

# Access to information by orphans and other vulnerable children in the Ohangwena Region<sup>1</sup>

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School principals and teachers must understand OVC problems and assist with information.  
[15-year-old boy, Ohangwena Region]

## Introduction

This paper is based on a larger study conducted in January 2009 in the Ohangwena Region to identify the information needs and information-seeking behaviour of orphans and (other) vulnerable children (OVC). The study found that financial assistance, exemption from school development funds and child care support were among the most pressing information needs for most OVC. The findings also show that radio was the most popular channel for obtaining information among respondents at all levels of education. Other channels were church leaders, regional councillors and traditional leaders. The more educated respondents also mentioned newspapers as a preferred channel for obtaining information. Respondents with low levels of education, i.e. Grade 7 and below, preferred to consult friends, relatives and teachers as sources of information, whereas respondents with Grade 8 and above preferred radio, newspapers and teachers as their main source of information. In general, the study reveals there is an acute shortage of appropriate information for OVC to successfully understand and manage their survival.

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## Background

Namibia, like most countries in sub-Saharan Africa, faces a major challenge in managing OVC to ensure they are taken care of and lead productive lives. Although a number of studies have been done on several aspects of the OVC situation in Namibia, none has been undertaken on OVC's access to information in the Ohangwena Region in northern Namibia. Ohangwena was selected for this study because, among Namibia's 13 Regions, it has recorded one of the highest percentages (33%) of OVC residents. Others with high numbers of OVC residents are, in descending order, Caprivi (42%) Omusati (34%), Oshikoto (32%) and Kavango (31%).<sup>2</sup>

According to the National Planning Commission's Regional Poverty Profile as determined through surveys in 2001, Ohangwena has 228,384 inhabitants, or 12.5% of Namibia's total population.<sup>3</sup> Between 1999 and 2001, the Region's mortality rate increased by 122%. On average, therefore, a quarter of all households in the Region experienced a death in the family during this period. Comparative figures for the rest of the country were only 15% on average. Clearly, the high mortality rate in the Region created many orphans, most of whom were under the age of 15. This shows that Ohangwena has the largest proportion of households in the nation taking care of OVC.<sup>4</sup> It was this large number that prompted the focus of this study.

Data from the 2006 Demographic Health Survey Report by the Ministry of Gender Equality and Child Welfare reveals that there are 250,000 OVC in Namibia overall, of whom 155,000 are orphans.<sup>5</sup>

Attempts made to meet the basic needs of the OVC by various stakeholders have included providing shelter, food, school uniforms and financial grants. One gap which has not been closed, however, is the provision of adequate information to both OVC and caregivers in the country, to empower and enable these children to manage their lives better. Access to information, as Praverand has pointed out, is a human right and the most basic of all human needs.<sup>6</sup>

An *orphan* is defined as a child between 0 and 18 years who has lost one or both parents and/or whose primary caregiver has died; a *vulnerable child* is a child between 0 and 18 who is in need of care and protection.<sup>7</sup>

On the other hand, Skinner and others define *vulnerable children* as those who have no or limited access to their basic needs, or those for whom only some basic rights are fulfilled.

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2 MHSS (2008:258).

3 NPC (2004).

4 (ibid.).

5 MGECW (2009).

6 Praverand (1980:55–58).

7 MGECW (2009:4).

The authors identify *basic rights* as including –<sup>8</sup>

- name and nationality
- a safe home and community environment
- education
- family care
- adequate food
- protection from abuse
- security from the government and community
- health care
- shelter
- love
- clothing, and
- the right to make decisions about their life.

The Ministry of Health and Social Services defines *vulnerable children* as those who live in a household with a chronically ill adult or adults, and experience hardship in coping with life.<sup>9</sup>

Additional needs have been identified by Kurewa, who points out that children also have social and psychological needs.<sup>10</sup> While *social* needs include food, clothing, and shelter, *psychological* needs include the need for constant counselling because of the emotional problems these children face, the need to be loved, respected and accepted, and the need to feel a sense of belonging. Kurewa's study concluded that most AIDS orphans were ignorant about their rights.<sup>11</sup> However, although the author identified different needs for children, there was no mention of the need for information.

Unfortunately, the reviewed literature is silent on the need for information by OVC. Nonetheless, these children require information on coping skills, how to protect themselves from sexual exploitation, and the risk of HIV infections. In some cases, orphaned children are heads of households and caregivers, and require exactly the same information as adults playing similar roles.

This paper draws from a study which aimed to establish the extent to which OVC have access to the information they require to meet their both their basic needs and other needs they have as a disadvantaged group in society.

## **Research objectives**

The study aimed at examining OVC's access to essential information in the Ohangwena Region that allows them to cope with their daily lives. The specific objectives of the study included the following:

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8 Skinner et al. (2004).

9 MHSS (2008:256).

10 Kurewa (1999).

11 (ibid.).

- To identify channels and sources of information used by OVC, and
- To establish the perceived usefulness of the identified information sources and channels.

## Literature review

The number of children orphaned due to the AIDS pandemic is increasing worldwide. OVC face many problems that force them to seek information that will enhance their chances of success in solving the many problems and challenges they face in their daily lives. As Chitiyo and others as well as Barna point out, these children suffer from emotional trauma from losing their parents or caregivers, who in some cases die after a long illness.<sup>12</sup>

Under these circumstances, older children assume parental roles and responsibilities by taking care of sick parents/caregivers and siblings. Abebe and Aase term these *care-giving and care-receiving practices*.<sup>13</sup> However, such additional responsibilities affect the child who, in some cases, ends up dropping out of school. As Chitiyo and others postulate, these additional responsibilities overstrain orphans physically and emotionally.<sup>14</sup>

Another problem is the increasing number of OVC who do not attend school or drop out permanently due to economic hardship because their parents or caregivers cannot afford school fees and uniforms. As Ainsworth and Filmer argue, the increasing number of OVC in developing countries has come about as a result of personal tragedies resulting from social and economic problems.<sup>15</sup> The danger is that they will acquire inadequate education, thereby limiting their own and their country's future.

After the death of the parent/caregiver, children may experience stigmatisation, abuse, and other human rights violations, including name-calling, denial of access to education and shelter, or being forced to engage in unprotected sex – in turn making them more vulnerable to infections like HIV and other sexually transmitted infections. Problems such as these will impact negatively on the children's mental well-being.<sup>16</sup> Thurman and others point out that children and young people suffering from emotional distress are more likely to show signs of behavioural regression and withdrawal from the community.<sup>17</sup> Psychosocial intervention is absolutely crucial for these children to manage their emotions positively.

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12 Chitiyo et al. (2008:384–392); Barna (2005:475–484).

13 Abebe & Aase (2007:2058–2069).

14 Chitiyo et al. (2008:385).

15 Ainsworth & Filmer (2006:1099–1128).

16 Wood et al. (2006:1923–1933); Chitiyo (2008:386).

17 Thurman et al. (2008:1557–1567).

## Methodology

In January 2009, research was conducted in Ohangwena to determine the information needs and seeking behaviour of OVC. The respondents lived in the Region under study, and hailed from the Eenhana, Engela, Ohangwena and Ondobe Constituencies. A total of 368 residents, aged between 8 and 18, participated in the study.

The Ohangwena Region lies in northern Namibia. It shares its eastern border with the Kavango Region, its southern border with Oshana and Oshikoto, and its western boundary with Omusati. There are 11 Constituencies in the Region, namely Eenhana, Endola, Engela, Epembe, Ohangwena, Okongo, Omulonga, Omundaungilo, Ondobe, Ongenga, and Oshikango. Only four constituencies were sampled for this study, as indicated earlier.

In respect of research procedure, the first step was to seek permission from the Ministry of Gender Equality and Child Welfare to conduct an investigation on OVC in Ohangwena. The second was to communicate with traditional leaders and regional councillors to inform them of the intention to carry out the study and obtain their cooperation and support. The third was to recruit and train five suitably experienced research assistants who were fluent in English and *Oshikwanyama*. The research assistants were informed of the purpose of the study, what the interviewing techniques entailed the interview schedules, and the criteria to be applied in selecting participants in the field.

## Data collection instrument and selection of participants

The OVC interview schedule was made up of two parts. Section 1, which was used for gathering demographic information, had five questions. These obtained data on a subject's age, gender, education level, accommodation, and source of school development fund fees. The aim was to get personal information about the OVC and to confirm whether or not they qualified as subjects for the study. Section 2 dealt with OVC information needs and seeking behaviour, and had 13 questions. The aim of this section was to determine when, how and why information was needed, and to address problems and situations OVC faced that would prompt the seeking of information. This included the search strategies employed to obtain information; the channels and sources used to obtain it; what problems OVC faced in seeking and obtaining information; and to find out what organisations or institutions they used most often for these services.

Children participating in the study were identified by way of recommendations by key informants such as social workers, traditional leaders and teachers, using the 'snowball' sampling technique.<sup>18</sup>

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18 This is a technique whereby informants with special expertise – in this case, traditional leaders, teachers and social workers – identify children who match the research criteria.

## Presentation of findings

A total of 368 OVC participated in the interviews in the Ohangwena Region. The majority (208, or 57%) were aged between 13 and 17 years, followed by those between 8 and 12 years (93, or 25%), while the rest were 18 years old (67, or 18%).

There were 186 (51%) male and 182 (49%) female OVC interviewed, with the majority (141, or 38%) being between Grade 8–12, followed closely by Grade 4–7 (134, or 37%) and Grade 1–3 (37, or 10.1). While 23 (6.2%) had never been to school and 31 (8.4%) were school dropouts, with a few (2, or 0.6%) at college or university. The demographic data is presented in Table 1.

**Table 1: Demographic information (N=368)**

Demographic characteristics		Ohangwena Region, rural	
		N=368	%
Age	8–12	93	25.3
	13–17	208	56.5
	18–22	67	18.2
<b>Total</b>		<b>368</b>	<b>100.0</b>
Gender	Male	186	50.5
	Female	182	49.5
<b>Total</b>		<b>368</b>	<b>100.0</b>
Educational level	Never went to school	23	6.2
	School dropout	31	8.4
	Grade 1–3	37	10.1
	Grade 4–7	134	36.4
	Grade 8–12	141	38.3
	College/vocational training	1	0.3
	University	1	0.3
<b>Total</b>		<b>368</b>	<b>100.0</b>

The participants were also asked why they needed information. Their responses are presented in Table 2 according to gender. Both male and female respondents identified the following information needs: financial assistance and grants; school development fund exemption, child care support, feeding schemes, health care services, and counselling. These six topics of investigation were identified by the majority of OVC in Ohangwena.

**Table 2: Reasons for needing information, by gender (more than one response)**

Reasons for information need	Male		Female		Total	
	N=186	%	N=182	%	N=368	%
Financial assistance and grants	149	80.0	139	76.0	288	78.0
School development fund exemption	119	64.0	121	66.5	240	65.2
Child care support	48	25.8	44	24.2	92	25.0
Feeding schemes	35	19.0	30	17.0	65	18.0
Health care services	27	15.0	34	19.0	61	17.0
Counselling	23	12.0	24	13.0	47	13.0

Another question posed was on the channels by means of which respondents obtained information. The responses, cross-tabulated by level of education, are presented in Table 3.

**Table 3: Channels employed to obtained information, by level of education**

Channels used to obtain information		Never went to school	School drop-out	Grade 1-3	Grade 4-7	Grade 8-12	College/ Vocational training	University	Total
		N=23	N=31	N=37	N=134	N=141	N=1	N=1	N=368
Radio	#	17	24	29	116	121	0	1	308
	%	74	80	78	87	86	0.0	100	84
Newspapers	#	0	7	0	28	58	1	0	94
	%	0.0	20	.0	21	41	100	0.0	25
Church leaders	#	5	9	6	33	24	0	0	77
	%	22	27	16	25	17	0.0	0.0	21
Regional Councillors	#	2	7	11	26	27	0	0	73
	%	9	20	30	19	19	0.0	0.0	13
Traditional leaders	#	8	3	10	13	13	0	0	47
	%	35	7	27	10	9	0.0	0.0	13

Table 3 shows the channels that most respondents in Ohangwena used, by educational level. The participants who had never been to school preferred the radio as a source of information (17, or 74%), followed by traditional leaders (8, or 35%) and church leaders (5, or 22%). While school dropouts also preferred radio (24, or 80%), their second choice was church leaders (9, or 27%) and their third was newspapers and regional councillors (7, or 20%).

For respondents with a Grade 1–3 education, radio was a popular choice (29, or 78%), followed by regional councillors (11, or 30%) and traditional leaders (10, or 27%). Respondents with Grade 4–7 also preferred radio (116, or 87%), followed by church leaders (33, or 25%) and newspapers (28, or 21%). Respondents with Grade 8–12 favoured radio (121, or 86%) as a first choice, followed by newspapers (58, or 41%) and then regional councillors (27, or 19%). Respondents attending college, vocational training or university (2, or 100%) preferred radio and newspapers as a channel for accessing information.

The findings show that radio was popular among respondents of all levels of education, with Grade 7 learners and below preferring radio, church leaders, regional councillors and traditional leaders as sources of information, while respondents with Grade 8 and above preferred radio and newspapers.

A question on sources of information was also posed to the participants (see Table 4).

**Table 4: Ohangwena Region, Rural**

Sources of information		Never went to school	School drop-out	Grade 1–3	Grade 4–7	Grade 8–12	College /Vocational training	University	Total
		N=23	N=31	N=37	N=134	N=141	N=1	N=1	N=368
Radio	#	17	23	25	111	120	1	1	298
	%	74	77	68	83	85	100	100	81
Friends/ Relatives/ Grandparents	#	8	9	16	39	25	0	0	97
	%	35	27	43	29	18	.0	.0	26
Teachers	#	0	0	8	39	35	0	0	83
	%	0.0	0.0	22	29	25	0.0	0.0	22
Newspapers	#	0	5	2	19	36	1	1	64
	%	0.0	13	5	14	26	100	100	17
Church leaders	#	4	8	1	20	27	0	0	60
	%	17	23	3	15	19	0.0	0.0	16
Regional Councillors	#	3	7	6	15	24	0	0	55
	%	13	20	16	11	17	0.0	0.0	15



Respondents who indicated they had never been to school (17, or 74%) and school dropouts (23, or 77%) both preferred radio as their primary source of information. The two groups also chose friends and relatives (8, or 35% and 9, or 27%, respectively) as their third choice. Other sources mentioned were church leaders (4, or 17% and 8, 23%, respectively). Respondents with an education level of Grade 1–3 selected radio as their main source (25, or 68%), followed by friends and relatives (39, 29%), and then teachers (8, 22%). Respondents with a Grade 4–7 education also favoured radio (111, or 83%), followed by friends, relatives and teachers (39, or 29%). Respondents with a level of education equivalent to Grade 8–12 chose radio (120, or 85%), followed by newspapers (36, or 26%) and teachers (35, or 25%). Respondents at college, undergoing vocational training or at university both favoured radio and newspapers (2, or 100%).

From these findings, it is clear that, irrespective of their level of education, respondents favoured radio as a primary source of information. Those with lower levels of education sought friends, relatives and teachers as sources of information, while respondents with Grade 8 and above used newspapers and teachers as their secondary and third sources, respectively.

Respondents were asked to give comments on how information flow could be improved to enable OVC to access useful information. The participants' views are presented in Table 5.

**Table 5: Suggestions on how to improve the flow of information (multiple responses)**

Suggestion (N=360)	Frequency	Percentage
Government should provide information to OVC on where to get their basic needs (clothes, shoes, stationery, school bags, uniforms, food/feeding schemes)	124	38
Government should provide information to OVC on how to apply for exemption from the school development fund (“So we can study and have a better future”)	63	19
Government should build schools and houses for OVC (“Our relatives misuse our food, mistreat us, and sell our blankets”)	33	10
Councillors/traditional leaders should talk to the youth about how they can be assisted, and should advise caregivers on how to handle OVC	21	6.3
OVC such as school dropouts and Grade 10 failures need to be assisted in applying for farms, projects or job opportunities	18	5.5
OVC should be assisted with information on how to obtain birth certificates and financial assistance	17	5
Councillors should use the radio and newspapers to disseminate information such as where to get food	13	3.9

Suggestion (N=360)	Frequency	Percentage
School principals and teachers need to understand OVC’s problems and assist them with the necessary information	12	3.6
Government should provide OVC with transport to school or bicycles during the rainy session (“The school is 7 km away”)	12	3.6
Government should assist OVC with their Namibia College of Open Learning (NAMCOL) studies up to university level	9	2.7
OVC should be provided with information on how to get free medical treatment	8	2.4
Total	330	100

Table 5 provides some of the suggestions offered by OVC in the Ohangwena Region on how to improve the flow of information. The majority (124, or 38%) of OVC felt that the government needed to provide more information on basic needs areas. The next suggestion made by the biggest number of respondents was to provide more information on how to apply for exemption from the school development fund. It seems many OVC (63, or 19%) are not aware that the government has exempted OVC from paying such fees, so these children need information in this regard. It was also suggested that government should build more houses for OVC (33, or 10%) because they felt they were being mistreated by their relatives. In addition, they suggested, Councillors and traditional leaders should talk to the youth on how they can be assisted, while 21 (6.3%) felt that they should also advise caregivers on how to handle OVC. As regards OVC who had dropped out of school or had failed Grade 10, it was suggested by respondents that they be provided with farms, projects or job opportunities, since most of them became cattle herders. Other suggestions included the following:

- OVC should be given information on how to obtain birth certificates and financial assistance
- Councillors should use the radio and newspapers to disseminate information such as where to get food
- School principals and teachers had to try to understand OVC problems and assist them with information
- Government should provide bicycles to OVC to use to and from school during the rainy session, because the school was 7 km away
- Government should assist OVC with access to the Namibia College of Open Learning up to university level, and
- Government should provide free information on how to get medical treatment.

**Discussion**

The study shows that most OVC were between 13 and 17 years old, with 51% of the sample being male and 49% female.

The study found that most OVC in rural areas were likely to drop out of school, compared with non-OVC in the rural areas. Nyamukapa and Gregson<sup>19</sup> found that OVC who had lost a female parent had lower primary school completion rates in rural Zimbabwe. The findings of the Namibia studies were similar to these from Zimbabwe, which found that 54 (15%) of OVC had either never gone to school or had dropped out.<sup>20</sup> In the latter study, the emphasis was on OVC who had lost their mother, while the Namibia study did not specify which parent had died.

Both male and female participants identified the following areas as important information needs areas: financial/grants (288, or 78%), school development fund/grants (240, or 65%), child care support (92, or 25%) and feeding schemes (65, or 18%).

In respect of information channels used, radio was the most popular among all participants, with 308 (84%) responding that this was their primary source of information. This choice was followed by newspapers (94, or 25%) and church leaders (77, or 21%). It was also suggested that government should provide information on where OVC should go to have their basic needs met (clothes, shoes, stationery, school bags, uniforms, food/feeding schemes). Other OVC pointed that government should inform all OVC of the required procedures when they apply for exemption on school development funds (“So we can study and have a better future”), while a few OVC suggested that government build schools and houses for OVC (“Our relatives misuse our food, mistreat us, and sell our blankets”).

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19 Nyamukapa & Gregson (2005).

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