with, without which I could not manage to meet the interviewees. The names of these CBOs were Tilerane orphan care centre in Area 23 and Consol Homes orphan care centre in Kalolo village. All these organisations are involved in the care and support activities for orphans in Lilongwe District. The chairpersons booked appointments with interviewees on my behalf. They were told beforehand about the purpose of my study, what kind of people I wanted to interview and the criteria, so when they got to the villages and communities they were already aware of the issues I looked for.

I was meeting my interviewees at a care centre in the area in which they lived. It was not possible to visit interviewees in their homes for a number of reasons. Firstly, the villages from where some of the interviewees came were very far. Again with the limited time that I had, it was easier to meet them at one point. Secondly, because of my topic of study, I did not want to create problems for interviewees who are staying with guardians or extended families who might be suspicious and curious about what I was investigating. Again, my topic was about their experiences as orphans, the interviewees would not easily open up at their homes in fearing that their guardians would hear them. Thirdly, I was personally afraid of theft. The study took place during rainy season when the grass had grown and it was bushy. In Malawi, it is dangerous to walk alone in such places otherwise you might be robbed or even killed by thieves. So I did not want to risk myself. Lastly, it was the problem of money. As I have already said the CBOs booked appointments, it would mean that I had to incur extra costs, such as lunch allowance if they had to escort me to the interviewees' homes.

Regarding the selection and interview process, there were also a number of challenges. I originally planned to interview 8 orphans as said earlier, but I finally interviewed 7 orphans; 5 girls and 2 boys. As I have said, the chairpersons were the ones who were supposed to book appointments, but it was not like that. They delegated the work to their junior co-workers, who then, I believe did not properly understand the criteria. For example I would tell the Chairperson that I want 1 girl and 1 boy, I would find that they have brought 2 boys. Or I would give them the age limits of 15 and 17, they would bring those who are 12 years or even less. It was a waste of time for both the interviewees and me because it meant cancelling the interviews and call it a day.

Stigma to HIV/AIDS might have influenced the interviews. In all my interviews, there was not a single moment that I asked the interviewees about the sickness of their parents due to HIV/AIDS. I remained silent about it intentionally because one of the interviewees, a girl in Area 23, became too emotional when she was describing her situation in relation to sickness and deaths of her parents. She was sobbing. Then I had to first stop the interview and comfort her. I even got scared of what the chairperson would have thought about what I had done to the child. So if I had mentioned about HIV/AIDS to her, it would have made the situation bad. This made probing problematic.

Generally, the interviewees had a feeling of being exploited in research. A girl in Area 23 told me that a lot of people had been coming to interview her and her relatives on several occasions. She thinks people are taking advantage of their situation and prosper at their expense. Though this is the meaning she attached to her situation, it might have had impact on how she narrated her experiences to me.

Recording Interviews

The interviews were conducted in Chichewa (Malawi's national local language). They were later translated into English. Chichewa was used so as to be able to understand contextual meanings attached to experiences of each orphan and to enable children to express themselves freely in their own local language. Again, the more familiar researchers are with the language of a social setting, the more accurate the interpretations becomes about that setting (May 2001). In this study, language is not only understood in terms of words but also non-verbal communication such as facial expressions and bodily gestures, which I also tried to capture through observation.

An interview guide was developed and was used for conducting the interviews. However the interview guide did not limit the exploration of issues. Often situations are not the same in the field so use of the guide helped to fit in any situation of the respondent.

As said earlier on, qualitative research is challenging especially if you as a researcher, do not have good listening skills or lack the social skills required for personal interaction and probing. So a tape recorder was used to record data so that I could concentrate not only on listening but also follow the stories being told and probe. The tape recorder shortened the time for conducting the interviews and each interview took about half an hour.

However I found that using tape recorder was rigorous and it took a long time to transcribe and later translate the data. I also experienced technical faults when I was in

the field. My tape recorder was borrowed from a friend and I did not know that it had some faults. So when I was to start the interview it could not switch on. This forced me to take notes by hand, which made the interview to last long and I could not concentrate much because I was busy writing. It is important to ensure that one carries all the necessary gadgets before leaving for the field such as papers, ballpoints, batteries and tapes. One also needs to secure good environment for recording, like taping from a quiet place. The recording itself involves ethical issues such as sensitivity. Thus, before engaging in every interview I first of all sought consent from respondents and I explained the importance of letting me use the recorder. I had also to express the aspects of anonymity and confidentiality of the transcripts and tapes by ensuring them that the tapes would not be given to anyone else.

Data Analysis

By definition, data analysis is a process of bringing order, structure, and interpretation to the mass of collected data (Marshall and Rossman 1999). Qualitative data analysis is a search for patterns and relationships in the data through constant comparing between individuals, stories, experiences or meanings attached to these experiences. The whole of this study is based on constructivist grounded theory; hence, data analysis followed some of the ideas from the theory. This approach reaffirms studying people in their natural settings and this is what is being emphasized through out the discussion. It enables mutual creation of knowledge by the viewer and the viewed and aim towards interpretive understanding of subjects' meanings (Denzin and Lincoln 2000). Data analysis was done on a daily basis and concurrently with data collection, as well as after the completion of fieldwork.

The following process was followed during the data analysis:

- ✓ In this phase I was involved in listening to the tape, transcribing, translating from my local language to English and reading the data again and again so as to become familiar with experiences of each orphan. This helped me to construct a picture of each account. May (2001) argues that focusing on the ways in which different people relate their experiences according to circumstances they found themselves in enhances a comparison of people's accounts. At this point I was also involved in entering data from each interview in the computer.

- ✓ I was engaged in the open coding. I would read the data line by line, also reflecting to my interviewees, and generate indicators for each line or sentence according to meaning derived from the data. The indicators helped in naming themes and categories. I would compare these indicators and then write memos whenever there is a relationship. Then I did axial and selective coding which involved continuous searching of patterns, linkages and relationships between and among the categories that I derived through open coding, for instance. However it must be noted that this was a back and forth process throughout the whole study. Each stage was arrived at by constantly questioning the data with the use of process questions as stipulated by Strauss and Corbin (1990) for instance, how? Why? What? This demanded heightened awareness of data, focused attention to those data, openness to the subtle, identifying salient themes, recurring ideas or language and patterns of belief that link people and settings together. Strauss and Corbin cited by May (2001) points out that this requires a rigorous spirit of self-awareness and self-criticism, as well as an openness to new ideas that is often the hallmark of research studies

of good quality.

- ✓ As I said, I kept a memo where I was writing my ideas, meanings and stories about the relationships and linkages among the categories just to mention a few. This memo among other things helped me later in coming up with a story line, which made writing up of the report.

The study was guided by the above elaborated research process so as to understand, explore, interpret and explain orphan experiences. The justifications for the methodology and the problems imply that research is a challenge, and that it is never without biases. My experiences show that whatever is done in theory cannot totally work in practice. Hence as a researcher it is important to be always critical, conscious and alert in this study of the empirical world. And have vast or wide experience and knowledge about the social phenomenon under study

CHAPTER 4

EXPERIENCES OF ORPHANHOOD

Orphanhood especially due AIDS, is the worst event that a child would ever experience in his or her life. It is because death from HIV/AIDS is usually characterised by period of prolonged illness, and involves a number of situations, which are traumatic for children. And often, the death of one parent means the other will follow shortly. Therefore children will have to undergo various challenges. They have to find means of how to cope with new life, especially where parents did not prepare for their future.

As it has been stipulated earlier on, the study was conducted in the rural and urban parts of Lilongwe Districts in Malawi. A total of seven girls and boys between ages of 15 and 17 years old were interviewed. The aim was to explore and analyse life experiences of orphans. The children revealed that they are not only active participants in the process of their parents' death but are also articulate and thoughtful individuals able to think reflectively and constructively about their personal experiences

In order to understand these experiences of orphans, I constructed individual stories about them. I asked them questions in way to initiate story telling about their life situation, as we shall see in this small picture of Mateyu's story:

It was on 23rd January 2005 that I had a personal encounter with Mateyu at Tilerane orphan care centre. This centre is located in Area 23, one of the suburb areas within Lilongwe city. It is where orphaned children, disregarding their source of orphanhood,

meet and receive different types of support such as food, cloths and life skills just to mention a few. Mateyu comes from a nearby small village known as Tsabango, which is about 20 kilometres from Tilerane orphan care centre.

Mateyu is a 17-year-old young boy. He is the first-born child in a family of six children; 3 girls and 3 boys. The youngest child is 11 years old. They are all orphans. Mateyu's parents died long time ago. His father died in March 1989 while his mother died in February 1998. They both died of AIDS. Since then, Mateyu has taken over the responsibility of caring for his young siblings. He personally told me how his life situation had changed since his father got sick and then died.

There was bitterness and depression in his voice and facial expression as Mateyu was describing about his experience as an orphan, which has come about because of death of his parents. "When my parents were alive, we were living happily. Food was not a big problem. We were proud that we have our parents. We could play with friends. We were not in trouble". A turn in his life came when his father fell sick. His father and mother were not in formal employment; they were just local farmers who depended on small scale farming for subsistence. So when his father fell sick, he could no longer do farming activities, as he was weak. Food and money became a problem. He told me "his illness took a lot of money because we were going to pay for hospital bills". So did his funeral. 9 years later, Mateyu's mother passed away.

Just after her mother's death, his father's relatives grabbed away their property including land, house, farm tools and household utensils such as plates and pails. Therefore Mateyu was forced to leave his father's village and go to his mother's village. They went away empty handed except for the clothes that they were putting on. While at his mother's village, no one was interested to help them. They would go hungry for days without anyone to help. Not even his mother's sisters who are staying nearby would dare

sharing a single meal with them.

Other children within the community point at them, "my friends when they talk to me they say aah!!! This one is an orphan."

"...Even other women in the village, when they see us (interviewee and his siblings) they like to say aah!!! Those children belong to so and so who died. They are orphans"

This makes it hard for him and his siblings to get and make friends. He told me " if you are an orphan you are always abused, people hate you, they look at you as a useless person. They disown you".

"It (orphanhood) is an abusive thing (chonzunza). You don't have a lot of things. It is an unforgettable thing."

Mateyu and his siblings were left "pa mtunda." This is a local concept literally meaning "bare ground" which means ground without anything on it. It is a metaphorical concept used to describe degree of poverty. It means to be left totally with nothing, and in deep poverty, such that they will have to start life all over again from the scratch. I could tell the "bare ground" from what Mateyu was wearing on that day. He had put on a worn out and dirty shirt and trousers. He did not put on a pair of shoes or sandals on his feet. He looked as if he has stayed for a month without taking a bath because his body also looked dirty and dry. The lack of income is affecting how they access basic needs such food, clothes, education. Mateyu and his siblings do not go to school.

"I cannot manage to clothe them so they cannot go to school. At school, it also needs to be smart always, so to find soap and food I cannot manage", said Mateyu who has once

attended standard 1² when his parents were alive. He did not continue schooling because his parents did not have enough money for paying his school fees.

Mateyu does not rest every day and every hour trying to make ends meet. He starts his day by firstly going to the garden every morning. When he comes back he prepares food for his family. In the afternoon he goes back to look for piecework in the villages or goes to the town, since his village is near the town. If he does not get one, it means they will have to sleep hungry. He has a small garden, which his uncle (from maternal side) gave him, so he grows some vegetables, which he sells in town. But this is not done everyday. He gets about MK70 (less than a dollar) after he sells vegetables. At least this helps him forget orphanhood, as he says. Mateyu is currently being supported by Tilerane Orphan Care Centre, which is teaching him skills in carpentry. He believes his future will be bright if he completes his course.

This story configures different situations in which Mateyu and his siblings are found in as a result of deaths of their parents due to HIV/AIDS. They experience the disruption in their economy that is exacerbating problems in other spheres of their lives, such as being rejected, stigmatised and increased workload among other things as we shall see in the following.

² Malawi Initial CRC Report to the United Nations: Primary school education has eight steps called standards. Thus standard 1 is the first step.

ECONOMIC DEPRIVATION

As it has been said, the study argues that orphans life experiences should be understood with regard to their individual biological, social, historical, cultural as well as political and economic environments of which they are part. As we have read about Mateyu's life story, we see the interplay among these elements, which are having an influence on his life experiences.

The situation about Mateyu's life story is not different from other interviewees such as Hawa (17 years), Maria (17 years), Atusaye (15 years) and Chisomo (15 years) whom I also met. They say that they started experiencing economic deprivation during the sickness and death of their parents. This is vividly seen when their fathers fall sick and then die as Chisomo says, "*...When my father died, it became a problem for us to get things we needed.*" This is because in Malawian context fathers are breadwinners. In most cases, because of the persistent gender inequalities in our society, women are economically disadvantaged and hence they lack economic muscle. As such they depend on their spouses for support. This lack of economic muscle can also be seen in the children's own stories whereby they do not specifically mention their mothers as being of economic importance to them. They talk of their fathers as being employed and not their mothers.

The sickness of both parents is seen as a loss of income in sense that the person is sick for a long time, and it requires medication and good nutrition, which cost a lot of money. Mateyu talks of his fathers sickness, he says, "*his illness took a lot of money because we were going to pay for hospital bills*". Another interviewee, Maria also says "*My father had bought a piece of land at a nearby village...he built a house there...when he became seriously sick he sold the land and house and this is why we are found here in this (new) village.*" Although Maria does not specifically tell what the money was used for, we

would judge what this money was used for. Considering Mateyu's case, it could be possible that it was used either for medication, hospital bills or for running of the household. Again the relatives also grab their remaining property after the death of the parents which leaves them with nothing. For instance as said earlier Mateyu is now '*pa mtunda*.' In the case of Hawa, her father's relatives took more property than what was left for her and siblings. The process of selling of property by parents can be portrayed as 'property grabbing,' although this kind of grabbing is never talked about in Malawian society. We tend to put emphasis on the problems of property grabbing posed by relatives. It is just taken for granted that because parents own the property then they have a right to sell it. How then do parents suffering from HIV/AIDS think about the future of their children? How far do they know the rights of children? What could be done to ensure that parents suffering from AIDS do not 'grab property' but instead invest for the future of their children? Likewise, the grabbing of property by relatives portrays the existence of conflicts between culture and rights of the children. As explained in the background, it appears the deep cultural roots embedded in Malawian society exacerbated by the lack of awareness on children's rights and poverty are derailing the efforts in reducing the problems associated with the inheritance of property.

The lack of income, land and housing created by sickness and death of parents and other forces mentioned, in turn compromises and limits their access to other basic needs such as food, educational opportunities and health just to mention a few. Chisomo says she looks at her situation as painful because she cannot get food and everything she needs in her life, and she admires her friends who have their parents. Likewise, Atusaye and her brother, they are struggling to get school and examination fees. He says he will not make it to the next class this year because he did not write examinations. He told me "*Life is really very hard because at school we have to pay examination fees by ourselves which we cannot manage.*" His brother who was in form 3 has stopped going to school because

of lack of fees. In Malawi, secondary education is not free in the public schools³. The amount of MK3450 (about 34U\$) per year is paid in the day secondary schools and MK10, 000 (100U\$) per year in the boarding secondary schools. On the other hand, although education is free in public primary schools orphans cannot attend. Mateyu and his siblings do not go to school because “*at school, it needs one to be smart always, so to find soap and food I cannot manage.*” Food becomes a priority as opposed to school, because one cannot go to school when he or she is hungry. This portrays the reasons as to why the government efforts for free primary education in Malawi are not being achieved. Malawi is currently facing high drop out rates both in primary and secondary schools. According to the Global Policy Forum report (2002) out of 1.2 million pupils who enrolled for standard 1 through out the whole country in 1994, 900,000 had dropped by 2004. They did not complete the primary school let alone getting to secondary school. These figures do not tell how many were boys or girls. This large drop out rate is probably reflecting the large number of children who are orphaned due to HIV/AIDS in Malawi. The Global Policy Forum argues that these dropout rates in school are due to poverty, which has been worsened by HIV/AIDS. The epidemic is therefore said to reverse progress in achieving universal education as stipulated in the Millennium Development Goals (MDGs). The report further argues that there are other factors that are contributing to high dropouts in different contexts. The social policy of a country, for instance, is playing a vital role as well in reversing the education progress. A study carried out in Botswana, Uganda and Malawi on the impact of AIDS on education showed differences between the countries (Global Policy Forum report 2002). Orphans had a better attendance records than non-orphans in Botswana, which has one of the highest HIV prevalence rates. In Uganda and Malawi absenteeism was higher among orphans than among non-orphans. Unlike the latter, in Botswana the government has a comprehensive programme of material support for such disadvantaged children. This would imply that providing the incentives and meals for such children in schools might reduce the drop out rates.

³ I have only mentioned the public schools and not private schools because they are affordable and cheaper than the private schools. Most orphans go to these public schools.

To sum it up, economic deprivation contributes to multiple problems in the lives of orphans. As it has been shown in Mateyu's story and other interviewees, economic deprivation affects their accessibility to basic needs, which also in turn lead to various multiple problems for them, such as rejection, lack of help from extended family, increased workload and lack of time as explained in the following subsections.

THE REJECTION

Mateyu and his siblings are facing rejection because of the stigma that is attached to deaths of their parents due to HIV/AIDS. As we saw, they have become a talk of the society, friends and family because of death of their parents due to AIDS. The women in their neighbourhood gossip them. His friends call him "*wamasiye*" a Chichewa concept meaning an orphan.

Mateyu says some friends and people introduce him and his siblings as "*amasiye*" for a several reasons. They want to know them, but others do so because they would like to humiliate and disgrace them. Others do so because they would like to know them since they were gossiping about their parents.

In Malawian context, the concept of "*wamasiye*" is really stigmatising because of its associated negative implications about HIV/AIDS. A person who has died of AIDS is said to have been immoral and as such his or her death is not welcomed by the society. Thus, even if such kind of persons had left their children behind, they will also be stigmatized.

On the other hand policy makers as well as organizations working with such children

perpetuate the stigma experienced by children at community level. They will, for example, if they are distributing food, tend to label and use AIDS orphanhood as basis for eligibility of assistance. It is a common thing among such organizations to say “*izi ndi za ana amasiye*” literally meaning, “these are for orphans”. In reaction to this, a USAID report to congress stipulate that programmes should avoid singling out children orphaned by AIDS as it exacerbates the stigma attached to HIV (Stein 2003). Similarly the professional researchers also tend to reinforce the stigma of orphaned children by singling them out as subjects to research. Most researchers are predominantly concerned with the threat of massive social dislocation and breakdown posed by high numbers of orphans and the impact this will have on society as a whole. Use of the following quotation provides an example of the overwhelming concern being expressed regarding orphans as a problem for society:

“ Children orphaned by AIDS will have no role models in the future and they will resort to crime to survive” (ibid)

Stein (2003) states that her research with street children in different context showed that children without role models are not more prone to violent behaviour than other children unless they live in communities that excludes, condemn, abuse and abandon them. Thus it is not orphanhood that is a threat but, rather, the way society constructs and deals with the ‘problem’ of parentless children. The stereotypical image of AIDS orphanhood that is being created and projected by people evokes strong emotions of aversion, fear and panic among orphans, as Mateyu says:

“It gives me fear because when I try to forget my parents death, they remind me again”.

Heatherton et al (2000) argue that stigma and rejection devalues self-esteem and leads to loss of identity in children. It tends to be looked upon as the primary cause of social isolation, a sense of shame and a lack of emotional and financial support after the death of parents from AIDS (UNAIDS 2002). It leads to delayed emotional healing, a sense of

hopelessness, fear, anxiety, suicidal ideation and helplessness. Adolescents with low self-esteem are more likely to be depressed. Some symptoms of depression include hopelessness, low self-esteem, and general somber mood. Because all of these factors are related, self-esteem and depression are usually observed in cycles. The cycle begins with low self-esteem that leads to depression that again can lead to suicide, as Mateyu says:

“... You are not always at peace and wish to die as well.”

Self-esteem means that children should have a good feeling about themselves. This good feeling is an extent to which they expect to be accepted and valued by the adults and peers who are important to them (Katz, 1995). Children with a healthy sense of self-esteem feel that the important adults in their lives accept them, care about them and would go out of their way to ensure they are safe and well.

Apart from stigma to AIDS, the interviewees view rejection in terms of their poverty situation. Now that the orphans do not have income, they have lost their property and they do not have basic necessities, they might be looked upon as a burden of the extended family by others, although it is not always the case. The relatives may not willing to accommodate them in their homes let alone sharing them food. As we saw in Mateyu story, he says:

“... Sometimes it is possible that one house has food and we do not have, they do not share with us. Like my mother’s sister, her house is next to ours but she does not share us the food. So most of the times we stay hungry”.

Those who are staying in the extended family, they feel rejected especially where the caregiver has other children, as Maria illustrates:

“...I know they (aunt and her children) talk about me when I am away. Often there are moments when I am away like the way I have come here (for the interviews), and when I go back I will find that everyone is silent and gloomy, not willing to talk to me.” (Maria, Lilongwe)

As it has been said earlier about the extended families, such conflicts in households that care for orphans indicate that resources are not enough with the coming of new members (orphans). Thus lack of resources could bring rivalry between orphans and other siblings in the household; and between orphans and their caregiver.

Disregarding of their poverty, this feeling of rejection among orphans could also imply the difficulties children are facing in dealing with the change, for example, the change from old home to new home with new guardians. Usually residential mobility as a result of parental death is a risk for children. Children find it painful to change homes because it means a loss of many things such as old friends, change schools, let alone standard of living that they had with their parents. It is very painful because in most cases parents suffering from HIV/AIDS do not prepare their children beforehand about their future if they die. They do not prepare their children, about who they will stay with if they die, making it more stressful for the children to live with an aunt, uncle or any extended family member whom they have not been used to. In such circumstances, orphans integration into new homes is hard and stressful without anyone to help them. Change of residence makes the child more isolated and individualized. Before a parent dies, it is essential to deal constructively with plans for their children’s future and children’s fear about how and with whom they will stay, for example, disclose to a child who shall be their guardian. This may help to ease the psychosocial burdens of the child. G. Kliman (cited by Simonnes 1996) supports this notion. He uses the concept of “psychological immunization” and proposes that “mastery in advance” provides better coping in future

crisis situations because it permits psychological preparation and anticipatory problem solving.

As such, whereas some interviewees experienced orphanhood as a painful rejection, others did not. According to Harriet, she says orphanhood is not painful if you have everything you need in life. "...If you are able to meet all your basic needs people cannot recognise that you are an orphan hence they will not talk bad about you". Hawa stays with her brother in their house, which their parents left for them. Her brother is 24 years old, single and employed as a clinical officer in the government hospital. This implies that children who have all their needs met by themselves do not face rejection. This is because they do not exert burdens for relatives, since they are not bothered to fend for them. Such children feel satisfied and secured in their life. This in turn develops child's independence and identity (Simonnes 1996). It is really true in Malawian context that if the orphaned children are rich, relatives might not reject them because they would like to benefit from the richness. If property grabbing has not taken place, orphaned children who were left with property and are rich do not face rejection in the same way as those who are poor.

Therefore there is a linkage between orphans economic situation (rich or poor) and rejection, in that it is not only the stigma to HIV/AIDS that leads to rejection but also the poor economy of orphans.

WORKLOAD: ‘a blessing in disguise’

The lack of income, basic needs, and rejection contribute to workload for the interviewees. As we saw in the story of Mateyu, he does not have free time and rest. As pointed out earlier, Mateyu being the first-born child, he is responsible for caring for his young siblings. As such Mateyu has to find means of getting money and food in order to raise his siblings, which in turn increases the amount of workload for him, as he says:

“During rainy season I work in people’s gardens and in dry season I cut grass which I sell. My siblings are very small so I just tell them not to work.”

“I always have to ensure there is food at home, so I spend much of my free time doing piecework or looking for piecework.”

The death of their parents is painful also because of workload. They are busy everyday trying to look for survival activities to get money for meeting their basic needs such as food, school fees, soap, body lotion, cloths, books, and other necessities. They have to do heavy work such as farming, tinsmith and piecework, which are hard and do not match with their ages. They have to make a budget for a day the things they were not doing when their parents were alive.

Workloads are manifested in their accounts of daily activities. When they were asked to tell what they do in a day, other interviewees also indicated having tight schedules just like Mateyu. For example, Atusaye, he uses his skill in tinsmith to produce pails and local stoves made up of iron sheets. It was at 10 o’clock in the morning when he was called from the market where he was working to come and meet me. He was already looking very tired and weak at that hour of the morning. As we saw with Mateyu, it could be possible that he did not take even breakfast in the morning because he cannot afford it.

His palms looked old as he told me that his work takes a lot of his energy as it involves hammering of metals. Before he goes to the market to start this kind of work, he has to do housework at home, go to school and then in the afternoon that is when he goes to the market. When he comes back in the evening he has to prepare dinner and then go to bed. So he rarely finds free time. In addition, his work at the market is not profitable. Mostly he struggles to get the raw materials (iron sheet) because they are very expensive, but which at the end he has to sell the products at very cheap price and it becomes impossible to make savings. The policy for orphans in Malawi recommends that orphans should be trained in vocational skills so as to be self-reliant and as one way of lifting up the children out of their poverty situation. These skills include tinsmith, carpentry and tailoring. However, some of the service providers tend to view such interventions as a charity exercise. In other words, the fact that the services are offered for free tends to compromise quality. For example, trainers of courses in vocational skills in these orphan care centres are mostly under-qualified. As I have said earlier, this could explain why the products being produced have low quality.

The interviewees have workload because they want to be accommodated by the extended family. They know that if they refuse to work then they might be chased out of the home, as illustrated here:

“...But now I cannot refuse any work I am told to do because I would have no place to stay if they chase me.” (Atusaye, Lilongwe)

“...We are 4 girls but the other ones (her aunt’s children) do not want to do housework. We are the only (interviewee and her sister) working. We go to the field and they do not. So we just work.” (Maria, Lilongwe)

Though workload is a means for getting their needs such as food, shelter, money, soap

and other things, it conflicts with their free time and education. Workload and busy schedule interfere with their free time in which they are supposed to associate with friends. The children frequently mentioned that they do not usually have free time to chat and play with friends. Free time is an important aspect in childhood, because it is where children get to meet with their peers and discover a lot of issues important for their growth into adulthood (Mayall Berry 2002). Simonnes (1996) states that play is vital to child development. By using Erik Eriksson theory on development, Simonnes argues that play helps a child to process painful feelings and experiences and to learn its various roles in society. He further points out that the human being is a social creature and its development depends on to what extent he or she can manage to interact with other human beings. Workload puts them in a disadvantaged position when it comes to school. Because they are tired, it is hard to study, and hence they cannot compete in school with their friends who have their parents. For example, Hawa says that it is hard for her to read especially during planting season because she has to go, first, to the maize garden in the morning before she goes to school, while her friends are reading at that time. Just like many other orphans, this girl stays with her grandfather and aunt who are very old and frail, and they are looking upon the orphans to fend for them. When I asked Hawa about the problems she faces she said:

“...I am always busy doing a lot of work since my siblings are small. It is difficult for me. Everything relies on me...I am the only one who is strong and I go to school, so to find time to get manure (local fertilisers such as animal dung and tobacco residues) for the farm is difficult, I do not have enough time.”

Hawa then suggests that staying in a boarding school could solve her problem because she would concentrate in her studies. But on the other hand her status of orphanhood puts her at a disadvantage in the sense she cannot afford boarding fees let alone when she does not manage to find food. This breeds a cycle of poverty for orphaned children.

Not only is workload perceived as painful experience, orphans look at it positively in the sense that it has taught them to be strong, self-disciplined and creative, of which they are grateful. Looking at the situation positively is one way of dealing with negative situations. The children regard the experience of losing parents as having contributed to change in their behaviour. Chisomo says she has learnt to do house work because when her parents were alive they had a housekeeper who used to work for them. The knowledge on how to work is equipping her for any challenging situation to be encountered in future.

The workload experience has disciplined and instilled responsibility in them on how they divide their time even though there is no one to supervise their daily routines. They know what to do and when to do it. When I asked what activities they do in a day, each child had their own unique way of dividing the time in a day. Though they complain of workload, most interviewees manage to divide their time in such a way that they still spare some time to interact with friends in the youth clubs and the community based organisation.

SOLIDARITY

When asked how they manage their lives after death of parents, it shows that orphans develop some kind of solidarity among themselves that helps them to deal with their orphanhood. *"We just care for each other on our own."* Though in this difficult circumstance, orphans show love, understanding, togetherness and interdependence as ways of living together in harmony. It is this solidarity amongst them that gives meaning to their lives.

"...Yes we stay nicely. Only that we all agree with each other. If we were not agreeing then we cannot stay together. We can separate. So we treat each other as one, there are no differences" (Harriet, Lilongwe)

Sibling solidarity was present among those children who are rejected by relatives, and they are living in child headed households with the elder sibling as a head of the household. The children develop a relationship of mutual support whereby the old and young support each other in whatever way they can. Mateyu says:

"Sometimes it is possible that my relatives are sick, so the money which I get from piecework just goes straight to care for that sick child."

Children look at love and understanding as the key for living in peace and unity. One girl said that conflicts or constant quarrelling provides a loophole to outsiders, and then they will start talking bad things about you. They support each other physically, economically

and emotionally through division of work and by just the presence of sibling at home. They share household responsibilities thus lessening amount of workload and time for other social activities like playing and chatting with friends. Many children do become very stressed up when they are separated from their siblings. Keeping siblings together provides them an important sense of continuity and is a source of support and identity.

Solidarity was also present among peers, i.e., orphans who are participating in the youth activities carried out at the community based organisation. Through the youth clubs, children discuss problems that affect their lives. Their interaction with each other in the clubs makes them form strong bonds and cooperation among themselves and hence help the feeling of acceptance. However this solidarity can also imply the phase of development to which children of this age group belong (15- 17). During this period children prefer to be with their peer groups and often dependent on them for emotional and social support

THE FUTURE: Making the unforgettable experience forgettable

Poverty, rejection, stigma and workloads seem to bring hopelessness, depression and pessimism in children about their future. As we saw in Mateyu's story, at first he looks at orphanhood as an unforgettable thing, and later, he says he forgets about his orphanhood because of his business of selling vegetables. Despite of all the problems orphans are facing, they are aspiring for a better life in future.

When I asked the children about their future aspirations, they linked them with what they are presently pursuing with the help they get from the orphan care centres. For example, Mateyu, Atusaye, Hawa and Chisomo who are presently being trained in various vocational skills offered by community organisations look into their future as promising because the skills will help to generate money hence reduce their poverty.

“If I happen to know this skill of carpentry, I think my future will be bright because I will be working on my own and hence be able to get things I need in my life.” (Mateyu, Lilongwe

For Atusaye, although he is not able to complete his formal education because of lack of school fees, he still has hope for a bright future because of the skills he has learned.

Those who are in secondary school education and are getting school fees through support of the orphan care centres seemed to be optimistic about their future and aspired for good occupation. For instance, Maria reveals that she would like to be a doctor, while Chisomo would like to be an accountant. She says *“I will be successful if there will be an opportunity for a job, so that I can also care for relatives”*

The orphan care centres are a great source of support and are playing a vital role of integrating orphans back into society. These centres are locally formed by community

members to deal with various problems in a community. They are run by volunteers and they are non profitable. Children view the organisations as the sole place where they can run to for assistance. It is the only place where they are free to talk openly about issues that affect them in their daily lives through association with peers who are in similar situation. When they gather together at the orphan care centre, the interviewees reveal that they do not feel they are orphans. Chisomo told me, *"...We youths, when we meet together here in our youth clubs and organisations, we encourage one another, and teach one another on how we can get AIDS or prevent it... we discuss this among ourselves. So you learn new things, which you didn't know."*

Having a sense of group identity as well as personal identity also helps a child feel a sense of belonging. Group identity which has been constructed through formation of youth clubs gives them common identity and common interests. It gives each one of them a feeling of acceptance and attaches new meaning to their lives.

Again, the orphan care centres provide career counselling and guidance, which motivates and encourages the children to work hard in school and aspire for a bright future. This in turn encourages them to even have the desire of helping other orphans who are in a similar situation. Thus they are involved in youth clubs, in which they are engaged in various activities such as peer training in life skills education, fund raising activities, counselling and providing for old aged people, HIV/AIDS orphans and other orphans with clothes, food, and beddings.

The interviewees also perceive employees of the orphan care centres as their role models. One girl expressed that the coordinator of the community based organisation acts as her role model, thus she would like to be like her in future. This also explains the importance of having well behaved and qualified mentors, volunteers and coordinators in these orphan care centres, because they do not only act as mere employees or volunteers but

also as role models for orphans.

However, Mateyu and all other interviewees wished to succeed and do well in future so as to forget the poverty and problems they face now. The feeling of hopelessness and uncertainty about future is largely determined by their present economic situation.

CHAPTER 5

CONCLUSION

The study has shown that there are interrelations between individual orphan stories and their social, cultural, economical and historical processes. Being an orphan means facing a number of challenges such as poverty, limited access to basic needs, rejection and workloads just to mention a few. It has also been shown that children are not a homogenous group, as they might be perceived and this is why the experiences of orphans varied throughout the study. Experience was also linked to the social and economic status of the family. Those whose parents were both working had less suffering than those coming from families where only one of the parents was working. Though in both scenarios it revealed that parents mainly fathers, sold property during their sickness, leaving children without anything.

The experiences are interdependent. As it has been shown, it starts with sickness and deaths of the parents, especially of the breadwinner, that leads to loss of income and property. This leads to the lack of land, housing and poverty, which in turn affect their accessibility to food, educational opportunities, health and clothes. All these also have an effect on their probability of either being accepted or rejected by the extended family. Rejection in turn has the psychological consequences in terms of depression, anxiety, anger and confusion. It also affects their perception of the self-esteem and self-concept. Again, workload is seen as a result of their orphanhood, their poor economic situation and their struggle to be accepted or accommodated by the extended family. The economic situation of the orphans seems to be cross cutting factor affecting all other spheres of their lives. Making income and the basic needs available to orphans would minimise depression and anxiety.

Orphanhood in practice begins long before the death of the parents. It begins when parents become sick with AIDS. Often household is without income and the parents are not able to support the children. This, and the trauma of watching the parent slowly dying are the first stresses the orphans face. This idea challenges interventions that are carried out to deal with problems of children after death of parents. The current emphasis on orphanhood tends to exclude children living with parents who have AIDS who also experience many negative changes and can start suffering neglect long before the death of the parents. This implies that to start helping these children before they lose their parents would provide the best practice for dealing with orphanhood.

Experiences depend on the importance attached to the roles of the deceased to the child. In Malawian society, a father is the most important person because of his role, not only as a father but also as the breadwinner. So where a father dies first children suffered a lot in terms of his role in the provision of needs like food, clothes, education health and shelter. Death of mother was important in the orphans lives because of her critical role in the provision of parental guidance especially in the children's early years of life. Though culturally, extended family members do take a role in advising children, they are becoming less active providers of guidance as they too are concentrating on their own children. In Malawi, parental guidance and advice have culturally been taken for granted hence there is no specific policy that provides for parental guidance.

It has been shown that the orphans' biographies or life stories are also influenced by culture. Traditional cultural patterns such as matrilineal and patrilineal marriage systems, the customary law on inheritance and gender issues are seen as to worsen orphans

problems. The study has shown that the fate of orphanhood is the same for both girls and boys. They are facing similar problems though mostly it is the girl child who becomes more vulnerable because of cultural factors.

In Malawi a lot of interventions have been and are still implemented to address these problematic situations of orphans and to ensure that they enjoy their rights. This study has shown that despite this, orphans are still suffering as far as children's rights are concerned. They are still deprived of their rights to life, food, education, association, free time and play just to mention a few. As such, a holistic approach to orphan care could help to address the problems, for example, the implementation of the child rights-based approach to programming in development activities. This approach ensures full involvement and participation of children in matters that are affecting them. The study has shown that children do know their problems better than anyone else does, hence involving them in all stages of development, that is, decision making, planning, implementation and monitoring and evaluation, would reduce their problems.

The implementation of new laws on inheritance and the continuous review of the same would help to reduce the problems of property grabbing.

Again, orphans just like any other children are human capital in future, as such denying them important things such as education jeopardises the development of a nation. The provision of free education in secondary schools and other basic needs that go along with it would help to keep orphans in school.

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APPENDIX I

Interview guide

1. For how long have you been orphaned?
2. How has your life been like since you became orphaned. Probe for (experiences just after getting orphaned, after a while, and current) Probe for Whys
3. How was your life situation before becoming an orphan? Probe where necessary. Let the child describe events before became an orphan.
4. How do these differences in life situations (before and after) affect your life?
5. Where do you stay now? Who do you stay with? Probe reasons for staying with the person mentioned. If stays alone probe why? Who else has she or he been staying with before the present caregiver. Probe for reasons for why she or he moved
6. How are you treated at the home where you are staying, community, school, or anywhere? Probe the way the child relates with the guardian, family members, peers etc?
7. Do you go to school? If not why? If yes who supports him or her?
8. What kind of support do you get? From whom? Probe about psychosocial, education, health, clothing, and food.
9. What activities do you perform everyday? Tell about the daily activities.
10. What problems do you encounter since becoming an orphan?
11. In what ways do you solve those problems?
12. So where and how do you think your life situation will be from now (in 10 years time).