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BEYOND VULNERABILITIES: EXPLORING THE COPING
MECHANISMS OF CHILDREN AS FAMILY HEADS IN CHILD-HEADED
HOUSEHOLDS IN KAMPALA DISTRICT UGANDA

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Abstract

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Uganda is a signatory of both local and international child protection protocols and has further shown its great commitment to child welfare through various agencies put up to implement child welfare-related issues. Yet with all this, children in Uganda continue to be abused and their rights violated. More to that, children are in the face of poverty, domestic violence, wars and conflicts, divorce and the Human Immunodeficiency Virus (HIV)/ Acquired Immuno Deficiency Syndrome (AIDS) scourge that has left families in disarray with high rates of child neglect and orphanhood. The extended family that used to take in Orphans and other Vulnerable Children (OVC) has been stretched by the increasing number of children and their needs but also the escalating rates of poverty. As a result, some children find themselves responsible for looking not only after themselves but also their siblings. They have formed Child-Headed Households (CHHs) where they have to cope with the adversities in their daily lives in order to survive.

The study aimed to explore the coping mechanisms of children as family heads in child-headed households in Kampala Uganda. Study aims were to; explore the strengths exhibited by children as family heads; explore the coping mechanisms of children heading families and assess the resources available to children and how they make them cope with adversities. The study employed a qualitative approach with a case study design by collecting in-depth data through interviews among 6 household heads selected purposively. Interviews were recorded and later transcribed word by word. Thematic data analysis was used to explore the themes. Findings revealed that children as family heads have several abilities and strengths that cannot be overlooked. Children also revealed the positive and negative coping mechanisms. Children further pointed out the resources available to them that have enabled them to cope. The study points out implications for social work practice and social policy. The study also pointed out what future studies might focus on in relation to CHHs. The study concludes that all stakeholders must have genuine participation to ensure the welfare of children in CHHs. This participation must be child-led as social workers focus on creating an enabling environment for functioning.

Table of Contents

Abstract.....	i
List of tables	iv
List of Figures.....	v
List of Appendixes	vi
Acknowledgement.....	vii
CHAPTER ONE: INTRODUCTION AND PROBLEM AREA	2
1.1 Background	2
1.2 Problem Statement.....	3
1.3 Purpose and aim of the study.....	4
1.4 Research questions.....	5
1.5 Key definitions used in the study	5
1.6 Relevance of the study to Social Work.....	6
CHAPTER TWO: LITERATURE REVIEW	7
2.1 Literature search process	7
2.2 Needs among CHHs and how they cope with them	7
2.3 Incapability vs capability view of children	9
2.4 Strategies to cope.....	9
2.3.1 Positive coping strategies.....	9
2.3.2 Maladaptive coping mechanisms	10
2.5 Resources available to CHHs	11
2.6 Managing household chores among CHHs.....	14
CHAPTER THREE: THEORETICAL FRAMEWORK	15
3.1 Life model of social work practice.....	15
3.1.1 Social systems theory	16
3.1.2 Strength-based perspective	17
3.1.3 Resilience perspective	17
3.2 Theoretical implications on study findings	18
CHAPTER FOUR: METHODOLOGY	19
4.1 Methodological approach	19
4.2 Research Design	20
4.3 Data collection methods and tools	20
4.4 Sampling	21
4.5 Study participants' features.....	21
4.6 Pilot study	22
4.7 Data management and analysis	23
4.7.1 Transcription.....	23
4.7.2 Data analysis.....	23

4.7.3 Quality of data.....	25
4.8 Ethical considerations.....	25
4.9 Study limitations	27
CHAPTER FIVE: RESULTS AND DISCUSSION.....	28
5.1 Strengths and abilities exhibited by the children	28
5.1.2 Ability to reflect and make an assessment of the legal framework	28
5.1.1 Ability to define their needs	29
5.1.3 Saving.....	34
5.1.4 Personal attributes	34
5.1.5 Understanding the market dynamics for survival	37
5.2 Coping mechanisms	37
5.2.1 Involvement in illegal and unsafe activities	37
5.2.2 Coping with food needs.....	39
5.2.3 Defying social constructions.....	41
5.3 Resources available to children	42
5.3.1 Social networks.....	42
5.3.1.1 Support from relatives.....	42
5.3.1.2 Help from neighbours.....	43
5.3.1.3 Support from friends	44
5.3.1.4 Support from NGOs and government facilities.....	45
5.3.1.5 Support from sponsors	46
5.3.1.6 Support from household members	46
5.3.2 Involvement in income-generating activities	47
5.3.3 Family land	49
5.3.4 Religiosity.....	50
CHAPTER SIX. CONCLUSIONS	54
6.1 Research conclusions	54
6.2 Implications for social work practice and social policy	55
6.3 Implications for further research	55
REFERENCES.....	57
APPENDIXES.....	61
Appendix 1: Information letter and consent form.....	61
Appendix 2: Interview guide.....	65

List of tables

Table 1: Themes and subthemes.....	24
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List of Figures

Figure 1: Children's environment	18
Figure 2: Diagrammatic representation of the study findings	51

List of Appendixes

Appendix 1: Information letter and consent form	61
Appendix 2: Interview guide	65

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Point of departure

Growing up in Uganda in a hard to reach village with abject poverty made me realise how hard life was for children whose parents had died, neglected them or had migrated without them. The elder sibling always shouldered the responsibility of looking after younger siblings. Missing school to work for money, food or work on family gardens characterized their daily lives. In some cases, they were abused sexually, physically and emotionally mocked. Their property was often grabbed by the neighbours and kinsmen sometimes in the guise of wanting to help. Getting a meal was a hustle just as getting all other basic needs. Amidst these, some managed to put a smile on their faces, progressed through classes and seemed to be sailing through the storms. From an external point of view, I always wondered how they manage to sail through amidst being placed between a rock and a hard place. In Sweden, lectures about children in adverse life situations and especially young carers made me ponder and compare the lives of European children and children back home. They all shared one thing in common that amidst the hard life, they managed somehow to push on. The reasons behind that seem not to be adequately documented and I intend to contribute to such through this study that aims to explore how they manage to cope as family heads.

CHAPTER ONE: INTRODUCTION AND PROBLEM AREA

1.1 Background

In Africa, the family is considered as a normal environment for a child (Phillips, 2011) and a general belief in Africa and Uganda at large holds that children do not only belong to a biological parent but to the entire descent group (Oleke, Blystad & Rekdal, 2005). However, the customary construction of the family consisting of parents and children in a common household is reducing due to many reasons but majorly HIV/AIDS that has led to mass orphanhood (Thwala, 2018). HIV/AIDS has claimed most adults' lives in sub-Saharan Africa (Kakooza & Kimuna, 2006; Kipp et al., 2010) and is classified as the biggest disaster and major cause of death particularly in the south of Sahara. Of all HIV/AIDS patients in the world, $\frac{2}{3}$ are Africans and the disease has been worsened by poverty, a reason for the millions of orphans (SOS children's villages, 2020). The extended family system that cared for children in Africa has been overly strained beyond capacity by the ever-increasing number of children in need of care (Phillips, 2011). As a result, the elderly for example have acquired new roles such as looking after the sick, orphans and other vulnerable children. Formal and informal mechanisms of taking care of such children have been overburdened due to the death of many young adults and the HIV/AIDS scourge (Kakooza & Kimuna, 2006). Africa has since been reported to have the majority of Child-Headed Households (CHHs) compared to other continents (Phillips, 2011). According to Kurebwa & Kurebwa (2014), these CHHs are because of the compounding issues such as political instability, financial incapacitation, infirmity, parental separation/divorce, among others which have made CHHs the new way of living and coping. Children in need of care alternatives have become many in Sub-Saharan Africa yet the available care options are scanty (Kurebwa & Kurebwa, 2014).

Uganda is a signatory of both local and international child protection protocols such as the United Nations Convention on Rights of a Child (UNCRC) ratified in 1990 and has since then implemented it through various bodies such as setting up the Ministry of Gender Labour and Social Development (MoGLSD), the national council for children, the police through Children and Family Protection Unit (CFPU), family and children's court, children's act of 2016, the 1995 constitution among others. This shows a great commitment towards children and child welfare. Despite all the efforts, children rights continue to be violated and children in Uganda continue to grapple with poverty, wars and conflict, HIV/AIDS scourge, domestic violence, divorce and among others that have left families in shambles escalating rates of child neglect and orphanhood (MoGLSD, 2004; Domestic violence act, 2010; Walakira et al., 2015; Uganda Bureau of Statistics (UBOS), 2016; African Network for the Prevention and Protection Against Child Abuse and Neglect (ANPPCAN), 2019).

The MoGLSD in Uganda has the national mandate for all children including orphans and other vulnerable children affairs in partnership with other actors both local and international to meet their needs (MoGLSD, 2004). The national Orphans and Vulnerable Children's (OVCs) policy asserts that a family with a responsible adult is set as a first priority

for the integration of OVCs whereas the community is the second option as it offers an environment like that of a family for child development. Formal and informal alternative care means are identified for children deprived of parental/ lawful guardians where formal alternative care means include; foster care, institutional care, adoption and legal guardianship whereas informal alternative care include kinship and customary care (Walakira et al., 2017). The MoGLSD (2004) asserts that the community and the extended family system have not been able to meet the needs of such children which has prompted other actors to give a hand though they lack adequate resources to solve the menace. Orphaned children have in return flooded the streets where they are abused and exploited while others live in CHHs taking care of themselves and their siblings (MoGLSD, 2004). Uganda became the champion of CHHs in the 1980s (Kurebwa & Kurebwa, 2014) which points to the many years the issue of CHHs has been in existence.

According to Namazzi and Kendrick (2014), CHHs are constituted of children under the age of 18 who live on their own because their parents died, have addictions, chronic illnesses or neglected them. In other words, CHHs come up when there is no family or members in the community that have the ability and willingness to incorporate orphaned children. The available families' help is unreliable and inconsistent sometimes characterized with intentions to grab property from such children (Kipp et al., 2010). In CHHs, the oldest sibling always takes over parental responsibilities that include decision making, caring for younger siblings and all day to day household provisions (Phillips, 2011). More so, the increasing number of orphans and high poverty rates have strained households and communities to utilise traditional methods such as incorporating such children into "extended families" (Agere & Agere, 2020, p.117). As a result, children are bound to look after themselves as there is no adult to look after them and have to assume parent roles with adverse effects not only to their lives but also the lives of other siblings they are looking after (Evans, 2011). Children are robbed of their rights to education, medical care, right to be protected from exploitation, inheritance of property, treatment without discrimination in any way and all other basic needs (Constitution of Uganda, 1995; MoGLSD, 2004). Children who head families have limited ability to take on all the tasks such as protecting members and family resources from being seized by kindred (Kipp et al., 2010). Children head their families regardless of the proximity of their relatives because of "personal family issues, the children's ages, the family's disregard for the children, conflict over land, and the presence of the extended family's own immediate family members in the household" (Kipp et al., 2010, p.303). Heading such household's entails employing different strategies to be able to cope with the adversities that come along.

1.2 Problem Statement

According to a Ugandan local newspaper the Daily monitor (2020), there are 7.2 million households in Uganda and of these 28,800 are headed by children. Also, UBOS (2016) pointed out that about 0.3% of the households in Uganda are headed by children. However, there is no available national database with current estimates of the number of children who head families in Uganda. This points to the information gap in regard to child-headed households.

A study carried out in South Africa by Niccoh (2020) pointed to the fact that children as family heads in CHHs assumed parental roles. Some had siblings in their care with a range of responsibilities such as meeting their needs (material and non-material) and those of their

siblings. Niccoh further noted that these children find great difficulty in performing a range of responsibilities such as finding a balance between household roles and education needs. Finding employment and finances to meet the basic needs of food, shelter, clothes, medical care and education characterises their lives but they have to manage their lives as they cope with the several adversities that come their way (Niccoh, 2020).

Previous studies such as Kipp et al. (2010) have revealed that CHHs in Uganda face a lot of challenges encountered in accessing basic needs. These are poverty-related and also encompass emotional problems as they saw their parents and siblings die at a tender age causing trauma. These children are also prey to violence such as sexual abuse and are uncertain over ownership of family property. Children in CHHs often depend on unreliable support from families usually the relatives, the community and external organisations amidst exclusion and preconceived perception of being associated with HIV/AIDs (Kipp et al., 2010). Studies such as Collins et al. (2016) that employed mixed methods approach in Uganda articulated that CHHs are often living in fear due to the violence they are put through and the hard work they have to do to earn a living. Collins et al. notes that some of the girls are reported to suffer sexual violence not only by strangers but even family members who ideally would be protecting them. Save for violence, most girls are forced into commercial sex to cover the basic needs with adverse risks of death, HIV/AIDs, low self-esteem among others. These families also lack basic household materials such as kitchenware among others with nowhere to run to for support or running to the already broken, strained as well as unreliable extended family system (Collins et al., 2016). A study by Kipp et al. (2010) articulated that children in CHHs have been robbed of the right to education as they cannot afford scholastic and other school materials such as uniforms amidst the free education provided by the government. Kipp et al. further notes that accessing medical care is a burden compounded by financial incapacitation. The limited psychosocial and economic support to such families leaves them exposed to ill-treatment and fury putting them at risk of sex work, child labour and HIV infection (Kipp et al., 2010).

Most of the studies have focused on CHHs in general and there is insufficient literature about how children as family heads within CHHs in the Ugandan context cope with the adversities they encounter while executing their parental roles. This study would thus contribute to such by exploring the several coping mechanisms of children as family heads.

Despite the risks and vulnerabilities encountered, social workers looking from the strength-based perspective have to look beyond vulnerabilities to the strengths, abilities, resilience and how CHHs have managed to cope with such adversities. This formed the basis of this study that aimed at exploring the coping mechanisms among children who head households.

1.3 Purpose and aim of the study

The overarching aim of the study was to contribute to the existing literature by exploring the coping mechanisms of children as family heads in CHHs in Kampala Uganda. In order to understand how these children cope amidst adversities, the study aimed;

1. To explore the strength exhibited by children as family heads as they cope with the adversities

2. To explore the coping mechanisms of children heading families as they execute their roles?
3. To assess the resources available to the children and how they enable them to cope with adversities

1.4 Research questions

1. What strengths do these children who head households have that enable them to cope with the adversities?
2. What other coping mechanisms enable children who head families to move on and manage their days amidst adversities, needs and concerns?
3. What resources are available to children who head households and how have they helped them to cope with adversities?

1.5 Key definitions used in the study

According to article 1 of the Convention on Rights of a Child [CRC] (United Nations Children's Fund [UNICEF], 1989), a child is any person below 18 years of age. This is in accordance with article 2 of the African Charter on the Rights and Welfare of the Child (Organization of African Unity (OAU), 1990), and Article 257 (1) (c) of the Constitution of Uganda (1995).

According to UBOS (2016, p.14), a household refers to “a person or group of related or unrelated persons who live together in the same dwelling unit(s), who acknowledge one adult male or female as the head of the household, who share the same housekeeping arrangements, and who are considered a single unit”.

A household head according to Foster et al. (1997, p.158) refers to “the person primarily responsible for the day-to-day running of the household, including child care, breadwinning and household supervision”. The existence of CHHs goes beyond the “normal family structure” that acknowledges one adult as ahead as mentioned above (UBOS, 2016, p.14). This formed the basis of children as family heads in this study to mean all those children living alone or together with siblings or friends as a single unit who are responsible for the daily running of the household. A family in the context of this study refers to the same as a household.

According to Namazzi and Kendrick (2014, p.724), CHHs are defined as “children, typically under the age of 18, living on their own as a result of circumstances such as parental death, illness, addiction or abandonment”. This conceptualization gave a basis of the type of children who head child-headed families that is those that head families on their own as a result of abandonment/neglect and parental death.

According to the MoGLSD (2004, p.14), an extended family is “a collection of a number of households or families of individuals who are related by blood and with social ties and responsibilities towards one another”.

According to the Uganda Children Amendment act (2016:6), child neglect refers to; the failure to provide for the basic physical, emotional and developmental needs of a child, in areas of health, education and emotional development, nutrition, shelter and safe conditions which cause or have a high probability of causing impairment to a child's health, mental, spiritual, moral or social development.

According to the MoGLSD (2020, p.viii), children in adversity is;

a term used in reference to children living in conditions of serious deprivation or danger. These include children who experience violence or are exploited, abandoned, abused, or severely neglected (in or out of families) and also face significant threats to their survival and well-being as well as profound life cycle risks that have an impact on human, social, and economic development.

According to Grover (2005, p.528), coping refers to “anything that increases the survival likelihood of the child emotionally and/or physically whether or not the strategy the child employs is socially acceptable or devoid of appreciable risk”. Coping mechanisms are both negative and positive which all amplify the survival of children. Children facing adversity might exert negative coping mechanisms which have adverse effects in the long run (Ward & Eyber, 2009).

According to Good therapy (2021), coping mechanisms refer to strategies people frequently employ when faced with stress and/or trauma to enable them to take care of such adversities. Coping mechanisms in the context of this study referred to the different strategies children as family heads use to take care of the several adversities they encounter.

1.6 Relevance of the study to Social Work

Social work as approved in 2014 by the International Federation of Social Work (IFSW) general meeting and the International Association of Schools of Social Work (IASSW) general assembly is “a practice-based profession and an academic discipline that facilitates social change and development, social cohesion, the empowerment and liberation of people” (International Federation of Social Work [IFSW], 2021, para 1). In my view, social work is change-oriented aimed at improving people’s welfare. Social workers work with individuals, families, small groups, communities and societies to challenge “structural conditions that contribute to marginalization, social exclusion and oppression” (IFSW, 2021). It is on this notion that Children in CHHs fall within the mandate of social work practice not only as individuals but as families who are marginalized, excluded and oppressed in the context of their environments. These need to be targeted by social work practice to enhance their functioning and consequent coping. This formed the basis of interest in the study that as social workers, we have a mandate to identify such groups of vulnerable individuals and families and work with them to facilitate their functioning.

CHAPTER TWO: LITERATURE REVIEW

This chapter reviews the literature concerning coping mechanisms among children in CHHs that was done during and after data collection. The reviews provide a broad context (national and international) within which findings relating to coping mechanisms among children as family heads are analysed, presented and discussed. Although some studies such as Foster et al. (1997), Phillips (2011) and Kurebwa and Kurebwa (2014) point to the fact that CHHs come up as a coping mechanism, coping mechanisms in this context ranged from the establishment of households as a way to cope to how children cope with situations that led to the existence of CHHs and how they cope with the different adversities that come along. Literature review helped to articulate a range of studies that have been documented concerning CHHs and this gave the background to reflect during data analysis the extent to which the study relates to other studies carried out in other contexts or disagree with results that have emerged from several studies.

2.1 Literature search process

The literature search process involved the use of various sources on the national and international level. Scholarly materials including journal articles, textbooks (physical and electronic) and reports were all utilized from several fields of sociology, social sciences, demographics and psychology. These were gathered from various sources such as; Researchgate.net; Google scholar, Gothenburg University library databases of Sociology collection and Scopus, Stavanger University library (ORIA) and Makerere University library. The reference lists and bibliography of accessed literature was also utilised to identify who the authors cited or recommended for further readings. A range of search words were used such as “child-headed households” “coping mechanisms” “coping strategies” “children as family heads” and “child parents”. Specific titles were also searched such as “coping mechanisms among child-headed households”, “coping of children as family heads” and “how children who head households cope with adversities”. Search filters were used such as peer-reviewed articles, accessed online, in English language, full text and subject area sociology and social sciences. Most of the studies that concerned Child-Headed households were from Africa and based on their relevance to the study, I used studies from South Africa, Zimbabwe, Zambia, Rwanda, Tanzania, Uganda and Swaziland. Studies pointed to how children in CHHs cope with the several adversities they encounter, the resources available to them and the strength and abilities they exhibit. These themes of which some were used in data presentation are presented below.

2.2 Needs among CHHs and how they cope with them

Several studies have been conducted that have identified a range of needs by children in CHHs that vary from context to context but most of them universal. A qualitative study by Kipp et al. (2010) in Uganda pointed to several needs by CHHs ranging from food, shelter and education that (they termed as a means to escaping poverty but all limited by lack of school requirements in terms of school fees, scholastic materials and clothing's). Other needs ranged from accommodation and transport related needs among others (Kipp et al., 2010). Qualitative

Studies such as van Dijk and van Driel (2009) in South Africa, Mkhathshwa (2017) in Swaziland, and Thwala (2018) in Swaziland revealed nutrition related needs among child-headed households. They further note that children are often frustrated by constant begging characterized by mockery, stigma and labelling. These children resorted not to ask for any more food as they feared that the neighbours will get tired of them and be rejected by adults. Other children who resorted to asking for formal aid from the government also lamented of the processes being so procedural and bureaucratic and they wouldn't be taken to be serious when they appear without any adult. Children also as a way of coping with food needs attended school where they had meals through programmes such as "school feeding programme". Missing food has diverse effects on their health and also affect their concentration in school. Other concerns include the ability to adjust to parental/adult roles, fear, distress among others. (van Dijk & van Driel, 2009; Mkhathshwa, 2017; Thwala, 2018, p.153). A qualitative study in Swaziland that employed a phenomenological research design by Thwala (2018) pointed to the need for clothes by children living in CHHs and they have hence lived at the sympathy of friends and neighbours who offer second-hand clothes to them.

A study in Uganda by Kipp et al. (2010) further pointed to how children in CHHs have emotional needs which are often overlooked due to their great need for material needs of housing and meals. Emotional needs result from their experiences for example having witnessed their parent(s) die at a tender age. These children lack anyone to run to for emotional support hence feel left alone and often unhappy. Kipp et al. (2010) also stressed that emotional needs also resulted not only from witnessing their siblings die but also the daily struggles such as failure to attend school and see others go, being exposed to rape and abuse, illness and insecurity related to their lives and property (Kipp et al., 2010). A qualitative case study carried out in Zimbabwe by Makuyana, Mbulayi and Kangethe (2020) pointed to the need of advice by children in CHHs. These children noted that they had no one to advise them or to turn to for assistance in matters such as body changes, choice of companions (boyfriends and girlfriends), doing homework and managing "social gossip". They lacked nurturing manifested in their daily lives (Makuyana et al., 2020, p.4).

Studies such as Kakuru (2018) in Uganda have also revealed the need for medical care and have stressed the abilities of children in CHHs to know when they are sick, how they should and when they should respond. In addition, some children know and are able to use the local resources such as herbs for treatment the knowledge they learnt from the adults (Kakuru, 2018). Children in CHHs are in great need of sexual and reproductive health needs as studies reveal how is it difficult for females to for example access sanitary pads and have hence resorted to using alternatives such as bundling underwear to act as pads (Thwala, 2018). A Qualitative study carried out in South Africa further identified that children in CHHs have deteriorating living conditions characterized by unsafe shelters that expose children to harm and danger such as houses falling away due to being old (Nziyane & Alpaslan, 2012).

From the above previous studies, children in CHHs devised means of coping with every need that arose. As the onus of meeting the needs is on the children as family heads, this study sought to explore the several mechanisms children who head households use to cope with adversities that come along the several needs. As the previous studies point to how children in other contexts managed to cope with the needs, this study sought to explore if similar or different mechanisms exist among children who head households in Kampala Uganda.

2.3 Incapability vs capability view of children

The notion of viewing children as inferior to the adults and in need of protection than viewing them as independent and having agency is subjective. A qualitative study for example carried out in South Africa by van Dijk and van Driel (2009) articulates that not only in South Africa but elsewhere, the young are perceived as inferior to the old and bound to respect and go by their choices. Apart from legislation based on age, also values attached to adults and children point to the differences in terms of power. The study noted that these are hierarchical hence socially and structurally constructed where children often go by them influencing their coping and autonomy. van Dijk and van Driel further note that the children's ability to choose and implement what they choose is embedded in the socially constructed norms and values relating to the common perception of children as incapable vs seeing them as capable with agency. Objection and questioning the elders are castigated and as a result, many children shy away from asking for help from them. Although children are perceived as able to make decisions to some extent, they are limited socially (van Dijk & van Driel, 2009). Percy-Smith and Thomas (2009) note that when adults underestimate the ideas of children, it challenges their participation in matters affecting their lives. Children's participation in what affects them is not a gift but a right to be respected by everyone (Skivenes & Strandbu, 2006). Studies reveal the perceptions concerning CHHs and their basic lives which influence the mechanisms children use to cope with several adversities they encounter. This study sought to explore among others if such connotations exist among children who head households in Uganda and how they relate to the mechanisms these children use to cope.

2.4 Strategies to cope

This section includes studies that have been carried out in relation to coping mechanisms/strategies of child-headed households. Several strategies have been identified that children have adopted as a way of coping with the several adversities they face in CHHs. The knowledge about such strategies helped to paint a picture of if the same or different mechanisms do exist among children in Kampala Uganda. These strategies are both positive and negative as presented below.

2.3.1 Positive coping strategies

Studies have pointed to the fact that children in CHHs have developed positivity about their responsibilities. An ethnographic study carried out in Zambia by Payne (2012) articulated that children in CHHs made and felt the adult responsibilities they take up to be part of their everyday lives. They point to the positivity in regard to the responsibilities and a sense of pride they feel as they partake in such roles. These feelings are though mixed as some feel overwhelmed by the responsibilities (Payne, 2012).

Nkomo (2006) in a qualitative study carried out in South Africa further articulated that children in CHHs developed coping strategies such as accepting the situation they are in, use of religion that gave them a sense of hope, believing in themselves and their abilities, the role

of support from several organisations and playing with peers and friends in schools that helped them to forget challenges at their homes.

Earlier research also points to how children in CHHs used various ways to acquire income to meet their needs. In a study by van Dijk (2008) in South Africa, he articulates that children were involved in many activities that enabled them to acquire income. They managed to do informal jobs such as child care, being sent to buy things by neighbours, working on taxis to collect fares and guarding it, working as shop keepers over weekends and making clothes. van Dijk noted that although these jobs were rare, they contributed much to their welfare. Children also became innovative as some made some handwork such as making brooms and selling them, poles for laundry. Others participated in for example washing cars which helped them earn money. Children also did housework for neighbours who offered them food and money (van Dijk, 2008). Qualitative and participatory research by Ward and Eyber (2009) in Rwanda revealed that children in CHHs resorted to cultivating family lands and selling the yields to cater for basic needs. Other children got involved in vending goods such as beer, banana and avocados. The study noted that due to financial instability, some resorted to working on small jobs which they did after school or during holidays. They opt out of school or get married as a way of securing a future for their siblings. Once they leave school they look for work opportunities (Ward & Eyber, 2009). In a phenomenological study carried out in Tanzania by Daniel & Mathias (2012), children in CHHs managed by carrying out mechanisms that brought them income such as making use of the garden through farming for food and selling for income and making bricks. They also engaged in other activities such as offering labour to carry construction materials, making charcoal and carrying timber. They also got help from friends from church and sometimes asked for permission from teachers to allow them to go and do farming (Daniel & Mathias, 2012). Thwala (2018) articulates that children as a way of providing for their families also participated in income-generating activities during weekends or when schools are closed. They participated in activities such as “weeding fields, harvesting fields, clean yards and wash their neighbours’ clothes. Others sold sweets and snacks in schools and used the profits to buy their needs” (Thwala, 2018, p.155). Results from a study by Kurebwa and Kurebwa (2014, p.239) articulate that the informal sector has been one of the avenues for livelihood. Several activities are involved in the informal sector such as “selling of fruits, food (cakes, sauces, soft drinks, and butter), household goods (such as soap), and traditional handicrafts”.

As a way of managing the limited resources children resort to reducing/cutting on the cost of living. In a study by van Dijk (2008), children in CHHs reduced costs of living by reducing electricity expenses by using paraffin for cooking instead of electricity. They also reduced the amount of food intake and resorted to buying cheap but the ones that fill most and avoided what they called luxuries such as meat (van Dijk, 2008).

The study sought to explore if such mechanisms that exist in other contexts also exist among children as family heads or if the mechanisms among children in Kampala are different.

2.3.2 Maladaptive coping mechanisms

A Qualitative survey study in Zimbabwe by Kurebwa and Kurebwa (2014) revealed that children in CHHs opt to drop out of school as a coping mechanism which regardless of the negative effects helps the family to get relief of financial obligations. As evident such events

are in other contexts, they have been less documented in the context of Uganda hence the study unravelled how such could be evident.

van Dijk and van Driel (2009) in their study articulated that children in CHHs go against the social constructions as a way of coping. Society prescribes how children are supposed to behave and be treated. The study further notes that amidst the social and structural constructions, children manage to move on as they do not always go by the rules and develop means of acquiring what they want from adults. This means going against socially constructed ways for the sake of survival (van Dijk & van Driel, 2009). This concerns the expectations and what is allowed from children and the values attached to what children do (van Dijk, 2008).

Children facing adversities in CHHs often exert negative coping mechanisms with its related negative impacts such as engaging in sexual activities for food, accommodation or money. Others are involved in casual labour which is risky as they work in quarries among other environments (Ward & Eyber, 2009). In an ethnographic study by van Dijk (2008), he stated that children get involved in criminal and unsafe activities such as stealing, involving in violent acts, alcoholism and drug use. This was largely because they needed what to survive on but also peers played a role in influencing them. The study noted that some especially girls also engaged in sex work to get money to feed themselves and their siblings which put them at risk of HIV. Others also go into abusive relationships but they have no options as their partners are the ones that give them sometimes money and food for survival (van Dijk, 2008). Lobi and Kheswa (2017) in systematic review research carried out in South Africa noted that poverty situations have forced most females who head CHHs to engage in transactional sex with its associated risks of exploitation, early pregnancy among others. Other children have resorted to alcohol and drug abuse risking death and human trafficking. A qualitative study carried out in South Africa by Shava, Gunhidzirai and Shava (2016) articulated that children in CHHs face trauma as a result of their experiences such as death or illness of their parents and caregivers and some children resort to taking drugs as a way of coping with the memories. This study sought to explore what mechanisms children as family heads use to cope with adversities and in so to articulate if such maladaptive mechanisms also exist among children in Kampala Uganda.

2.5 Resources available to CHHs

Studies have revealed that children in CHHs rely on several resources both material and non-material to cope with several adversities they face. An exploratory study carried out in Uganda and Tanzania by Evans (2012) revealed that children inherited material resources from their deceased parents that facilitated their coping. They inherited resources such as land, houses and other assets. They are able to stay in houses that their parents left with them while others have chosen to live together on their own in order to protect their property from being grabbed (Evans, 2012). Also in a study by Kipp et al. (2010), it was noted that children have land they acquired through a will or assumed when their parents died. They used such land to get food and also sell surplus crops for income. Children lived and grew crops on such lands while others also owned animals (Kipp et al., 2010). In a study carried out in Rwanda by Ward and Eyber (2009), children who had land cultivated it and sold the yields to buy necessities. Others were innovative enough to make beer from the bananas and sell in the markets, sold

avocados and banana. They ably utilized the resources for their benefit (Ward & Eyber, 2009). The extent to which such mechanisms do appear as coping strategies were explored in this study.

A study in Zimbabwe by Kurebwa and Kurebwa (2014) reveal programmes such as food for work programmes that are also paramount in the coping of the most vulnerable categories in the community. These refer to programmes by government and non-governmental organisations where the poor people especially women and children work on community development projects such as “construction and maintenance of infrastructures, such as roads, irrigation structures, and dams” and are in turn paid in form of handouts and food. The study notes that these have been integral as strategies for surviving especially in rural societies. These programmes have further helped in terms of provision of “basic nutritional requirements” and have also helped in the access to health and education (Kurebwa & Kurebwa, 2014, p.238-239). Such results guided to consider the exploration of if any programmes not only for food but other aspects exist among CHHs (do children who head households in Kampala Uganda context also mention of programmes that have facilitated their coping?).

Earlier literature also points to the role social capital/social networks play in the facilitation of the coping of children in CHHs. van Dijk and van Driel (2009) articulated that children in CHHs receive a range of support from several avenues and this has enabled them to cope with several adversities and challenges. The study further notes that children receive support from different avenues including grants from the government. However, some adults who apply for such grants to look after these children use the grant for other purposes and little or nothing is used to support such children (van Dijk & van Driel, 2009). This is in a way similar to the context of Uganda as noted by Kipp et al. (2010) with declining family and government support with the available family support being unreliable and often in the guise of benefiting from the child including taking family property. Kipp et al. notes that however, extended family members also provided children with food, money and emotional support which left many questions unanswered as to whom they should trust or ask for help for their coping. Kipp et al. (2010) further articulated that children also received support from their friends and neighbours which was vital to their coping. Also, a study by Ward and Eyber (2009) articulated that children’s neighbours respected and had sympathizing attitudes and in addition, they encouraged them to carry on which facilitated their coping. Some helped in cooking, visiting them and also giving them guidance and counselling. The study noted that the relationship with the neighbours and the community wasn’t always positive as they had conflicts regarding land and other wrangles. Ward and Eyber further indicated that Organisations also helped these children in form of providing school fees, school uniforms, food, and other material goods (such as beddings) and was regarded as reliable. Children also depended on social support from extended families. Children also received support from children who were living in the same situation as them (Ward & Eyber, 2009). A study by Kurebwa and Kurebwa (2014, p.239) also revealed how households utilise help from organisations that provide services such as “health, education such as school fees and supplementary feeding, and welfare services, and in some cases, psychosocial support, shelter and material support”. The study further articulates that the community is helpful as it provides food, payment of school fees, and giving social support to the stigmatized especially those living with HIV/AIDs. Such help is however sometimes characterized by stigma from the

community in general. The same study pointed to the help from the community in form of relatives and friends who offer help to the CHHs but have now been weakened by economic hardships.

A study carried out by Thwala (2018) in Swaziland revealed that children as family heads reported their strengths such as support from “siblings, church, prayer and neighbours’ support”. This led to their “spiritual healing” and some participants developed liberty and autonomy that has enabled them to get income to sustain the family (p.154). The study noted that siblings offered emotional support to their young ones which has encouraged these children to go through the challenges. The church was reported to be fundamental as well in instilling courage and resilience among children. Thwala further noted that children resorted to praying when faced with challenges and memories such as the death of their parents which has given them relief from the troubles. From the church, children were able to learn morality and other life principles. The church also visited these children and they not only would share with them all their concerns but the members also helped such families with gardening (Thwala, 2018). Ward and Eyber (2009) in their study in Rwanda revealed that children in CHHs also got involved in church activities such as choir among others. They were also able to meet with other children at church with whom they interacted with. This was vital as it enhanced their confidence and made them happy (Ward & Eyber, 2009). Children in CHHs depend on social capital to survive on a daily basis but this cannot be presupposed that they often get help from relatives and friends (van Dijk, 2008). The extent to which this is true in Uganda is not so adequately documented and this study sought to explore whether such patterns can be identified among the coping mechanisms by children who head families.

Children in CHHs offer care to each other, a resource that has been reported by earlier research to facilitate their coping. An interpretive qualitative study carried out in Rakai Uganda by Kakuru (2018) revealed that elder siblings in CHHs took roles of looking after their fellow siblings as young as 3 years. It is noted that such care did not only start when their parent’s/care givers die but even when they were ill. This care challenges the view that children are not mature enough and hence depend on the adults for survival but instead, children have capacities to manage with school, looking for food, managing household work and also looking after their younger siblings. The study noted that children ably managed to engage the siblings in tasks such as preparing food (sorting beans) hence becoming teachers to them. children heads are also able to negotiate and utilise the existing community relations in form of relatives and neighbours such as leaving the young siblings while they are at school. Kakuru further noted that elder siblings also teach the young ones how to cope without parents such as playing with neighbours making them an active source of child protection in societies with no strong child protection systems. Children living in CHHs are able to manage household chores which they share/divide amongst themselves. They have the ability to run many tasks at the same time which has enabled them to cope with the limited time (Kakuru, 2018). The context of Rakai is obviously different from a city setting of Kampala hence the extent to which such a mechanism was true is contested. This study sought to make a contribution by exploring the mechanisms that child heads use to cope with the adversities they encounter in Kampala district.

2.6 Managing household chores among CHHs

In an ethnographic study by Francis-Chizororo (2010) in Zimbabwe, it was revealed that there was sharing of household chores among household members. These chores/roles were also gendered depending on the composition of the household, age of household members and the number of children in the household. Children inherited social roles where females did household chores whereas males did productive and labour intensive jobs. Francis-Chizororo further articulates that in CHHs however it was different especially where females had to take over as fathers. In most cases, households with boys only assumed both father and mother roles while those with boys and females took over roles pertinent to their gender. The study notes that males were often embarrassed to perform female roles such as domestic chores as it was going against the societal norms. Males wished to marry but the socially constructed age of marriage still put them at a disadvantage. Francis-Chizororo indicated that in families headed by females, there was a contestation where males as dependents would still command masculinity from the females as heads. In such instances when boys challenged the authority of females, females devised by refusing to cook if at all their boyfriends had bought them food and some decided to stay with their boyfriends and others went to look for work on farms which formed as a coping mechanism. This does not only point to the roles in the household but also the effect of gender on the roles in the household (Francis-Chizororo, 2010). Studies reveal several strategies children use to cope with household chores and expectations. The extent to which such exist among CHHs in Kampala Uganda was assessed.

CHAPTER THREE: THEORETICAL FRAMEWORK

This section presents the theoretical framework of the study that based on inductivism (research theories emerging from the study findings) (Bryman, 2012). Data was collected first and then fed into the existing theories for analysis and discussion. The findings of the study were “fed back into the stock of theory” in order to generate certain scrutiny. In other words, it involved “drawing generalizable inferences out of observations” (Bryman, 2012, p.24-26). Theories facilitated the process of data analysis and consequent presentation of study findings from children within the context in which they live and their own views on and of coping. However much the inductive study aimed at generating theories from the findings, the study did not point to new theories but instead articulated how the already existing theories hold from the study findings. Results from the study pointed to the life model theory of practice (Gitterman & Germain, 2008; Teater, 2010) as the main theory for analysis and discussion but also borrowing from the systems theory, strengths-based perspective and the resilience perspective. The life model theory has connotations of the; social systems theory sometimes known as the ecological perspective due to its focus on the interaction between people and their environment; the strengths-based perspective as it connotes that all people have strengths and entails the identification of strengths and resources from the individuals and the environment and also the resilience perspective as the life model holds that resilience is as a result of interaction between a person and the environment and not only personal characteristics (Gitterman & Germain, 2008; Skovdal et al., 2009; Teater, 2010). Life model theory guided data analysis but borrowing from the systems theory, strength-based perspective and the resilience perspective.

3.1 Life model of social work practice

The life model focuses on an individual and the environment in which they live and interact with. The model places great emphasis on transitions in life, problems and the needs that arise from the environment as a result of interactions. Each individual has a peculiar developmental route and this brings about different encounters (Gitterman & Germain, 2008). The life model asserts that people develop and grow within the context of their environments. The environment is both social and physical where the social environment consists of social networks, institutions and organisations while the physical environment consists of the “natural and man-made structures and objects, and time and space” (Gitterman & Germain, 1976, p.605). The social and physical forms of the environment are influenced by “race, gender, ethnicity, social class, sexual orientation, physical and mental challenges” which all bring about adversities. Individuals interact with their environments and practitioners come into play to help them dialogue with the environment (Gitterman & Germain, 2008, p.97).

Relating to the study is how children who head households live and interact with the environment around them. As children interact with the environment, they encounter adversities which they cope with a focus of this study. Gitterman (2009) asserts that there is need to create a fit between people and their environments. This is done by enabling people to

identify and use strengths and resources from themselves and the environment to manage adversities and also make the environment responsive to the needs of people. In the context of children as family heads, their daily lives are centred around coping with the needs arising from the environment as a means of creating a best fit. Teater (2010) asserts that in the life course perspective in the life model, people transit and the course of transition comes along with adversities which vary from individual to individual based on their context. It is vital to note how individuals manage transitions and are able to tap into the resources in the environment (Teater, 2010). Individuals in life course face adversities that emerge from; developing from childhood to late adulthood and the roles and responsibilities; transiting socially and also the traumatic events in life (Gitterman & Germain, 2008). In other words, children as family heads face transitions from childhood to living a life without caregivers or parents and the trauma that comes with all that experience. Gitterman and Germain (1976) contend that Social workers come into play to enable people and their environments to vanquish adversities they encounter which affect their adaptation. Focus is on the interplay of the person and their environments by making a holistic assessment of the individual and the environment in its entirety that is how they transact between themselves (Gitterman & Germain, 1976). Using the life model approach in this study entailed looking at a child who heads a household and how he/she develops and grows in their environment. As these children grow they transact with the social and physical environment around them in form of their own family, relatives, friends, neighbours, employers, social policy among others. As these children develop from babies to children who are adolescents comes with transitional challenges that these children have to cope with. As they socialize and also go through traumatic events such as loss of parents, caregivers and siblings, there are roles, responsibilities, demands and challenges that come along which they cope with. The environment around children in CHHs facilitated the assessment of strengths, strategies and resources that facilitate coping with adversities.

3.1.1 Social systems theory

The life model incorporates the systems theory as it focuses on the interactions between individuals and the environment. A system according to Kirst-Ashman and Hull (2002, p. 10), refers to “a set of elements that are orderly and interrelated to make a functional whole”. Social systems theory on the other hand relates to “systems” and how they “behave and interact with others” (Teater, 2010, p.20). The parts of the system function together and interact with each other to complete a holistic system. In other words, all parts of the systems work in unison (Teater, 2010). Therefore, using the social systems theory in real life is to see how a person interacts and depends on the environment around him or her to be able to function. The social systems theory helped to look at children as family heads and how they interact with other systems (family, church, neighbors, non-governmental organisations, social policy among others) to be able to function. Teater (2010) just like Gitterman and Germain (2008) articulate that there is interdependence between the individual and systems in the environment and a change in one means a change in other systems. From the findings of the study, it was revealed that children as family heads cope using several measures that lie within the systems and the environment around them which all connote to the “person-in-environment” aspect (Teater (2010, p.16).

3.1.2 Strength-based perspective

Saleebey (2006) holds that in the life model, there is a focus on individual and collaborative strengths than focusing on shortfalls. Gitterman and Germain, (2008) note that all people have strengths and the focus should be on the identification of strengths and resources from the individuals and the environment. Practitioners working from the strengths-based perspective help in the identification, mobilizing and building on such strength and resilience. The life model hence seeks to alleviate environmental challenges by building on the strengths of people (Gitterman & Germain, 2008). Focusing on the strengths of individuals was also emphasized by Healy (2014,p. 168) who in referring to Saleebey (2012a, 2012b) and Weick et al. (1989) identified multiple assumptions of the strengths-based perspective such as; “all people have strengths, capacities and resources; people demonstrate resilience often than pathology” in the face of adversity; clients have self-determination; “collaborative partnerships between the worker and the service user reflect and build service user’s strength” and a focus on client’s resources and strengths than on challenges. Looking from the strengths lens, the study focused on the strengths and abilities children who head households have and how they influence their coping with adversities.

3.1.3 Resilience perspective

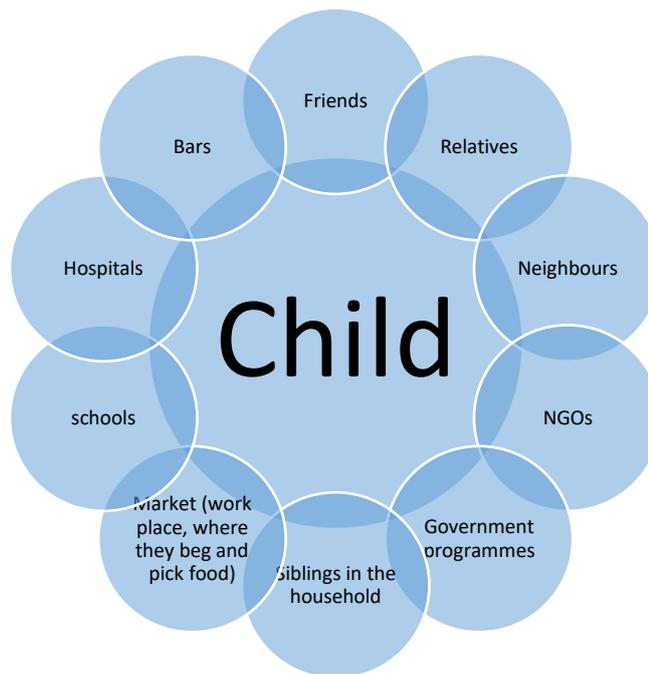
Gitterman and Germain (2008) articulate that resilience is a result of the interaction between a person and the environment and not only personal characteristics. According to Skovdal et al. (2009, p.588), resilience refers to “peoples’ positive capacity to cope with adversity”. The external factors in a child’s life for example facilitate resilience for “children’s well-being” hence “resilient children need resilient families and communities” (Ungar, 2008, p.221). As noted by Ungar (2008), resilience is considered to be an outcome of the context in which the child lives that is for a child to be well (have a well-being), the “outside” of the child has to support resilience. For a child to be resilient, their families and communities have to be resilient that is looking at the family and community to offer resources but also adversities (Ungar, 2008, p. 221). According to Rutter (2000), the concept of resilience entails focusing on positive outcomes amidst adversity, experiences gained and how individuals cope with adversity. Adversity further compels active involvement of an individual and their environment and it is paramount that people develop coping strategies to deal with such (Rutter, 2000). A resilient environment around children brings about resilient children who as a result manage to cope with the adversities that come along their lives. Resilience is not universal as cultural and social contexts have to be taken into considerations and how they facilitate or hinder resilience (Ward& Eyber, 2009). Looking at children as family heads from the resilience perspective was looking at how they interact with the environments around them which influences their resilience and consequent coping.

All in all, the life model was focused on by this study as the main theory with its focus on the environment and how it interacts with children as family heads. The eclectic nature of the life model further helped focus on the systems around the children, the strengths, abilities, resources and resilience they have imperative to their coping with the adversities.

3.2 Theoretical implications on study findings

From interviews with the children who head households, they were able to identify the composition of their environment that entails a range of systems, resources and the source of resilience all paramount for their functioning and coping with adversities. I have put the figure below to illustrate the environment around children who head households in Kampala district.

Figure 1: Children's environment



Source. Researcher

The above analogy I have developed and adopted puts the child as a family head in the centre and moves from the child to the environment around the child that entails systems and subsystems. In the results chapter, it is noted how children indeed relied on the environment and the multiple systems to enhance their coping.

CHAPTER FOUR: METHODOLOGY

This chapter discusses the methodological approach used, the research design, the study population and its eligibility criteria. Furthermore, this sections presents the area of study, the data collection methods, features of study participants and tools and pilot study. Besides, a description of the data management and analysis is done, the ethical considerations and study limitations.

4.1 Methodological approach

The study employed a qualitative approach because the nature of the topic that focused on coping mechanisms of children who head households and a short period of time for data collection (4 months) made qualitative methodology the best suit. More so, the subjectivity of the study and the context-specific conceptualisations of strengths, coping mechanisms, resources and understandings of childhood can be best studied qualitatively. The Covid-19 pandemic that came with restrictions in terms of public transport, social gatherings influenced the amount of time in the field further making the qualitative approach suit the study. Qualitative research is also flexible in terms of the method, tools and questions under investigation (Bryman, 2012) which further made it suitable for the study. Children who head families live in the context of the community and the environment around them. In terms of epistemology (what is and should be considered as admissible knowledge), the study employed a phenomenological view [“how individuals (children who head households) make sense of the world around them”) (Bryman, 2012, p. 30). As Bryman (2012) articulates, the study relied on the fact that the experiences and coping mechanisms are subjective based on the unique interpretation and creation of meaning to events in the world around them. In other words, how children who head household interpret their coping and what they mean by coping. These meanings and interpretations were explored in-depth from the context of the participants (also known as respondents in this particular study) qualitatively. According to Bryman (2012), studying social phenomena involves constructionism (social phenomena is a result of changing social interactions). The social world around children changes as a result of interactions in the environment they live in. As people interact with each other and the environment around them, they create meaning and interpretations and to understand such, a researcher must view them from the point of view of the people (Bryman, 2012, p.380). The study collected data from the point of view of children who head households themselves and what interpretations they have of the life they go through. Coping is an individual effort and information from other sources such as (Non-Governmental Organisations (NGOs) that work with children, local authorities that work with such families is informative but assumptive a reason why they were not part of the study. The nature of research also pointed to the fact that literature review was carried out during and after data collection while theories were generated after collection hence guided the analysis. This points to the inductive study in qualitative research that is concerned with theory as an “outcome of an investigation” (Bryman, 2012, p.384).

4.2 Research Design

The study employed a case study design where an in-depth inquiry was carried out to explore coping mechanisms among six children who head households as a case at a single point in time. Studying a case at a single point is cost-effective and takes limited time compared to longitudinal studies. This was in line with the fact that the master's thesis period and resources are limited to carry out studies that take a long time (Bryman, 2012). Six (6) children who head households were studied as a case by conducting deeper scrutiny using qualitative data collection method (in this case unstructured interviews) and tools. Case study designs entail "a detailed and intensive analysis of a single case" allowing the exploration of distinctive features of the case. Case studies are often associated with qualitative research and particularly those that employ methods such as unstructured interviews as it allows in-depth scrutiny which is all associated with this study (Bryman, 2012, p.66). In qualitative research and case studies in particular, the researcher is not entirely focused on generalization of the research findings but rather on the generation of theory(ies) from the study findings. The generation of theory from findings also relates to the inductive nature that this study undertook (Bryman, 2012). Children who head families were studied as a peculiar case (Yin, 2014) to explore their coping mechanisms as family heads. Exploratory research as associated with subjects is where less is known about them and in this case coping mechanisms of children as family heads were less known in Uganda.

4.3 Data collection methods and tools

Qualitative data collection methods and tools were employed in the study. Interviewing was used due to its flexible nature and the fact that the interviews, their transcription and analysis can be accommodated into "researchers' personal lives" (Bryman, 2012, p.469). Bryman (2012) further notes that qualitative interviews entail the focus on the view of the person being interviewed in this case the viewpoint of children who head CHHs. Also, it allows not sticking to the interview guide but rather make follow ups on the replies of the person being interviewed hence no specific order of questioning is followed (Bryman, 2012). Semi-structured interviews were carried out to answer the research questions using a semi-structured interview guide as a tool. In semi-structured interviews, the researcher has a range of questions on a list or topics to be considered known as a guide to the interview but these questions do not have to follow in any order or manner (Bryman, 2012). Interviews were carried out with children who head CHHs and typically followed their point of view and follow-up was made to their responses. This meant that questions were not followed in any particular manner but rather just cover the topics on the semi-structured interview guide. These topics were exhausted by responding to the feedback given by children as family heads. Qualitative interviews also favoured asking children about things that would not be possible to identify through observation such as emotions. They also enabled children to connect with their experiences through a "think back" known as "reconstruction of events" (Bryman, 2012, p.495). Children were able to tell through experience of what happened (is happening) and how they manage(d) to cope. In-depth interviews though often associated with providing more than necessary information thus making it challenging to sort out the most relevant to the study topic were carried out with children who head households. Interviews lasted for 60-90 minutes and were

recorded using a tape recorder and no participant declined being recorded which would call for notes taking. Recording was helpful as vital information was not missed from the perspective and real-world of participants (Bryman, 2012).

4.4 Sampling

Bryman (2012, p.187), asserts that a population refers to “the universe of units from which the sample is to be selected” whereas a sample refers to the “segment of the population that is selected for investigation”. Sampling therefore, is a process of selecting a sample from a population. The study population was among children who head families in Kampala district Uganda. The study employed purposive sampling a non-probability sampling technique where participants were selected based on their significance to the study questions. Gatekeepers inform of local leaders, Village Health Team members (VHTs) and local police helped in the identification of respondents and later purposive sampling employed to select six children who head families. These gatekeepers are knowledgeable about the number and location of such children/households and were vital in the process. Purposive sampling and qualitative research in general, do not allow generalization but rather a focus on the peculiar opinions of participants (Bryman, 2012) which made them suit the study. Data collected cannot be generalized to all children in Kampala district or Uganda at large due to the subjectivity of the topic under study. This is because what some children use(d) and view(ed) as their coping mechanisms was different from other children depending on the environment/context. I collected data from 6 children as family heads in 6 households (equal males and females) aged 10-18 years. Choosing 6 children allowed me not only to collect in-depth information but was also cost-effective in terms of resources and time. By virtue of law children who are below 18 years, head a family/household on their own with or without external help and take care of their younger siblings, nieces and nephews were considered for the study. Runaway children, those who co-parent, those that live with a relative or friends and those living outside the study area were not considered for the study. This because I intended to get first-hand information from children who head families and those who stay with relatives do not have the sole responsibility of looking after themselves or siblings making their coping way different from those that are solely on their own.

4.5 Study participants’ features

Note: The names do not reflect the real names of the participants for purposes of concealing their anonymity.

John. A 17-year-old male who takes care of three other female siblings with the youngest aged 5 born with HIV/AIDs. The father died of HIV whereas the mother left home to another district. They are renting in a city slum and the sole responsibility is and has been on John for one and a half years since the mother left. John and the siblings are engaged in street hawking and other odd jobs for survival.

James. A 16-year-old male whose mother divorced and left the home with their last born. James started living with the father and his young brother. The father left for work 10 years ago and has since then never returned or made any efforts to look for them. James takes

care of his younger sibling in a rented house in a city slum for 9 years now. They all hustle through odd jobs and begging to survive with sole responsibility on James.

Mathew. Male aged 17 whose father and mother died when he had run away from home. After their death, he was left with no option but to look after the other four siblings with the youngest aged 6 years now. He has never been to school so he couldn't find any employment and resorted to selling marijuana in Kampala slum area where he stays for survival. He has taken care of the siblings for 5 years now.

Mary. A 16-year-old female whose both parents died. She left the village as no one was taking care of her to stay with her elder sister in the city. Her elder sister later died leaving behind 8 children in her care and she has taken care of them for 4 years now. They are currently renting a single room in a city slum where she is involved in sex work and doing odd jobs for her survival and family. The children in her care are also involved in looking for survival through begging and pick food disposed of in markets. The sole responsibility of looking after all these children is on Mary.

Martha. A 17-year-old female whose father died and was abandoned by the mother at age of 2 months. She stayed with her grandmother until she was unable to take care of her and later died as well. She came to the city to stay with her elder sister who at that time had one child. The sister later got married leaving her with that child. Martha later on also got pregnant and the man responsible for her pregnancy disappeared from the vicinity. Martha was left on her own and she has been taking care of own her child and her sister's child in a rented room in a slum area for three years now. She is employed as a market vendor where she is paid seventy thousand a month (approximately \$19). She also does other odd jobs such as hawking and washing clothes for income.

Agatha. 17 and a half years aged female whose father died and the mother got married in another family. The mother left two other children at home in the care of Agatha. Agatha's elder brother impregnated a lady and the child was brought home and now in her care. She also got pregnant and the man responsible for her pregnancy refused to move in with her. She is and has been taking care of her siblings, her two-year-old child and her nephew for four years now. She does odd jobs like washing for other people for pay and also part-times at a friend's restaurant and is given food in return.

4.6 Pilot study

Prior to the interviews, I carried out a pilot study that involved two households headed by children (male and female) aged 15 and 16 respectively to test the feasibility of the methodology, design and data collection methods and tools. A qualitative case study indeed suited the study and the interviews suited the study. Semi-structured interviews in a conversation mode were feasible to explore the coping mechanisms of children. From the pilot study, it was indeed paramount to probe the responses of children as family heads but having a list of topics to be covered rather than structured questions. Topics on the interview guide guided the interviews as children talked through experiences and needs. They shared how they manage(d) to cope with several challenges and were kept in check by the topics on the semi-structured interview guide. This informed the real study interviews as the same was followed. From the pilot study, it was important to identify the needs of these children who head families

and later go ahead to make an inquiry about how they manage to cope amidst the needs and concerns. Initially, I had not considered exploring the needs but after the pilot study, it became vital as through their needs they were able to identify their abilities and the several mechanisms they use to cope.

The pilot study also guided the fact that female children were part of the study and the notion of sensitivity of some of their views should be considered. A female research assistant was therefore hired to assist in data collection to accommodate sensitive gender issues if they arise. She was trained in the context of the study and data collection for three days. She was considered based on her three years experience of not only as a social researcher but a peer educator with a great knowledge of working with children and especially in vulnerable situations. She was fluent just as me with the language of the study participants which made her suitable for inclusion. Pilot study also guided that children should be asked if they wish to be interviewed in presence of the research assistant or alone with the researcher. Data collected from participants in the study guide is not included in the data analysis.

4.7 Data management and analysis

Data management and analysis involve how transcription was done, data analysed and the notion of data quality. It is the basic representation of how the data was handled in the entire research process.

4.7.1 Transcription

Interviews were recorded to capture the exact way the information was said and transcribed paying attention to repetitions, pauses and exclamations. Interviews were transcribed word by word which allowed identifying of commonalities and differences in the six interviews. Regardless of transcribing being time-consuming, it allowed reading and making thorough scrutiny of the data and allowed me to go back to the data whenever needed as articulated by Bryman, (2012). All interviews were transcribed wholly however much Bryman (2012) suggests that it is not always necessary to transcribe whole interviews as it is very time-consuming. Bryman notes the advantages of writing down the whole interview such as; correcting the limitations of our memory, repeated and more thorough examinations of the interviewees' answers, countering accusations that the analysis is influenced by the researcher's values, as well as to allow the data to be reused (Bryman, 2012 p. 482). Transcribing them in whole tapped in the above advantages and also enabled familiarization with the data to make deep scrutiny of the meanings and patterns in the data from the point of view of the children as family heads.

4.7.2 Data analysis

The study utilized an inductive approach that guided research analysis where the theory is from the research outcome (Bryman, 2012). Data was collected first and then fed into the existing theory (ies) that guided the analysis and presentation. The study employed a thematic data analysis which is the most used for qualitative research studies. The thematic analysis

seeks to identify key themes or categories in the data, in this case the transcribed interviews. A theme is sometimes referred to as a code and these themes were based on repetition and patterns that came up (Bryman, 2012). Thematic analysis hence formed the basis of data analysis based on its appropriateness. However, repetition was not the only criterion for building a theme but rather themes had to relate to the study objectives and research questions (Bryman, 2012). Data was analysed during and after data collection by identifying its patterns. After transcribing the recorded interviews, I read transcripts over and over for familiarization and generated themes manually. I highlighted interesting parts from all interviews that I deemed relevant to the study and research questions with different colours. These colours represented codes that I named and formed a long list of codes related to the research questions. It was evident that after highlighting the main codes from the six interviews that some were identical, related and others different. Identical themes were merged, related one grouped while others put in subgroups. These groups were scrutinized and related to the study objectives to generate themes and subthemes. For example, children identified their abilities and strength through making a reflection on what they need (ed) and how they manage such needs. From the needs, they noted several abilities which were put under subtheme ability to define their needs. This process was repeated for all the interviews and eventually, three themes were generated with subthemes and sub-sub themes (presented in paragraph format) as presented in the table below.

Table 1: Themes and subthemes

Theme	Subtheme
Strengths and abilities exhibited by children in CHHs	Ability to define their needs Ability to reflect and make an assessment of the legal framework Saving Personal attributes Understanding the market dynamics for their survival
Coping mechanisms	Involvement in illegal and unsafe activities Coping with food needs Defying social constructions
Resources available to children in CHHs	Social networks Support from relatives Help from neighbours Support from friends Support from NGOs and government facilities Support from sponsors Support from household members Involvement in income-generating activities Family land Religiosity

These themes were noted down in the analysis chapter and discussed linking them to previous literature and theoretical framework.

4.7.3 Quality of data

Data quality was ensured in the entire study where research ethics were adhered to and all participants consented prior to the study. The study is considered valid basing on Leung (2015, p.325), who notes that validity in qualitative research refers to “appropriateness of the tools, processes, and data”. That is if the research questions are well found for the preferred result, if the methodology chosen is suitable to answer the questions if the design is sound to the methodology, if sampling and analysis of data are suitable and if the results and conclusions are sound contextually (Leung, 2015). In this case, the study is valid due to the appropriateness of the whole process and the employment of a phenomenological epistemology where participants interpreted and created the meaning of the social world around them and a social constructivist ontology where meanings were out of “interactions between individuals” all suitable for a qualitative methodology and the related approaches. The study was not only designed and executed under the guidance of the research supervisor but also an external post-graduate scholar who helped to review the thesis and the contents and asserted that the study is valid. Both males and females who head CHHs were considered for the study which to some extent balances the study findings as views were taken from their points of view. Also, the use of the research assistant was only for data collection purposes and not part of data analysis.

In terms of replicability and generalization, the study employed a qualitative methodology that does not emphasize generalization due to the contextualised and subjective study findings (Leung, 2015). The findings cannot be generalized to all children in CHHs in Kampala, Uganda or in other contexts. However, some degree of similar findings could be found if the same research process and participants are considered in some contexts. The case study design employed also meant that the findings cannot be replicated entirely.

4.8 Ethical considerations

Ethics in social research relate to how “important values are in terms of how we treat research participants and the limits of our relations” (Bryman, 2012, p.130). Researchers need to be aware of ethical principles and be able to make informed decisions and choices about certain actions. Although the study was not attached to any university at a local level for approval, I ensured that all research ethics are followed as guided by the supervisor and the study guide. These were followed and upheld in every way possible in the following ways.

Being a child who heads a family and also the discussion about their views and experiences bring up emotions and memories that might harm them physically or emotionally (Bryman, 2012). I ensured that the participants were not harmed by informing them about study intentions and the potential risks involved. Potential harm would have come up mentally if they were deceived about the study intentions and the protocol. I asked and allowed them to only share information they were comfortable with while respecting pauses for emotional stimulation. Ample time and space were given to avoid harm as they thought through their

experiences. A local agency (Uganda Youth Development Link (UYDEL) and a qualified social worker were identified and made known to participants for emotional support during and after the interviews if needed.

Gatekeepers were approached and they provided permission to access the communities where these children resided. These included local leaders, Village Health Team (VHT) members, local police among others. These are not only knowledgeable about the children in the community and their residence but also assist in the accessibility of their jurisdictional communities. I provided the information letter about the study to the gatekeepers and also personal identifications and contact which helped for purposes of identification and seeking administrative authority to access the community. The study was explained to the gatekeepers who not only granted access to these communities but also aided in safeguarding the vulnerable children as they would inform them that the study is not for bad intentions but for study purposes. Some offered to walk with us (researcher and research assistant) in the communities which in a way not only minimized harm to the researcher but also legitimized the study since the locals, local authorities and children are aware of our presence. Intentions of the research and how it will be done were clearly stipulated as well to the children that participated in the study.

Privacy is vital and a *right* and violations of it are not allowed (Bryman, 2012, p.142). Interviewing children as family heads involved asking questions about their experiences and certain questions invaded their private lives. Such was informed to the participants and only allowed to share what they feel comfortable with. Interviews were made at private places deemed comfortable by the participants which avoided harm and protected their privacy. In the face of the COVID 19 pandemic, social distances and other standard operating procedures such as sanitizing and wearing facemasks were adhered to strictly. As requested by the respondents at all instances she was asked to keep away as they felt comfortable to be interviewed in her absence.

I sought and considered informed consent in the study. Both verbal and written consent (through written consent forms) were sought from study participants. The children that participated were all above 15 years and were asked to consent on their own as they are deemed mature to make informed choices. This was not only about them knowing about the study but allowing them to participate while aware of the research process and intentions (Bryman, 2012). Consent further involved informing participants of the implications of being involved in the study. Participation hence was voluntary (Homan, 1992) and at any point when they felt uncomfortable for any reason they were free to withdraw their participation with no consequences. Fortunately, no participant withdrew from the interviews which was regarded a success. A copy of the information letter and consent form was left to the study participants with the contact information of the researcher and the supervisor so that any inquiries can be made if needed. The study also considered the notion of children as participants who head families with several responsibilities on them and focused on the sensitivity of the environment, the study and participants themselves. Consent was sought for recording interviews and they were kept private accessible only to the researcher and for research purposes. These recordings will be discarded after thesis submission and grading.

Confidentiality and anonymity were ensured with the respondents which is also the genesis of harm (Bryman, 2012). Extra “care” was given to the identities and information

provided by respondents whereby their names are not used or even appear anywhere in the study results. Pennames were given to seal their identities and the information provided was only for academic purposes.

4.9 Study limitations

Maintaining appointments was challenging with children who head household as they do unpredictable odd jobs. Some children postponed the interviews to the next days or late evening hours as they had to first run errands. This affected the plans and the data collection process but I became flexible to accommodate their self-determination and flexibility.

The use of gatekeepers to access the community also called for unnecessary attention from the community members. Seeing me (a stranger in the residence) and the research assistant walking with the area leader (gatekeeper) in a somewhat way painted a picture in the community that I was “such an investor who has come to fix all their challenges”. On several occasions they made efforts to ask which “service and offers we are giving) which was difficult and took time to explain that I was doing academic research. This took part of the time meant for data collection.

The study did not consider giving compensation to the participants of their time which looked odd to them. Participants noted how they have always received to some degree some compensation once they participate in studies. This did not however compromise with the data quality as they were informed before the study that no compensation will be given. Doing research in COVID-19 came with complications in terms of transportation to the study area, physical access to participants which had to ensure social distancing, face masking and physical contacts. At times it would be difficult to hear some words or understand the tone of a participant. Convenient places though without noise played a vital role so that no information was missed.

CHAPTER FIVE: RESULTS AND DISCUSSION

A personal reflection about the study results

Children in CHHs have to adapt to a life without adult caregivers characterized by daily care for themselves and younger siblings or even friends. Meeting the daily needs is problematic but they have to hustle and cope with the several adversities they encounter. It is imperative to note that from the interviews conducted among children who head families, it was revealed that the ability of these children to cope with the adversities is deep-rooted in their strengths. They possess what I found as abroad and stretch amount of knowledge and abilities that they tap in to cope. They utilise the environment around them to be able to facilitate their coping.

This chapter presents the study findings that relate to the several coping mechanisms children who head households use to survive amidst adversities. The study findings are presented, interpreted and discussed in relation to previous literature and theories. Findings are structured according to the themes generated from data analysis done during and after interviewing and transcribing the interviews. Three broad themes are presented that is strengths and abilities exhibited by children, coping mechanisms and resources available to children who head families.

5.1 Strengths and abilities exhibited by the children

Children who head household from the interviews revealed a lot of strengths and abilities that enhance their coping. Though children themselves did not recognize and mention such as strengths, it was paramount to note and interpret how children can articulate the things they can do to cope with adversities. Children revealed that they can learn from friends, neighbours, community and use what they termed as *little knowledge they had learnt from school* to be able to know what they need to survive and thrive.

5.1.2 Ability to reflect and make an assessment of the legal framework

During interviews, the children were able to make scrutiny of the legal framework and how it affects them in their coping as household heads. They articulated that laws and policies influence their lives in form of the activities they engage in and programmes that would sustain them. Children articulated the need for the government to make special laws that relate to the provision of basic needs to them. They also noted the need for city authorities and security operatives in charge of trade and order enforcement to create certain leniencies for them. This was due to constant arrests and confiscation of their merchandise which has always pushed them down as they have to meet the related costs. Children further decried the laxity of the laws and policies that relate to punishing children offenders. They noted that they are offended and abused in various ways (physical, emotional and sexual) but the offenders always go unpunished. For example, in an interview with Agatha, she had this to say;

men can rape you or steal your property and you go to report to police but they will do nothing to him. First of all, the reporting process is complicated by moving from level to level and you must be willing to give some money for your case to be considered [...] even when they are arrested, the next day or after a few days they are released and you wonder what is happening [...] these people are dangerous as now you become a target because they want to revenge for reporting them.

The legal framework was highly criticized for leaving out and not minding about issues related to children such as abuse, neglect and others.

As a social worker, it was amazing to hear how these children can make a reflection of the legalities in the city and how they relate to their status as children who head households. To me, their ability to for example note that the authorities should be lenient to them to be able to sell their merchandise revealed how clever they are. Also, they were able to point to the gaps within the legal framework and how they should be handled to meet their needs protect them. Their relation to policies and laws related to how they are able to relate with the subsystems of the social system around them that influence their functioning (Teater, 2010). Also, their ability to make a scrutiny of the legal framework relate to their strengths and abilities that are articulated in the strength-based perspective (Healy, 2014). The policy and law enforcing structures mentioned by children lie in the social environment in form of institutions and organisations as articulated by Gitterman and Germain (1976). The scrutiny children as family heads make of how the institutions should be lenient and considerate to them to be able to sell their merchandise and also bring to book those who offend and abuse them relates to the notion of the life model that the environment should be responsive to the needs of individuals in this case children (Gitterman & Germain, 2008).

5.1.1 Ability to define their needs

From the interviews, it was revealed that however much children as family heads in CHHs face several adversities, they possess the abilities to identify and articulate their needs. These children know what they need, what they can and cannot do to meet their needs. During interviews, children articulated a range of needs and how they have been able to cope with them an ability imperative to their coping. Their ability to tell what they need to be successful is crucial and cannot be overlooked.

Children were able to identify the notion of education as a prerequisite they mentioned for formal employment. The highest level of education among children who participated in the study was senior three (third level of secondary school and one level less to complete what is termed as ordinary level education in Uganda) by one female child head while the least had never attended school. Children expressed on several occasions a desire to attain education as they narrated how they have failed to get jobs because of limited skills and competence. Failure to acquire education has not only robbed them of job opportunities but they also feel they will be judged and abused by other people including future spouses for failure to attain education. For example, in an interview with Martha, she said;

But for me I have to struggle as the next day my employer can say that there is no work and you go somewhere else and they ask for academic documents and when you tell them that you stopped in s.3 (senior three) or p.7 (primary seven) they just chase you saying that there is nothing you understand.

Children expressed a desire to find sponsorship to be able to resume school or be trained in other life skills such as hairdressing, auto-mechanics and nursing. In an interview with John who was at one point supported by an NGO which later halted operations because of the COVID-19 pandemic said;

I had wanted to go learn auto-mechanics but I did not get that opportunity so I went back home to look after my siblings.

Children during interviews articulated that being educated with skills would not only give them income but give them other life skills like problem-solving, financial management, leadership as family heads and child care. Children noted fact that the available measures put by the government such as universal primary and secondary education and other skills training programmes do not provide related needs such as meals and scholastic materials. They also noted how difficult it is for them to leave their younger siblings at home with no care and go to school. Some children are compelled to drop out of school to work as the younger siblings stay in school as Mary narrated;

You see the whole household looks at me for everything. So I imagine how I can go to school and leave them alone without anything to put in their stomachs. I decided to leave school and work and let the siblings study but I am well assured that they will not go far because I do not have money to meet all their needs.

It is a sacrifice they make for the sake of their siblings which robs them the education right and need. Children's education needs and concerns were beyond themselves as they involved siblings, schools, government and sponsors. These form systems in the environment around the child that relates to the social systems theory and the life model (Gitterman & Germain, 2008; Teater, 2010) and how they influence the children's functioning through interactions. Children were able to point out system failures within the environment for example how the existing education frameworks do not address their needs. Children were able to articulate that the subsystems within the environment such as schools, government and sponsors have failed to support them to attain education. The ability of the children to make deep scrutiny of how education relates to skill development, employment and ultimate welfare is such a strength they exhibit that relates to the life model that entails a focus on how people use their abilities from themselves and environment to function (Teater, 2010). The study found out that children drop out of school as a coping mechanism which concurs with a study by Kurebwa and Kurebwa (2014) that articulated the same mechanism. Children transitioned from a life of schooling to a life of no schooling which came with adjustments such as managing to get low skilled jobs with ultimate low income which relates to the life model that emphasises how transitions in life course bring about adjustments that vary from person to person (Teater, 2010).

In addition to education needs, children were also able to identify feeding which they identified as their greatest challenge and a burden. All children mentioned that often they spend days and nights hungry as they have nothing to eat. In an interview with Martha, she noted that;

Even for food when I eat today I do not eat tomorrow.

Children identified that failing to get food raises concerns not only for them as family heads but more to younger siblings who are unable to withstand hunger putting them at risk of hunger-related illness as a result of malnutrition. In an interview with Martha who is currently breastfeeding but with inappropriate feeding noted that the situation puts the toddler at risk of several diseases which she has no capacity to treat (she was able to learn about this during her antenatal care visits to the hospital and also in school before dropping out). All children further reported that even when they are lucky to get a meal, it is often low in nutrients as they even have one cheap meal (maize corn, rice and beans) over and over. They noted that this does not only affect their development as children but also their energy to offer and do hard work for their survival as James notes;

I do a lot of work such as lifting that requires much energy. But sometimes I sleep hungry and the next day I cannot really do much. You need good feeding to manage such work but my situation as a child on his own makes it hard.

Children were able to use the knowledge from school, neighbours and hospital to identify their feeding-related needs and concerns a strength that cannot be underestimated. Martha's knowledge to know what is good for her child cannot be overlooked as it is a resource one would least expect from a 16-year-old child. Her experience has exposed her to such which she capitalizes on to cope with her needs. Children relate with the environment around them and can learn from the community basic knowledge for example nutrition and can relate it to their daily lives. This relates to the life model and social systems theory as noted by (Gitterman & Germain, 2008; Teater, 2010) that hold that individuals interact with the environment for functioning. Children were able to relate with to the environment around them for their benefit such as utilizing schools and the knowledge they got from there to inform their feeding. Children also utilized knowledge from hospitals which all relate to the life model that articulates the interdependence of individuals and their environment in form of social and physical structures (Gitterman & Germain, 1976). Children like Martha transitioning from a child to a mother came with responsibilities and roles which she copes with. This relates to the life model that asserts transitions in life and the experience that arises thereafter (Gitterman & Germain, 2008). Transitioning is not only about Martha being now a mother but also how other children manage from a life of having three meals in stable families to a life of having one meal and coping with that. The study findings also concur with findings from several scholars such as van Dijk and van Driel (2009), Kipp et al. (2010), Mkhathshwa (2017) and Thwala (2018) and who all assert the absolute feeding needs to children in CHHs characterized by low nutrient intake. They agree to the effects of less feeding such as reduced concentration in class. Findings in particular, differ with findings by Thwala (2018) who contended that children cope with food needs through programmes such as school feeding programmes as all children that participated noted that such programmes are not known to them.

From the interviews with children, they revealed their abilities to reflect on the notion of housing and how they cope with housing needs. All children in the six households were renting in private houses in slum areas characterized by poor hygiene, insecurity and overly poorly served with other housing utilities. They were all renting one room which they shared with one or two mattresses for example in an interview with John, he revealed that;

Even where we sleep we have one mattress and it's not enough because we are four and they are girls and I am a boy. I had bought a bed but I have not managed to put a mattress on it. So we have two beds and one has a mattress because it is what our mother left there with a mattress and on the other it's not there because I am the one who bought it but now the fact that they are young, I put them on that bed and me I sleep on the empty bed because it has only plywood. I just add a blanket then I cover myself with a jacket

John just like Mary, Agatha and Martha shares a single room with siblings of the opposite gender which inconveniences him and others of privacy. Children revealed that they always have no finances and are compelled to stay in cheap houses in insecure neighbourhoods which puts them at risk of abuse. Males reported being exposed to emotional and physical abuse (inform of beating) from their peers and adults in the community while females decried most of the sexual and emotional abuse. In an interview with Agatha, she noted that she rents a single room separated from the men's room by plywood that does not reach the top of the house. She pointed out that on several occasions they have plotted to defile her under influence of drugs and alcohol. Agatha however notes that she has no money to access better housing so she has to stay but cautious. Sexual abuse was reported among females who participated in the study and no male pointed to sexual abuse. Children also noted that there is poor disposal of waste in the slum areas which has greatly affected them. In an interview with Mary also renting in a slum, she noted how the deteriorating hygiene risks their health as she noted;

Like this house we rent is near a toilet so at night they pour faecal matter and the smell makes us and the children sick and uncomfortable. It goes through the trenches so the situation is really bad.

Study findings reveal the love for example John has for his siblings that he sacrifices to sleep uncomfortably which stood out as a great strength. The strength in the emotional and caring capacity of children as family heads as expressed by children relates to the strength individuals hold that facilitate their coping (Teater, 2010; Healy, 2014). Findings also concur with findings by Nziyane and Alpaslan (2012) who articulate the deteriorating nature of houses where children live that exposes them to harm and danger. Children also make private living arrangements with landlords for accommodation an interaction that has facilitated their coping with housing needs. Landlord/housing lies in the environment of children and affects their functioning which relates to systems in the life model. Renting also relates to the physical structures articulated in the life model that eventually influence individuals and in this case children as family heads (Gitterman & Germain, 1976; Gitterman & Germain, 2008; Teater, 2010).

All children noted how they grapple with medical care needs not only as household heads but the household in its entirety. They noted that the nature of their feeding, the work

they do and the places they live in all put them at health risks yet with no assurance of medical care. Children noted that they face a range of medical needs from what would prevent them from getting sick, diagnosis while sick and treatment. They further noted that they greatly face Sexual and Reproductive Health (SRH) needs ranging from menstruation needs, information and advice. They have to manage by working and having money to be able to cater for medical needs. Children noted that the available public medical facilities are unreliable with long queues and often with no drugs hence resorted to private facilities which are reliable but expensive. Being able to meet such needs is a burden to these children as they mentioned that lack of income and someone to look after them cripples more their efforts to meet such needs. They further articulated that the government has not made targeted medical interventions for them.

These children have abilities to reflect on the medical care needs and able to connect with how the government has not done much. This capacity and strength are paramount to their coping with the different challenges they encounter which relate to the strengths individuals hold (Healy, 2014). Children were able to reflect on the structures in their environment such as public medical facilities and how they relate to their medical needs. These structures relate to the physical structures identified in the environment around children that relate to the life model (Gitterman & Germain, 1976). The findings also relate to a study by Kakuru (2018) who articulated that children in CHHs are able to know when someone gets sick and have the ability to know when and how to respond. Findings also concur with a study by Thwala (2018) that articulated that girls faced SRH needs especially pads as they resorted to bundling underwears as an alternative to pads. The children interact with health facilities to meet their medical needs which form part of the system around children in the social systems theory (Teater, 2010). The life model further notes that the environment around individuals should be made responsive to their needs (Gitterman & Germain, 2008) and in this case making the medical facilities responsive to the medical needs of children.

On a personal reflection, I imagine if other children of the same age probably in well-off families or other countries or contexts can identify their needs and clearly articulate what they do and need to do to cope with them. Children during interviews express several competencies such as their ability to not only articulate clearly what they need but also comprehend how what they need would benefit them and influence their welfare. They express much love and sacrifice for their siblings and in all needs they encounter they reveal how concerned they are about their siblings. Their abilities and strengths are in line with the strengths-based perspective that asserts that focus should be put not only on the deficits but also on the abilities that people have (Healy, 2014). Seeing their needs from the strengths perspective does not mean that their needs and concerns are overlooked but rather appreciated to the extent that their ability to recognize and articulate them is a great capacity. Children utilise systems around them such as friends, neighbours, hospitals, schools and the community at large for their benefit. They are able to learn from them what they need and how that influences them not only as family heads but as a household. This relates to the systems theory and how the interaction between subsystems bring about functioning. The interactions between these children and their environment enable them to learn about their needs and concerns (Gitterman & Germain, 2008; Teater, 2010). As children interact with their environments, they encounter experiences and needs they have to resolve such as education, housing among others

which all relate to the life model and its focus on the interaction between individuals and the environment (Gitterman & Germain, 2008).

5.1.3 Saving

Saving and the saving culture was mentioned as integral to the coping of children who head households. From the interviews, children noted that they did individual savings and saving as a household (every member of the household saves in a pool aimed at purchasing or meeting a certain need) which was done in saving boxes. Children also noted that they belong to informal voluntary saving groups with friends from the neighbourhood where they save every week and can be able to borrow when they are in need. They mentioned that such initiatives were borrowed from the community such as women saving groups, VSLAs (Village Saving and Loan Associations) and this has been paramount to their coping. Saving has helped them in times of emergencies such as illness, arrests and feeding as they are able to access income to meet such needs. From the interviews children also noted that saving groups further helped to instil accountability and other financial management skills like planning which they mentioned has been vital in helping them cope with the several challenges they encounter. John one of the respondents narrated how saving helped him recover his petty business after his merchandise had been confiscated by city authorities;

I was saving slowly in a box. So when they caught me I went to check in my saving box and I had one hundred thousand and I re-continued selling popcorns, onions, tomatoes, green pepper and aubergine/eggplants.

Children articulated how the environment around them relates to their ability to save such as learning from the environment especially VSLAs, household members and friends who are all involved in their saving as a coping mechanism. These relate to the social environment articulated in the life model and how it influences the functioning of individuals (Gitterman & Germain, 2008). Saving at a household level relates to the interaction in the family as a unit of systems just as saving with friends. These are part of the social systems theory that relates to the interaction of systems and interactions within a system (Teater, 2010). The life model also points to how the environment responds to the needs of individuals (Gitterman & Germain, 2008) in this case the environment around children responds to the financial needs of children who head households. They are able to save with systems around them and also utilise the knowledge from the environment. From a strengths-based perspective, it imperative to note the abilities of individuals and in this case, the ability to save, belong to a saving group and also utilise knowledge from the VSLAs (Gitterman & Germain, 2008; Healy, 2014). This a great strength as indeed mentioned by children that have helped them cope with financial needs.

5.1.4 Personal attributes

During the interviews, children were able to mention and describe what they termed as personal attributes and how they facilitate(d) their coping with several adversities they encounter. Children reported that they have over time developed a sense of belief in themselves and the abilities they possess which has enabled them to cope amidst the adversities. Several personal attributes are discussed below.

Children mentioned contentment as one of the personal attributes that has enabled them to cope with several adversities. A sense of contentment as defined by children entailed *recognizing the small and little things/opportunities you have and being happy with it*. Children related contentment with hope as they were aware of what they had and knew that the next day they will work more and change the situation. Being content also helped some children not to get involved in criminal activities to meet their needs for example in an interview with John, he said;

I have also managed to cope because even when I have something small I know that's all I have and that's what I am able to get.

Children mentioned honesty as one of the attributes they have which has enabled them to cope with adversities. Children who head households noted that they live in very vulnerable situations mounted with a lack of basic survival needs. They noted that in an event when they get someone to give them some work, they do it with great honesty. Children noted that most of the children without any caregiver looking after them are often associated with crime and “terrible behaviours” making the community lose trust in them. As a result, many people in the community decline to offer them work because of the experience they have had with such children. However as children mentioned, in an event when they get something to do, they do it with great care, honesty and trustworthiness to paint a good image in the eyes of the public so that they can always be given work. Children noted that being honest and trustworthy in the little things and the jobs they are given to do has meant a “great deal” to them since people have now started trusting them with their houses and other property. This has helped them cope as it has made them get more work and consequently a living.

As a way of surviving, children who head families noted that they have mastered the art of hard-working that helps them cope with the adversities. From the interviews, they noted that they put a lot of effort into all they do especially the income-generating activities and odd jobs with high completion rates. They noted that this has not only enabled them to be called for more work but they are also able to finish one piece of work in time and start on another. As a result, they have been able to earn more income to meet their needs and have even managed to save. James noted for example that;

I work so hard to survive and get anything that I want. I have no one to look after me so everything is about me. My age and the life I am in even makes me want to work more because I am in my own. I work a lot and when some people appreciate they will call me the next time for more work.

Findings from the study further revealed that children remain strong amidst the challenges they go through. They noted that “being strong” is a result of being used to the same situations and feelings of having no other option but to be strong. Children noted that such strength is helpful as it helps them keep moving and pressing on amidst challenges. They articulated that they become strong/stay strong in the face of adversities and critics by the community as one Martha said:

You just get strong because you have no money and have no food as well. You find that you have no option but be as strong as you can.

All children that participated in the study revealed during interviews that they have come to accept the situation and the life they are in. They noted that they have nothing they can do to alter it so they accept it and devise means of managing it. They noted that this helps them to cope because they do not get anxious about any situation or quake when something bad happens. They instead look for means to manage it which has made them cope with adversities. They have developed a degree of control over the situations among them which gives them a greater opportunity to think of the different kinds of strategies to manage them. Children reported that they have accepted the “unpleasant” life they are in and have with time gotten used to it. In an interview with Agatha, she noted;

I got used because I had nothing to do.

All children noted that they have mastered the ability to assess situations and events that unfold. With this, they are able to make informed decisions and choices. Children noted that they are able to for example filter the advice they get from friends and neighbours as some give wrong advice and information. They are also able to “look into their friends and peers” and know whom to trust and whom to distance themselves from. This is usually due to the perceived effects of such friendships especially those involved in criminal activities. In an interview with John, he asserted that;

I have managed to cope because I have distanced myself from people who deal in marijuana. So, I have managed to look after my siblings or not even being involved in stealing.

Personal attributes by children who head families play a vital role in enabling them to cope with several needs. The several attributes of children relate to the strengths-based perspective as their hopes, aspirations, strengths and abilities all play an integral role in their coping. These abilities reinforce their coping as they are empowered to focus on what positives they have and are around them than focusing on the problem (Healy, 2014). The personal attributes are also reinforced by the environment around them and in particular friends, neighbours, household members and the external environment such as market/workplace. This concurs with the notions of the life model and the systems theory based on narratives of reinforcements through interactions and looking at a child within the environment around them. Relating to the life model is that the environment is both a source of adversities but also resources to children such as jobs (Gitterman & Germain, 2008; Teater, 2010). From the study, children feel positive about their lives which concurs with Payne (2012) who noted that children in CHHs are positive about their responsibilities and perform them with pride connoting to resilience. As Salebeey (2006) notes that the strengths based perspective entails a focus on the individual and their collaborative strengths, these children as family heads utilise their personal attributes to be able to cope with the adversities.

5.1.5 Understanding the market dynamics for survival

From the interviews, children exhibited a great understanding of the dynamics of the market for survival. Children demonstrated how the market operates and how they utilise it for their own good. Children who head families as a way to cope always opted for cheaper living modalities such as renting cheaper rooms in slums which they could afford though unsafe and characterized by insecurity, unhygienic, prone to abuse and discrimination. Cheaper modalities also involved opting for cheaper food like potatoes, rice, maize flour and beans while shunning what they termed as luxuries like meat, fish, chicken and other expensive items. Children also opted for cheaper clothes from second-hand markets which they afforded and hence managed to cope with the clothing needs. From the interviews for example Agatha noted that;

I know how I can manage some things like I cannot look for a room I know will give me headache to pay for. I look around this slum to see which one I can afford with my little earnings. You see even for clothes, I look for my level as I cannot go to a boutique.

Looking at the environment in terms of the market around the children has enabled these children to survive and cope with adversities. This environment relates with the social systems theory and life model as the children interact with the social and physical environment to function (Gitternam & Germain, 1976; Teater, 2010). The ability of the children to understand the dynamics of the market cannot be overlooked or undermined as they are able to know what works for them and where they find it a strength that concurs with the strength-based perspective. The strength-based perspective holds that individuals have strengths and capabilities which should be focused on (Teater, 2010; Healy, 2014). The environment around the child enhances resilience among children (Ungar, 2008) as they are able to fend in it and cope with adversities. The market forms part of the “outside” of the child that which brings about adversities but also resources to enhance functioning (Ungar, 2008).

5.2 Coping mechanisms

A range of mechanisms were discussed and identified by children who head families during the interviews. These mechanisms are both positive and negative but all imperative to their coping with the adversities that encounter.

5.2.1 Involvement in illegal and unsafe activities

Interviews with children who head families revealed that some of the children engage in illegal and unsafe activities as a way of coping. Illegal activities comprised of sex work and selling drugs as two children out of six reported being involved in such with one involved in sex work and another in selling drugs. In an interview with Mary, she revealed her engagement in sex work in return for food, money and accommodation. Her decision for engagement was made out of desperation and lack of other survival means. She noted that;

I hustle to survive because each one has to hustle. I hustle everywhere and go through many mechanisms and channels. Sometimes I go and sell sex to get money [...] I also go to bars. I sometimes come with a man and he gives me like thirty thousand (approximately \$8).

Mary reported that she is exposed to several challenges such as unwanted pregnancies, Sexually Transmitted Diseases and Infections among others. She further noted that;

You do not go with a man because you love them. you do not love them but because of money you have to do it [...] I find a lot of problems [...] There are some who will sleep/have sex with you and refuse to pay and he leaves you there. You have to walk let's say you have gone to (name withheld) and someone has used you and failed to pay, you have to walk back [...] There are even those that beat you.

The business is associated with several dangers as identified but the danger of sleeping on an empty stomach with 8 children in your care seemed to be so overwhelming for Mary a reason for engagement in sex work. Sex work was not reported by males in interviews.

Selling drugs was also another activity Mathew was engaged in. He noted that he is involved in selling marijuana in his slum residence something that earns him a living. He revealed that the activity is not only illegal but deadly as intoxicated people have less control and can do anything including stabbing a person. He also said;

I encounter a lot in this business I do (selling marijuana). It is very dangerous as you can be there and you find that people have been arrested for selling drugs but we have no option

These children noted that there are no other available means to earn an income due to their limited skills. However much such activities are illegal and unsafe, children noted that these activities are more profitable than most formal employment around.

Pointing to the environment around these children such as Mary who goes to bars and gets men for sex and Mathew who sells drugs in the slum all relate to the life model and systems theory as it focuses on the person and the environment they are in (Gitterman & Germain, 2008; Teater, 2010). Results from the interviews relate with a study by van Dijk, (2008), Lobi and Kheswa, (2017), Ward and Eyber, (2009) and Makuyana et al. (2020) that all point to the unsafe activities children in Children households and those who head families engage in. This is entirely for survival reasons as they do such in exchange for food, money, accommodation and other favours. Being in adverse situations makes them prone to being lured and tempted in such with adverse effects on their lives. Findings from the study also relate to the study by Lobi and Kheswa, (2017) that articulate how females in CHHs as a result of poverty have resorted to transactional sex that exposes them to exploitation, early pregnancy among others which is a typical example of Mary. Other children in CHHs also were engaged in alcohol and drug use that put their lives at risk of death and human trafficking. Study findings reveal several adversities that result from the environment around children such as abuse which relate to the life model that articulates that people face adversities that emerge from the environment around them but also as they make adjustments in life transitions (Gitterman & Germain, 2008).

5.2.2 Coping with food needs

All children who participated in the study revealed together with their household members grapple with the food needs and must look for ways how to cope and survive. During interviews with these children, they shared a number of ways how they cope with the food needs such as; reducing on the number of meals taken per day; buying and stocking cheap and long-lasting food, cutting down on the amount taken, begging and picking food disposed of. These are presented in details below.

All children that participated in the study revealed that as a way of maximizing the little food available, they resort to reducing the number of meals taken per day. They reported that in other well-off families or even before their parents died, they would have three meals (breakfast, lunch and dinner) but this has since then become history. They resort to having one meal a day usually dinner save for when one is sick or very young ones where they are obliged to make for them an extra meal usually breakfast. They reported how this has greatly affected their health as they have lost weight and became sick of hunger-related illness such as stomach ulcers. James for example noted that;

In other family's children have two or three meals but for me I know my life and I have to have one meal and see what the next day will bring.

John also, in addition noted that;

[...]in eating because at home we have one meal a day since our mother left. We only have the last supper. Maybe sometimes when like the young one is sick we give porridge in the morning if it's there.

Children have the ability and knowledge to know that to maximize food they not only reduce the times they have meals but also have to consider younger children or the sick. This is a strength that is related to the strength-based perspective as articulated by Healy (2014) that strength-based is about focusing on the strengths, resources and capabilities of an individual. Children use their knowledge as a resource to take care not only of themselves but also their younger siblings.

All children that participated in the study identified that as a way of coping with the food needs, they buy and stock cheap-lasting food. They buy food especially after work or payday in large quantities they can afford and stock it as they said *tomorrow is never assured of getting food or money*. Children reported that the food bought is always cheap and the one that lasts for longer periods usually rice, maize flour and beans. This helps them to get what to eat in times when there is no work or money to buy food. Martha articulated that;

When I get some money I buy food that can take me for some days. I buy like maize flour because it lasts and I can even take it as porridge if I do not have sauce.

Children are wise to think about not only buying food after work or pay days but also buying food that is cheap and long-lasting. They are able to know their standards and go for what suits them a strength that cannot be overlooked. Such relate to the strengths-based perspective (Healy, 2014) that entails that all people have strengths and resources that are

utilised for functioning. Opting for cheap and lasting food relates to the study findings by Djik (2008) who revealed that children opted for buying not only cheap food but most filling food.

Children also revealed that they resort to reduce on the amount of food taken per individual in the house. Children noted that in a world of limited resources they eat to survive hence no need of consuming more food than what they are able to afford. Reducing the amount of food was in comparison to what they ate with their parents or what other families take. In an interview with James he noted that;

You cannot have a plate full of food when you do not know how tomorrow will go. You eat what can make you survive as you know you are not like other good families that have a full plate and eat to satisfaction. You eat half plate so that the few kilograms of food bought can take you for some days as you hustle for more

To James and other children getting satisfied was something uncommon to them as they eat only to survive and putting in mind what to eat the next day/meal.

Such abilities to reflect on their lives and come up with mechanisms of managing with less food relates to the strengths-based perspective focusing on the inner capabilities of people (Healy, 2014) and how they facilitate functioning. Reducing food intake also relates to the study in South Africa by Djik (2008) that also articulated that children in CHHs resorted to reducing the amount of food taken.

From the interviews, children also revealed that they cope with food needs by picking food thrown away and begging for food. Some children during interviews revealed that they pick food from market droppings and what has been disposed of by other people. In an interview with Mary, she noted that she goes to the market with the children under her care where they pick matooke, potatoes, beans, peas, onions and green pepper. This food is not only used for home consumption but sometimes resold to get money for other needs such as soap, clothes among others. In addition to picking food thrown away, all children during the interviews revealed that oftentimes when they cannot afford to buy or work for food they resort to begging from neighbours, friends and others strangers in the markets. While they pick food, they also get an opportunity to beg from those around them in markets and streets. Begging and picking food is not only limited to the family heads but to all household members. Mary who looks after eight children articulated that;

We beg and if we get someone to give us well and good. When we do not have like food they can go to the taxi park and pick some potatoes and bring and we eat

All children agreed to the fact that people and families around them also have pressing needs and families to look after that they rarely offer any help when approached by these children. Often times these children have to sleep on empty stomachs when they are unable to get help from people or work for the food. This caused further trouble related to malnutrition, food insecurity and other illnesses.

Children take note of the environment around them and how it has facilitated picking and begging of food. They mention of markets, streets, friends, neighbours and other strangers who form part of the environment of the child relating to the life model and social

systems theory. The environment around the child is a source of food (Gitterman & Germain, 2008; Teater, 2014). The environment around the children also relates to the protective factors around the child that enhances their resilience to cope with the food challenges (Masten & Garmzey, 1985 cited in Rutter, 2000). The study finding also relate to study findings of how friends, neighbours and others help in providing food for children in CHHs (van Dijk, 2008; Kurebwa & Kurebwa, 2014). Findings also reveal how child-headed families' food security is deteriorated which relates to a study by Thwala (2018) in Swaziland that reveals how children went for days without any food with related effects such as malnutrition, food insecurity and others.

All in all, coping with food involves children making deliberate adjustments in life such as picking and begging food, reducing the amount of food taken, buying cheap and lasting food and resorting to having one meal. This relates to the life model by Gitterman and Germain (2008) that articulates that as people make transitions in life in this case from younger children to household heads, from children with a care giver to a life of no caregiver comes with challenges and needs which require adjustments that vary from person to person. Indeed, as mentioned for example some children resorted to picking and begging while others did not which points to the differences in the adjustments different people make. The adjustments further relate to the ability to use internal and external resources to deal with adversities relating to food. Such resources include friends, neighbours, market among others which all appear in the space of the environment around children. (Gitterman & Germain, 2008).

5.2.3 Defying social constructions

Findings from the interviews with children who head families revealed that they defy social constructions as a coping mechanism. Children noted that the community and society around them set certain rules and pathways that they have to follow. However, children reported that there is always a mismatch and contestation about what the society expects and requires of them and how the life they go through makes them fulfil such. From the interviews, children asserted that the society and the environment around them has for example prescribed some jobs to be done by a certain gender such as domestic work (cooking, washing and child care) for females while other labour intensive jobs like truck loading, Boda-boda (bicycles and motorcycles used for transport), carrying luggage all meant for males. More so, society considers children to be "innocent" without a lot of responsibilities and should depend on adults for care. Children however find themselves going against these prescriptions and social constructions which has brought criticism and prejudice. Children mentioned that they have no alternative means of survival and they are always open to hustling and going for every opportunity that comes by even if it means going against the social rules. The decision to defy these social constructions is made out of desperation and lack of other options as one respondent John stated;

when I cooked and they said that I am a man and I should not cook that I should be working as the girl cooks but I told them cooking has no problem because I can cook and even my neighbours haven't said it much that a man shouldn't cook or do that because they look at me and see my situation. I cannot say I

cannot cook because if I do not and the other person also does not cook then the young ones will die of hunger

Martha also noted that;

One day at that parking he wanted people to sort the plastic droppings, pack and load them in the car. We started working as we loaded them on the car and people started saying that those are works for men and not for females [...] I did not feel good about it but the fact that I was looking for money I had to be strong and do it.

All children that participated in the study reported to have broken or gone against what society expects them to do and all reported that there is no other way to survive but to do all it takes and all work as it comes.

Society as part of the environment the child lives in influences behaviour and functioning. The life model in particular articulates how social and cultural notions influence individuals and their functioning. The environment around children is a source of work opportunities and also adversities as they have to deal with environmental pressures in form of roles, responsibilities and perceptions to cope. (Gitterman & Germain, 2008; Teater, 2014). Indeed, as articulated by the children, the society and environment around them has prescribed certain things and expectations that they fulfil. This is in line with previous studies such as (van Dijk & van Driel, 2009; van Breda, 2010; Mkhathshwa, 2017) and their articulation of how gender influences roles and societal expectations. Study findings also relate to how children's choices are influenced by societal norms and values (van Dijk & van Driel, 2009) and from the study children in CHHs indeed are aware of such constructions and have often times defied them.

5.3 Resources available to children

Children who head families identified several resources (both physical, social, emotional and material in nature) that have enabled them to cope with the adversities.

5.3.1 Social networks

Social networks among children involved close relationships that these children relied on formally and informally. Children interdepended with these networks. Social networks around children consisted of some relatives, neighbours, friends, organisations and government facilities, sponsors and support from household members. However much the social capital was a source of challenges/adversities such as isolation and exclusion, it was also a great source of hope and support that facilitated their coping.

5.3.1.1 Support from relatives

Findings from the interviews revealed that some children have or still received help from family relatives especially grandparents. Such help consisted of advice, food and money to buy some basic needs. However much this help was vital for the children, it was not reliable and sustainable as most of their relatives later on die(d), had their own financial difficulties and needs or were often times bedridden due to illness. Relatives offered support as well in terms

of food, clothing and paying for medical care but they were reported to be having their own needs and problems and they rarely offered any kind of support to such children. Children reported that most of the relatives are up to helping in return for family property or using these children as house helps while others are individualistic mainly due to their economic abilities as John noted;

So my aunt I tried running to her for help after they had chased me from the house and she refused to help me. [...] I insisted on asking her but she said she was also poor

Just like John Agatha noted that;

For the relatives, each one cares for their own children and family
For Mathew and Martha, they noted how they have received help from relatives as for example, Mathew noted;

When things are bad at home we go to our grandmother or any other relative and sometimes they give us like money or food. We cannot go there each time but sometimes when we are stuck they help.

Finding from the study relate to the study by Kip et al. (2010) that articulates the declining and unreliable support from family and relatives and often associated with giving help in the guise of grabbing property of the children. Kipp et al. further articulated that relatives provided food, money, emotional support, shelter and other materials to children in CHHs which is similar to these study findings. Relatives identified by children in CHHs are part of the environment and systems in the social systems theory and life model as they affect/influence the lives of children (Gitterman & Germain, 2008; Teater, 2010). The findings on how relatives enhance the coping of children in CHHs concurs with a study by Kurebwa and Kurebwa, (2014) where relatives offered support to children in CHHs but such help was on a decline due to economic difficulties.

5.3.1.2 Help from neighbours

Neighbours were reported to be vital in the lives of children who headed families as they are the immediate people they would run to when there is need. Neighbours helped in terms of looking after the young ones as the elder children went to look for survival, offered food, clothing, accommodation, advice, contributed to rent and at times gave them money. Even though some gave such help for free, others gave conditional help where children would in turn fetch water, wash clothes, clean the house or offer labour while renovating houses. The help from neighbours was so instrumental in coping of these children as John reported;

Those neighbours also help me in terms of clothing's. Because they can see that the other one has an old clothe yet for them they have old clothes they do not use and they give it out to be put on. There is a neighbour they demanded me rent from September up to November and there is a neighbour we call "kojja"

(elder). He gave me a full month's rent as he gave me seventy thousand and said I pay. I also added on and paid because for them they are in a house of ninety thousand a month and for us it's for seventy thousand

Martha also received help from the neighbour and had this to say;

You have to sacrifice and as I told you that sometimes you get food and other times you won't get it. Or even sometimes my neighbours give me some food or other times they do not. [...] No one else save for my landlady who gives me food when they have and when they do not have I starve [...] They might tell me that they give me food and in return they need you to bring them jerry cans of water. So I go and fetch it.

Such support from neighbours attests to the findings from the study carried out in Rwanda that pointed out that neighbours are instrumental in CHH's lives as they offered encouragement to such children, helped them in chores such as cooking, offered counselling and guidance all paramount to the coping and functionality of children in CHHs (Ward & Eyber, 2009). Neighbours also form part of the environment around children that facilitate their coping. As articulated by the life model and social systems theory (Gitterman & Germain, 2008; Teater, 2010) individuals utilise the environment around them for resources and opportunities just as children utilise help from the neighbours.

5.3.1.3 Support from friends

Children who headed households reported to have a range of friends whom they can run to in case of need. These consisted of children (peers) who were facing similar situations and challenges and others adults. Peers were instrumental in informing them about the available job opportunities, offering employment, giving them social and emotional support, encouraged them and at times even contributed money to meet urgent needs. John one of the respondents reported to have received support from friends;

[...] because the friends I work with we wake up and go to work together at times and some come to wake me up to tell me it's time to go and work because we pass via the railway and that place is dangerous at such a time when you pass alone it's not safe so we go and work. There are times when I do not work or do not do much like I get three thousand and they give you some on their money and you end up with ten thousand and they say they have helped me in that way so I can start from there. [...] the friends what they help me not to get bored because they are even the ones that got me that [...]. They told me to go with them and when you are there they call you to do this and that. It's better than staying at home as you go and get something to make you busy [...] They help me not to be bored and idle. When you are idle you get many thoughts but when they come and tell me to go play football since there is a football pitch near our place of residence. We play football, interact and go back home.

Agatha who had also spent a month sleeping on the streets also was helped to get accommodation by her friend until she saved enough to rent her own room;

There a story I have when my brother had just left me with his children, it was so difficult. He left them with me when he had not informed me and time came when the landlord chased us from the house. We stayed outside for some time [...] I had to look for a cheaper house but I first stayed at my friend's place though but they couldn't stay with us longer since we are three. So I started washing clothes for people until I got enough money for cheap rent.

Children as family heads were able to mention how friends are so vital in their coping. The study finding relate to previous literature as identified by Kipp et al. (2010) who articulate the notion of friends and how they help children in CHHs. Children as family heads interact and interdepend on their friends who form part of the social environment articulated by the life model and social systems theory (Gitterman & Germain, 2008; Teater, 2010). These are paramount to their functioning as a system around them they harness for their benefit.

5.3.1.4 Support from NGOs and government facilities

From the interviews, children identified NGOs and government facilities to be part of the wider community that is also instrumental in their coping. Some children reported having received or still received some help from organisations which has been fundamental to their coping. This help was in form of school fees, food and clothes. This help was though reported as unsustainable as most organisations ceased operations due to COVID-19 and other issues leaving children with no help or where to run to. This greatly disrupted the help that was being given to such children as for example, John said;

I had an organisation that was looking after me to pay my school fees. But it reached sometime and it couldn't manage us and they started letting us go one by one

To John, this organisation was his only hope for his studies and he reported that after the organisation ceased operations, he also had to drop out of school.

Children also reported that there is no direct support that the government provides for children who head families. Some children reported to have used a government facility especially schools and hospitals but decried of poor service delivery and unreliability of such facilities that has resulted to them shunning such. Agatha for example used a hospital facility and had this to say;

It is difficult as you know such hospitals you make a line for the whole day and that day is gone as you cannot do anything else productive. The child can be sick but also there are no drugs in hospitals yet expensive in private clinics they are

Findings from the study relate to study finding by Ward and Eyber (2009) in Rwanda where organisations offered help to CHHs in form of providing food, school fees, school uniforms, beddings and other material things. In a study by Kurebwa and Kurebwa (2014), it was also revealed that organisations were paramount as they provided health needs, education needs and other welfare needs just as how findings from this study reveal. The study also was

in agreement with study findings by Kipp et al. (2010) that pointed to the declining support from the government as from the study children noted that they receive no direct support from the government and the available facilities from the government are characterized by poor service delivery. NGOs, Church and the government also form part of the systems around the child that have a direct or indirect influence on the functioning of children. They in particular form the social environment as noted in the life model (Gitterman & Germain, 1976; Teater, 2010).

5.3.1.5 Support from sponsors

From the interviews children revealed that they get help from sponsors which facilitates their coping. These were identified to be individuals and well-wishers who choose to visit slum areas and offer unconditional support to children who head families. Children reported that they received support in form of clothing, food, money and in lucky situations school fees. This support however comes once in a while hence unreliable but instrumental in enhancing their coping. Mary for example noted that;

Sponsors just come to the slums looking for children and families that cannot take care of themselves. Not that they always come but some times and they bring like food, money or clothes. [...] like these children their school fees is paid by a sponsor though he does not give us the money but pays to their school directly.

Sponsors lie in the description of the environment by children which they rely on for coping relating to the environment around the individuals and how it influences their functioning as noted in the life model and social systems theory. This was instrumental as it reinforced their coping abilities which relates to the life model and social systems theory (Gitterman & Germain, 2008; Teater, 2010) that contend that individuals utilise resources from networks in their environments.

5.3.1.6 Support from household members

From the interviews, five out of the six household heads asserted that they have been able to cope because of support from household members ranging from siblings to nieces and nephews they were looking after. Having dependents gave children as family heads a reason and motivation to work harder and a sense of responsibility. Knowing that they have someone at home waiting for a meal and any other kind of support according to children made them indebted to do what it takes to bring something home. Household members also partnered/worked together on household chores such as cooking, washing clothes, cleaning the house and other household errands. The division of labour eased the work of the household head as less time would be spent on household chores meaning much time would be dedicated to looking for survival means and working. As a household, they also made major decisions together related to how to access major needs and as a result, they would resort to several means together such as saving. This was reported to be relieving to the family heads as they reported that their siblings putting such efforts was not only motivational but supportive. Household members participated in looking for survival through doing odd jobs, picking food, selling

merchandise such as fruits, fresh foods among others and begging which supplemented what the household head got. In an interview with John, he revealed that he gives his siblings fresh foods to hawk and the returns are saved for a particular item while what he works for goes for food. This was revealed to be vital as they reported that sometimes they are unable to find work and on reaching home they find when the siblings managed to do some work for a living. The overall support and hard work by all household members facilitated and eased the role/responsibilities of the household head which eased the coping.

Household heads however noted how the work done by siblings was unsafe to their health as they were involved in heavy and unsafe work at a younger age. They feared that they will learn bad habits, be exposed to exploitation and abuse or at worst die. They however noted that they had no option as Mathew noted;

you cannot stop them from working yet you have nothing to eat in the house. You have no starting point since you yourself haven't been able to do anything or even do enough. You just let them go but pray they do not fall into bad hands or be abused by criminals in the city..... Sometimes they are beaten and their property confiscated by adults but they have nothing to do about it

Findings relate to the systems theory as siblings in the household form a subsystem (the immediate family to the head of the household) that influences the coping of the household head (Teater, 2014). Results also concur with Thwala (2018) who noted from her study findings that siblings offered emotional support to the younger ones. Findings attest to findings by Kakuru (2018) in Uganda who articulated that siblings in CHHs cared for each other, older siblings taught younger ones how to live and cope without parents and also helped in engaging younger children in home tasks which became vital for their coping.

All in all, as Ungar (2008) stresses, the social networks form part of the outside of the child that enhances resilience. Gitterman and Germain (2008) noted that resilience is not merely out of personal attributes but due to their interactions with the environment. Indeed, children have interacted with such which has facilitated their functioning. All in all, children from interviews revealed a range of social networks and how they facilitate their coping and ultimate functioning. These social networks relate to the social environment articulated in the life model which individuals interact with. Social networks influence interpersonal processes and behaviour which eventually affects functioning as they not only facilitate functioning but also bring about adversities, responsibilities and perceptions through socialisation which individuals in this case children have to cope with (Gitterman & Germain; 1976; Gitterman & Germain, 2008; Teater, 2010). Making the environment responsive as articulated by the life model would involve making the social networks around children function to be able to meet the needs of children as family heads. Children transit in the context of their environment with peers and friends which bring about adversities, opportunities, roles and responsibilities that all influence the coping of children as family heads (Gitterman & Germain, 2008).

5.3.2 Involvement in income-generating activities

All children that participated in the study reported that they engage in various income-generating activities to be able to cope with the adversities. Children reported that they did not

go far as education is concerned with the most educated having stopped in senior three. They articulated that there are no formal jobs available due to their limited education and skills and have as a result resorted to being involved in making/involving in self income-generating activities mainly through hawking or street selling. They are involved in petty merchandise selling such as selling food items such as popcorns, onions, tomatoes, green paper and aubergine/eggplants among others. Others especially one female reported to be skilled in hairdressing something she does when she gets customers. Most males were also involved in washing cars, motorcycles and umbrellas. Females also were involved in washing clothes for other people which even saved them from spending on the soap as they would wash using the one offered by the owner of the clothes. Other activities also included fetching water, collecting and selling tyres and other plastics. Children however reported to find grave challenges in such for example arrests from city authorities for trade licenses and arrests from security operative due to operating past curfew hours that were instituted as a measure of combating the COVID-19 pandemic. Others included criticisms from people, theft, verbal, physical and sexual abuse. John narrates how he was arrested for selling items past curfew hours;

I was arrested in curfew because I had worked from [...] at night so they arrested me and took me to clock tower police. I was there but I knew that when the time reaches for my siblings to sleep, they will not close. They will leave the door open.... Yes. Someone can move in say a thief or any other person and harms them since they are girls. When I slept there I thought they would release me but in the morning they seemed not to mind about releasing me. I reached a point and needed any person to come and help me but I did not have any people's number whom I could call to come and help me and I did not have a phone. I spent there four days but my thoughts were far as I did not know what was happening at home. I couldn't imagine what they are up to or what they have eaten and in cells I did not know anyone who could even give me food so I was also hungry but what I thinking of most is home. How is there, were they robbed and everything in the house taken a way? When I was released now I was thinking about capital as I wanted to again get capital and start working.

Income-generating activities also involved offering labour in return for food, money, accommodation and clothes. Labour among females was in form of loading and offloading of trucks in the city and loading sand and soil on trucks. Both males and females all engaged in carrying luggage from the market to people's homes and vehicles. These activities were reported to be dangerous and unsafe to these children as James reported;

He was dealing in buying old car tyres as he takes them to [...] factories. Those are the jobs we did every time. We would go to collect them and I worked there for like three years. But that job required much energy and was meant for adults/older people. I thought that if I continue doing such a job by the time I reach the years of doing my own work I will be affected badly

Findings from the study relate to the social systems theory in that the avenues of work for children in CHHs lies in the environment around children. These children are able to interact and interplay with the environment to be able to get income (Gitterman & Germain, 2008;

Teater, 2010). The environment around the children is a source of resources through selling merchandise and hawking as well as getting work such as washing clothes, washing cars, offering other labour among others. All these are a result of the interaction between the child and the systems around them which enables them to get income that facilitates their coping. The environment is also a source of adversities such as abuse and arrests which deprives them of usage of resources in the environment (Gitterman & Germain, 2008; Teater, 2010). The environment around the child further relates to the resilience and strengths-based perspective as they are able to find survival and inspiration from the environment (Healy, 2014, Rutter, 2006). The results from the study also relate to findings from other studies such as van Dijk, (2008), Ward and Eyber, (2009), Thwala, (2018) and Kurebwa and Kurebwa, (2014) that all point to the several income-generating activities children in CHHs are involved in all in the informal sector just as the study reveals such as selling items from handwork, selling food items, offering labour in households through housework and washing, offering labour at construction sites among others.

5.3.3 Family land

Family land also formed part of the resources available to children imperative to their coping with adversities. Some children revealed that they were lucky that their parents left them with land which they cultivate for food and they sell others to meet other basic needs. This land however being at the risk of being grabbed by relatives has been vital in providing food for such families. Children in such families reported that they only buy what they cannot produce for themselves or buy in times when they are unable to plant for themselves. They always count on their gardens which has helped them cope with food scarcity. This was however among the two families as other families had no land as they rented in slum and relied only on buying for consumption. Children without land mentioned how they wish their parents had left them with land that could be a great asset and help in times of need. In an interview with Mathew he noted that;

Our parents left us with some land but the bad thing is that some has been stolen by our relatives. The other we use it to plant crops which we feed on and when they yield highly we even sale and buy anything we want. So we get majority of the food from our own gardens and buy a few [...]

James on the other hand noted that;

I wish my parents had left some land for me. I would also plant some food and be assured of a meal but there is nothing.

The findings of how children utilise land to meet their needs concur with findings derived by Evans (2012) in a study conducted in Uganda and Tanzania where children inherited property from their deceased parents including land which enhanced their coping. Finds further relate to studies by Kipp et al. (2010) and Ward and Eyber, (2009) that pointed out how children in CHHs used the land acquired from their parents for food production and also selling surplus to meet other needs. Having family land points to the strength-based perspective that articulates

the focus on the resources an individual has and building on them to enhance functioning (Healy, 2014). Land also forms part of the physical environmental resources around the child that facilitate their functioning in form of meeting their needs (Gitterman & Germain, 1976).

5.3.4 Religiosity

All children during interviews noted how being religious has been helpful in enabling them to cope with adversities. According to the children, being religious or the concept of religiosity meant belonging to a certain religious denomination and believing in a supernatural being. They noted how it has instilled faith in them that the bad situations they are in will change. Being religious further entailed going to church which gave hope and taught them the importance of hard work to change the *undesirable situations* they are in. They also noted that they have learnt morals and how to behave in public something that has helped them be trusted with work hence earn a living. Children have been able to learn the importance of sacrifice from being religious which has been instrumental in their coping. They have come to appreciate people who have sacrificed for their wellbeing and in return, they have learnt how to sacrifice for their sibling's welfare. They have many times slept hungry but made sure that their siblings get something to eat. For example, James noted that;

Sometimes I go to church so I consider myself as a religious person. That is why I cannot go to steal and make other people cry because in me I wonder if they were doing the same to me. I have learnt a lot from [...] church. I learnt how to put efforts on work and compassion for others.

John also noted that;

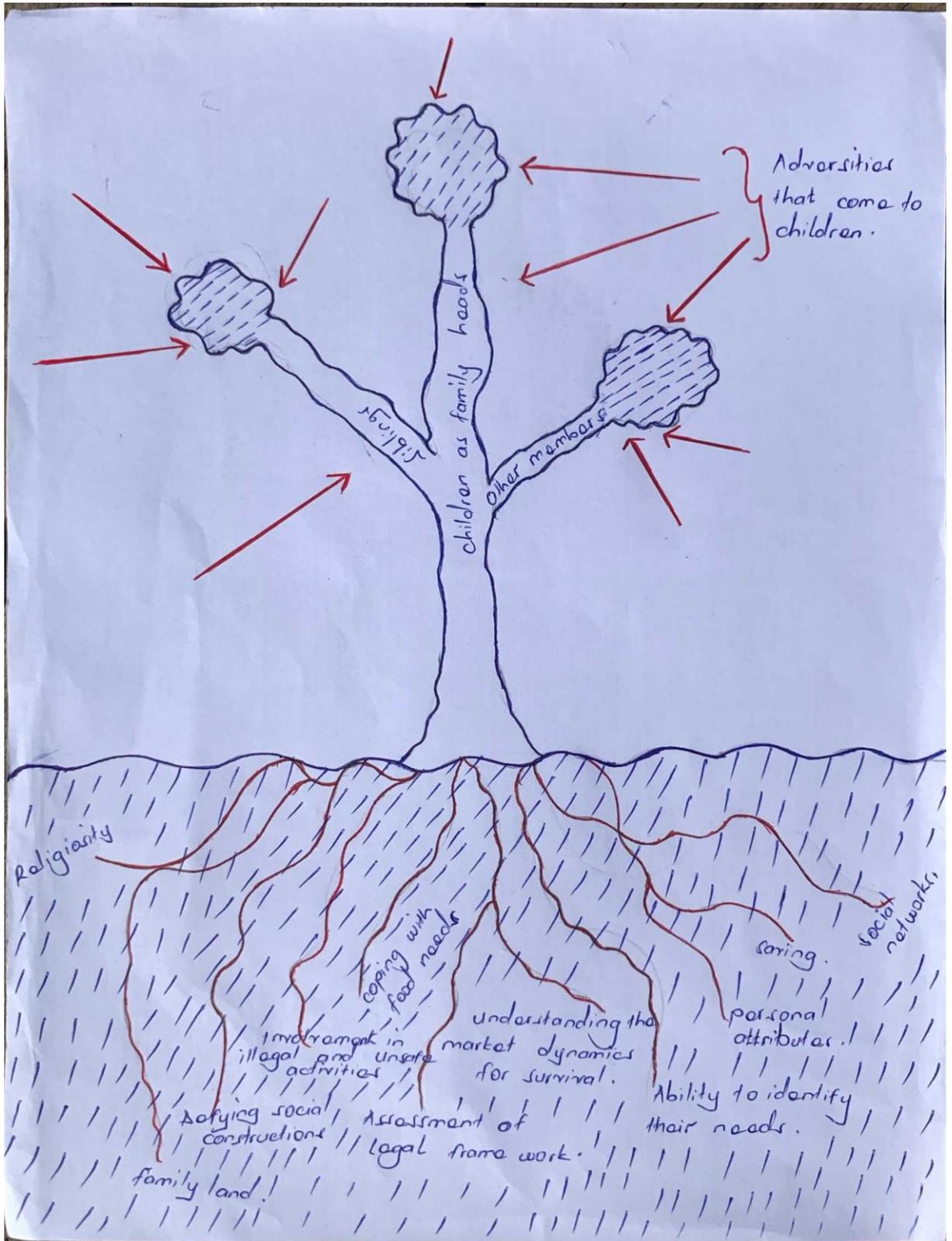
We used to go to church with our mother and I can say we learnt a lot from there. You see in church they teach about caring for others even more than you care for yourself something I have practiced in the house I head now. You are in need but sometimes someone is in more need than you. Being religious has also taught me a lot patience and having hope that things will change one day and indeed how I was many months ago is not how I am now.

Study findings concur with findings by Thwala (2018) who noted that the church was important as it instilled courage and resilience among children in CHHs. Children prayed as an aspect of being religious which gave them relief and were able to learn about morality and other life skills. Through meeting at church children were able to share with other people their concerns. This relates to the study such as how being religious has instilled hard work and morality attribute that have helped them cope with adversities. The study findings also relate to a study carried out in Rwanda by Ward and Eyber (2009) where the church was paramount in that these children joined in activities such as choir where they interacted with others facilitating their confidence and happiness. Being religious relates to the strength-based perspective as it relates to the capabilities and the partnerships that facilitate the functioning of the children (Healy, 2014). Being religious also instils resilience which relates to the resilience perspective as it instils the positive energy to cope with adversities (Skovdal et al., 2009). Belonging to a church as a form of religiosity also relate to the environment around children

and the interactions which facilitate socialization and functioning. Children are able to fend on such resources to be able to cope with adversities (Gitterman & Germain, 2008; Teater, 2010).

I present a diagrammatic representation of the study and the study findings in relation to the coping mechanisms of children as family heads in CHHs.

Figure 2: Diagrammatic representation of the study findings



Source: Researcher

The image above summarizes the study findings in relation to the coping mechanisms of children as family heads in CHHs. The tree represents a child as a family head and branches represent all other household members in the care of the child. The winds represented by arrows hitting the tree represent the adversities that children encounter in their lives. The tree roots represent a range of mechanisms children tap in to be able to face the adversities and be able

to continue standing. Indeed, as the roots support the tree not to fall, some roots are stronger than others and one shaken the whole tree can shake. If the trees are reinforced positively they enable the

CHAPTER SIX. CONCLUSIONS

This section presents the summary of findings in relation to study objectives, recommendations for social work practice, social policy and implications for further research and conclusion.

6.1 Research conclusions

This study explored the several mechanisms children who head CHHs use to cope amidst the adversities they go through. It intended to look beyond the challenges to the coping mechanisms of children as family heads in child-headed households in Kampala district Uganda. It was paramount to note that children face multiple adversities but they manage to move on and thrive. The reasons behind their thriving and the coping mechanisms were explored in detail among six children as family heads. In particular, the study findings pointed to the several strength and abilities these children possess such as the ability to identify their basic needs, the ability to understand the market dynamics, their ability to reflect and make an assessment of the legal framework, saving and personal attributes. The study also pointed to other coping mechanisms both positive and negative these children revealed such as; getting involved in illegal and unsafe activities; coping with food needs through reducing the number of meals taken per day, buying and stocking cheap-lasting food, cutting down on the amount of food taken and picking and begging food and defying social constructions. The study also revealed the resources the children have such as; social networks in form of support from relatives, help from neighbours, support from friends, support from NGOs and government facilities, support from sponsors and support from household members; involvement in income-generating activities; family land and religiosity. Scrutiny was done for the study findings and they related to the life model and systems theory that focuses on looking at the environment in form of systems around an individual (Gitterman & Germain, 2008; Teater, 2010). The results pointed to how children relate to the environment and systems around them such as friends, neighbours, relatives, government, sponsors, NGOs, the market among others. The life model was also eclectic to other perspectives such as systems theory, strengths-based perspectives that focused on the hopes, strength, capabilities and aspirations (Healy, 2014) of these children who head households. The life model further related to the resilience perspective in form of how an individual is able to cope with adversity. Resilience is as a result of interaction between a person and the environment and not only personal characteristics (Gitterman & Germain, 2008; Ungar, 2008; Skovdal et al., 2009). Strengths, coping mechanisms and resilience all stemmed from the environment and the systems around these children.

In conclusion, the improvement of the welfare of children in CHHs requires a genuine involvement of stakeholders at all levels (family, community, district and national levels). This means involving children from their world views, experiences and environments. This is possible through strong state capacity in terms of laws that give space, voice and audience to children. It also entails the quality of the governments to implement programmes that affect child welfare (Lansdown, 2009; Rothstein, 2011; Fukuyama, 2014). Social workers being agents of change must develop skills to meaningfully engage children and other stakeholders

in the realization of meaningful and contextualized child welfare. Children further need an enabling environment (Percy-Smith & Thomas, 2009) for their functioning. Therefore, it is imperative to note that such an environment can be understood when there is a focus on the environment of children and how it affects their coping. As indeed noted by Gitterman (2009) social work practice in the life model should focus to create a fit between people and their environments. Social work practitioners stand as a pillar in the life course as they work with individuals to manage life transitions and be able to tap into the resources in the environment (Teater, 2010).

6.2 Implications for social work practice and social policy

According to the IFSW (2014), social work practice aims at creating social change through many spheres including social policy. Social workers work with people in communities to realise a change in their individual and community wellbeing (IFSW, 2014). From the interviews, several recommendations stood out for social work practitioners and social policy as noted below.

It is imperative for social workers and social work practitioners not to only focus on the challenges of client's/service users but also to look beyond that to what they can do. Focusing on the strengths of service users is empowering but also helps to give a narrative of building on what clients already have for functioning. Children indeed have several strengths if built on can create sustainable and owned solutions.

From the study, participants expressed the need for targeted policies for example through enforcing the legal capacity to ably manage/handle the cases related to child-headed households. Children noted how they are abused and the perpetrators often go unpunished citing the gaps in the law enforcers such as the police. It is imperative to enhance the capacity of such stakeholders to ably handle such cases.

There is also a need for policies and programmes through interventions to meet the needs of these children ranging from housing, food, clothing, medical, education and other basic needs. Children pointed out the several needs they encounter and how there are no efforts by the government to give a helping hand. The government should prioritise such a vulnerable population to enhance their functioning.

6.3 Implications for further research

There is limited research in the context of Uganda that points to what children in CHHs are able to do themselves and cope with the several adversities they encounter. Indeed, much has focused on what children are facing in terms of challenges and less has been put beyond their challenges. More research should indeed focus on capability notions

This study focused on what children as family heads do to cope with the adversities but it would be worth getting a perspective of other family members under the headship of a child. As much as these children face more or less similar challenges, each child manages what can be unique from the other child. It would be important to tease out such notions from other members of the household.

Further study can exclusively explore the notion of gender and how this influences coping in CHHs. The study was vital to note that children in female and male-headed indeed have different experiences in terms of coping with adversities.

Further research might also focus on the extent to which the CRC has been met in regards to the life and welfare of children in CHHs in Uganda.

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APPENDIXES

Appendix 1: Information letter and consent form



Erasmus
Mundus



BEYOND VULNERABILITIES: EXPLORING THE COPING MECHANISMS OF CHILDREN AS FAMILY HEADS IN CHILD- HEADED HOUSEHOLDS IN KAMPALA DISTRICT UGANDA.

Dear respondent,

My name is LAMBERT BUZAARE a Ugandan international student of the European Master in Social work with families and children at the University of Gothenburg. I'm conducting a research study titled "Beyond vulnerabilities: Exploring the coping mechanisms of children as family heads in child-headed households in Kampala district Uganda" that is children as family heads in child-headed households. It considers those entirely on their own not into someone's care, below 18 years and above 10 years of age and living in the vicinity of Kampala district.

The information below provides an overview of the research prior consent to participate.

Purpose of the study.

The study is intended for academic purposes for a master's degree programme at the University of Gothenburg. It is part of the University requirements for any social work master's student to conduct a research study and produce a report that is assessed as a prerequisite for completion of the programme and subsequent graduation.

Why children in child-headed households?

Currently there is scanty literature concerning how children in child headed families manage to move and cope with adversities. A lot of studies have been carried out that have identified their needs and the challenges they encounter but social workers from the strength perspective need to focus on the strengths, abilities, resources and coping strategies children use. This study will hence focus on enhancing on the existing scanty literature on how these children cope and manage to move on despite the several difficulties they go through

Why have I been chosen?

You have been purposely selected because you are believed to have information about the theme of coping mechanisms for children in child-headed households. Over all 6 children from 6 households will be engaged as a case.

What if I do not know the answers?

The research is about understanding several mechanisms that children use as they face the different challenges as family heads. There is no right or wrong answers, but it is important to be honest and be prepared to share your thoughts about your experience, your understanding and view of coping with adversities.

Are there benefits from the study?

There are no direct/immediate benefits that will be gained from participating in this study. However, your information and experience shared will help enlighten the world on how you manage to move on amidst the challenges. This information might also be used by agencies working with children and government agencies to design targeted policies and interventions aimed at building on the already existing coping strategies that you and other children have.

What are the likely consequences for participation in the study?

There might be minimal risks that may relate psychological and emotional discomfort but other than those there are no major risks. Should you feel uncomfortable to continue or to respond to any question, please feel free to stop the interaction. The fact that the study includes personal experiences, it may trigger emotions. Breaks will be given during the interviews and but also a local agency [...] and a professional social worker [...] are available for emotional support whenever there is need (both during and after the interviews).

Anticipated costs include time where approximately one and a half hours will be spent reviewing this information form as well as conducting an interview. Breaks will be provided during the interview depending on your convenience. You will also choose a place that is convenient for you to carry out the interview from that ensures privacy. Children above 15 years will be asked to consent on their own as they are deemed mature to make informed choices while those below 15 will chose a suitable adult whom they are comfortable with to be or not be around during the interview and consent on their behalf. There are no additional costs for the participants.

How will the interview be conducted?

The interview will be conducted by asking open ended questions about your experience as a family head in a conversation mode. You will be requested to share your experience and information that you are comfortable with on how you have managed to cope with the adversities and difficulties involved as a child who heads a family. Our conversations will be audio recorded (most preferred method) to avoid missing any vital information which will be later be transcribed for analysis. In case you are not interested in being recorded, notes will be taken to record the information shared. The Audios will not be shared with anyone and once the research process is done, these audios will be discarded.

How safe is the information I provide?

I would like to assure you of confidentiality and privacy of information provided. Your information will be accessed exclusively by me and, in an unlikely incident, by my research supervisor. Your personal information will be kept anonymous where by extra “care” will be given to the identities and information provided. Your name won’t be used or even appear anywhere in the study results and instead pennames will be given to seal your identity and the information provided will also only be used for academic purposes.

Audios recorded during interviews and the anonymised transcripts will be discarded after completion of the research process.

Can I withdraw from participation during the process of interview?

Participation is entirely voluntary and you are free to withdraw at any stage of data collection without giving any reason. Please feel free to only share the information you are only comfortable with.

Thanks for reserving your time to go through this form. You may now proceed to the consent form if you agree to participate in the study.

In case you need any further information please contact me (LAMBERT BUZAARE) on the contact details below. I have also provided my research supervisor's contact in case you need any further clarification.

Researcher

LAMBERT BUZAARE

Mfamily International Student

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Supervisor

MANUELA SJÖSTRÖM

Department of Social Work, University of Gothenburg

Email: manuela.sjostrom@socwork.gu.se

Statement of consent

I have read the above information or had the above information read to me which I have understood. I have also received answers to the questions I have asked. I have understood the nature of the study and I consent to participate.

Name of participant/adult consenting on behalf of a child

.....

Signature or thumbprint/mark of participant

.....

Date:

Name of Person obtaining Consent:

Signature of person obtaining consent:..... Date:

Appendix 2: Interview guide

Semi-structured interview with Children who head families

Interview Guide

Topic: Beyond vulnerabilities: Exploring the coping mechanisms of children as family heads in child-headed households in Kampala district Uganda.

Note: Semi-structured interviews give room to a researcher to probe on the respondent's answers. The mode is not to follow questions or topics in any particular manner but rather probe on the responses of the participants. The following will guide the interview to ascertain that all topics are covered.

Guiding research questions

4. What strengths do you have a child who heads a household and how do these help you cope with the adversities?
5. What other coping mechanisms enable you to move on and manage your days amidst adversities, needs and concerns?
6. What resources are available to you as a child who heads a household and how have they helped you to cope with adversities?

Introduction remarks.

How old are you?

For how long have you been the head of this family? (how have you managed?)

How many people are in your family? (those you look after) (How do you take care of them and yourself?).

How old are your household members?

What responsibilities are you charged with? What do you do in this household?

- Medical needs
- Food
- Financial needs
- Clothes
- Shelter
- Education (school fees and other scholastic materials)

Livelihood activities engaged in and how they influence coping

Influence of the community (friends, relatives, peers, neighbours and other community structures).

Community/social constructions vs coping

Management of multiple adversities/those that come at the same time

Household chores, sharing and management

Resources available

Personal features/attributes and how they influence coping.

NB. Probes are made based on the responses of participants