

Dealing with Children from Child-headed Households: How Prepared Are the Teachers

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ABSTRACT The paper sought to ascertain the level of teachers' preparedness to deal with learners from child-headed households (CHHs) in their (learners) academic pursuits. The study followed a qualitative case design of a conveniently selected school and the snowball sampling technique was used to identify orphaned learners. In-depth interviews, observation and document analysis were utilised to collect data. The paper established that teachers were not ready and able to assist these learners. The learners in the study felt that their teachers were not trained to assist them. The paper concluded that teachers were not empowered to deal with CHH learners. Recommendations were made that educators should go for in-service training, workshops, seminars, and professional development meetings to empower and prepare them to deal with such CHH learners. The colleges and universities training teachers should also prepare teachers in the making with the relevant skills to deal with such situations.

INTRODUCTION

There is a dearth of literature on the new classrooms in Africa, where a significant number of learners or pupils in the classrooms are orphaned or coming from child-headed household (CHH) (Le Roux-Kemp 2015; Gubwe et al. 2015). George and Mansah (2011) state that one of the biggest challenge schools face today is the increasing number of learners coming from CHH. People used to assume that there was no such a thing as CHHs because it was generally assumed that orphaned children would be easily looked after within the extended family structures (Le Roux-Kemp 2015; Phillips 2015; Mturi 2012). Now, due to the advent of HIV/AIDS scourge, this new structure (CHH) is now a reality and a permanent feature of our society. This phenomenon is puzzling educators in schools who are left with a dilemma by not knowing how best to deal with such learners. Masondo (2006) in his study notes that the number of orphans in CHH can be expected to increase significantly and educators are increasingly frustrated by lack of capacity and resources to support these learners that they face every day (Phillips 2015; van der Mark 2015). There was, therefore, a need to ascertain whether teachers were prepared to handle children from CHHs in their academic pursuits and assessing how those learners view teacher preparedness.

Literature Review

Teachers' Readiness/Preparedness to Assist Orphans

Educators play an important role in shaping and grooming learners coming to school. They act *in loco-parentis*. Different studies agree that HIV/AIDS-orphaned children normally come to school lacking parental guidance, love, warmth, a shoulder to cry on, financial resources and carrying heavy responsibilities (Phillips 2015; van der Mark 2015; Mturi 2012). Available research acknowledges that the number of HIV/AIDS-orphaned learners from CHHs is increasing (Marongwe et al. 2016; Phillips 2015). The African Development Forum (2000) notes that the education sector is the hardest hit: countries have been devastated; teachers, pupils and administrators are affected. The quality of education is undoubtedly affected as class sizes are on the increase. In support of the African Development Forum, George and Mansah (2011) report that one of the biggest challenges schools have today is the increasing number of children coming from these child-headed families. The question is, "Are teachers prepared to handle these learners who come to school troubled, shabby, lacking basic things and emotionally and psychologically depressed?" According to UNESCO (2010), teachers are seen to have an important responsibility in ensuring that chil-

dren and young people acquire essential knowledge, skills and attitudes. Teachers are seen as pivotal in ensuring that children affected and infected with HIV/AIDS epidemic have access to care and support (Marongwe et al. 2016; Gubwe et al. 2015).

Some qualitative studies carried out have established that since the advent of HIV/AIDS, educators/teachers seem ill prepared to dealing with these children in school. Maphosa et al. (2007) observe that orphaned children's problems become serious psychosocial ones; however, when they attend school no one appears to be aware of their plight and they are often misunderstood by teachers. Anderson (2005) cited in Dalen et al. (2009) concurs by saying that some teachers may interpret students' emotional and social deficits as a lack of respect or bad manners. It is evident that there is a misunderstanding of these learners. Maphosa et al. (2007) note that these children are not spared at school either; they may be treated equally with other children who have parents but when they fail to operate like other children may be labelled as deviants (van der Mark 2015). The view of Maphosa is in congruence of the researcher's observation at her school.

Pillay (2011) points out that some studies have found that teachers are grappling with the task of teaching such children. On a daily basis schools have to contend with children who are hungry, exhausted and emotionally and psychologically affected (Zhangazha 2014). On the same note, UNESCO and ESART (2009b) report that teachers are not adequately trained. UNAIDS (2010) concur in that the quality of education is hindered due to lack of training of teachers and an unwillingness on the part of teachers and schools to provide appropriate education. UNAIDS goes on to report that available research suggests that, in general, teachers are not sufficiently empowered to address the HIV/AIDS-related vulnerability and this impact on the school setting at present.

The inadequacy of proper training of teachers to deal with these learners often results in the teachers' illtreating them. Child-welfare (2009), Loundon et al. (2007), UNESCO (2010) and UNAIDS (2010) agree that some orphaned children are treated badly by some educators who reprimand them for late coming or incompleteness of work not realising the problems or perhaps being ignorant of the added responsi-

bilities and struggles these children have to cope with. Subbarao et al. (2001) and Meintjes et al. (2003) concur by saying that teachers aggravate the situation by making insensitive remarks; unwillingness to make allowances for children's late arrival, absenteeism or shabby clothing (Gubwe et al. 2015). Such prejudice can push CHH children further into the isolation of their own melancholy world. These children have nowhere to turn for emotional and social support in order to cope with problems faced. The likes of DePanfilis (2006) and Anderson (2005) cited in Dalen et al. (2009) concur by expressing the view that it is more accurate and helpful to understand that the learners come to school with a narrower range of appropriate emotional responses than are expected (Phillips 2015; Le Roux-Kemp 2015).

It is also argued that educators are frustrated by the whole scenario. Masondo (2006) holds that educators are increasingly frustrated by lack of capacity and resources to support these learners that they face every day (Gubwe et al. 2015). Anderson in Dalen et al. (2009) agrees with this view that educators are puzzled, frustrated and irritated by the behaviours of these orphaned learners because teachers have less experience in teaching children without parents. Taggart (2007) adds that large classes and poor resource facilities at schools worsen the situation. It is established that some teachers label, demean and blame students, yet it is advisable to avoid that at all costs. Mkhonto (2010) asks whether it is a question of being difficult, stubborn, and ill-disciplined or a question of being traumatised and receiving no psychosocial therapy. Having looked at all these views, the researcher wants to align to those views.

Other researches explain that HIV/AIDS-orphaned children from CHHs need support because of the situations and difficulties they face (Le Roux-Kemp 2015). Instead, what do they get? Studies establish that they are stigmatised and discriminated against by people from whom they expect to get love, warmth and support. UNESCO (2010) reports that stigmatisation and discrimination by teachers is the major educational barrier because these teachers are not adequately trained to work with these children. Masondo (2006) states that peers and educators exacerbate psychological trauma through stigmatisation of infected and affected orphaned children (Fleming 2015). In concurrence, Chigwenya et

al. (2008) established that children whose parents died of HIV/AIDS-related illnesses are often discriminated against and stigmatised by their teachers, peers and others thus exerting untold distress and social isolation before and after the death of their parents. Also Kelly (2000) notes that children are teased by schoolmates and there is a lack of response from the community to their emotional needs which tear them apart.

India HIV/AIDS Alliance and Tata Institute of Social Sciences (2006) believe that schools should be sensitised and have a flexible education programme for CHHs facilitated to make a school a supportive place for the CHHs and to enable them to continue their studies. Sibanda (2006) carried out a study on “Who drops out of school in South Africa” and found that one of the biggest concerns for educational systems in Africa is their ability to retain students until they graduate from primary or secondary school. The problem of dropouts is disquieting to policy-makers since it partly reflects the inadequacy of a schooling system in terms of school quality. Other studies also seem to agree that the Education Policy on HIV/AIDS orphaned children is not clear or is quiet about it. A case study commissioned by UNESCO in Tanzania found that the Ministry of Education and Vocational Training does not have specific policies or guidelines (UNESCO and ESART 2009b). On the same note, it is also argued that no South African Education Policy is clear on the issue of children orphaned by HIV/AIDS living in CHHs.

Generally, many studies and reports, as discussed above, concur with the view that teachers are not prepared to handle learners orphaned by HIV/AIDS living in CHHs because of lacking of training. UNESCO (2010) and UNESCO and IATT (2010) explain that qualitative studies also highlight the inadequate support provided through teacher training programmes or other efforts to empower teachers to support HIV/AIDS infected and affected learners. McCarthy (2006) holds that school systems do not understand the cognitive and emotional dynamics of these children and children are at high risk regarding difficulties in school. This lack of understanding and support makes it likely that some of them may never reach their full potential.

Learners' View (Attitude) on Teachers' Preparedness

Several studies hold that most orphaned children from CHHs live in a stressful environ-

ment and many of them struggle with unmet basic needs such as food, shelter, education and medical care and have poorer psychosocial well-being compared with other children (Fleming 2015; Le Roux-Kemp 2015; van der Mark 2015). Jill (2010), Gubwe et al. (2015), Chigwenya et al. (2008) and Maphosa et al. (2007) agree that the children's descriptions of their situations and difficulties they face highlight the need for support. Jill (2010) states that these children feel like dying because of the distress and social isolation they experience. This is made worse by the shame, fear and rejection that often surround them (Phillips 2015). Learners consequently come to school carrying these heavy responsibilities, lacking love, warmth and means, and expect the school to fill the gap (Marongwe et al. 2016). When they come to school how do they perceive the readiness of teachers to help them achieve their goals?

There is a limited amount of literature available concerning how children view teacher preparedness to assist them since the advent of HIV/AIDS. This is a gap this study intends to fill. The affected children know and feel that they are not totally accepted like children from normal households. Phillips (2015) and Maphosa et al. (2007) note that when these children attend school no one appears to be aware of their plight and they are often misunderstood and suffer maltreatment. They can pick up that teachers are not ready to assist them because they are often not even noticed. Dalen et al. (2009) report that CHH orphans reported that people did not care about what happened to them. Some of the children used in the study by Dalen et al. (2009) claimed that some people saw them as a disease and called them names like ‘stupid’. UNICEF (2007) has it that on numerous occasions, HIV/AIDS orphans are scorned by other children, discriminated against and isolated to such an extent that they find it better to stay away from school (van der Mark 2015; Phillips 2015). These children see that they are not getting help; even when they are scorned by other learners, teachers do not reprimand the unaffected children. Orphaned children from CHHs are therefore prone to abuse (Masondo 2006; Chigwenya et al. 2008; Jill 2010; India HIV/AIDS Alliance and Tata Institute of Social Sciences 2006).

Kirya (1996) notes that some HIV/AIDS orphaned children from CHHs may develop a fatalistic attitude towards their condition and learn

to live with their condition of helplessness and hopelessness. This leads to resentment and learners may not look for help from teachers or fellow learners. DePanfilis (2006) argue that those children have learnt that their needs may not be met by others and may cause them not to even try to solicit warmth or help from teachers or peers. This behaviour may result in HIV/AIDS-orphaned children not getting help from teachers and peers, thus reinforcing the negative expectations that they are not wanted (Marongwe et al. 2016). These children become mistrustful of teachers and others and may be less willing to learn. Children may develop fears, an inability to trust, low self-esteem, insecurity and anxiety, and choose isolation (Le Roux-Kemp 2015).

Children may actually perceive how educators struggle to deal with them. Pillay and Nensengai (2006) argue that because educators lack a situational understanding of the backgrounds of learners from parentless homes, they appear intolerant and fail to recognise the link between their learners' domestic problems and their scholastic performances (van der Mark 2015). This pushes the learners back, for they soon realise that the teacher is not prepared to assist them and this pushes them into isolation. At times these children do not have control over some situations so they just withdraw (Sendengo and Nambi 1997). Stress is evident when they realise that even the teachers from whom they expect help cannot help them. This has a negative effect on their academic performance, according to some studies (Gubwe et al. 2015).

Zhangazha (2014) and India HIV/AIDS Alliance and Tata Institute of Social Sciences (2006) note that children feel they should discontinue their education because of pressure and lower grades obtained. Chigwenya, Chuma and Nyanaga (2008) and AIDS Action (2004) report that such learners have very little access to outside assistance, so they end up relying on their own initiatives. The report on Global AIDS Epidemic (2006) reports that the National Governments International Partners and Communities are failing to provide adequate care and support for the 15 million children orphaned by AIDS; millions of these children are rendered vulnerable by the epidemic (Fleming 2015).

Statement of the Problem

The problem under investigation is: "How prepared are the teachers in dealing with children from child-headed households?"

The Nelson Mandela Children's Fund Report (2001) thus reports that South Africa has the fastest-growing rate of children who are heading families (Phillips 2015). There was therefore a need to establish whether the teachers were sufficiently well equipped to deal with them. The above-mentioned report also notes that educators were frustrated by the learners' escalating absenteeism and low performance. In agreement, Wilson (1996) acknowledges that teachers are likely to be puzzled, frustrated or irritated by these learners because of the teachers' lack of experience in teaching children raised without parents or guardians. There was, therefore a need to establish educators' readiness, as that was a cause for concern because of the growing number of children coming from CHHs. George and Mansah (2011) observe that one of the greatest challenges schools face today is this increasing number of children from CHHs. This study therefore sought to answer the question, "How prepared are teachers in dealing with children from child-headed households in their academic pursuits at Makabongwe Senior Secondary School in Cofimvaba, South Africa?"

Goals of the Study

The goals of the study were:

- To ascertain the extent to which educators were prepared to assist these children.
- Establish how the children from child-headed families viewed teachers' preparedness to assist them with their challenges within the school system.

RESEARCH METHODOLOGY

Research Approach

The study was rooted in the qualitative approach as it sought to understand and describe the qualitative nature and the extent of the challenges faced by CHHs in their academic pursuits from their own perception. The qualitative approach had been chosen because of its characteristics that suited the phenomenon of CHHs unlike the quantitative approach which explains everything using the causal and effect laws (Meyer et al. 2003). Moutong and Prozesky (2001) reiterate that qualitative research attempts to produce findings arrived at from real-world settings where the phenomenon of interest un-

folds naturally; in this case the phenomenon is CHHs. A qualitative approach was also considered suitable for this study since it presents facts in a narration of words, as compared to quantitative research which presents statistical results numerically (Henning 2005).

Research Design

A case study was used to study the phenomenon at one selected school (Babbie and Mouton 2010). A case study design allows a researcher to focus on a small scale study primarily for rigor and in-depth understanding of CHHs (Maree 2007). A case study is an in-depth study of a particular situation rather than a sweeping statistical survey, a method used to narrow down a very broad field of research into one that is easily researchable (Maphosa et al. 2007).

Sampling Procedures

The population for this study was drawn from orphaned learner children as a result of HIV/AIDS living in CHHs, who were of school going age in a rural senior secondary school. The school was selected through the convenient sampling technique, where orphaned children from CHHs were identified. The targeted participants were selected through purposive and snowball sampling techniques. 10 learners from child-headed households were used from Grade 8-12. 4 educators were interviewed, 1 SGB member and 1 principal. A total of 16 participants participated, small as it may appear, but the figure aligns to a qualitative approach. Creswell (2008) substantiates this view when he argues that a sample size of this nature will suit the qualitative study.

Data Collection Techniques

The study used in-depth interviews which were the main source of data gathering. Cohen and Manion (1994) note interviews as the principal means of gathering information by providing access to what is inside the person's head and that it makes it possible to measure what a person knows (knowledge and information) and what a person thinks (attitudes and beliefs). Observation was applied in order to triangulate findings from the interview. Mathison (1998)

states that triangulation is a strategy used in qualitative research for the purpose of improving the validity and reliability or research evaluation of findings. Observation was made at school and at home to establish the way children from child-headed households behave, work, and socialise and their attitude towards fellow learners, educators, school work and extracurricular activities. This was suitable to the topic under study because Leedy and Ormrod (2010) note that actions are more telling than their verbal accounts. The major advantage of an observation is that it is used to triangulate data collected from interviews. Document analysis was used to augment data from interviews and observations. Creswell (2008 cited in Babbie and Mouton 2010) acknowledges that documents contain text (words) and images that were recorded without the researcher's influence and is reasonably free from the researcher's bias. The researcher analysed documents such as class attendance registers, the learners' exercise books and work schedules to measure how children from child-headed households were performing at school.

Data Analysis

Data were thematically analysed. Beginning with content analysis the researcher sought to extract themes and metaphors that organise and make sense of the data obtained. Responses were put into categories on the basis of the meaning they conveyed.

Measures to Ensure Trustworthiness

In qualitative studies there are also measures to ensure trustworthiness of a study. Strauss and Myburgh (2001) identify four measures, namely, credibility, transferability, dependability and confirmability as also identified by Guba (1990) cited in Krefting (1990). To ensure validity and reliability for the purpose of this study the researcher adopted Guba's model of trustworthiness of a qualitative research (Krefting 1990). The model has four basic aspects which are: truth-value, applicability, consistency and neutrality. Kvale (1996) is of the view that validity and reliability in a qualitative study is based on quality which helps people to understand a situation that would be enigmatic or confusing. Healy and Perry (2000) concur with Krefting

(1990) when they use terms such as credibility, neutrality/conformability, consistency, dependability; applicability and transferability often used for the qualitative paradigm.

Ethical Considerations

The researcher conformed to the standards (expected norms) of conducting research as this was a social science research project which collected data from human participants. Rubin and Babbie (1997) note that social research often presents an intrusion into people's lives requiring people to reveal personal information about their lives, therefore, ethical considerations such as informed consent, anonymity, confidentiality, voluntary participation and withdrawal were critical (Neuman 2006). The researcher explained to the participants the importance of ethics in research. She made it a point to explain the purpose of the study to them first before signing of the consent forms.

RESULTS

From the findings themes related to the problem statement emerged. These themes are discussed below and illustrated by means of quotations from the interview text. The quotations are presented verbatim. The common issues derived from the collected data emerged as:

- (a) Nature of teacher preparedness
- (b) Teachers' greatest challenge in dealing with CHH learners
- (c) Learners' views on teachers' ability to assist them

Coding: OL-Orphaned Learner, T-Teacher, P-Principal and SGB-School Governing Board

Nature of Teacher Preparedness

Views of the participants based on the nature of teacher preparedness were highlighted below:

In response **OL7** said:

No, teachers are not ready because they are busy; they have no time their work is too much so they are not ready to cater for us. This has affected my performance because I thought the teachers were going to create a special time for us, counsel us and do extra lessons with us.

Similarly **OL1** stated:

No, teachers are not ready to assist us because they don't even know that we are or-

phans; they chase us away from school. They punish us when work is not done but they don't even know what we are going through. My performance has deteriorated because my teachers are not supporting me emotionally and academically.

When the teachers were asked to respond to the same question on how prepared they were to assist these learners achieve better results, teachers had mixed feelings. The question was, 'Are you prepared to assist these learners? How do you assist them?' In response **T1** stated:

It's tricky to say but I think if the school can sit down and discuss the matter and come up with solutions then we can be ready. We are ready to assist them only that we don't know how to go about it.

T3 on the other hand, felt that teachers were ready. He explained:

Some teachers are ready because others who know about these children have gone to the principal telling him about such learners and that they shouldn't be chased away since they are orphans.

T4 expressed the view that:

We can avail ourselves specifically for these learners if the school could take a position and come up with CHH policy.

In response to the question above **P1** said that:

At the time we trained it was unheard of that a child of 12/13 or 16 years of age could lead or head a family so our methods are those ones that cater for children staying with parents, guardians or foster parents. Some teachers don't have and don't know what to do but some call the children and talk to them.

T3 explained that:

My own observation is that we are not using methods that suit these learners. We need to do something to cater for these learners. The methods we are using are boring and frustrating them; we need newer approaches to teaching and learning to accommodate these learners from this new family structure.

Teachers' Greatest Challenge in Dealing with CHH Learners

As a follow-up again on teacher preparedness, the researcher asked teachers to indicate the greatest challenges they were facing when teaching CHH learners and how they were dealing with them.

T1 remarked that:

My greatest challenge is to teach learners you know are shouldering mountains of problems in life. These learners are hungry, hopeless, they lack love etc. Above all, I have a big problem when it comes to the teaching of HIV/AIDS as a topic; it affects me; it would seem as if I am referring to them. Sometimes I ignore the topic because I won't enjoy seeing learners crying in class.

T3 acknowledged that he was faced with a challenge when he said that:

Considering all the burdens these children carry like poverty they experience, it makes it difficult for me to teach them effectively. For example, I give them formal tasks like projects; assignments etc. which they are expected to carry out or do research on but they won't be able to travel because travelling needs money which they don't have and they end up not doing it.

T4 also came up with his greatest challenge when he explained that:

Most of these learners are always behind. That's my greatest challenge when it comes to teaching them. Their school attendance is not good at all because they head families or are staying in CHHs where there is no parent or guardian to encourage them to go to school. You introduce a new concept or topic or give a formal task but that learner is not there.

Closely related to the frustration and stress showed by **T4**, was **T2** who faced the same predicament when she remarked that:

My huge challenge is that I don't know how to handle these learners fairly in class. Some of them are very sensitive but you give them work to do and they don't do it. It's not easy to teach a child you are seeing has problems and knowing that he/she is not going to make it. The school should do something to support teachers and learners.

Learners' Views on Teachers' Ability to Assist Them

Both learner and teacher participants interviewed showed mixed feelings when asked to respond to the questions: Do you think educators are well equipped to deal with CHH learners? What is your view of teacher readiness to assist such learners? In response to the above question, **OL1** expressed the view that:

Our teachers seem not to be empowered because if they were, they were going to organise sessions and activities focusing on us in order to motivate us and support us in our learning since we are facing many challenges and living in CHHs. I don't think they have the skills and ways.

Also, **OL5** concurred with **OL1** in that teachers were not empowered to handle them. Thus **OL5** stated, *"Teachers are not empowered; you see that when you fail to do your homework, they just shout at us and punish us"*.

The teachers also concurred with responses given by the learners interviewed. The teachers indicated that the learners felt that they were not empowered to deal with CHH learners. For instance, **T1** stated that:

The learners perceive that we are not empowered since we are treating them the same with learners who come from normal families.

On the other hand **T3** had a different view and remarked that:

Some few learners see that we are equipped because I can see a bit of improvement now because I advised a few individuals to start a garden, grow vegetables, sell and get money. They are now happy.

The researcher went further to ask the management about what they thought about how learners viewed the teachers' ability and skills to help them. Both **P1** and **SGB1** concurred and confirmed what was said by learners and teachers that teachers were not empowered. For instance, **SGB1** stated that:

Learners don't think that teachers are equipped since there is nothing done by the school to help them except for referring them to the Department of Social Welfare. Teachers are not empowered because they were not told about the CHHs and they need to be trained on that.

P1 confirmed the above and said that:

Learners have their own reasons why they think that teachers are not empowered but I think that teachers are not well empowered because as a school we have never talked about it and I have never seen teachers asking about it.

DISCUSSION

The study established that teachers were not ready and able to assist these learners, possibly because there was a contradiction between what

CHH learners and teachers expressed. Some of the reasons that were cited as an indication that teachers were not ready to assist the learners were: the school had no policies based on CHH learners; the school sent CHH learners back home for fees, the school was not identifying and keeping a record of CHH learners; teachers were not counselling learners or calling professional experts to counsel the CHH learners (van der Mark 2015) and teachers did not have the methodologies to cater for these learners.

It was further highlighted that teachers (used in the study) were too busy to notice these learners; they treated CHH learners like other learners coming from normal homes without establishing the reasons why work, such as homework, was not done. This finding contradicts van der Mark (2015) who reports that were mostly quite supportive. Learners were shouted at in class and labelled as lazy or dull and some teachers displayed a negative attitude towards them. Teachers in the study indicated that they had never attended a workshop or a staff development meeting on CHH or even talked about the matter as a school. They admitted that they had a heavy work, hence failing to attend to the needs of CHH learners.

The CHH learners' plight needed to be identified and known of for them to get appropriate help and attention. The learners pointed out that they did not only want to be asked about their family background status when there were visitors looking for information, or the Department of Education just asking for the statistics to update their records. The CHH learners, because of that, felt neglected, demoralised and rejected and it resulted in poor performance in class. This finding is in line with what was reported by The 2012 Vietnam Country Progress report in Fleming (2015) that there was still discrimination, which posed a barrier to school attendance for many children: hence a feeling of rejection. The learners in the study felt that their teachers were not trained to assist them.

CONCLUSION

The study concluded that teachers were not empowered to deal with learners from CHHs, hence always clashing with them and calling them names; this created misunderstandings between teachers and CHH learners. The CHH learners perceived teachers as being inadequately empowered to help them, according to the

findings of this study. CHH learners cited issues like being treated like learners who had parents, being punished for late-coming/uncompleted tasks, being sent back home for fee collection, no counselling given to them, not known by the school etc. as evidence that teachers were ill-prepared to deal with them. This had a negative bearing on the CHH learners' performance. The study found that the teachers were not sufficiently skilled to assist the CHH learners due to lack of proper training on how to deal with them and heavy workloads they already had. The study also concluded that CHH learners had not been identified by the school; there was no record-keeping of such learners, despite the school having quite a large number of learners from CHHs. Furthermore, the study concluded that the school did not have policies on CHH learners in order to direct the teachers and the learners to this regard.

RECOMMENDATIONS

The following recommendations are made against the findings of the study that the educators should go for in-service training, workshops, seminars, and professional development meetings to empower and prepare them to deal with such families that have emerged in the classroom situation. The study noted that the incompetence of teachers created a gap and led to misunderstanding between teachers and learners. The paper notes with great concern the incompetence of teachers in the rural schools and their limited access to professional development programmes for teachers. Programmes would empower teachers to exercise their ability and to adapt their knowledge and practice to new (in this case a new family of CHH that has emerged in society) and diverse situations. The colleges and universities training teachers should also prepare teachers in the making with the relevant skills to deal with such situations. The researcher further suggests urgent counselling for teachers in the system since they are frustrated and stressed by CHH learners. The Department of Education should act swiftly and treat this issue with the urgency it deserves to address this anomaly.

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