Cognitive Learning: A Life-line Challenge for Orphans and Vulnerable Children in Child-headed Households

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ABSTRACT Orphaned children suffer mental stresses and anxieties and these manifest in the manner they learn and socialise at school and in the community. The phenomenological descriptive case study investigated the learning limitations of orphans and vulnerable children (OVC) and how various stakeholders could mitigate and support the learning of these OVC living within child-headed households (CHHs) in the Chimanimani District of Zimbabwe. Observation and focus group discussion were used for data collection. Six heads of CHHs, two local community members, two teachers, a school headmaster and one children’s rights advocate participated in the study. Data collected indicates that OVC lived under difficult physical and psychosocial circumstances, going through life without proper parental guidance. They encountered situations that militated against effective formal and informal cognitive learning. Orphanhood is a psychological deterrent to learning; the study therefore recommends that the local community, education administrators, policy makers and child advocates should map out life-lines ideal for enhancing the cognitive learning of OVC residing as “siblings” in CHHs.

INTRODUCTION

Since time immemorial, the government of Zimbabwe (GOZ) and many non-governmental organisations (NGOs) have been grappling with ways to best assist orphans and vulnerable children (OVC) to live a more or less normal family life. In fact, one of the eight Millennium Development Goals (MDGs) calls for care and support for orphans (Zimbabwe Millennium Goals 2004, 47 MDG 6 in the Progress Report). The parents of many OVC died of HIV/AIDS especially before the multiple introduction of antiretroviral drugs (ARV) to every person requiring these drugs including the poorer segment of the population. In places as far afield as Asia, the HIV/AIDS epidemic is spreading rapidly. An estimated 7.4 million people are living with HIV in the region and 1.1 million people became newly infected in 2011 alone, bringing the figure to 60% of the world’s population (UNAIDS 2004). The fast-growing Asian epidemic has significant global implications. One such implication is the number of OVC in CHHs.

In Zambia in Africa, a study by the International Labour Organization (ILO) in several districts showed that the majority of children involved in prostitution are orphans who are living in the streets. In Ethiopia, the majority of child domestic workers in the capital city of Addis Ababa are orphans too. In Uganda, focus group discussions revealed that girls orphaned by AIDS were especially vulnerable to sexual abuse in domestic households because of the stigma attached to their orphaned status. Studies conducted in numerous regions have shown that orphaned children have substantially lower levels of education than children who are not orphaned (UNICEF 2003).

Although a correct estimate is not available, the number of affected children and child-headed households is increasing. Children in such conditions are deprived of their childhood and the opportunity to attend school. Economic hardship forces them to find ways to subsist and this increases their exposure to HIV infection, substance abuse, child labour, prostitution and delinquency.

In South Africa, one of Zimbabwe’s neighbours, an analysis by the 2006 General Household Survey found that 0.67% of children were living in CHHs, which amounts to approximately 122,000 children of the 18.2 million children in South Africa. Most of these children, approximately 90%, are located in Limpopo, KwaZulu-
Natal and the Eastern Cape (Meintjes et al. 2009). The researchers urge more researchers to gain a better understanding of CHHs in order to ensure that policies and programmes are well focused and formulated for orphans. They also suggest that more research in the form of longitudinal surveys be conducted to shed light on events leading to the formation of CHHs and the duration of these CHHs (Meintjes et al. 2009).

In addition, Mogotlane et al. (2010) established that in South Africa families and communities are currently unable to cope with the effects of HIV and AIDS, especially in the areas of care of and support for OVC. The OVC seem to be compelled to form a new family structure, the CHH. However, a study conducted by Walton et al. (2009) in South Africa established the extent to which learners who experience learning barriers can be included in schools belonging to the Independent Schools Association of Southern Africa (ISASA).

In recent studies by the Zimbabwe National AIDS Council (2011), it has been claimed that there is a dramatic increase in the number of orphans in Zimbabwe where an estimated 240 000 are believed to be living in CHHs. The Basic Education Assistance Module (BEAM) funds seem to be overwhelmed by the demands and costs of living of affected children. Slightly more than 50 registered child-care centres make the effort to care for some of the children and the National AIDS Council (NAC) executive is encouraging extended families to intervene and implement the idea of fostering children orphaned by AIDS (Zimbabwe National AIDS Council 2011). The researchers have observed that many older OVC prefer to head their households when their parents die.

HIV/AIDS is a significant cause of orphanhood in that if a parent is infected with HIV, the probability that the spouse will also be infected is very high meaning that children face a high risk of losing both parents over a very short space of time, resulting in double orphanhood. UNAIDS (2004) cited in Ganga and Chinyoka (2010) echoes the same sentiments by contending that the proportion of orphans whose parents died of HIV and AIDS is rising, hence the mushrooming of child-headed households.

Zimbabwean children are suffering from an orphan crisis that is depriving them of the chance to be educated and to receive good health care. Most of these children are adolescents aged between 12 and 17 (Youthnet 2005). Demographic and health surveys show that the prevalence of orphanhood increases with the youths’ age. Personaz of UNICEF (2007) declares that within a population of about 15 million people, two million are vulnerable children. UNICEF (2007:1) goes on to say, “We know that one in every four Zimbabwean children is an orphan … talking about 250 000 children being orphaned…” The prevalence has dropped in recent years due to helpful intervention programmes such as ‘Behaviour Change’ but the number of orphans remains unchanged. Hence, there is a need to find ways of intervening by providing the necessary opportunities to be educated, for example. The school was found to be the safest place for any orphan (OVC Policy 2003). The OVC Policy (2003) confirms that schools and teachers play a critical role in the development of OVC. It is the school system that provides psychosocial support.

On the other hand, many social psychologists are trying to understand the relationship between family characteristics and cognitive performance of children so as to fully assist every learner to learn purposefully countrywide. Questions on cognition and orphanhood have also been raised as a subject of debate among researchers, with reference to many nations including Zimbabwe. Earlier research studies favoured families where both parents were still alive. This particular study endeavours to relate orphanhood, learning and cognition of OVC residing in CHHs within Zimbabwe.

Learning is a psychological term referring to a relatively long-term change in behavior that result from experience (Kosslyn and Rosenberg 2008). The simplest way of learning is when an individual or organisation is exposed repeatedly to a stimulus that continuously alters the individual’s/organisation’s responsiveness. Both Kosslyn and Rosenberg (2008) and Woolfolk (2005) contend that behaviorists entrust that all forms of learning are by association or by relating one object or event with another. This study is centred mainly on cognitive learning although it greatly appreciates the works of pure behaviorists mentioned before.

Cognitive learning involves listening, watching, touching or experiencing (Kosslyn and Rosenberg 2008). Information that is obtained through cognitive learning is usually used by the learner for planning, evaluating, synthesis-
ing and other thinking processes. Cognition refers to the mental processes of gaining knowledge and comprehension, including thinking, knowing, remembering, judging and problem-solving. These are higher-level functions of the brain that encompass language, imagination, perception and planning (Kosslyn and Rosenberg 2008). The learners (OVC) are engaged in cognitive learning when they try to tackle scientific, linguistic or mathematical tasks or learn new schemes. Cognitive learning covers such forms of learning as latent, meaningful, insight, mastery and cooperative learning.

Observations locally have also indicated that orphaned children suffer mental stresses and anxiety manifested in the manner they socialise or isolate themselves. Yet researchers such as Cluver and Gardiner (2007) assert that very little is known about factors that affect orphans’ mental health. This study also realises the importance of the Convention on the Rights of the Child proclaimed in the Charter of the United Nations (signature, ratification and accession by the General Assembly Resolution 44/25 of 20 November 1989) which came into effect in 1990. It specifies clearly the universal children’s rights to include OVC. Through the Universal Declaration of Human Rights, the United Nations has proclaimed that children are entitled to special care and assistance in all spheres of life including learning as in education. As such, it becomes vital to understand how children’s development is shaped by their social contexts (Bray et al. 2010).

Bronfenbrenner (1986) explains fully how different levels within a system in the social context interact in child development. Interacting dimensions are central to his model, which covers personal factors (for example, one OVC’s temperament), process factors (forms of child-headed family interactions) contexts (members of the extended families, schools or local communities) and time (changes over time in the child and the environment). He explains fully reciprocal influences in families, peer groups, classrooms, schools and local communities covering four nested systems, namely the microsystem, mesosystem, exosystem and macrosystem, which all interact with the chronosystem.

And so, OVC are at the centre of it all. Reciprocal interactions with their peers, school administration, CHHs and the external community all impact on OVC, siblings and their community. For instance, the notion of residing in CHHs can affect the exosystem, for example a CHH older sibling’s school interactions can affect other siblings’ ways of life, as most members of CHHs look to older “brothers” or “sisters” for care and support. Therefore, any frustrations at school can eventually affect entire CHHs, which in turn affect all the OVC, their peers and the community. Eventually the whole macrosystem is affected either positively or negatively.

RESEARCH METHODOLOGY

Research Design

The study adopted a phenomenological descriptive case study in order to explore and
present an authentic learning situation and resultant implications for OVC in CHHs and the community at large. The enquiry falls within a qualitative research paradigm (Creswell 2008; Leedy and Ormrod 2005).

**Sampling Procedures**

Six child-heads from six CHHs were purposefully selected from the Chimanimani District of Manicaland in Zimbabwe. The OVC were aged between 14 and 18. There were three female and three male child-heads. Two teachers, one headmaster, two community members and one non-governmental organisation (NGO) officer were also purposefully selected to form a total sample of 12 participants. Efforts were made to balance gender and participant numbers.

**Data Collection and Analysis**

The developmental experiences of the OVC in the CHHs were noted on an observation guide developed for use by teachers, NGO officers and one researcher. Participant observations were convenient as observers were residing in the district at the time of the study. Non-obtrusive observation procedures (Sidhu 2003; Nachmias and Nachmias 2008) were employed to check OVC’s behaviours, emotions, strengths and weaknesses during interactions with teachers, researchers and other children. The procedure proved useful in earlier research by Venter and Rambau (2011). The teachers and NGO officers were trained by the researcher to use the observation guide beforehand. A focus group discussion was conducted with the OVC, teachers, NGO officers and the researcher in order to try to confirm some of the observed OVC behaviours. Data triangulation (Leedy and Ormrod 2005) was meant to extract an authentic situation about the OVC in CHHs.

Some cognitive learning themes emerged from the focus group discussions and interview transcriptions as well as observation reports. Within these themes the researchers were able to place anecdotal statements taken from the OVC’s learning experiences within their phenomenal fields (environment), thus making the study results more qualitative.

**Ethical Considerations**

The researchers were aware that each and every citizen, including OVC, has the right to dignity of treatment and privacy. Therefore, it was prudent to explain the purpose of the study to all the participants. Participants were assured of strict confidentiality, and where names were necessary only pseudo names were to be used. Consent forms were used especially for both minors and older participants. The main aim of the study was to establish the cognitive learning situation of OVC from CHHs. Data collected was used only for educational research purposes and to perhaps establish and recommend ways in which the OVC could be assisted. Participation in the study was voluntary.

**FINDINGS AND DISCUSSION**

The findings discussed here help to highlight the cognitive learning experiences and challenges that OVC encountered in and outside their CHHs. Pseudo names are used in the anecdotal records presented. The section covers findings on each form of cognitive learning as a major theme covering latent, insight, observational, situated, meaningful and cooperative learning.

**OVC’s Life-line and Learning Experiences**

The learners expressed difficulties in cognitive learning where in simple terms they could not handle work inside and outside the classes due to the degree of difficulty that went beyond their own potential. All six OVC considered themselves marginalised and to some extent not recognised in so far as learning aid was concerned. For instance, they nodded their heads as Batsirai (pseudonym) expressed her concerns over acquisition of learned information, “It is quite difficult to live as an orphan where one is unable to consult especially on homework since we all reside as parentless children, with none of us who is well informed about wanted detail in each subject. Neighbours seem to be too busy to help.” Tapiwa (pseudonym) added by saying, “They always say - Hatizivi (we don’t know). It is the teacher who sometimes takes time to help but unfortunately our teachers are too busy and stay far away from our various homes. “Tinoshaya wekubvunza sezvaungaita uine mubereki wako” (we fail to get people who are always ready to assist as one’s own parents would). ” They all seem to be referring to hindrances in accessing cognitive aid such as latent learning where it is most needed. The OVC wander around their environment to develop a cognitive map that helps to store informa-
tion, albeit without much success. It is latent learning that can help to distinguish learning something and performing it (Meyer et al. 2003).

Latent learning is a form of cognitive learning that places crucial reliance on how information is stored in memory. Rangarirai (pseudonym) also expressed sentiments over their inability to store learned details. He lamented saying, “Even if I try to recall what they teach, it becomes difficult because my mind is always centred on my little brother’s and sister’s welfare. “Hazvigari mupfungwa, Zvinotobuda tisati tanyora matests” (Nothing learnt really settles in my mind for long. In fact it expires before we even write tests.).” He implied lack of memory retention and the fact that learned detail quickly go extinct before school authorities assess the work. As such, learning from a CHH is hindered by circumstances that seem to be unavoidable for an OVC.

Atkinson and Schifrin (1971) cited in Kosslyn and Roselyn (2008) identify basic types of memory stores and explain how information flows among them. Essentially information flows from a sensory memory to short-term memory up to long-term memory. Later discoveries were that information can move from sensory memory straight into the long-term memory and that repeating items over and over again AIDS memorisation (Kosslyn and Rosenburg 2008; Slavin 2010; Beihler and Snowman 2011). With this background, memory retention may not be so easy for children in CHHs.

In another instance, a younger OVC, with the pseudonym of Tonde, praised her elder sister saying, “It is my sister who is always helping me with school tasks whenever my teacher is not around. Therefore, I find it easier to learn any new work even if mum and daddy are long gone. We work together as a family in order to make sure that we achieve something in life.” The learner here implied insight learning from an older child-parent and residing in and learning from a CHH. The OVC learn a lot from one another. Sometimes the products of their learning are profitable, but in other instances they drag the OVC into hot waters. Any negative insight learning necessitates early intervention by well-wishers. This study endeavours to establish these effects while working toward a remedy in a home where there are no real parents, only child-parents.

In another encounter, Ndabonga (pseudonym) mentioned that they also learn a lot from observing others at school and older learners within their fields. “I must admit that even if we are orphans some teachers and other children try to assist us a lot. We watch how they tackle some mathematical concepts and follow suit. On the other hand, some children may want to teach me behaviours that I do not agree with and I rely on my aunt’s occasional visits and messages that some behaviour is harmful.”

Another one, Tarirai (pseudonym), also indicated situations of observational learning as she expressed her experiences in practical skills saying, “I learnt how to cook, type, polish and do all sorts of things from friends around our home.” As OVC socialise among themselves in CHHs they continue to learn about each other’s cultures, likes, dislikes, beliefs and expectations. It helps people to learn how to behave in their cultures. One wonders, however, where and what OVC observe and learn in their CHHs, at school and in the rest of the community. The OVC may learn how to cook by watching others and eventually practising, making mistakes in the first instance and eventually mastering the task.

On a negative note, OVC may observe aggression when watching other children’s behaviour and may eventually model it (Bandura 1993). By observing others, children can produce desired and undesired behaviours. The reason is that many may say one thing and then model.
another as in the case of a peer educator who may wish to counsel an OVC on matters related to sexual activities yet most of the time the peer is engaged in premarital sex leaving the observer in an awkward situation, wondering whether to copy the behaviour or not. There are also other forms of cognitive learning worth discussing.

Situated learning theory proposes that learning is maintained and situated with authentic activity context and culture. It is regarded as unintentional where knowledge should be presented in authentic contexts that would involve the perceived knowledge. It involves social interactions and collaboration components where learners are said to be involved in a 'community of practice' involving certain beliefs and behaviours to be acquired. This is evident in Ndabonga and Tarirai's anecdotal statements mentioned previously. The assumption is that the learner moves along to become more active and engaged in the particular culture. She/he eventually becomes more competent and assumes the role of an expert (Lave 1988; Brown et al. 1989). These authorities in concurrence with Vygotsky's social cultural perspective have developed the situated learning theory into believing that both formal and informal learning advances through collaborative social interactions, hence the social construction of knowledge.

The learning theory is significant here as it explains to readers fully how both formal and informal learning can be enhanced among OVC if proper collaborative activities are planned for less-privileged learners in their CHHs and/or when they join other learners at school in formal learning setups.

According to Ausubel (1960) cognitive learning theory is concerned with how students learn large amounts of meaningful material from verbal/textual presentations in a learning activity based on the representational and combination process that occurs during the reception of information. As in assumptions of cognitivists, new material is related to relevant ideas in the existing cognitive structure on a non-verbatim basis (previous knowledge). Meaningful learning results when new information is acquired by linking the new detail with existing details in a learner's cognitive structure, as explained by assimilation and accommodation.

In the focus group discussion, OVC lamented over many more learning drawbacks that included poverty, loneliness, ill relatives, overworking, taking responsibility for younger siblings and a lack of perfect security. Both the teachers and headmaster confirmed that the OVC from the CHHs face problems of resources especially extra reading and revision materials while at home. Any meaningful learning would entail availability of sufficient learning AIDS for both assimilation and accommodation to take place without any hitches. Responding to our question on readiness for new learning, OVC mentioned the lack of a home base that gave them a chance to prepare for new classwork. Perhaps teachers should pay serious consideration to the use of advance organisers as stimulants for adequate assimilation and accommodation of concepts. Advance organisers are deductive in nature and help to compare new material with older material. They are a common basis for any new learning.

In responding to how best the OVC would prefer to be assisted in their learning, Batsirai (pseudonym) said, "If it were at all possible we would appreciate a situation where our teachers would allow us more learning time with them "kuti tinyatsobata zvidzidzo" (so that we are able to grasp all given concepts.) There is no one at home who can help us fully besides our subject teachers. Many out there in the community are not so willing to give us extra assistance especially in Mathematics and Science out of school assignments." They were all murmuring concurrences as the child narrated her story; this is an indication that many OVC needed more contact time with the subject teacher for them to tackle tasks given as extra work. This implied a need for teachers to implement mastery learning principles. The basic assumption of mastery learning is that almost all students can learn the essential knowledge and skills within a curriculum when the learning is broken into parts and presented sequentially (Slavin 2010).

Teachers will need to improve the quality of the curriculum instruction by helping to link instructional activities to student needs. Variations in students should be considered, where educators should allow higher-level activities for faster learners and extended learning opportunities for slower learners who may need more time. An ongoing formative evaluation is essential if learners and educators are to have an effective reciprocal teaching and learning interaction.
The advantage of learning when children stay as siblings was mentioned by one younger child-head, Rangarirai, who expressed advantages as follows, “*We like it sometimes when we learn to share after meals as a family even if our parents are no more.* “*Tinogona kuronga kusangana nedzimwe nherera tichitodzidzisana.*” (We sometimes arrange to visit other orphans in order to share ideas.) My brothers and sisters keep me company too and a lot is explained to me in learning many subject materials including how to protect our homes from enemies out there especially when we visit other orphans.” Also known as collaborative learning, cooperative learning is the instructional use of small groups so that students work together to maximise their own and each other’s learning (Jacobs and Hall 2002) or principles of learning and techniques for helping students work together more effectively (Jacobs et al. 2002). Essentially it entails helping students to make learning experiences as successful as possible. It offers many benefits that include elevated self-esteem, greater love for school, enhanced inner ethnic ties, improved abstract/complex thinking (Johnson et al. 2000) and of course a sense of security.

In an interview with the NGO officer, it was noted that OVC in a child-headed household face cognition challenges as evidenced by the vast number of organisations countrywide trying to educate the OVC and help them to learn. Examples of such organisations are Ndoro Children’s Charities. The organisation aims to support underprivileged children in the poorest parts of the world with an initial focus on Zimbabwe. The Hidaya Foundation Report (2011) aims to meet the basic survival needs of orphaned children, provide support for basic and continuing education, monitor progress in educational goals and remove obstacles that hinder progress. This study is quite significant to this particular organisation as it tries to unpack cognitive learning challenges facing affected children in Zimbabwe.

**CONCLUSION**

In an effort to enhance the area of education and the wellbeing of OVC, this study tries to intervene into Education for All (EFA) goals by catering for the rather neglected lot of children striving to learn where sometimes the cognitive maps are distorted by intervening variables. Once the effects have been established, perhaps the findings will open up the way for future research that will facilitate the emancipation of OVC in CHHs.

Orphans and vulnerable children fall under many children with cognition and learning difficulties. The group makes up a greater number of children in the mainstream schools today. Although there are some generic approaches meant to help learners to learn, they may be needed for further scrutiny in the handling of the many children who seem to be living under very stressful conditions such as double orphanhood.

Children in affected families are deprived of their proper learning during childhood and the privileges of living in a safe environment. Some forego their education to take up jobs and shoulder the burden of their families. The number of orphans and vulnerable children is likely to increase, posing serious threat to existing socio-economic structures. What is required is a proactive response by all stakeholders so as to scale up support and care services for children orphaned by AIDS.

Such children often grow up deprived of such emotional and material needs and the structures that give meaning to social and cultural life. They are also at a greater risk of neglect, violence, sexual assault and other abuse. The role of the research remains to provide evidence that can provide guidance to policies and programmes. In this case it is the learning and enhancement of cognition on the part of OVC in CHHs. A number of anecdotal records were produced for the children to air their views and it was noted that the construct of orphanhood does deter cognition especially if the orphan is neglected or abandoned. The implication therefore was that the impact of the environment, even in the CHHs, should be monitored fully and studied to assist the populace as they learn from experiences throughout their life, beginning from childhood.

The OVC displayed resourcefulness, responsibility and a sense of morality. In situations where the stressors were becoming too much of a burden, the children tended to become negative and employed potentially harmful strategies to cope. A community-based approach to intervention was recommended in order to strengthen the overall community wellbeing and building capacities for coping mechanisms and resil-
ence characteristics, while addressing their areas of vulnerability.

From the data collected, it was found that the rights of the affected children were compromised. Those heading the households were often not at school and were responsible for domestic chores. The households needed food, clothes, money, shelter and education.

Factors identified were a specific lack of a sense of security, belonging and acceptance; consequences of the past affecting psychosocial wellbeing; extreme poverty characterised by insufficient food, clothing and shelter; exploitation and abuse; property grabbing; denial of children’s rights and a lack of democracy; neglect; emotional abuse; a lack of advocacy; and finally a lack of access to social services such as health and education. These factors are consistent with other studies conducted in this area.

RECOMMENDATIONS

The ecological impact of child-parenting in poorer situations seems to be far more detrimental than it is helpful because the children’s anecdotal reports and our observations noted instances of need deprivation in various formats. Educators have a role to play in dismantling oppression of children and generating a vision for a more socially just future.

The researchers recommended empowerment of the OVC by regarding them as active members of the community instead of taking them to be victims who only await aid from donors. It is further recommended that the need for children’s support groups alongside adult support groups so as to look into ways of coping with parenting and schooling at the same time. Effective measures to help mobilise the communities to provide immediate and long-term support to CHHs should be initiated by both governmental and nongovernmental sectors. Mental health research is essential for affected OVC, life skills training, psychological support services and education for most children who are engaged in multiple burdens of labour at home and are not able to concentrate on school work. The concept of foster families such as the Ndoro Children’s Charities for children orphaned by AIDS has emerged as a positive approach for supporting children at risk. More such homes are essential. They provide continuity of care in family and community settings thereby providing a more natural, personal, loving and affectionate environment for children to survive. A similar model is working in India.

Every effort must be made to ensure that affected children have stable family-based care and adequate social support. The community should be fully involved in the welfare of all children especially those whose microsystems do not include biological parents. Teachers too should be fully prepared to deal with issues related to OVC.

The orphaned children in CHHs remain a concern for every parent in Zimbabwe. The government, nongovernmental organisations and members of the community should make collaborative efforts to plan best ways to normalise the upbringing of all minors including those who are orphaned. Teachers are also encouraged to extend their in loco parentis duties to weekends and vacations in order to afford each learner the care and support that she/he continuously requires and seeks. Looking at the high poverty levels in CHHs the policy makers should establish ways of controlling or eradicating the extra tuition for extension work.

Maintaining all children’s schooling is an important intervention in several ways. It retains children’s connectedness to peers, familiar adults and to an institutional identity. Schooling provides children and society with future knowledge and skills. Keeping children in school could also help to prevent vulnerability to HIV infection, by protecting children and reducing the child’s need to seek shelter, food and clothing through risky encounters with unscrupulous adults.

There is a need for provision of parenting education to all child-parents and caregivers in order to enhance the academic and social performance of children. Improved parenting can lead to better child outcomes, but only if other needs in a family’s life have also been addressed.

Very often university academics, researchers, governments, civil societies and other well-wishers recommend intervention programmes for marginalised groups yet implementation may not take off or may remain at pilot level, resulting in the intended beneficiaries continuing to suffer within their microsystem or macrosystem interactions. More action research is encouraged to help the child in need.

There is a need for an in-depth study concerning OVC in CHHs as it is evident that the
concept of a child heading a household goes against all rights that are due to children in the Convention on the Rights of the Child proclaimed in the Charter of the United Nations.

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