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The Gender Gap in Responses to the Orphan Crisis in Zambia: How well is the female Orphan catered for?

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DEDICATION

To my beloved husband, Robby, our children Priscilla, Philip and John and nephew David. Thank you very much for your support and endurance of my absence. It has been a big sacrifice indeed. I love you all.

To my dad John, and mum Nankole: You have been very encouraging and supportive throughout my school life, may God richly bless you. You laid my education foundation.

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ACRONYMS AND ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
ARV	Anti Retro- Viral
CBO	Community Based Organization
CRC	Convention on the Rights of the Child
CSO	Central Statistical Office
DFID	Department for International Development
DOVCC	District Orphans and Vulnerable Children Committee
DPU	Development Planning Unit
FGD	Focus Group Discussion
FHI	Family Health International
GAD	Gender and Development
GRZ	Government of the Republic of Zambia
HEPS	High Energy Protein Supplement
HIV	Human Immunodeficiency Virus
LCMS	Living Conditions Monitoring Survey
MCDSS	Ministry of Community Development and Social Services
MDG	Millennium Development Goals
NGO	Non-governmental Organization
NPA	National Plan of Action
OVC	Orphans and Vulnerable Children
PAM	Program against Malnutrition
PWAS	Public Welfare Assistance Scheme
SCOPE-OVC	Strengthening Community Partnerships for the Empowerment of OVC
STD	Sexually Transmitted Disease
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific, and Cultural Organization

UNICEF	United Nations Children's Education Fund
USAID	United State Agency for International Development
WAD	Women and Development
WFP	World Food Program
WID	Women in Development
ZCSS	Zambia Community School Secretariat
ZHDS	Zambia Health Demographic Survey

ABSTRACT

Zambia is one of the countries that have been hit hard by the HIV/AIDS pandemic. As parents die, they are leaving behind a huge number of orphans, because the pandemic is affecting mostly those in the productive age (15-45 years). Traditionally, the extended family has been absorbing orphans, but now it is getting overwhelmed since the problem has reached the level of a crisis. This is due to the fact that HIV/AIDS is eroding both the nuclear and extended family. However, even where members of the extended family are still there, it is extremely difficult for them to help due to high poverty levels in the country.

After realizing the incapacity of the extended family, the state and civil society have come in to help the children that are being orphaned. A number of interventions have been put in place to cushion the orphans that are falling through the cracks of the family, whom when not helped are likely to stop school, resort to the street, into prostitution and other harmful lifestyles. A number of studies have been done on the orphan crisis, that is, the magnitude, the interventions so far, and experiences of orphans and their guardians such as the situational analysis of 1999.

This study draws on this previously done research to investigate how current responses to the orphan crisis are meeting the needs of the female orphans. It critically analyzes the responses in order to understand whether they are effective in meeting the specific needs and greater vulnerabilities of the female orphans. Thus, the study highlights these specific needs and greater vulnerabilities to show that girls and boys experience orphan hood differently and so should not be handled as a homogenous category. The study examines the implications of a generalized approach and recommends a gender-sensitive approach in the provision of care which can make the OVC programs more equitable.

CHAPTER ONE

1.0 INTRODUCTION

This chapter states the problem that this study is investigating. The objectives of the research are presented, its relevance, the methodology used and the delimitations of the study. The background to the problem is reviewed and the theoretical frameworks within which the study locates itself are specified.

1.1 Problem statement

Zambia is one of the countries experiencing a high prevalence of HIV/AIDS with 16% of the population aged 15 years and older estimated to be HIV positive (CSO, 2003: 236). HIV prevalence is more than twice as high in urban areas as in rural areas (23% and 11% respectively) (ibid: 237). Recent statistics estimate that there are approximately 850,000 orphaned[1] children in Zambia (Children on the Brink, 2000 in FHI, 2002). After Uganda, Zambia has the highest proportion of children orphaned by AIDS in the world (UNICEF, 1999). By 1999, 64% of orphaned children had a deceased father, 22% had a deceased mother and 14% were double orphans (Ibid: 9).

The problem of increasing numbers of orphans gives rise to two issues thus, who should take responsibility for providing care? And how can the quality of care ensure children's wellbeing?[2] Quality here goes beyond the responses being good or bad but looks further at the suitability and effectiveness of the responses to the girl. Given the fact that girls and boys experience orphan hood differently, it means interventions should be gender specific.

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[1] In this paper, the term orphan will mean a child under 18 years who has lost father, mother or both as defined by the Zambia living condition monitoring survey report (GRZ, 1996). The 18 years cut –off mark was introduced because one is considered to be mature enough to fend for oneself after that age (GRZ, 1999:61).

[2] Well-being in this paper is understood against the various ways in which children orphaned by HIV/AIDS are disadvantaged. In addition to the trauma of witnessing the sickness and death of one or both parents, they are likely to be poorer and less healthy than non orphans. They are likely to suffer damage to their cognitive and emotional development, to have less access to education, and to be subjected to the worst forms of child labor (UNICEF, 2003).

Initiatives both by the state and civil society in Zambia have been designed to try and contain the problem of increasing numbers of orphans alongside the extended family. Since the mid 1980s, when HIV/AIDS was first discovered in Zambia, the number of orphans has kept on increasing despite the efforts that are being made. Therefore, the need to look at the wellbeing of the child to assess whether the wellbeing needs are being fulfilled, especially the needs of the girl orphan based on the premise that gender roles indicate particular gender needs (Moser, 1995:107), meaning that her needs may be different as a girl. Currently, these needs are invisible.

The aim of this paper is to highlight the specific gender needs and greater vulnerabilities of the female orphan so that programs and policies are made gender equitable. Without highlighting these specific gender needs, what is of importance to the girls will always remain out of sight and mind of the policy makers and program planners. It will mean interventions will never be gender specific.

Literature on studies done (such as the 1999 Zambia situation analysis on OVC and voices from the community by FHI, 2002), suggests that girls have got specific and greater vulnerabilities compared to boys. Girls are more vulnerable to sexual abuse, abortion, rape, illiteracy, worst forms of labor and ill-health. Girls are often kept at home as additional domestic, agriculture or informal labor and so are less likely to be educated; a greater proportion of girls than boys are victims of abuse at the hands of family members, friends, educators and strangers; a girl child is often considered a financial burden to be offloaded usually by marrying her off too early (CHANGES, 2003: 15; FHI, 2002; Fact sheet on the program on women 2001; UNICEF, 1999; UNICEF, 2003; Report on the global HIV/AIDS epidemic, 2002; Okwany, 2004; Sohoni,1998).

Clearly, female orphan hood has got specific and greater vulnerabilities that need to be considered when responding to the crisis of orphans. And I believe that attention to the girls' rights and entitlements can go a long way in ensuring their well being and enhancing equitable provisioning of social services as policies and programs get better informed.

A point of major concern is the bleak situation of the female orphan because all efforts in addressing the orphan crisis are handling the children as a homogenous category, and in the process generalizing their vulnerabilities. An example of specific needs is contained in the Report on global HIV/AIDS epidemic (2002) that states that girls often drop out of school because they assume responsibility for caring for parents who are ill, or because they must look after household duties in the parent's stead, including that of caring for younger siblings (ibid: 135). This implies that the programs that are just "dropped" on all orphans may not benefit these girls. The same report has posed the challenge to pay attention to the roles of girls and boys, and address gender discrimination. This, I believe is very key in orphan care as both boys and girls should enjoy the rights enshrined in the CRC. The paper highlights the specific gender needs of the female orphan so that she can equally enjoy the rights. Once female needs are made visible, responses to the orphan crisis can be in turn made gender-sensitive for more effectiveness. The interplay of HIV/AIDS, poverty and gender is disproportionately detrimental to girls and so the need for a closer look at female orphan hood.

1.2 Background

1.2.1 Global context of HIV/AIDS and the orphan crisis

The HIV/AIDS pandemic has created a crisis in most parts of the world with the south being hit most. Since HIV/AIDS is killing most of those in the reproductive age, it has meant a lot of children being orphaned. Children are a particularly vulnerable group among those affected by the AIDS crisis and increasing poverty (GRZ, 1999:6). The global estimations of children being orphaned by the day keep rising. Hunter, S. & Williamson J. (1994) put the estimate at 22.9 million by 2010 having risen from 15.6 million in 2000. Approximately 80% of these children, which is about 11 million, live in Sub- Saharan Africa, a region being ravaged by poverty (UNAIDS, 2002:133).

1.2.2 National context of HIV/AIDS and the orphan crisis

Zambia, with a population of close to 10 million, and once a middle-income country has suffered decades of economic decline precipitated by a drastic fall in copper prices and

heavy borrowing from the mid 1970s to mid 1990s leading to rising poverty (CSO, 2003, DFID, 2004). Per capita income in Zambia fell from $752 in 1965 to $351 in 2002 (ibid). Furthermore, these reports state that increasing prevalence rates of HIV/AIDS and worsening social outcomes have made Zambia one of the poorest and most unequal countries in the world. Zambia is now ranked as one of the Least Developed Countries with the 2003 UNDP Human Development Index placing Zambia in the bottom percentile at 163 out of 173 countries; with indexes measuring longevity of life, knowledge, and standard of living declining to below 1975 levels (GRZ, 2003:2). Currently, an overwhelming 73 percent of Zambians are classified as poor (CSO, 2003:2).

Before this pandemic, orphan hood was not a problem as such, as the extended family readily took over the responsibility of ensuring the wellbeing of the children. Extended families have assumed responsibility for more than 90 percent of orphaned children (UNICEF, 2003). Even though forces such as urbanization, migration, poverty and the HIV/AIDS pandemic itself has threatened the cohesion of the extended family, the family remains, for all practical purposes, the fundamental front line of response to the orphans and vulnerable children (OVC) crisis (GRZ, 1999). However, since HIV/AIDS is killing more of the productive age than any other age, it means that the extended family is no longer intact as those who should step in are the ones dying. This, then, presupposes that a good percentage of orphans are growing up without care. According to Dixon-Fyle (2002), psychology tells us that among the inputs necessary for us to develop to our highest potential are love, moral guidance and satisfaction of our basic needs, that is, care. Without care, he says, families and societies produce crippled beings, who at best sip at life, and at worst inflict harm on themselves, on other human beings and on our planet.

Moreover, the whole problem of HIV/AIDS is manifesting in an environment that is poverty-stricken. Poverty shapes life chances and affects the ability to secure rights (Okwany, 2004). In her analysis of urban poverty, Okwany, (2004) asserts that over urbanization leads to sprawling slums and shanty towns whose dwellers live under life and health threatening poverty conditions. The dwellings are of poor quality and are

overcrowded while lack of basic services is severest, including lack of access to health services, safe water and sanitation, and adequate educational opportunities. These locales are extremely child unfriendly places. There is erosion of mainstream values, drug and alcohol abuse are prevalent, informal unions and female-headed single parent families prevail, fertility is high as is teenage pregnancy (Okwany, 2004). She notes further that women in slums and squatter settlements are the poorest of the poor and the majority of them are illiterate, a situation that does not bode well for their children whose welfare depend upon the well-being of their mothers. Millions of children struggle for a livelihood in these slums, and a complex of factors drive the children onto the streets. These factors lead to acute social problems as growth is not matched by expansion of employment, formal housing, health or educational provision (Europa, 1994:696 in Byrne, 1994).

True to the above analysis by Okwany, is the situation in Zambia. Zambia is highly urbanized as a result of rural-urban migration with 40% of the population living in urban areas which has in turn led to over urbanization (Byrne, 1994).This is compounded by the fact that the country has had distinct economic upheavals due to structural adjustment policies with almost all parastatal and private companies shutting down. Even where the members of the extended family still exist, their ability and willingness to help is constrained. The structural adjustment program brought in cuts on health care, education and other social services. Worse still, after the 1999 situation analysis of the orphan crisis and consequent interventions in Zambia, the magnitude of the orphan problem was found to be greater in urban than in rural areas - 42 percent of the households in the urban areas had one or more orphans under their care compared with 33 percent of the rural households (GRZ, 1999:69). Nearly three quarters of Zambian children live below the poverty line with little notable quantitative and qualitative difference between OVC and others (Ibid: 9).

The prevailing environment of poverty and disease has had devastating consequences for the well-being of children, who need health care, education, good nutrition, and a safe and hygienic environment (GRZ, 2002). Thus, UNICEF (2003) states that in countries where large proportions of children are orphaned by HIV/AIDS, the odds are high that

the pandemic has had a damaging impact on a far larger number of children who are not orphans, eroding their wellbeing and the opportunities available for fulfilling their rights. These "other vulnerable children" include those who are living with HIV/AIDS, those whose parents are sick with HIV/AIDS, and more generally, children who are especially vulnerable because of poverty, discrimination or exclusion, whether as a consequence of HIV/AIDS or not (UNICEF, 2003: 13).

However, this paper only looks at the orphans as a category despite being mindful of the fact that it is very difficult to separate an orphan from the other vulnerable children. The difficulty in separating them is evidenced in the way interventions are being carried out. Programs that are responding to the orphan crisis are targeting all of the OVCs for the fact that in the common environment of poverty, both orphans and non-orphans are experiencing the same vulnerabilities. My paper focuses on the female orphan because, in addition to vulnerability of orphan hood, she also has disadvantages that are specific to her gender.

1.3 Objectives of the research

The main objective of this research is to make specific needs and greater vulnerabilities of girl orphans visible by evaluating current responses which will help in developing social policies and programs which are gender-sensitive. Focus is on highlighting the experiences of female orphan hood in the context of HIV/AIDS and urban poverty to show that girls and boys experience orphan hood differently. Once female gender needs are made visible, responses to the orphan crisis can be in turn made gender-sensitive for more effective policy and program interventions, so this research posits that girls' invisibility makes them miss out on well-meaning interventions because what is invisible is ignored and does not receive policy support (Okwany, 2004:183). This paper therefore argues that we need to consider gender roles and relations to ensure inclusive targeting (Save the children, 1997).

1.4 Research question

The study will focus on the following research question on: Are current responses to the orphan crisis effectively meeting the needs of the female orphan in the context of HIV/AIDS and urban poverty in Zambia? More specifically the study seeks to investigate:

a. What forms of orphan care are provided by the state and the civil society in Zambia?
b. How gender sensitive these responses are?
c. How are the girls and boys experiencing orphan hood in terms of the specific problems that affect their wellbeing?
d. What are the implications of a generalized approach of care in the context of HIV/AIDS and urban poverty?

1.5 Relevance and justification

Since the onset of the pandemic a lot has been done in terms of research and responses to the HIV/AIDS effects such as in the care of orphans. The extended family is taking on orphans though constrained by poverty; the civil-society including CBOs are providing needs like education, skills training, income generating activities, psycho-social counseling, etc, and the state has come up with deliberate policies and programs. Among the latest research is the 2002 research on the impact of HIV/AIDS on the lives of orphaned children and their guardians by Family Health International (2002).

This paper considers all the above efforts and argues for a gender-sensitive approach in the provision of care, which is a gap in research, policy and practice and also argues that there is not enough attention given to the quality of care. The relevance of this research lies within the attempt to evaluate and assess the gendered link between female orphan hood, HIV/AIDS and urban poverty a web that complicates her situation and hinders inclusive provisioning. The orphan problem in Zambia is mostly an urban phenomenon as revealed by the 1999 situation analysis that found more orphans in urban than in rural areas. I believe that a proper understanding of the different experiences of girls and boys will make the responses more effective. Without an assessment, there is the danger of

losing sight of needs and interests of the children, especially girls for whom the pandemic is really problematic. When we analyze gender differences, we discover that multiple demands on the girl's time affect her ability to respond to the well-meaning programs. Without understanding gender relations policies can go wrong (Pearson, 1992:312).

Much of the growing body of literature and research on HIV/AIDS and orphans does not look at the gender aspects of the responses. None look at how girls and boys seize the opportunities that come with a given project or program. If the girl is more disadvantaged than the boy in normal life, how much more is she disadvantaged during orphan hood and poverty? It draws on previous research done by the Government and non governmental organizations. Rather than dwell on the magnitude of the problem of orphan hood or whether the responses are adequate, the paper looks at the effectiveness in the light of gender. To date, few policy-makers and program planners have explicitly addressed the opportunities and constraints faced by the girls. Take for example the case of a girl who has to perform domestic chores and also go to school. Effective interventions will seek to take into account these gender roles and needs. Structuring of programs so that they are gender specific and appropriate is crucial in this regard (Save the Children, 1997). Strategies for empowering girls are the beginning of women's empowerment (Sohoni, 1998:476).

1.6 Methodology

The research is based on secondary data and the main sources have been national policies, documents and reports on the orphan problem; civil-society reports on the orphan crisis interventions; situational analysis reports; documented research studies and journals. Other secondary data is from the internet, newspapers and publications, and books from the Institute of Social Studies library on the general orphan crisis in other parts of the world. Empirical data was drawn from results of documented focus group discussions and case studies that where done by UNICEF, Family Health International and government departments. An analysis of these various studies is done as their objectives were to bring out real experiences of children who have been orphaned by AIDS. This paper goes further and traces gender in those experiences. Issues discussed

ranged from coping with parents' illness, parents' death, coping economically, emotionally, socially and physical health to their (children and their guardians) views and knowledge of which type of institutions are operating within their community and how they have been able to benefit from these. Both boys and girls were part of the study samples.

To answer the question on how girls and boys are experiencing orphan hood, and as to whether the current responses are effectively meeting the needs of the female orphan, I have used documented voices from the communities based on previously done research. To answer the question on the forms of care being provided, I have used the report on the situation analysis which used literature review on OVCs in Zambia; data review and enumeration that assessed the number of orphans in Zambia and evaluated the welfare of orphans and non orphans using livelihood indicators for poverty, residence, food security, education and health; institutional responses based on interviews of nearly 60 organizations (NGOs, donors and religious institutions); community responses which examined community based coping strategies and profiles and community thoughts on solutions to the orphan issue using focus group discussions and case studies involving groups of men, groups of women, male youths, female youths and mixed groups; and perceptions of care by an in depth study of 10 orphan programs throughout Zambia.

To answer the question on whether the responses are gender sensitive I have assessed reports from the NGO and CBO interventions as documented by UNICEF, FHI and GRZ.

Within the theoretical frameworks of Moser's tools, entitlements and rights, and state-civil society, the study shows that girls have specific needs and vulnerabilities. Additionally, the paper shows that being right holders, they have entitlements to claim from the state as a duty bearer. The frameworks show that the girl is orphaned within an environment of poverty and in a patriarchal society within which she is disadvantaged in several ways. With the illness and death of the parents, her entitlements fail and rights are placed at stake. Then responses from the state, civil society and the extended family come in but are not gender specific.

One of the major funding NGO programs that are supporting CBOs that are responding to the crisis, SCOPE-OVC, is analyzed in terms of its funding criteria and targets, achievements and limitations. This has assisted in understanding whether gender issues are taken on board at a funding level or not.

In addition I have incorporated my experience working with orphans and vulnerable children in a Government Department.

1.7 Theoretical frameworks

The paper is based on the following theoretical analyses:

The Moser Framework is used with emphasis on gender roles and needs which are used to analyze the specific needs of girls and boys in order to come up with more effective and equitable programs. This is based on the premise that gender roles indicate particular gender needs (Moser, 1995:107). The concepts of roles and needs help us to understand the social relations among girls and boys and wider society. As actors are responding to the orphan crisis, it makes sense to use the triple-role analysis in planning frameworks, because any development intervention in one area of work will affect the activities performed in the other two areas (March, et al, 1999:57). These authors say that Moser's concept of need is based on the idea that women as a group have particular needs, which differ from those of men as a group; not only because of women's triple role, but also because of their subordinate position to men in most societies. This subordination begins in girl hood.

This framework will therefore help us analyze and understand the vulnerabilities of girls within their gender roles and the opportunities coming with the orphan programs. It is for this reason that this study is using the framework despite being aware of the debate around its usage. It sees it as a starting point.

The Entitlements and Rights-Based Approach is used to understand what entitlements children have and how they fail at the sickness and death of the parents, and whether orphaned children have got any rights to claim. This framework helps us analyze the entitlements of the female orphan as a right holder as a way of making her needs visible.

All aspects are examined within a state-civil society theoretical framework wherein responses to the orphan crisis are taking place. When the female orphan is viewed as a right- holder with entitlements, it makes her situation visible to the state and civil-society. The state especially being obliged to provide for orphans in turn can be held accountable to provide the needed social services.

1.8 Delimitations and limitations of the study

This paper does acknowledge that not only orphans are vulnerable and yet has chosen to focus on the orphan only due to time constraints. Specifically, the paper looks at the female orphan within the web of poverty, HIV/AIDS and gender. The paper looks at what surrounds the female orphan in terms of the constraints and challenges in her ability to seize the opportunities that come with the responses to the orphan crisis.

Secondly, the paper does not look at all areas of need in the life of the female orphan in analyzing how well she is catered for by the current OVC programs. Focus is on education because it is a major factor in human development whereby if addressed accordingly, can equalize benefits for all children and so uplift the status of the female child. Like Sohoni (1998) cites from King (1990), education is a key indicator and determinant of status. Despite the efforts of the last few decades, girls continue to enjoy a less favorable educational status than boys and that although more educated today than before, girls continue to be less educated today than boys. She says that according to UNESCO (1988), about 60 million girls in the world have no access to primary schooling, compared to 40 million boys. With the entitlement failure of orphan hood, girls become disadvantaged in a double bind. However, other aspects of the girl's life are looked at in the process of analyzing education because of the general linkage among all basic needs. For instance, to educate the girl, one needs to have looked into her nutrition and shelter needs for her to be able to attend school. Similarly, once educated, the girl's other needs fall in place.

Lastly, focus on education has been necessitated by the fact that most interventions in the OVC programs are education- based with fewer programs on other issues. Since my

study is using previously done assessments on these programs, it only makes sense to stick to education.

Further, the study is limited to secondary data. Given the constraints of the research paper, the study is delimited to urban areas. It is also limited to the urban areas because the orphan crisis being mostly an urban phenomenon has prompted responses to be urban based. This paper seeks to assess these responses.

1.9 Conclusion

This chapter has presented the problem that this study is investigating, indicating the methodology, objectives of the study, its relevance and the delimitations. The background to the problem has been reviewed and the theoretical frameworks in which the study locates itself have been specified. These theoretical frameworks are discussed in the next chapter.

CHAPTER TWO

2.0 ANALYTICAL FRAMEWORKS DISCUSSED

2.1 Introduction

This chapter discusses the analytical frameworks that the study adopts. The paper has taken into account the three theories being, the state-civil society framework, the Moser framework and the combined theories of entitlements by Amartya Sen and rights-based approach. These approaches are important in this analysis because gender roles and needs in the Moser framework are vital in doing gender analysis that this study is advocating for in the responses to the orphan crisis for targeting OVCs to be all inclusive. Within this framework is the triple-role analysis that highlights the constraints that the girl faces when trying to seize the opportunities that come with the OVC programs. The entitlements and rights framework are important in highlighting the rights of orphans and also the entitlements that they have a claim to. The state-civil society framework situates the responses to the crisis within the state, being the first duty bearer and the civil society that is filling in the gap that the state has created.

2.1 State – civil society interaction as a theoretical perspective

The state and civil society have a fundamental interdependence as both need each other and this paper sees them as co-actors in provisioning for the orphans. The state can either play the role of co-ordination, regulation or facilitation but regardless of the role, there are functions in economy, political and social life which only the state can provide, which are to do with its particular relationship to accountability, incentives and scale (Robinson, 2000:161). Whereas the state is responsible for the provision of public services and as guarantor of the conditions of collective consumption, the developmental state often proves incapable of carrying out these tasks in an efficient or effective fashion (Fowerakor, 2001), and this is due to various reasons one of which is lack of political will. It is this failure by the Zambian government to do much that has created the gap that the civil society is filling up in response to the orphan crisis. Ideally, civil society is supposed to be a partner and acting as just one of the actors in responding to the crisis,

yet suffice it to say that the state has abandoned the care of the orphans to civil society. According to the World Bank, NGOs have gained remarkable credibility as agencies of social assistance for impoverished and marginalized social groups because they are widely seen as small, more flexible and unencumbered by political and administrative entanglements of state bureaucracies (Okwany, 2004:179). On the other hand, civil society (community organizations, interest groups, non-governmental organizations, trade unions, professional bodies and the media among others) does not have the institutional capacity to adequately handle the crisis. However, even when resources are limited, it can continue engaging with the state by lobbying on behalf of the marginalized groups and also act as a check on state monopolized power.

2.2 The entitlements and rights based approach as a theoretical perspective

This paper locates its study in the combined theories of entitlements (by Amartya Sen) and rights (CRC), as it is quite difficult to separate the two. When we talk of OVC programs being effective for girls, it goes without saying that they also have a right to life as much as boys. Woodhead and Montgomery (2003) put it that the discourse of rights necessarily invokes general claims. That is, these function as appeals to general entitlements, the generality of which is used to strengthen demands for their application in a specific situation. Devereux (1993) further argues that the word entitlement itself suggests notions of moral and legal rights. When articulated this way, we realize that one cannot talk about entitlements apart from rights.

Entitlements as defined by Sen (1984:487) refer to the set of alternative commodity bundles that a person can command in a society using the totality of rights and opportunities that he or she faces. Devereux (1993), using Sen's work of 1981 says a person's ability to command food...depends on the entitlement relations that govern possession and use in that society. It depends on what he owns, what exchange possibilities are offered to him, what is given to him free, and what is taken away from him. They categorize entitlements in two components- that which is owned by a person, or her/his "endowment"; and that which can be obtained by exchanging some of that endowment for other commodities and services.

Through the loss of a caregiver, orphans are often subject to different forms of deprivation. A sick caregiver loses their production, trade and own labor entitlements due to ill health. These entitlement failures are resource and exchange based and they affect mostly the dependent members of the family in many ways, who finally become orphans as a result of the death of a caregiver. Orphans themselves directly face the inheritance based entitlements failures both within the original family and adoptive family (Sen, 1986:13). With the death of the parent(s), orphans' entitlements fail further when property is grabbed by relatives, a growing trend in Zambia. Voices of the children and their guardians (FHI, 2003), revealed that if it were not for the relatives that grab property from orphans, the wellbeing needs of the orphans would be better. When parents die, houses, savings and other estates are grabbed from the children leaving them homeless and destitute.

The entitlements approach helps us understand what entitlements girls and boys have, when they fail, how they fail and what it means when there is entitlement failure.

As indicated above, once a child becomes an orphan, his/her wellbeing needs are then jeopardized with the failing of the entitlements. Article 27 of the Convention on the Rights of the Child (CRC) entitles children to a standard of living that is adequate for their "physical, mental, spiritual, moral and social development" (UNICEF, 1995: 8). This approach recognizes children as rights holders and not merely as recipients of services or beneficiaries of protective measures (UNICEF, 2004:37).

Orphan hood has been recognized as a public crisis and everybody agrees that children deserve help. Governments and non-governmental organizations have responded to the crisis by providing welfare services starting with the needs that providers deem as more urgent for example food, and yet children can have different priorities altogether. Some young people who have been invited to express their views deem the consequent lack of emotional support and guidance even more harmful than inadequate nutrition (United Nations, 2003:274). More of the programs in the responses are voluntary and usually short-term with donors dictating the terms, since it is believed that certain groups have the technical expertise to meet the needs of children (Save the Children Alliance,

2002:22). Cantwell (1998), puts it that this is a basic feature of crude charity (that is silent on rights) and the provider can not be held to account by the beneficiaries for the quality, appropriateness or adequacy of the assistance delivered. This leaves the female orphan at the mercy of the providers as it means that if she can not fit into the program, she is left out.

The pure "rights-based" approach is characterized by the recognition of a duty to respond unconditionally and systematically, on the basis of universally accepted principles and standards, when rights of any given individuals, groups or population sectors are neglected or violated (Cantwell, 1998:387). The Rights-Based approach brings in the realization that orphans have rights to all that other children have, and more importantly that the female orphan has rights just as much as the male orphan. Going beyond the needs to the rights entails that the duty bearers are obliged to help the orphans. This is so because they will realize that children are entitled to help, while the children also will realize their right to claim the entitlements as right holders. Thus, while the needs perspective ends up at identification and delivery where possible, rights aim for claiming which is very empowering for the vulnerable children. The Rights-Based Approach then entails that there will be various implications as duty bearers are responding to the crisis because they are now obliged to ensure the wellbeing of every orphan.

2.3 The Moser Framework as a theoretical perspective

Caroline Moser developed the Moser framework as a method of gender analysis at the Development Planning Unit (DPU), University of London, United Kingdom in the early 1980s (March et al., 1999: 55). The Moser framework has three concepts, namely, women's triple roles; practical and strategic gender needs; and categories of women in development/women and development (WID/GAD) policy approaches (policy matrix). However, this paper only uses the first two to analyze how girls and are seizing the opportunities that are coming with OVC programs.

Citing from Moser (1993:89), March et al., point out that the Moser framework questions assumptions that planning is a purely technical task. Moser characterizes gender planning as distinct from traditional planning methods in several critical ways: First, gender

planning is both political and technical in nature; second, it assumes conflict in the planning process; third, it involves transformatory processes; and fourth, it characterizes planning as debate. These authors state that the framework aims to set up "gender planning" as a type of planning in it's own right, with the goal of gender planning as the emancipation of women from their subordination and their achievement of equality, equity, and empowerment. Noteworthy is the fact that responding to the orphan crisis involves planning.

Gender roles and needs as planning concepts have proved particularly useful at the policy, program and project levels (Moser, 1995: 107). By assessing and understanding the gender roles in a given society the specific needs of women (and men) can be ascertained and addressed within projects (Moser& Levy, 1986 in The Oxfam Training Manual, 1994). She puts it that in most poor households, men have the primary productive role. Women are responsible for reproductive work – child bearing and rearing required for guaranteeing the biological and social reproduction of the labor force – but they also have a productive role as well as a community managing role. At community level, men more generally are involved in community politics. The most important planning implication is therefore that women, unlike men, are severely constrained by the need to balance these roles, with value placed only on their roles as paid laborers. Moser goes further to say that because men and women have different roles and responsibilities within the household and different control over resources, they also have different needs. She categorizes the needs into two – practical and strategic gender needs. Practical needs relate to welfare needs such as health, housing and childcare provision and are drawn from women's and girls' concrete experiences – they do not challenge their subordination in society. Save the children (1997), articulates this framework as helping to make the aims and objectives of different projects clear from the outset. Strategic needs are those that arise from an analysis of women's/girls' subordinated gender role, such as: legal rights, changes in the division of labor, control over resources (land, credit, etc.), equal pay, and reproductive rights.

This framework then tries to understand the specific needs of girls and boys in order to come up with suitable and more effective programs. The usefulness of the Moser

framework lies in the fact that, as it recognizes that women (and girls) perform reproductive and community management activities along side productive work, it makes visible work that tends to be invisible. As March et al., (1999) clearly articulate it; the framework aims to ensure that tasks are equally valued. Therefore, the roles of girls and boys will be understood as they step into the roles of their sick or dead parents. To this end, gender based programs will help achieve equity. This study however, is aware of the debates around this framework. For example, March et al, argue that the concept of gender "roles" may imply many things, one of which can imply that people have choice as in "my chosen role". The other weakness the framework has is that it handles women (girls) as homogenous category, and yet they have differences among them such as class, age, culture and ethnicity. For the purposes of this study this weakness does not arise because the data used does not have these other variables.

2.4 Conclusion

This chapter has discussed the frameworks within which the study is located. It has looked at the broader framework of state/civil society interaction, the entitlements and Rights-based approach, and the Moser framework as analytical tools in assessing responses to the orphan crisis. Consequently, the following chapter looks at state and civil society response to the orphan crisis.

CHAPTER THREE

3.0 STATE AND CIVIL SOCIETY RESPONSE TO THE ORPHAN CRISIS

3.1 Introduction

This chapter answers the question on the forms of care that are being provided by the state and civil society to OVCs, i.e. by government, NGOs and CBOs, international donors, faith-based institutions and the community. It first sets out to give an overview of the orphan crisis and thereafter looks at the institutions and organizations individually.

3.2 The orphan crisis

Zambia is one of the countries that are experiencing massive proportions of orphans and vulnerable children due to HIV/AIDS now estimated at 850,000. Currently, the sero prevalence rate in Zambia is 16% (CSO, 2003). About 73 % of the orphans are due to HIV/AIDS (GRZ, 1999). As the infected people keep on dying, more children get orphaned a situation that jeopardizes their wellbeing.

Orphan-hood is not a new phenomenon in Zambia. What has caused the crisis is the fact that while the number of orphans is increasing at a tremendous rate due to HIV/AIDS, poverty is also deepening, resulting into many families eating one meal per day or even less, decreasing school enrolments, inability to access health care, stunting in young children, increased child mortality and a host of other negative effects throughout the country (GRZ, 1999). These factors have stretched the extended family to breaking point. Children are particularly a vulnerable group among those affected by the AIDS crisis and increasing poverty. With the loss of parents, children may experience homelessness, ill health, loss of inheritance, lack of education, starvation, inaccessibility to health care, worst forms of labor, danger of HIV/AIDS infection, sexual abuse, isolation from emotional connections with families, and crime among other problems (Save the Children, 2003; GRZ, 1999; Hunter & Williamson, 1994; UNAIDS, 2002).

Currently, illness and poverty are placing great burdens on care givers and traditional family structures. With the recognition of this crisis, the state and civil society have come

out to address the problem given the situation that some children if not most, are falling through the extended family safety net and usually onto the street, into prostitution and other unsafe alternatives. Although the extended family has proved to be an all weather safety net, it can be something of a "black box" in many developing countries hiding incidents of child abuse, neglect and exploitation...and around half of the cases involve family members or others within the close family circle (Wazir, 2000:26 in George & Oudenhoven, 2002: 24).

However, for some children, the family is not just there because children lose more relatives than just parents. In families where there are multiple infections, children may also lose brothers, sisters, aunts and uncles (Campbell, 1999:147). The current phenomenon now is what Campbell has called "skip generation parenting", where children are being raised by grandmothers. She notes the tragedy of these grandmothers being stretched to their capacities by poverty, and the great physical and emotional strain it entails. Often grandmothers who are skip generation parenting are not in good health themselves and living in poverty conditions. Zambia is also experiencing another type of skip-generation parenting that involves the younger generation. In this version the teenagers and young adults in the family take over the care of younger children (FHI, 2002; Campbell, 1999).

The UNICEF Children on the Brink report (2002), has documented the impact of AIDS on children as being both complex and multifaceted with children suffering psychosocial distress and increasing material hardship. They may be pressed into care for ill and dying parents, required to drop out of school to help with farm or household work, or experience declining access to food and health services while many are at risk of exclusion, abuse, discrimination, and stigma (ibid: pp 4, 5). The same report states that overall, AIDS is increasing the number of vulnerable, malnourished, poorly socialized and uneducated young people, which in turn heightens the prospects of social instability, a point re-echoed by Dixon-Fyle (2002). HIV/AIDS catches children in two ways. They must support themselves and their families, often under the pressure of serious poverty, yet many are forced out of school just when they most need to prepare for their own futures. Girls are often the first to drop out, which not only undermines their own health

and well-being, but also that of the next generation (UNICEF, 2002:13). Access to education is prized as a means of getting out of the poverty trap but many poor families cannot afford to send their children to school (ibid) let alone dependant orphans. Also families are more likely to keep girls away from school than boys, and young girls without qualifications have limited employment opportunities.

In the following paragraphs, I will look at how this crisis is being handled. The state has always looked into the plight of orphans by providing institutional care such as orphanages but is now facing a huge challenge as the number of orphans keeps soaring under the unrelenting HIV/AIDS pandemic, which has necessitated different and broader interventions. Programs of assisting orphans within the extended families have come up for example, as the few orphanages can not contain them. However, literature says very little about government participation in the current orphan crisis.

Civil society has also come up with community based programs. What came out of the 1999 situation analysis in Zambia is that the bulk of activities directed towards mitigating the sufferings of orphans are the work of civil society - NGOs and CBOs.

3.3 State Response

The state being constitutionally obliged to provide for the wellbeing of the orphans has a National Child Policy which is being implemented through the National Program of Action (NPA) in Zambia that was approved in 1994. The NPA set nine goals one of which is to improve family welfare by enabling the poorest and most vulnerable families to raise their living conditions; reduce the proportion of children on the street; provide support to orphaned and disabled children; reduce the incidence of child abuse; and improve the welfare and status of women (GRZ, 1994). This action is in line with the Convention on the Rights of the Child (CRC) to which Zambia is a signatory. The situation analysis (GRZ, 1999) however, states that the status of orphans is not adequately understood or well protected in relation to their human right to health and education; their right to protection from physical, verbal and sexual abuse; their right to equitable treatment, without discrimination; and their right not to be exploited through the imposition of manual labor.

These policy frameworks constitute core guidelines for improving the welfare and quality of life of children as well as protecting their survival and developmental rights (GRZ, 2002:12). A National HIV/AIDS policy was drafted in this year and is currently under review by Government departments for the care and support of orphans and vulnerable children (ibid: 12). In addition to the existence of national overarching policies, individual government ministries have formulated sector policies that have child welfare implications. The Government considers the protection of children to be a cross cutting issue and various sector ministries have specific mandates to protect the child. But since the crisis of orphans coincided with the country's structural adjustment program, there has been very little progress. The state has had to cut costs on social services, a situation that has affected the welfare of the children greatly.

Due to the huge costs involved, the goals in the policies do not seem to be materializing because of misplaced priorities in Government budgeting. Programs like the Public Welfare Assistance Scheme (PWAS) in the Ministry of Community Development and Social Services (MCDSS) that is charged with the care of orphans are not working well due to the supposedly financial constraints as Government keeps hiding behind the smokescreen of economic reforms. The budget cuts that are due to structural adjustment programs have similarly affected the capacity of the extended family in provisioning for orphans as the state is increasingly withdrawing from provision of social services. The responsibility to care for the orphans is then shifting from the state to the household. Being a developing country, the Zambian state is not welfare and this compromises the entitlements and rights of the orphans. Apparently, the Zambian state even has a gender policy in place whose contents do not seem to be reflected in the programs such as the ones that are responding to the OVC problem.

The quality of the care that is being provided by the state leaves much to be desired. The few who receive help from the state get less than is required and erratically. Currently, (2004), the state can be said to have abandoned the wellbeing of the orphans and vulnerable children to the civil society, and is easing its conscience by putting down good plans and goals that are not followed up by action.

Given the fact that the state is not doing much, the greater burden of looking after OVCs has continued to fall on the family, and since families are struggling to survive, they can barely take on an additional member because it means enlarging the family with resources remaining constant or worse still, deteriorating. When orphans are taken on, because of limited resources in most adoptive homes, they are mostly discriminated against in terms of food portions and non-payment of school fees (FHI, 2002). Research in Zambia has shown that no other system can match the resilience of the extended family. However, this traditional support system is under severe pressure and in many instances has already been overstretched, increasingly impoverished and rendered unable to provide adequate care for children (UNICEF, 2003:15). When placement with the orphan's blood relatives, as part of the extended family is not possible, in certain instances it has been necessary to have an orphan fostered or adopted by a non-relative. Adoption is rare, accounting for no more than a handful of cases (GRZ, 1999). Therefore, this leaves the extended family to continue taking on orphans though stretched to breaking point, and so the need to fortify the capacity of this safety net that is closest to the orphans.

The following are the programs that the government has put in place in terms of assisting the orphans:

The Public Welfare Assistance Scheme: this program is in the ministry of Community Development and Social Services with the objectives of assisting the most vulnerable in society to fulfill their basic needs particularly health, education, food and shelter; promote community capacity to develop local and externally supported initiatives to overcome the problems of extreme poverty and vulnerability (PWAS, 2003:3). Children are a primary category in this program. This ministry has got offices in all the districts nationwide. However, its implementation is constrained by less and erratic funding. In my working experience, I discovered that the registered clients do not actually rely on this program because the assistance is not always there.

Adoption and foster care: the state has an Adoption Act and facilitates adoption and foster procedures in terms of legal procedures and ensuring the safety of the children. It

also provides for the supervision of adopted children by the Commissioner for juvenile welfare. The state does not encourage institutional care but it just gives grants to already established orphanages, and upkeep allowances to foster parents who have no blood relationship with the children (GRZ, 1999).

The Basic Education Sub-Sector Investment Program (BESSIP): this bursary scheme is under the ministry of Education and targets the vulnerable children in boarding schools (GRZ, 1999). Despite having this program, many orphans are unable to go to school because they either do not know about it or because they have been enlisted for assistance but funds are limited and so they can not be helped for a long time.

The National Aids Control Program (NACP): this program in the ministry of Health is assigned to look after the interests of underprivileged children and orphans (especially those whose parents died of AIDS since some of these children might be HIV positive). Activities Include dispensing free ARVs, effective treatment for STDs, HIV/AIDS education awareness, and provision of HEPS to malnourished children. The ministry also gives financial and technical support to NGOs working in the area of orphans (GRZ, 1999). However, most NGOs remain un/under funded despite meeting this criterion.

All these government programs however, are constrained by under funding leading to a situation were very few children are being served such that the fruits of government effort in responding to the orphan crisis can barely be seen. Actually, literature on interventions for orphan care and support says little about active government participation. According to the Situation Analysis of 1999 in Zambia, some reports even go to the length of speaking of "government's abdication of its responsibility" to provide adequately for the poor and orphans. Government's progress beyond rhetoric has been slow despite being a signatory to the CRC.

3.4 Civil society response

Due to this combination of incapacity and unwillingness of the state to do much, NGOs and CBOs have moved in to fill up the gap but they have limited outreach such that a very small percentage of orphans are being served. This is because unlike the

Government, NGOs do not have the institutional capacity to handle the huge numbers of orphans that are swelling by the day. Most non-governmental organizations are not financially sustainable and so depend on donor funding that is highly competitive. Additionally, many of these organizations are fragile with small-scale programs that are barely managing to offer the required assistance.

The NGO community is providing care in the areas of education, school feeding schemes, psycho-social needs and income generation but only to a few. An overwhelming 93% of the orphans remain unserved. By 1999, Zambia's volunteer bodies, churches and NGOs managed to provide assistance to only around 7 percent of those children requiring it (UNICEF, 1999: 20). The situation report on the analysis of orphans and vulnerable children in Zambia (GRZ, 1999), states that education is mainly being offered through community schools which is second grade to the mainstream education. Given this situation, and the fact of the state's has apathy in its response to the crisis, coupled with the institutional inadequacy of civil-society, there is need to equalize benefits by making plans, policies and programs that respond to gender-specific needs.

Given the inadequacy of state interventions, NGOs and CBOs focusing on child rights and protection issues have proliferated widely during the past few years. A driving force in their creation is the need to respond to the ever-growing number of OVCs as a result of the HIV/AIDS epidemic (GRZ, 2002). As in many countries, the NGO community is directing resources and programs at OVCs in need with its cornerstones being community mobilization and capacity building (to foster community ownership and responsibility and sustained action), education (mainly through community schools) and income generating activities (GRZ, 1999:14). Additional program activities include addressing the psychosocial needs of orphans and caregivers, HIV/AIDS interventions and health needs.

3.5 Models of care for OVCs by civil society

3.5.1 Direct assistance (handouts)

Some NGOs provide direct assistance to orphans and their families in the form of food assistance, clothing and school bursaries. These organizations feel that, given the poor economy of Zambia, their work is necessary (ibid: 30), otherwise this is not a popular model. They give to the poorest of the poor and to those who have no other means to provide for themselves, as in the case of World Food Program (WFP) and Program against Malnutrition (PAM).

3.5.2 Institutional care

The Situation Analysis Report (1999) revealed that although it was difficult to determine exact numbers during the study, it appears that the percentage of orphan children placed in institutional care is quite low. Institutional care is now discouraged as an intervention strategy. Orphanages and other homes for the children have proved unsustainable as they are expensive to run and often perceived to be a waste of resources in the long run. Moreover, they alienate children from the rest of the communities. Furthermore, whatever the hardships that the guardians experience of bringing up orphaned children, most were against putting children in orphanages. They felt that the best place for children was to be with their families (FHI, 2002:78). Institutions opened up by civil society are the last resort such as SOS children's village in Lusaka, Lubasi home in Livingstone, etc.

3.5.3 Psychosocial support

The Situation Analysis (1999) revealed that most NGOs recognize the need to help orphans cope with grief and deal with the separation of siblings and the stigma of AIDS. In some situations, these emotional needs include concern at being treated as second class citizens in their homes, and confronting issues of physical, mental and sexual abuse. The general response of NGOs is to offer life-skills training as part of the community school curriculum – ranging from sex education to attempts to foster self-confidence and self

respect (ibid: 22). Given the extended family network, a considerable amount of psychosocial support to deal with trauma is offered by the nearest kin.

3.5.4 Community schools

These are mainly offering education and day time meals as an incentive to keep children in school. Parents and guardians are often unable to provide school fees, uniforms and books to send their children to a government school (GRZ, 1999:25), and community schools act as a safety net. These schools cater to the children that are left out of the formal schools, usually between 11 and 17 years old. However, because of the crisis, younger children are being sent to the community schools because of the costs in formal schools. NGOs often help communities develop community schools as a means of educating their children. These schools condense the seven-year government curriculum into four years, and do not charge fees or require their pupils to wear uniforms. NGOs often provide teacher training for the voluntary teachers in community schools, who are drawn from the surrounding community. Currently, community schools are catering for about 176,000 OVCs (ZCSS, 2002), and the figures will keep on rising because many more orphans are shifting from formal schools because of costs. The only constraint in the community schools being able to absorb them will be the institutional capacity. These schools are usually poorly resourced, have dilapidated infrastructure and no teaching materials (International HIV/AIDS Alliance, 2003).

3.5.5 Support to the family/community

Families and communities are both in the front line of the impact of HIV/AIDS and the frontline of the response to HIV/AIDS. NGOs, like Family Health International (FHI) have a family centered approach aiming to provide long-term solutions for the children living with or affected by HIV/AIDS. It is believed that children grow and develop better in a family-based environment than in an institution. The aims are, among other things, to strengthen the ability of families to cope with their problems and the CBOs to save their neighbors; helping children and young people to care for themselves by providing access to quality education and protecting them against exploitation and excessive labor; developing communication programs and other activities with communities to reduce the

stigma and discrimination associated with HIV/AIDS; and foster a supportive environment for children and families; and helping to ensure basic legal protection for women and children (FHI, 2003). A good example of a family-centered approach is SCOPE-OVC.

SCOPE-OVC is a CARE International Zambia program supported by FHI with funding from USAID amounting to US$ 4.6 million. The program started in 2002 to 2004 and so far supports close to 400,000 OVCS in 12 out of 72 districts of Zambia (FHI, 2004). The program strives to mitigate the impact of HIV/AIDS on children through mobilizing, scaling up and strengthening community based and community led responses to the needs of OVCS (FHI, 2004). The SCOPE-OVC strategy has been initiated at several levels to enhance the ability of households, communities and district level institutions to respond to the needs of OVC especially those affected by HIV/AIDS. Some of the objectives of SCOPE-OVC as outlined in the FHI (2004) are to strengthen the capacity of the community based and community led responses to the OVC situation; and to advocate for the rights of OVCs through working with district and national multi-sectoral partners. To supplement local mobilization, SCOPE-OVC provides grants, which are awarded to community based groups and organizations dealing with OVCs.

To qualify for SCOPE-OVC support, an institution or organization must be non-profit-making, be an NGO, CBO or religious institution duly constituted under the laws of Zambia. Potential areas that SCOPE-OVC will support include those that protect the economic, food, water and shelter security of households and communities caring for the vulnerable children; those that increase OVC and their families/care givers own economic and social self reliance, such as life skills and vocational training; those that link HIV/AIDS care and OVC and their families/care givers to prevention; those that increase the likelihood that OVC and their families/care givers will be protected by appropriate and effective legal and institutional support systems; and those whose support focus on OVC and their families via community mechanisms (e.g. re-integrating OVCs and street children back into the community) (ibid).

Before SCOPE-OVC gives out grants, the CBOs are requested to formulate proposals using a standard format. Submitted proposals are assessed by the District Orphans and Vulnerable Children Committee (DOVCC). Successful project proposals receive grants from SCOPE-OVC.

Support to the family/community is currently the popular and fairly effective model. Following the 1997 World AIDS Day release of the Children on the Brink report, UNICEF decided to assess and intensify its programming efforts for families and children affected by HIV/AIDS (Hunter and Fall, 1998). The report notes that NGOs, CBOs and Government assistance programs for families and children affected by AIDS in Zambia are probably more numerous than in neighboring countries.

3.6 Conclusion

This chapter sought to outline state-civil society responses to the orphan crisis. The chapter answered the question on what forms of care are being provided by both the state and civil society. The various models of care were outlined with regards what is taking place currently. A quick look at how state and civil society has responded shows that the state has so far done less than it ought to do. Models of care that obtained before the crisis (e.g. orphanages), have not been revised to suit the new needs. Research has shown that civil society has responded in more appropriate and new ways such as taking care of the children right where they are and constructing community schools among others.

Clearly, civil society is doing a commendable job but because of its limited outreach, many more children remain unserved. Alongside the good side of NGOs are a host of disadvantages. Though seemingly many, the NGOs and CBOs are each just managing to assist just a few children. The reasons being that most of them are not financially sustainable and rely on donor funding that is highly competitive and never enough to match the orphan crisis. Many are fragile and stand alone without coordination with other organizations that are responding to the same problem of orphans. Because of this fragility and isolation, a number of them are not meeting the required standards on care of the children. The 1999 Zambian situation analysis points out that authorities can not impose standards on community schools for example because they do not fund them.

Civil society does not just have the institutional capacity to reach all orphans. This analysis further found that many community schools "borrow" buildings, which may be required for other purposes, and volunteer teachers do not always guarantee their availability.

Over and above it remains the duty of the state to look into the wellbeing of the orphans because it has the institutional capacity to do so and it is always there unlike the NGOs that are not sustainable. All the state needs to do is set the priorities right so that budgets are made in the interest of the children. It is sad to note that policies are usually assessed not in terms of their capacity to take children's interests into account, but according to what economic benefits and (recently and reluctantly) their impact on the environment (George & Oudenhoven, 2002:94). There is need for the state to revisit its priorities to match the rhetoric. Positive efforts have been made though, through the formation of the Government Task Force on orphans. In this, as in other areas, government's role is to facilitate the development of institutions and structures, ensure equity (act as equalizer) and promote security (in terms of physical and human rights) (GRZ, 1999:13). Yet government should not end up at the facilitation role but should go further and implement policies and programs.

CHAPTER FOUR

4. 0. GENDER IN THE RESPONSES TO THE ORPHAN CRISIS

4.1 Introduction

This chapter assesses gender in the way the state and civil society have responded. To do this, I look at the experiences of orphan hood both by girls and boys. Specific vulnerabilities of girls are highlighted to illustrate that they have different needs and so orphans should not be handled as a homogenous category. Current programs are not only inadequate as shown in the previous chapter, but are also lacking in that they are handling the children as one group with the assumption that they have the same vulnerabilities. Gender allows us to stop envisioning the orphans as a homogenous category of people, whose needs can be addressed in a uniform way (Budlender and Hofbauer, 2003: 5). Without targeting specific needs, interventions can not be said to be adequate.

The research report on voices from the community (by FHI) and other studies like the Situation Analysis on OVCs are used in this section were boys and girls spoke about their various experiences. However, there are fewer voices of boys from the research as compared to girls and so I will dwell more on girls. By highlighting the differentiated needs of girls and boys, I make the specific needs of the girls visible so that responses can be made equitable. For example, when a parent dies, children particularly in the case of girls may also be denied their inheritance and property thus increased vulnerabilities. A study in Zambia (FHI, 2002) found out that of the child headed households, the ones headed by boys had either an ailing grand mother or aunt living with them, while the female headed households lived on their own in abject poverty without any adult, had to find work, manage the house and discipline their siblings, a combination of tasks that exhausts even adults.

Gender is also assessed at the funding level and I do this by looking at the activities of SCOPE-OVC (mentioned in the previous chapter under the models of care), one of the major OVC funding programs in Zambia. While SCOPE-OVC may not be a representative program of all funding international NGOs, it is herein considered because

it is a huge program that is putting in a lot of funds into the OVC programs. Through SCOPE-OVC supported work, close to 400,000 OVCs have been assisted in various ways (FHI, 2004). An assessment of its funding procedures and requirements will tell a lot about whether gender is taken on as a unit of analysis. The way gender appears or is traced at such a high level shows how far and whether at all the CBOs consider gender issues in their activities that are being undertaken.

4.2 Girl's experience of orphan hood

4.2.1 Education

"My father used to pay for my school fees and buy me school requirements every term but now we struggle so much to raise that money. This is a big problem. Instead of paying for school, the money is used to buy mealie-meal. My attendance at school is irregular because I am usually sent back home for not paying" (FHI, 2002).

As household incomes dwindled with the parents' illness and death, most of the children in the study stopped attending school. Many of the guardians had no reliable source of income and often must make the unfortunate choice of choosing which children will attend a public or community school or neither (FHI, 2002). According to Save the Children (1997), families are more likely to keep girls away from school than boys, even when the fact is that young girls without qualifications have limited employment opportunities. Guardians will more often than not adopt girls just for their domestic labor contribution and not as a way of helping them. When the girls are confined to the home for labor, they lose out on education. Furthermore, when some girls have no one to pay for their education, Save the Children discovered that it is common practice for them to find "sugar daddies", older men who are often married, who can afford to pay their school fees or buy books and clothes. These men do so in return for sexual favors (ibid: 17).

Voices from the community echo the fact that most orphaned girls are unable to balance the role of looking after the young siblings earn an income and also attend school. Where older guardians are present, the limitation is payment of school fees and FGDs revealed that children of all age groups longed to go back to school. When asked how people can

assist orphans, overwhelmingly the response, from all the study participants was "pay our school fees" (FHI, 2002).

When a parent(s) dies both girls and boys experience difficulties with school attendance as their entitlements fail. Reasons for not attending or continuing with school are more or less the same for both genders with qualitative evidence supporting financial inability as the prime reason (GRZ, 1999: 158). This report showed that there is a slight discrepancy between the percentages of boys and girls enrolled in school, showing some favor to enrolling boys in schools over girls with 51% of boys and 48% girls. Apparently, these figures do not tell the whole story because the research further discovered that a significant number of school aged children, both orphan and non-orphan, are not enrolled in school. Since the poverty situation in the country is worsening, it is expected that in the future more families will be unable to send their children to school and a greater percentage of children will grow up without the benefits of a primary education (ibid: 158).

With the initiative of community schools, children that are falling out of the formal schools are being catered for but the ratio of boys to girls that cannot even access this alternative is worrying. As at 2002, there were 1,335 community schools in Zambia catering for 176,629 (89,592 boys and 87,718 girls) orphaned and underprivileged children (ZCSS, 2002). Figures for out of school children tell another story even if the gap here is insignificant.

With all the problems that both girls and boys face, the situation of the girl is compounded by her peculiar vulnerabilities as shown below.

4.2.2 Sexual abuse

"After my uncle died I started off for Mongu to my mother's place. On the way I met a man. He said that if I slept with him, then he would take me to Mongu" (CARE, FHI & USAID, and 2003: 33).

Children impacted by HIV/AIDS are also at serious risk of exploitation including physical and sexual abuse (Children on the Brink, 2002). The report found out that

isolated from emotional connections with the family, some turn to risky sexual behavior. Orphaned children are greatly at risk of abuse as they usually lack a secure homestead. Some guardians are said to be encouraging children especially girls to engage in prostitution to raise money (George and Oudenhoven, 2003:282; GRZ, 1999). For some girls who find themselves with the responsibility of looking after young siblings, they resort to prostitution as a means of livelihood to raise money for upkeep (FHI, 2003). A rapid assessment in Zambia in 2002 found that the average age of children engaged in prostitution was 15 with 61% as orphans (UNICEF, 2003). These behaviors put the orphans at more risk for instance the danger of contracting HIV/AIDS. Save the Children (1997) has documented that older men often take advantage of the situations of orphaned girls and offer them money for school fees in exchange for sexual favors. When the female orphan is fostered, the male guardians still sexually abuse her, and her human rights are often violated or ignored by the very people who are expected to provide care, protection and moral support (Ramolemana, 2002; Ng'weshemi et al (eds), 1997). What is obtaining for girls is far from safety, like George and Oudenhoven (2002) have argued that children fare reasonably if they have an "average, good environment" to grow up in. This implies that when children are "at risk", efforts should be made to "normalize" conditions by ensuring that children are safe, receive proper health care, are fed, can play and interact regularly with at least one reliable adult (pp. 95). Yet children have been abused by uncles, grand parents, cousins, brothers, and virtually any male around them. A glaring example is cited in Ng'weshemi et al, (1997) where they say HIV/AIDS and STDs in young children, especially girls may point to sexual abuse.

Another subtle form of sexual abuse is early marriage that is common and can increase the girls' vulnerability because she is physically immature and so more prone to physical trauma and infection during sex, which is often forced (Save the Children, 1997).

"I was ten years old. He said I was eating his food and needed to get married so that my husband would feed me. I felt bad" (CARE, FHI & USAID, 2003:33).

Young girls may actually be married to older men who are already infected or who have other partners. Save the Children brought out evidence of a link between the pandemic

and an increase in rates of early marriage. In matters of early marriage, girls' rights to be listened to get infringed upon because Article 12 of the CRC sets out the principle that children should be listened to on any matter which concern them and their views given due consideration in accordance with their age and maturity.

4.2.3 Health and nutrition

"My sister- in –law denies me food. If I ask she says we have not left you food and tells me to wash the plates" (FHI, 2003:33).

Although both girls and boys get their health and nutrition compromised with orphan hood, the girls experience a worse situation because of patriarchy. Girls tend to receive less food, and less nutritious food than boys, especially during famines (Save the Children, 1997: 42). In situations of extreme poverty, the young females' unequal position is even more pronounced according to Heyzer (1986) who states that it is the female child who eats last (Sohoni, 1998:466). Widows and orphans may face particular problems as they often have less access to credit (Save the Children, 1997). They may for example face impoverishment when they lose property to relatives (adult men) who have more inheritance rights than women and children. Even where the inheritance rights of women and children are spelled out in law, such rights are difficult to claim and are poorly enforced (UNICEF, 2003:20). The FHI study of 2002, documents voices from the community with worries of lack of access to health facilities. It seems few NGOs involved with OVC programs are addressing health needs for the communities where they work either directly or through linkages with those NGOs working in the health field (GRZ, 1999).

4.2.4 Psychosocial problems

"When my mother was sick I looked after her. One day she was very ill and I found a taxi to take her to hospital. She died in the taxi" (CARE, FHI & USAID, 2003: 21).

Boys and girls experience the trauma of losing a parent(s) differently with girls somewhat more likely to be affected than boys (UNICEF, 2003: 32). The trauma stems not only from the grief of losing the parent, but also due to stigma and discrimination.

Psychosocial trauma comes on as children are neglected by their friends and school mates, separated from siblings and as routines of normal daily life, school attendance is broken (ibid: 31). The same report states that children get discriminated against even in foster homes as in food and work. Female orphans are made to do domestic chores while children of the foster parent do not, and such children lack time for recreation and homework.

Further, the report says, with the death of their parents girls do not seem to have time to process their grief as they have to immediately assume responsibility over the household.

However, there are ways in which children react to the discriminating practices such as refusing to eat meals. While some of the girls in the FHI (2003) study refused to eat when they were physically or verbally abused, none of the boys, however, refused to take their meals.

The Situation Analysis found out that most NGOs recognize the need to help orphans cope with grief and deal with the separation of siblings and the stigma of AIDS. Actually, children who lose parents to HIV/AIDS will often lose not just their parents but also their neighborhoods, friends and schools - their sense of community (Campbell, 1999: 47).

4.3. Conclusion

This chapter set out to assess gender in the way the state and civil-society have responded to the orphan crisis. This was done by looking at the experiences of the girls and boys and highlighting specific vulnerabilities of girls. According to the assessment, the most common unmet needs are education, food, medical care and clothes (UNICEF, 2003:20). When these needs together with others like psychosocial needs and sexual abuse are looked at through a gender lens, it is then possible to draw out the specific vulnerabilities of girls. It is only when gender needs are made visible that programs and policies will be able to suit both gender. It has been seen that the girl who needs to go to school also has other needs of health and nutrition alongside caring for young siblings, a situation that may constrain her opportunities if not taken care of. The experiences of girls clearly show that gender as a category of analysis is lacking in the current programs.

Gender has also been assessed at a funding level, taking SCOPE-OVC, one of the huge funders as an example. It was discovered that gender issues only appear in terms of how many girls and boys are being assisted and not as an analytical tool in planning and programming.

CHAPTER FIVE

5.0 ARE CURRENT RESPONSES EFFECTIVELY MEETING THE NEEDS OF THE FEMALE ORPHAN?

5.1 Introduction

This chapter provides an analysis of the study and to answer the key research question, I use the specific research questions. Thus, I analyze the forms of care provided by the state and civil-society. Information in this chapter is drawn from the previous chapters. Thereafter, I draw out the implications of a generalized approach and as a way of concluding, I put forward my findings and policy recommendations.

5.2 Forms of care provided by the state and NGOs and their gender sensitivity

The research has revealed that both the state and NGOs have intervened in the crisis by offering various modes of care. These range from institutional care as in orphanages, through handouts, to community schools. Main activities being carried out are education, psychosocial counseling, income generation, food rations and skills training. Yet there is a gap because OVCs are being handled as a homogenous category. Program planners have not taken into account specific gender needs that would require specific interventions or activities to suit both girls and boys. Responses that fail to do this are in other words implicitly only serving boys. Kabeer (1996) clearly articulates this when analyzing poverty and says that policy discussion has been conducted in apparently gender-neutral terms, yet closer scrutiny reveals that it has often been premised on the concept of a male actor and of male-centered notions of well-being and agency, with obvious limitations for addressing the gender dimensions of poverty. This is because the girl who is caught up in the web of poverty, vulnerability and being female can not seize life opportunities as well as the boy. Evidence from the research for example showed that girls have not been able to engage in the education programs fully, due to their triple roles and poverty as parents gradually fall sick or die.

By right, the orphans are entitled to education, health care, food, etc. but the study has revealed that once entitlements fail with the death of parents, and no program is suitable

for the girl, she is just left to fate. Such that even the few well meaning programs for the OVCs do not benefit her because these programs lack gender analysis. Girls find themselves caught up in two or three roles and fail to balance them. They have to care for siblings, find food usually by engaging in piece work and also go to school or attend skills training. Since most times, the timing for all these activities clash, the girl ends up not going to school. Meanwhile, the boys who in many communities do not engage in reproductive work will have gone to school. If at all the girl manages to go to school, her attendance is erratic due to lack of school fees and other requirements. Now, since education has been proved to be a key for upward mobility, it means that these girls will remain locked in poverty.

The solution, as my paper posits, lies in paying attention to the triple roles when planning out the interventions. It makes sense to use the triple-role analysis contained in Moser's framework in a planning framework, because any development intervention in one area of work will affect the activities performed in the other two areas (March, 1999:57). Like said earlier, when the girl has to do reproductive and productive work, it means less or no time being spent on education. This is because reproductive work is crucial to human survival, and to the maintenance and reproduction of the labor force, and so cannot be left undone. As interventions take into account the girl's situations, they will in turn be able to, for example go to school or attend a skills training course that can help improve their livelihoods. From the voices of the girls in the studies, one can tell that it is not about availability of schools per se, but about access as in time and payment. This is because, for the children that are being left out of formal schools, the civil society has come up with alternatives (community schools) that have no cost and are within the communities. It tells us that what is hindering girls is their inability to balance the roles. In as much as educational opportunities are presented, girls who are struggling to pay rent will never access them as going to raise money to pay up is more appealing at such a time. The issue of opportunity costs becomes cardinal. The same applies to the girls whose guardians require them to perform household chores at the time they should be in school.

Similarly, when we consider the concept of needs, the paper has revealed that girls have different needs compared to boys. For example, girls have a strategic need of having

control over their own bodies. The study has revealed that girls have often been sexually abused and exploited in domestic labor. Men often take advantage of the girl's needs for school requirements and food and so exchange money for sexual favors. All the child heads experienced serious problems providing the basic necessities for their siblings (FHI, 2002: 4). This has caused them to use all possible means even prostitution. In the study many of the older girls go and live with boyfriends or get pregnant, hoping that the boys will look after them and take them away from their current situation. Some of these girls have become pregnant only to be abandoned by the father of their children and left to care for their own babies as well as siblings, therefore, compounding their plight.

Some of them have even been abused by their own guardians such as uncles and cousins. The study reveals that sexual abuse issues are not treated with the gravity they deserve due to the socio-cultural norms. Among these norms is the culture of silence that prevents girls from talking about abuse incidences.

With regards abuse in domestic labor, girls because they need to be in the safety of a home, continue laboring under harsh conditions as they cannot easily go to the streets as boys do when they cannot stand ill treatment. However this is not to say the street is better, neither am I saying that girls are never found on the street. Therefore, because girls are hidden in exploitative labor, they remain invisible. Of further concern is that this labor is not enumerated, neither is it paid. This is true of what Sohoni (1998) reports to say, in several recent studies, there is considerable evidence that girls are not only neglected in terms of their nutritional and health-care needs but also are over worked, underpaid, or unpaid (UNDP, 1997; UNICEF, 1997).

Given inadequacy of state interventions and limited outreach of civil society, the answer to this problem is for civil society interventions to go beyond the current activities such as education and challenge the gender division of labor, alleviate the burden of domestic labor and child care (ibid: 58). The girls who won't need to bother about the young siblings when they are relieved of child care will then be able to seize the opportunities in the OVC programs. In Zimbabwe for example, village volunteers ensure that children from child-headed households have time to attend school by helping them with domestic

chores (International HIV/AIDS Alliance, 2003). Such an initiative could be replicated in Zambia.

Counseling services that enhance self-esteem are equally needed to help the girls resist abuse at the hands of sugar daddies and abusive relatives and be able to report to the authorities that can come to her rescue. In most communities, the culture of silence has worked to the detriment of the girls, a thing that has made girls keep quiet in spite of being abused. Also programs that consider shelter for girls who are heading households will go a long way in enhancing the wellbeing of the OVCs. It is now a well known fact that institutional care is not good enough and should only be adopted as a last resort, but other initiatives could be made of helping the children within the communities. Voices from the community revealed that child heads of households face severe economic insecurity and are in a dire situation that needs to be addressed immediately (FHI, 2002: 15). The poverty factor is having a toll on society. All the children and adults who took part in the study are having problems of meeting their basic needs such as health, food, and shelter. Girls, who are unable to go to school both formal and informal, are simply falling through the cracks because specific gender needs are not being targeted.

Such findings show that interventions should aim to meet both practical and strategic needs for girls for them to fully benefit as much as the boys. Save the Children work on HIV/AIDS in communities has shown clearly that the Moser framework helps to make the aims and objectives of different projects clear from the onset.

Apart from education and poverty which came out as major issues, the studies also highlighted issues of girl's lower nutritional health and less access to food than boys; of experiencing more trauma than boys; and of girls losing their inheritance to male relatives. These findings are still coming up more than ten years since the onset of the OVC crisis and subsequent interventions, a situation that suggests that programs are not having an impact on the girls. More interestingly, the studies that where done contain more female voices than boys on these issues.

Another finding is that though orphans have a greater need for health services due to their compromised nutrition and immunity, none of the programs are addressing this problem

directly (FHI, 2002). Actually girls have a far greater need than boys because of their high risk in contracting sexually transmitted diseases and problems related to pregnancy. The only effort the NGOs make is to refer the children to state hospitals which are of little or no help because apart from demanding payment for the services, these hospitals are poorly stocked with medicine (GRZ, 1999).

Analysis at the funding level (SCOPE-OVC) has revealed that gender issues are not traced in the mission statement. It merely states that it strives to mitigate the impact of HIV/AIDS on children. Furthermore, a closer look at the standard proposal format that is required by CBOs to use, reveals that activities to be undertaken are not based on gender analysis. The mention of gender only goes as far as disaggregating boys and girls in the programs. Though necessary, disaggregating is not sufficient in trying to achieve equity. Activities to be undertaken are homogenous without a consideration of whether they are suitable for both gender. Anticipated benefits are equally generalized, meaning it is difficult to tell who is likely to benefit. However, the final project review report of 2004 by FHI (2004) reveals that SCOPE-OVC made tremendous success. The review team found the SCOPE-OVC approach to be an appropriate method to support community level structures, community owned activities and how it can achieve long term intervention at a large scale in Zambia (ibid: 22).

Despite this success, voices from the community (where SCOPE-OVC also operated) are still crying for help especially in the area of education. The answer is tackling imbalances in the households that are benefiting from the program, which can be possible if the SCOPE-OVC and other funding organizations put up such conditions after an analysis of needs by gender. In fact, the final project review report does not have any mention of gender, not even disaggregating it like in the project proposal format. The lack of gender at funding level poses a lot of insights into the gender gap in the provision of care. If such a big program and a determinant of the sustainability and existence of the CBOs is not gender aware, it means that activities of the CBOs are equally gender blind and therefore the unbalanced success of the programs.

Therefore, the number of NGOs, CBO and government programs and their seeming successes are not telling us the whole story because of the revelation about how girls are experiencing orphan hood and their challenges. On the surface, what we can see are "well meaning" brilliant OVC programs and yet the girl is not being adequately catered for. This then leads to the conclusion that gender-neutral projects and programs are not effective for girls. The key is to place what girls say is of particular concern to them on the main agenda of the responses to the crisis (March, et al, 1999).

5.3 Implications of a generalized approach

Adopting a generalized approach as the state and civil society are responding to the orphan crisis poses a number of challenges. It means the differential effects of orphan hood will remain invisible. On the whole, if the trend is not checked and orphan interventions do not begin to take on board gender, it means the girls will become and remain poor, illiterate, unemployed, malnourished and ill-socialized among other things. Girls have remained disadvantaged despite the considerable amount of programs in mitigating the effects of HIV/AIDS. As such, girls will continue lagging behind the boys in development.

5.3.1 Daunting Challenges

Socio-cultural issues

Information from the field demonstrates that female orphans when they cannot access education due to factors already considered, end up in either early marriages, as single mothers or in prostitution. This situation denies them prospects of ever coming out of their vulnerability. Further more, they then miss out on benefits of education. It means they will not be empowered enough to be able to make decisions on what concerns their lives, for example about their sexuality. The culture of silence has accentuated the girl's suffering under sexual abuse. The study revealed that the Zambian ministry of Health is carrying out HIV/AIDS awareness campaigns in schools, meaning that those without access to schools are less informed, mostly girls. This in turn increases their risk of HIV infection due to lack of knowledge. Gender socialization is also limiting girls' ambitions

causing them never to think beyond caring for the young siblings. Gender roles keep on constraining the female child's opportunities.

Socio-economic issues

Poverty, age and gender are impacting negatively on the girl who is most times forced by circumstances to get into prostitution, and as she does this, school attendance falls out. Farrell (1999) has argued that whatever else schooling may do, it operates as a selective social screening mechanism. It enhances the status of some children, providing them with an opportunity for upward social or economic mobility, and ratifies the status of others, reinforcing the propensity for children born poor to remain poor adults, and for children born into well-off families to become well-off adults. Zambian children seem to understand this very well, because when asked in the study about what one can do for orphans, they unanimously said school fees should be paid for them to be able to go or continue with school. The fact that poor children will become poor adults should ring a bell for the state that is obliged to care for the orphans. It means for as long as the state continues with this complacent attitude, national Human Development will be a mirage. This is especially critical because most of those to remain out of school are girls and girl's education has been known to have far reaching public benefits. Although girls are the most invisible and neglected group of out of school children, girl's education has a lot of benefits (Sutton, 1998; Okwany, 2004). These benefits include raising economic productivity, reducing fertility rates, lowering maternal and infant mortality, improving health, wellbeing, and educational prospects of the next generation, promoting management of environmental resources, fostering democracy and reducing poverty. Wazir (2000) puts it that female illiteracy is a problem, not just for girls and women themselves, but for society as a whole. She further states that advances in human development are not possible if half the population continues to lag behind in educational achievement. Given this fact and the increasing numbers of orphans (girls), it goes without saying that without special focus on female orphan hood and gender, human development will keep eluding the nation.

The importance of educating girls has been underscored in international forums, including the Third World Conference on Women (1985) that capped the United Nations Decade for Women and the 1990 Conference in Jomhein, Thailand, on education for all (Sutton, 1998: 382 in Stromquist, N., 1998). Sutton observes that despite widespread and growing concern for educating girls and women, in the majority of developing countries there is still a noticeable gender gap in educational participation rates and associated outcomes such as literacy.

For girls to participate fully in the education that is being offered by the state and civil society to the OVCs there is need for programmers and policy-makers to understand the girls' constraints to education. Gender differences need to be adequately addressed. Considering the fact that educating a girl has both private and public benefits, there is great need for programs to take gender on board.

Legal issues

The study also revealed that the state has not gone beyond rhetoric in fulfilling its commitment to the CRC as it keeps hiding behind the smokescreen of inadequate resources. Female voices from the community in the studies done are still crying out for help, meaning that the state has not yet looked at the girl orphans as right holders. If the state saw wellbeing as a right, appropriate programs would be put in place to suit both gender. The wellbeing of the female orphan needs to be viewed in the framework of entitlements and rights if the female orphans are to be safe from all forms of abuse such as sexual abuse. The law currently is very weak on child abusers and those who grab property from the orphans, a situation that further jeopardizes their well being.

Health and nutrition issues

Girls have lower nutritional health and less access to food than boys, and yet they are the ones who need better health most because of the task of child-bearing. Girls who are less nourished, sick or chronically hungry are less likely to attend school as the study has shown. Orphans whose entitlements have failed have poorer health and nutritional status, mostly girls. Yet no OVC program explicitly addresses health. According to Sohoni

(1998), whereas 40 percent or more of the world's children are born in poverty and face the consequences of poor nutrition, gender-directed nutritional research has established that the intra household distribution of food in many developing countries is skewed in favor of the earning male and of the boy as potential earner, with women and girls getting the lesser share in terms of both quantity and quality. She further quotes Heyzer (1986), who says in situations of extreme poverty, the young female's unequal position is even more pronounced.

5.3 CONCLUSION

The orphan problem is surely a crisis because the orphans are falling through all the three actors being the community, the state and civil society. All the three are currently financially incapacitated. Civil society however, is doing more than the state while the extended family has remained a frontline response although pushed to breaking point.

Girls have remained disadvantaged despite the considerable number of OVC programs. Current orphan programs are not effective for girls due to lack of gender analysis in programs, and this has led to the needs of the girls remaining invisible. Specific needs require specific interventions. What is needed is to take gender on board in policy, practice and research so as to serve the girl as a right holder. Therefore, gender-neutral programs are not effective for girls; the girl orphan is not adequately catered for. What should be done is to view the needs of orphans in the framework of entitlements and rights if the responses are to be made responsive. This study then concludes that current responses to the orphan crisis are not effectively meeting the needs of the female orphan.

5.4 Recommendations

This study has revealed that there is a gap in the state-civil society responses to the orphan crisis. Projects that are planned and implemented without gender analysis are not effective for girls. Therefore, the unbalanced successes in the OVC programs. This gap is further accentuated by the fact that the programs are not also adequate considering that government has been slow in moving beyond rhetoric despite having identified the

orphan crisis. The other contributing factors to the girl's invisibility are the socio-cultural norms which have compounded her vulnerabilities.

Based on the findings of this study, the following recommendations are put forward. This study recommends that both practical and strategic gender needs must be deliberately met.

Economic security/Social protection

Given the situation that poverty is accentuating the orphan crisis, there is need to strengthen the economic base for the families and communities. This will enable the orphans go to school, access health facilities, and adequate and good nutrition. The SCOPE-OVC model should be replicated in all districts. In addition when communities become economically sound, they will be able to come to the rescue of the orphans without much difficulty. For the older orphan heads of households, viable income generation activities could be a solution by granting them credit, while the young ones should be provided with food, health care and education as a right. At the moment, the state gives assistance to the orphans only when there are enough resources but the rights approach will ensure offering the assistance as an obligation in a holistic way. Budgets must be reoriented in order to allocate enough (and timely) resources to social services that children need most. A way of doing this can be by lobbying the international financial institutions not to cut back state support because the orphan crisis is a world crisis.

Participation of children in programming

For the specific needs of girls to be visible, there is need to involve them in programming from the identification stage through to implementation. This is the only way that what is of specific concern to the girls will be taken care of. When consulted, the girls will be able to talk about the multiple demands on their time that hinders them from seizing the opportunities in the responses to the orphan crisis. When their concerns are taken on board, the programs will in turn be more responsive to them.

Space to organize

The CRC gives children the right to participate in decisions which affect them, and recognizes children as political beings (CYD notes, 2004). As such I recommend that children should be given space to voice out what is of concern to them. This can be done by encouraging children's associations, for example. In Venezuela, when space was created for the children, they were able to hold workshops, do surveys and engage with local authorities in solving health problems in their communities (Blanchet-Cohen & Fernandez, 2003). Involving children can bring new dimensions to the solution of the orphan crisis. Similarly, in Zambia, we recognize orphans as right holders and capable of participating in issues that concern them and stop viewing them only as victims. Orphans should have a say and control over their lives.

Going beyond gender disaggregation

All parties responding to the orphan crisis should not stop at disaggregating data but should go further and analyze gender using the triple role analysis to actually understand how the girl is constrained in her roles. This way, flexible times for school attendance can be found to enable her enjoy the opportunities that are coming with the responses. Responsible ministries over OVC programs must require gender analysis by law from anyone wanting to respond to the orphan crisis. This can be one way of a deliberate effort to equalize benefits from the programs for both girls and boys. Once needs assessment is gender-based, it will mean activities that will suit either gender. In this regard, the missing activities like health care programs will fall in place. In essence this paper is arguing for the use of gender as an analytical category.

Further still, each gender should not be handled homogenously as there are differences of age and class also.

Child care programs

Since the role of looking after young siblings seems to stand out as a major constraint in the lives of the girls, the state and civil society should consider programs in child care. This will enable the girls to attend school or skills training. Community schools could be

fortified so that within the same premises there is a section for child care. The Zimbabwean example of community care could be replicated.

The state should promote girls' education in a more pragmatic way by looking at access in terms of the girls finding time to attend lessons and being able to meet the other needs that constrain them such as house rent and care of young siblings. So far only enrollment issues are being looked at as in figures for girls and boys. There is need to look at what is surrounding the out of school girls and go beyond access. Girls' constraints must be understood in gender differential terms.

Strong partnerships

For the orphan crisis to be contained there is need for strong partnerships between the state, civil society and the children. Strengthened partnership will prove a formidable force against the problem.

Future research issues

a. This study focused on girls, the situation of boys is also an area for further research.

b. Since all the three actors are having problems of limited funds, there is need to revisit the policies and come up with more pragmatic ways of handling the crisis.

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