Orphans’ Hope: An Evaluation of Residential Orphan Care in Malawi Africa

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Orphans’ Hope: An Evaluation of Residential Orphan Care in Malawi Africa

By

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Abstract

It is estimated that over 7 million orphans are institutionalized worldwide (sos-usa.org). Research has shown that while orphanages are often able to meet physical needs better than alternative forms of care, orphanage life can be harmful for the wellbeing of a child. This study evaluated orphan care at one institution in Malawi, Africa, to determine the effectiveness of care and suggest interventions that could position the children for success. Through interviews with caretakers and administrators, it was found that residential care in Malawi could be an effective form of care. The greatest needs were consistent behavioral intervention and sexual activity prevention. The results showed that with intervention and intentional caretakers, the likelihood for success was possible. Hope and spirituality gave a way for leadership and maturity at the orphanage.
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Orphans’ Hope: An evaluation of residential orphan care in Malawi Africa

Introduction

Masiye is but a face in the back of an overcrowded class that meets under the baobab tree in a city across the world. She stands a head taller than her younger classmates, aging nearly five years older than most of them. Masiye recently moved into a stable home with many other kids like her. While thankful for the nsima and beans she now receives three times a day, she cannot help but wonder what it would be like to be seen, to be known. Masiye is often unnoticed.

In Malawi, being named Masiye is less than desirable. Masiye is a Chichewa name that translates as abandoned, left behind, orphan (Chirwa, 2002). With a name like Masiye, a child cannot easily escape the daunting fate that accompanies the label of orphan.

In Malawi, there are nearly a million abandoned ones, those left behind, Masiyes that go unseen by the world’s eye. The frightening reality comes down to the fact that even when these children are noticed, often the efforts to help them can easily turn, and become destructive. This paper will look at the orphan crisis that runs rampant across Malawi. Research will be reviewed to answer what kinds of vulnerabilities these children face, how others perceive them and this condition labeled orphanhood, what is currently being done to address the need, and what can be done to improve these orphan care programs. This project will look at one specific program to see how effective the current model is and what can be implemented to better address the needs of children like Masiye. The purpose of this study is to identify the gaps in care and propose research-based interventions that can better the lives of orphans in residential care in Malawi.
The Orphan Crisis in Malawi

The orphan crisis in Malawi is raging due to several factors, the greatest being HIV/AIDS. There were over 900,000 orphans in Malawi in 2006 (Unicef, 2006) and that number has increased to over 1.3 million orphans today (Unicef Statistics, 2013). Kidman and Heymann (2009) report that 14 percent of Malawi’s population under 18 are orphans. Another study found that 15 percent of Malawi’s population under 17 are orphaned and of that 15 percent, 23 percent are double orphans, meaning that both of the child’s parents are deceased (Campbell, Handa, Moroni, Odongo, & Palermo, 2010). Being labeled an orphan in Malawi can put a child in an especially vulnerable state.

Some studies disagree about the vulnerability of orphans compared to other children. One study looked at the difference in wellbeing and developmental outcomes between orphans and non-orphans and whether certain types of orphans are at greater risk (Campbell et al., 2010). It also measured whether orphanhood is the greatest determinant of poorer outcomes or if poverty is the greatest factor. The data was collected through Demographic Health Surveys (DHS) in 11 African countries and the results demonstrated that, while orphan status is a factor of vulnerability, factors such as household income and region of residence were often greater indicators of vulnerability. However, the results also revealed discrepancies in orphan to non-orphan in school attendance and completion, implying that some vulnerabilities are specific to orphans (Campbell et al., 2010). Another study used the Malawi Integrated Household Survey to gather data to answer questions about the disparities between orphans and non-orphans. The results showed that orphans do have certain vulnerabilities that are unique to orphans. The study revealed a negative correlation between school attendance and orphanhood. The study
also demonstrated that the orphan’s disparities are not directly affected by poverty but rather by orphanhood itself (Kidman, Hanley, Foster, Subramanian, & Heymann, 2012).

While both of the studies revealed different results on whether orphanhood alone constitutes as a unique vulnerability or whether poverty is the vulnerably factor, they both demonstrate that there is a divergence between the educational opportunities and outcomes of orphans and those of non-orphans. Sharma (2006) looked specifically at the educational outcomes of orphans in Malawi. The longitudinal study examined 534 households in Malawi from 2000 to 2004. The households were surveyed using the Complementary Panel Survey. The results showed that orphans were more likely to drop out as grade level increased. The author hypothesized several reasons that would contribute to the dropping out, including labor demands, discrimination, and psychological trauma. Results showed that boys are more likely than girls to be attending school. These results highlight the danger in orphans getting stuck in cyclic poverty (Sharma, 2006). Case, Paxon, and Ableidinger (2004) also conducted an overview of the disadvantages of orphans in Africa. They also found that orphans have a significant disadvantage in the component of school enrollment. Their results showed that there was no difference in the vulnerability of female and male orphans when it comes to school enrollment. The results of this study also demonstrated that the greater the relatedness of the orphan to the care taker, the better the outcomes of the orphan.

On top of educational outcomes, orphans in sub-Saharan Africa also are exposed to risks in their physical and emotional well being and development (Kirkpatrick, Rojjanasrirat, South, Sindt, & Williams, 2012; Palermo & Peterman, 2009; Panpanich, Brabin, Gonani, & Graham, 1999). Palermo and Peterman (2009) investigated whether
being an orphan puts an adolescent girl at a greater risk of early marriage, early pregnancy, and early sexual debut. The authors used data from demographic health surveys (DHS) conducted in ten sub-Saharan African countries. The sample size included females age 15 to 17. The orphan status was determined by the answer to the question of parental status in the DHS. The results found that while there is no connection between orphanhood and early marriage or pregnancy, orphaned females are more likely to experience early sexual debut. However, there was no way to surmise whether the cause of the early sexual debut was due to sexual abuse or force, or if it was the result of mourning the loss of parental love and support (Palermo & Peterman, 2009).

Malnutrition is another area in which an orphan is especially susceptible. Panpanich et al. (1999) disclosed that malnutrition was worse for children in an orphanage who were less than five years of age, but malnutrition was worse for village children over the age of five as compared to orphanage children, indicating that orphans are predisposed to malnutrition before intervention, but there is also a high level of malnutrition for impoverished children in general. The results also showed that extended families are capable of providing adequate care for orphans, but when the family has more than three children, they require additional support (Panpanich et al., 1999).

Orphans are also prone to emotional distress. Kirkpatrick et al. (2012) considered the emotional status of orphans and vulnerable children (OVC) in Zambia. The methods included surveys of children and caretakers in two different communities. The Health Ed Connect Adaptation Questionnaire was used, which consisted of 43 questions for the children and 38 for the caretakers. The questions addressed the child’s perspective on their own emotional distress and the caregiver’s perception. Participants included 156
boys and 150 girls between the age of 6 and 10 were assessed. The OVC experienced acting angry, having scary dreams, worrying, feeling unhappy or sad, and preferring to be alone the most out of several other areas of emotional distress. The findings between the child’s report and the caregiver’s report were notably the same in most areas. The study suggests training and education for caretakers on how to notice and address emotional needs. The authors’ also show that the findings of this particular study coincide with the findings of other similar studies (Kirkpatrick et al., 2012).

**Perceptions of Orphans**

There is an interesting dynamic for how orphans are viewed and treated in Malawi and in Africa as a whole. The perceptions of caretakers and community members toward orphans can affect them as much as the physical and educational impacts of being orphaned. A study was done to look at caretaker’s attitudes toward orphan care. A qualitative cross-sectional survey was given to 371 primary caregivers at 34 primary and secondary schools. The sample size included 212 caregivers fostering double-orphans, 85 who had taken in children or had single orphans, and a control group of 74 who did not have any orphans in their care. They were given a 114-item questionnaire to measure wellbeing, needs, resources, perceptions, and experience of orphan care. The results showed that the majority of caretakers were older, single, or widowed women who were typically impoverished. This particular study showed that there was a strong willingness to foster and care for the orphans, the only hindrance being that of financial concern. This made a strong argument that caretakers enjoyed or were willing to help orphans (Howard et al., 2007).
However, one study done in Burkina Faso unearthed some inconsistent results on caretaker’s perceptions. The study challenged the ideology that institutionalized care is always harmful for a child. The qualitative research study interviewed 100 primary caretakers of orphans that were a part of a sponsorship program, in which they were given funds for the child’s basic needs. The results of the study showed that the majority of caretakers in Burkina Faso would choose for the orphan to be in an orphanage over their home, even though these caretakers were receiving fiscal sponsorship. This result was contradictory to the results from Howard et al. (2007) who stated that caretakers were only hesitant due to lack of fiscal resources to care for the children, but this statement indicates that even though these caretakers are receiving the financial help from sponsorship, they are still more likely to put a child in an orphanage. The reasons varied from education and better material provision to gender roles (Hodgins, 2010). Chirwa (2002), whose studies actually took place in Malawi, tends to dispute these findings.

Chirwa’s (2002) piece is focused on the current state of orphanhood in Malawi. Chirwa looks at folklore, first hand accounts from orphans, and ethnographic data to compile a picture of what orphan care within the Malawi context looks like. Chirwa finds trends that there is a fallacy in the definition of “orphan” in the Malawian languages and in the global understanding of orphan. Through this, there is a trend shown in Malawian folklore of the familial order of orphan care taking. Chirwa shows the Malawian family unit and how AIDS and other crises are disrupting the family system. Chirwa’s argument is against social exclusion and inclusion and is hopeful for a system that will help orphans integrate back into their communities. Chirwa’s fear was that institutional settings could isolate children from the culture and the local community.
Chirwa argues against institutional settings and points out several limitations to that model (Chirwa, 2002).

The orphans themselves have perceptions that impact their status. Harms, Jack, Ssebunnya, and Kizza (2010) did a study in Uganda where they looked at the perception of orphanhood from orphans. The results showed several trends, the first being that many of the orphans felt their childhood ended and they were forced to take on adulthood in an accelerated amount of time. The results also showed that losses for an orphan started at the illness of the parent, not just at the death. The children showed losses in educational opportunities and described a stigma and discrimination from the extended families and communities.

It is also important to note the global view of orphanhood. Meintjes and Giese (2006) conducted a literature review that examined how orphan was defined and how an inaccurate perception of orphanhood can lead to potentially ineffective interventions on the ground. The authors found that many initiatives that require funding will inaccurately portray the orphan crisis to attract the emotion of the funder. This then produces ineffective interventions that isolate and stigmatize orphans more and that neglect the needs of other vulnerable children. The goal of the global community is to care for the orphans but often good intentions can be misdirected.

**Forms of Orphan Care: Institutional vs. Alternatives**

The number of orphans and their vulnerability is only part of the problem. The greater question is of what is being done to assist them. Professionals are constantly debating the most effective way to care for vulnerable children. Residential care has been linked to negative effects on children in several research studies (Bakermans-
Kranenburg, van IJzendoorn, & Juffer, 2008; Bos et al., 2011; Dozier, Zeanah, Wallin, & Shauffer, 2012; James, Zhang, & Landsverk, 2012). But there are also several studies that show the children themselves do not always have negative things to say about their experiences in residential care. In fact, many of those findings lean towards being more positive (Kendrick, 2013; Southwell & Fraser, 2010). This shows a hope for institutional care. Many are now looking at interventions for these institutions to implement that will cause the outcomes to both benefit the children and the system itself (Bakermans-Kranenburg et al., 2008; Holden et al., 2010; Kendrick, 2013; McKenzie, 1998). Even with the new knowledge of interventions, some will stand by their stance that residential care is always harmful and should never be considered effective. Still, others are looking at the interventions and agreeing that with these interventions, residential care may be an effective solution to childcare.

Professionals who tend to stand by the abolition of institutionalization often do so with extreme passion and rightfully so, as there seems to be more empirical, quantitative data supporting the argument that residential care is detrimental to the child’s wellbeing. Dozier, Zeanah, Wallin, and Shauffer (2012) even make the claim “we argue that institutional care is structurally and psychologically at odds with what young children need” (p. 2). These claims do not come from opinion alone, rather from several studies showing the evidence. Bos et al. (2011) conducted research on children who were institutionalized, those who were removed and put into foster care, and those who lived with their biological family. The results revealed that institutionalized children were significantly less likely to have secure attachments, were more commonly diagnosed with attachment disorders, and were more likely to respond to emotional reactivity testing in a
negative manner (Bos et al., 2011). James, Zhang, and Landsverk (2012) found that while residential care often intends to be a temporary solution, the majority of the time it is not. When a child entered residential care, their stays were considered long-term especially if the child had a chronic health problem or had been previously placed multiple times. Longer stays in an institution have been related to a difficulty in developing secure attachments, delays in physical development, and lower IQs and deficiencies in cognitive development (Dozier et al., 2012). Is this evidence enough to rule out residential care altogether?

Some will say no, the evidence above is not enough to completely nullify residential care. While most of the evidence found against institutions is compelling, many of the studies are limited by their lack of communicating the children’s own experiences. Several who are in support of interventions have sought to seek out those who are in residential care and hear from their prospective (Kendrick, 2013; Southwell & Fraser, 2010). Southwell and Frazer (2010) sought to find the strengths and weaknesses of residential care when they interviewed the young people and their results were surprisingly positive. The vast majority expressed feeling safe and seemed to feel that their caregivers really had their best interest in mind. Those who were less satisfied were younger children and those who had been in multiple placements. The study showed that the greatest needs expressed by the children themselves were the need for support and consistency and the wish to be more involved in decision-making (Southwell & Fraser, 2010). Kendrick (2013) also looked into the child’s own perspective. This study found that the emotional needs of children in residential settings are being met due to the family-like relationships that are formed between the child and caretakers. Kendrick also
shows qualitative research indicating that several children preferred residential care to foster care based on varying reasons such as history of abuse, associating family with “distressing situations” (p. 81) or simply not wanting to reject their birth family by entering into a new family. Kendrick (2013) states, “It is in understanding children’s and young people’s centrality in the complex mesh of relations, relatedness and relationships that residential child care must find its true potential” (p. 83).

McKenzie (1998) presents yet another opposing argument saying that long term or even permanent institutionalization is favorable. His main point is that while institutional care is not ideal, it is a better option than multiple placements or return to abusive or neglectful biological families. The argument is for permanency and in many cases orphanages or private institutions can provide that permanency with greater success than the current foster care model, especially for hard to place children (McKenzie, 1998).

In Malawi, the orphan care system looks different than other places. The greatest initiative to assist orphans is through Community Based Organizations (CBOs). Two studies were conducted that looked at the effectiveness of the CBO model. One of the studies found that because the community members were in poverty themselves, volunteering was difficult, so there was a large turnover rate of caretakers at the CBOs. This also led to the upkeep cost rising making CBOs less affordable, because training new caretakers is expensive and time consuming. The results also showed the positive aspects being that CBOs are reaching rural areas, are giving communities a sense of responsibility, and are a model for other community initiatives (Drouin & Heymann, 2010). Another study done on the cost effectiveness of interventions for orphans stated
that CBO services are more cost efficient than institutional settings (Santa-Ana-Tellez, DeMaria, & Galárraga, 2011). Beard also conducted a study on CBOs finding the positive outcome trends to be a sense of community pride in the service, positive changes seen in the children, and increased attendance. This particular study shared significant anecdotal research to the success of the CBOs but there was no strong measurable evidence (Beard, 2007).

Zimmerman (2005) and Friedas (2010b) both conducted studies directly in Malawi as well. Both focused on institutional care within the Malawian context. Zimmerman compared those living in an orphanage or institution to those living in a foster family setting. The research was done through interviews and observations at nine orphanages and various foster system groups. Interviews were conducted with orphans and caregivers. The research looked at various aspects of the orphan’s life including physical, material, psychological, and educational needs. Zimmerman’s findings revealed that orphanages are the most efficient and successful form of orphan care. The current policies in place for orphan care look into long-term solutions but struggle to address the immediate needs. Zimmerman suggests that more orphanages should be built and funded to cover the immediate needs while still implementing the policies that will eventually lead to fixing the long term orphan crisis, such as community restructuring through in home orphan care. The findings support the claim that orphanage care is more sustainable and efficient (Zimmerman, 2005).

Friedus (2010a) highlighted the positive and negative outcomes of institutional care in Malawi. The positive outcomes were mostly material in nature, including basic physical needs and educational needs being met, and also that the children are removed
from abusive homes or villages. However, Freidus also draws attention to the negative effects being the stigma attached to orphans, uneducated and underpaid caretakers, and a growing disconnect to biological family and culture, especially when western sponsors are involved. The study also points out how the label of orphan in Malawi can be both one of extreme vulnerability and marginalization, but it can also be one of high value and worth. At the end of the study, Freidus discovers that while there are both positive and negative outcomes, the children themselves would rather be in the orphanage than in their home villages (Freidus, 2010a).

**Orphanage Interventions**

The evidence of negative outcomes is still greater than the perspective of the children or the good intentions of statements like McKenzie’s (1998), who argued for permanency in an institution over multiple placements. However, the use of orphanage intervention can greatly decrease the risk of negative consequences on institutionalization (Bakermans-Kranenburg et al., 2008). Several interventions are being found effective as the search for learning how to properly care for children holistically continues. Holden et all. (2010) argued for the implementation of the intervention CARE, Children and Residential Experiences. The idea behind CARE is that residential care does not have to be negative if it is being done using research based practice. The hope is that eventually using this research based theoretical model will lead to an evidence-based model specifically for residential care. The CARE model trains caretakers and staff in care that focuses on the development of the child by teaching at the child’s appropriate level. By keeping the care family-based and relationship-based, this model will allow the connection with the biological family to be fully utilized for the success of the child. The
program also trains staff in trauma and forms activities that are sensitive to the trauma many children have experienced. The CARE model has been used at several institutions in South Carolina and the authors share some anecdotes and feedback on the progress in those locations (Holden et al., 2010).

Interventions such as CARE have been developed and implemented in many places seeing great results. Interventions have been shown to increase the child’s IQ and cognitive development, physical growth, and attachment security. Interventions are proven most effective when applied at the beginning of a child’s life, preferably in the first year. The need for interventions is especially important in developing countries where alternative childcare is unavailable (Bakermans-Kranenburg et al., 2008). Another cause for interventions came from a study that states an orphan’s exposure to traumatic events leads to higher emotional difficulties, which has been correlated to poorer cognitive development. The study argued for psychological interventions in orphanages (Escueta, Whetten, Ostermann, & O’Donnell, 2014).

Several other interventions have been implemented in orphanages around the globe that are notable in determining and establishing effective orphan care in Malawi. One study conducted an intervention that consisted of applying a 90-minute daily play intervention. The three month longitudinal study took place in India. The children were tested using Bailey’s Scale of Infant Development. The results showed that after three months the children’s motor, mental, and social development increased significantly. The study also showed that caretakers were more willing to implement the intervention after seeing the positive outcomes of the children. This simple intervention can be applied in any residential setting (Taneja et al., 2002).
Institution-based early intervention is considered a seminal work in orphanage intervention. This intervention was first conducted in Russia after learning that child-caretaker interaction was very limited and that attachment levels were incredibly low (Muhamedrahimov, Palmov, Nikiforova, Groark, & McCall, 2004). The two-part intervention included training and structural changes. Both interventions were implemented in one home, training only was implemented in the second, and neither was in the third. The results revealed a positive correlation between interactions and intervention because that in homes where the intervention took place the child-caretaker interactions increased substantially. The children were played with more and the interactions were not simply limited to feeding and changing. The children showed signs of being more attached to the primary caregivers than secondary caregivers or strangers. The children showed greater anxiety with strangers thus proving the child-caretaker bond. These positive changes lead to better development and mental health for the child (Muhamedrahimov et al., 2004).

A study done in Pakistan found that family settings are of greater benefit to the child than dormitory settings. The study compared children living in two different residential facilities in Pakistan. The cross-sectional study was completed with 330 children between the two locations. They were assessed using the Strengths and Difficulties Questionnaire (SDQ). One of the locations was a family setting with a home with a mother and siblings while the other location was a typical orphanage setting. The study found that there was a negative correlation between the child’s wellbeing, behavior, and mental health and the foster mother’s state of depression or anxiety. The study concluded by showing that a family setting is the most beneficial for a child’s mental
health and social development (Lassi, Mahmud, Syed, & Janjua, 2011).

An intervention that showed positive results in African countries is named “Read me to Resilience”. This approach looks at an intervention using cultural stories to increase the resilience of those orphaned by AIDS in South Africa. The intervention consisted of the reading of cultural stories once a week for about 15 minutes. Resilience was measured using a pre-test and post-test using a draw-and-talk or draw-and-write approach. The children were prompted to draw, and themes were analyzed from the drawings. The sample size consisted of 20 who completed both the pre and post-test. The results showed an increase in two important factors of resilience: increased positive self-concept and increased positive relations with others.

The research found concerning the current status of orphans in Malawi and the state of orphanhood worldwide expresses the great need and the gap in meeting that need. The orphan crisis is growing in Malawi and the vulnerability of these children is increasing, making the need for an effective and relevant response urgent. Research shows that with proper intervention that is culturally pertinent, residential care can help to assist many children who are in need. This project will look at one residential facility to assess the strengths and weaknesses that could lend insight on what interventions are needed in Malawi.

**Methodology**

This study examined the current model of residential orphan care in Malawi. It was conducted over a six-week period in Malawi. The institutional review board of Southeastern University granted approval for the study on May 5, 2014. In June of 2014, the study was conducted at a residential institution outside Lilongwe, Malawi.
The methodology was based loosely off the qualitative methodology of Zimmerman (2005) and Freidus (2010a). Zimmerman conducted interviews over a five-week period in Malawi at different organizations. Freidus conducted interviews with orphans, caretakers, and administrators over a 14-month period in Malawi. Both of the researchers used information from open-ended interviews and observations taken on field notes. (Freidus, 2010a; Zimmerman, 2005) Variations in methodology will occur with sample size and sample demographics.

**Sample:**

A single orphan care institution was examined for this study. The institution houses 157 orphans in the central area of Malawi. The orphanage is located about an hour outside of the capital city of Lilongwe. It is found in a small township and trading community. The township has its own market, primary school, medical clinic, various churches, and other essential business. The sample was taken from consenting Malawian adults who were employed by the institution as caretakers and administrators. No orphans or minors were included in the sample. Each of the interviewees gave clear verbal consent to the study. They also gave verbal consent to the voice recording of the interviews. The sample included three administrative figures and five caretakers. Each of the caretakers were female and over the age of 30. Of the three administrators, one was male and two were female. The administrators were generally younger than the caretakers. The caretakers were selected using availability sampling, but were diverse in number of years spent working for the institution. The caretakers ranged from working at the institution for 2 years to 11 years. The administrators ranged from 1 year to 7 years. Each of the interviewees were full time employees but one of the administrators is
stationed in the United States and works for the funding and sponsorship. All of the other interviewees are at the location on a daily basis. Each interviewee, including the worker in the U.S., is Malawian.

**Data Collection:**

A series of open-ended questions were asked in the interviews. There were eight standardized questions that were asked in every interview. The interviews were conducted in a conversational manner, making use of clarifying probes when necessary. The interviews with administrators were all conducted in English. Each of the administrators are educated Malawians who are fluent in English. The five caretakers were interviewed in a focus group. The questions were translated from English into Chichewa and back to English for the caretakers. Each of the interviewees were asked about how and why a child would come into care, the challenges faced when the child first comes, how and why a child would leave care, and challenges faced when leaving. They were also asked about what they considered to be the greatest strengths of the current model and what they would change if they had the chance to improve an aspect of the orphanage.

**Data Analysis:**

The interviews were transcribed verbatim into English. As suggested by Padgett (2008) and Creswell (2007), the researcher and research advisor took an open coding approach. After three transcripts were transcribed, each individual open coded the interviews. Both individuals met and found they had a strong inter-coder agreement on themes within the interviews and determined a list of code names. Some codes were determined from the interview questions directly. Each subsequent transcript was coded
by the researcher, using the agreed upon list of codes. Ten codes were identified at the first meeting. Some codes were combined and subcategories were created for each code.

**Results**

The themes that emerged for the interviews have been broken down into the following categories: coming into care, food and nutrition, transitioning into care, connection to family, aging out, expulsion, behavior, spirituality, sexual behavior, and education.

**Coming into Care**

In order to have a better understanding of the orphan care system in Malawi, the interviewees were asked how a child would come into care. Each of the interviewees shared several methods. Children are often brought into care through a system where village chiefs communicate which children are in need to the Ministry of Gender and Women in the country. This is where they are listed with the social welfare office and then the nearest orphanage is contacted. The children are identified as vulnerable by the CBO’s or Community Based Care Organizations, which operate in specific villages to bring assistance to orphaned and vulnerable children. Every child that comes into care at the orphanage is registered with the Ministry of Gender and Women. The exception to this would be when the owner of the orphanage has found children in need during his travels and taken them in. Still other children are brought to the orphanage directly by their family members.

When asked why a child would come into care at this orphanage, most responses showed great similarity, stating that the child was orphaned and in need of care and education. The administrator defines an orphan as a child who has lost both parents and a
single orphan as a child who has lost only one parent. He stated that nearly three quarters
of the children are true orphans. Grandparents who could not afford to feed and clothe
them were raising many of the children, or some were in abusive homes that treated them
poorly, especially if they were paternal orphans living with a mother’s new spouse.
Sometimes coming into care was a rescue from maltreatment.

One interviewee explained the cultural practices and stigma concerning
orphanhood. When a child loses his or her parents, they are automatically sent to an aunt,
uncle, or grandparent. They immediately become their child. The problem arises when
the aunt or uncle already has several children in their care, or the new household is
already under the poverty line. In most cases, the child still goes, even if these
aforementioned circumstances exist. This creates the perfect situation for maltreatment
in Malawian culture.

“Now the children are still taken, but their needs are not met. They are abused,
they are not fed, they don’t have a place to sleep.” (Participant 1)

“It’s like most of the time they are being whipped. Most of the times they are
being denied of lots of things. Now it’s like they are in prison too. That’s why we
are seeing how their lives are going and we say…at least we should bring them
here so they can be educated.” (Participant 2)

“Theyir children (the biological children of the extended families) get the best
schools, their children get food first, and you (the orphan) are just that left over
step child which is sad to say but it happens a lot.” (Participant 1)

The need for care and education was emphasized by nearly all interviewees to be
of the same significance when it came to why a child would come into care at the
orphanage. One of the administrators went into detail about the orphanage founder’s goals behind its creation saying “he thought that for these orphans, if he could be giving them food and the like, he is not helping them but rather he better build an orphanage that would be offering them education” (Participant 2). There was a clear connection found in the answers of all participants, showing that the aim behind caring for the fatherless was to educate them, so that they can become independent leaders of the nation.

**Food and Nutrition**

Each interview indicated a clear connection between lack of sufficient food or malnutrition as a reason why a child would come into care, and having a good amount and variety of food as a strength to the orphanage. The provision of adequate nutrition was portrayed as a major reason for care. The child’s basic needs that were lacking at home were met at the orphanage. One housemother discussed how before coming to the orphanage many children were “going to school with an empty stomach but now (they are) going with full.” (Focus Group Participant) Another expressed that “when they get to their homes they find that there is no food” (Participant 3). An administrator discussed how before the children came to the orphanage they would likely only have one meal a day, if any (Participant 2). As mentioned before, step children or orphans living with family members that have biological children are often treated as second rate and are fed less or leftovers. The lack of food and proper nutrition before coming to the orphanage stands in direct contrast with the ample amount of food that children receive at the orphanage.

Food was something that employees of the orphanage saw as a strength. One housemother described the nutrition situation at the orphanage as “We are having fruits
and variety of food. Having enough porridge. Yeah, it’s good.” (Focus Group Participant)

The quality of food and the standard of nutrition found at the orphanage is not common place in Malawi. One housemother told the story of a boy who came into care and then decided he was bored and wanted to go back home. He was old enough to make that decision so they allowed him to leave. However, soon after leaving he found himself missing the fruits and having three meals a day. He eventually came back because he missed the food.

**Transitioning into Care**

Respondents stated that once a child was admitted into care at the orphanage, the child entered into a time of adjustment as they transitioned from village life into orphanage life. While not all children came from rural villages, the majority did, and nearly all of them came from impoverished families that were unable to meet their basic needs. The transition is physical at first. The child has to learn how to live the lifestyle of the orphanage. For many of the children, this may be the first time they have ever seen running water or slept on a bed that is not just a simple mat on the ground. One of the caretakers describes this shift in everyday life as follows...

It might be at home he was waking up very early in the morning.

Going to take care of the herd of cow or goats. While here he will just wake up, take a bath, go to school. Maybe he was not going to school at that time and now, he is forced to go to school. They see a change. Maybe he was going to school with an empty stomach but now he is going with full...to take a bath is difficult, to wash clothes, to sleep on the bed. Sleeping on the bed can be a difficult thing cause he might
fall, ‘cause he is used to just sleeping on a mat. Electricity and flush toilets it’s a new to them. To use a flush toilet, to use a shower, it’s difficult to them. Because they are used to pit latrine... (Focus Group Participant)

The administrator also identified a challenge of cultural differences that arises when children first enter care. Malawi has several different tribes, peoples, and cultures. When children come into care, they are forced to take the culture they once knew and merge it into the culture that is created at the orphanage. The administrator also identified this as a strength at the end of the process because of the unity that is created. He explains this hope of unity when asked about strengths by saying “Also, it is bringing together kids of different areas. That is to say, like the family is multiplying themselves. They won’t be enemies if they don’t know each other. This time around they know each other.” (Participant 2) This shows that the creation of unity is contributing to the goal of the orphanage.

**Connection to family**

The interviewees also referenced the connection of the children to their families of origin as a common challenge that they face when entering care. It was discussed that when a child first comes they may go through a season of crying over missing their families as they adjust. Some of them considered this a positive challenge because “when they come here is actually (the) bad company they lose, the company they had at home.” (Participant 2) This statement makes it seem like “losing the company they had at home” is portrayed in a positive light while other
statements portrayed “missing his family” (Participant 3) as the first and greatest challenge faced by children when they first arrive at the orphanage.

Even though separation from families and villages was a concern, a continuing connection to family back home was also a common theme. One interviewee spoke of the goal of the child getting educated in order to help families back home. It was also evident that the influence of the family on the child continued to be a strong proponent of the child’s life even though he/she no longer lived with their family. This can become a challenge when the family does not encourage the child to pursue the future that the orphanage is trying to give them. This can occur in behavior but mostly it occurs with education.

In our culture, with a child who is coming from an extremely rural village I think there is a lot of fear...there is that fear in the family because most of them are probably uneducated...I think one of the problems is that the communities we take the children from don’t really stand alongside the child…that is why recently we have seen if a child fails a class, they run back to village, because they feel that school is not the way forward. And if 99% of your family is not educated, then I don’t think anyone is going to pressure you for that education. If your family has not seen anything outside the four walls of that village then they won’t see that goodness for your child…At least some people…are appreciative, the child is being fed, the child is being clothed, but they don’t see past the first basic
necessities. So that is one of the challenges is watching children run away and not know what’s best for their futures and that’s probably because they go home and they don’t get that reinforcement from their family. But it does happen. There are families that are very great at just encouraging their children, but then again it doesn’t (always happen). (Participant 1)

There is an evident disconnect between the life that the orphanage is offering the child and the life of their home villages. The orphanage needs the support of the families in order to encourage the child to succeed and when that support is not present the orphanage has a hard time encouraging the children to continue on the path of success.

*Leaving Care*

In Malawi when a child reaches 18, he or she is supposed to move out of the orphanage. This orphanage has another view on aging out. “The thing is they are 18, they still have a life ahead of them. So we take children until they are out of college and then can find a job and support themselves” (Participant 1). It is the aim of the orphanage to see the child through college or university and into a stable job before they are required to move out. The plan is that once the now young adult has a job secured, the orphanage will honor them, celebrate their accomplishments, give them a starter pack with some money and essentials, and then watch them go into the real world. Thus far, the orphanage has only seen three or four children go through this process. The orphanage is learning that because children are unique, this process will look different for each of them. “You know I think every child will be different, just depending on how independent they are and how aggressive they are too” (Participant 1).
Because the youth are able to graduate and get a job does not mean that their challenges are over. The vulnerability of orphans does not necessarily escape them the moment they walk out the back gate of the orphanage. One of the greatest struggles expressed was that these aged out young adults faced a loss of support system. One housemother stated, “To start a new life is always difficult. So, because they were brought here into this new family to start another family, or to start again the families they left, is difficult. Because it’s like they were counted out from the family” (Focus Group Participant). They transition from being on a campus with over 200 people with rules and regulations, to now being alone with the responsibility of their own decisions. One of the participants remarked that the young adults from the orphanage would certainly miss the family of the orphanage.

A challenge they normally meet is they miss the company of their friends at the orphanage and sometimes they miss the company of the visiting teams from American...they are by themselves and they aren’t being told what to do or not to do, but now they are free to do whatsoever they want.

( Participant 2)

These graduated young adults have an advantage few Malawians can ever imagine -a college education. The hope is that they find a stable job before leaving the orphanage. If this happens, then the children have a unique challenge awaiting them. These children who were once abandoned and abused by their family members will now have to face those same family members who now see them as valuable. One of the administrators discussed having this conversation with some of the older boys at the orphanage about what will happen when their family members come to them. She told
them, “And that is a challenge that you will have to realize and know that it will happen one day. So it’s your (decision), you have to make a decision now that you are not going to do the same thing that they did to you”. She continued, “So I think that is one challenge they will face. Their families are below the poverty line and they (the educated young adults) will be inclined to help a lot of people…dealing with that emotionally may be hard for them” (Participant 1). Knowing that these orphans have such an increased ability to succeed, it is the hopes of the orphanage that they have prepared them well to be independent leaders of the nation.

You could have so many responsibilities for so many children that you hope that when they go out there they know that ‘this is how I am supposed to handle these situations’ (Participant 1).

It was quickly pointed out that aging out was not the only way a child would leave the care of the orphanage. There were a few negative alternatives, the first being that the children simply choose to leave. The majority of those who choose to leave are older children. The orphanage staff will try to advise and counsel them out of leaving but, ultimately it is their choice. According to the interviewees, there have been a few young children who have left by choice. This occurred after they would run away multiple times. After several incidents, the staff realized that if something were to happen to the child while they were running away, then the orphanage would be liable. One interviewee described this as the “Malawian perspective” (Participant 1). If the child is a liability, then they will allow the child to go home to their villages. For many of those who choose to leave, the families do not support them to come back, because they do not see the importance of changing the future of these children.
When a child chooses to leave the support of the orphanage, it can be a very terrifying thought. One administrator paints the picture vividly...

For the children, it’s so sad because they are walking right back into poverty. They are walking right back into where you can get bit by a mosquito and your parents don’t have enough money to take you to the hospital and you get malaria and you die. It’s that easy, if you just don’t get that treatment. So you watch those little children walk away and you go, you know, that’s it. You just hope that that’s not how the story is gonna end…It’s not just sickness. There are a lot of hardships and you can’t block...them (from) seeing...Some may go back to child labor. Some will probably not finish school. Some will probably only have one meal a day if any. So it’s putting them right back into that system (Participant 1).

If a child chooses to leave the orphanage, all too often the cycle of poverty and lack of education continues. Each of the participants showed a deep pain at the thought of a child leaving the security and opportunity that the orphanage provided to return to their former lives that often lacked these basic needs.

**Misbehavior leads to Expulsion**

Children also leave care when they show consistent or extreme misbehavior. If the misdemeanor involves the local authorities or police, then the child is typically automatically expelled unless the offense was mild enough to be dealt with on other terms. Another automatic expulsion would come if the child was expelled from their school. The boarding schools expel children for drinking, sexual behavior, and
pregnancy. If the child is showing destructive behavior at the orphanage, then the child will be counseled several times and warned. If the behavior continues, then the family is contacted to come to the village to witness for the child and to encourage the child to follow the rules and regulations of the orphanage. If, even after that, the child still continues with the destructive behaviors, then the child is expelled from the orphanage. The housemothers further identified behaviors such as “beating others... (being) rude to mothers...and when they fall pregnant” (Focus Group Participant) as example behaviors for expulsion.

This too sets the child up for a dismal future. Similarly to when a child chooses to leave the orphanage, when a child is expelled, they are prone to return to a situation where their home villages are not equipped to care for them or support them in the way in which they have been at the orphanage.

“Yes and after that, they become thieves because they have nothing to do. And others, they can’t eat without finding no work” (Participant 3).

“Most of them stop schooling because of school fees” (Focus Group Participant).

“When they get to their homes they find that there is no food. No clothing. No soap...” (Participant 3)

“You send them back and it is just the same cycle” (Participant 1).

“Some of them you will find ending up becoming thieves. And we have some witnesses of that, three boys, they were even in jail as of now because as soon as they left this place, they had nobody to help them but
then they started stealing and when they started stealing at the end of the day they found themselves in prison” (Participant 2).

Behavior

As expected when conducting interviews, administrators gave answers that were macro in nature, while the caretakers showed a greater knowledge of the individual needs of the children. The administrators spoke of expulsion for “bad” behavior but the caretakers discussed these behaviors in more detail.

“No one likes to fight with others (when they first arrive). To beat their friends because they are not used to them” (Focus Group Participant)

“To abide by the rules is something difficult” (Focus Group Participant)

One stateside director helped to give understanding of how behavior issues are seen and dealt with in Malawi.

“Seeing some forms of tough love is hard and I think it is hard on the moms too, to raise children who maybe have behavior issues. Here (in America) it is easy to identify a behavior issue and be able to address it, but back home (in Malawi) there is really no such thing as behavior issues, you are just a bad child. And being able to...go into that and not step on cultural boundaries, and try to discipline children is difficult” (Participant 1)

This orphanage does not have the facilities, training, or understanding to address these behavior issues. For that reason, the only way they know how to deal with the behavior is to counsel them or encourage them to be better, and then if nothing changes, expel them.
“They have been counseled for three times and if they break the rules for the fourth time that is when they are to leave. But not too much misbehaviors (are) here. So mostly at school.” (Focus Group Participant)

“Sadly for those who are expelled over behavior issues, you know it’s sad because our country doesn’t have those facilities to help. It would be nice if we could partner with an organization that could help with these issues, with aggressive behavior because of trauma in your background. But you send them back and it is just the same cycle. They are not helped.” (Participant 1)

The director identified how this is one struggle with finding the balance between institution and family. For an orphanage to function as a normal family is impossible due to the vast number of children and need for organization and order. However, the staff still seek to create an environment that allows the children to feel like the orphanage is their home and not just another boarding school or cold institution. The orphanage is constantly making decisions while trying to keep this balance in mind. “I seek to find a balance in between what can work, where the children feel like they are at home in a family and not like they are transitioning. It’s just a part of their life they are transitioning through. I want it to be like a circle where they know they grow in this and they come back to it, like this is their home.” (Participant 1) This balance not only greatly affects the handling behavior issues, but also the structure of buildings, daily schedules, and interrelations with staff and children.

**Spirituality**

It is important to identify an aspect that sets this orphanage apart from other orphanages in Malawi. This orphanage is faith based and is financially and physically
supported by western funders and many church groups. The children are exposed to the Christian faith through devotionals, local church attendance, and visiting team’s Bible classes. The impact of spirituality sets the orphanage apart from other orphanages that are not faith based. One interviewee spoke of the spiritual aspect as a strength in the orphanage.

“They do some devotions with some house moms so they are able to go to church. These are some things they don’t have at home.” (Participant 3)

The housemothers mentioned spiritual growth as something they would change if they were able to improve the orphanage. “Teaching them to grow spiritually” (Focus Group Participant) was mentioned multiple times by caretakers. However, they were noticing a change in spiritual growth due to a recent change in nightly schedules. “Since we have started having devotions each and every (night) I think there will be a big change.” (Focus Group Participant)

One director spoke of how the spiritual culture created at the orphanage is breaking down barriers and traditions in the culture.

“They have seen so much compassion through people who love Christ and I think that is the greatest thing that these children are impacted in a way that, you know, even me being Malawian, I never knew I could love God and be so free in how I worship Him...The good things I see is that...there is some tradition that is being broken in our culture. The girls know they can be who they can be and the boys know they can be leaders, but not be too much...they can be responsible young men and not have to feel that they are superior above other people and not have to feel like being aggressive is the way to go.” (Participant 1)
The director went on to reference one particular boy who lives in the orphanage. He has learned to sew and has become a great tailor since being at the orphanage. The orphanage has helped him to learn how to use his new talent to make profit in a fair and responsible way. He has sold many handmade bags and clothing to both western visitors and locals. Since he has been making money, he has saved it. He recently took his savings back to his home village and helped his surviving relatives by purchasing them sustainable gifts such as seed, a new roof, and a sewing machine. He taught his mother how to sew and helped her start her own business from his. The director states the spiritual climate of the orphanage as the source of this character building. She also referenced another child who has succeeded in schooling to the point that he is able to study at a western university yet he has vowed to come back to this community when he is finished with education to change the nation the best way he can, by working to break the poverty cycles.

“In some of the kids, there is a fire in them that is teaching them how to give back to their community.” (Participant 1)

**Sexual Behavior**

One circumstance that is all too common in Malawi and has found itself repeatedly arising at this orphanage is that of premature sexual behavior and unwanted pregnancy. This problem is not simply a result of physical desire but also a product of the culture. “Because in Malawi at the average age of 19, if you don’t go to school, then probably by the age of 18 you are getting married and by 20 you have two children, by 21 you have three, no family planning” (Participant 1). When a girl becomes pregnant, she can no longer stay at the orphanage. So, often a girl will become pregnant, leave the
orphanage, quit school, and soon after, she is found married with a child. One administrator even illustrated that many of these marriages do not last.

“They think the best thing is to find someone who can say they can marry them and later on, they are not married to those guys. So that is a challenge, cause when they go home, they have a baby or else they have given birth to a baby at home. But they don’t have somebody to help them. So now they may end up being in beer halls serving men instead of at least thinking of their future.” (Participant 2)

The cultural situation in Malawi places women under men and thus suppresses their ability to see their own potential. The cultural trend indicates that even girls who leave for behavior issues will probably end up pregnant soon after leaving the orphanage even if they were not pregnant when they left. They feel that if they struggle in school then they must start a family. The state side director explained this cultural stumbling block for the girls at the orphanage. “And that goes for our girls at the village (orphanage), they don’t talk, they don’t communicate, they don’t feel like they have the ability within them to succeed at life.” (Participant 1) The orphanage seeks to provide an opportunity for girls to see their worth and teach them how to “be a respectful well raised young woman and still have an ambition and a goal to be a leader in your country” (Participant 1) Yet the number of girls who have left the orphanage due to sexual behavior is greater than they would wish it to ever be.

**Education**

In a place like Malawi, it is not surprising that in conversations about the care of orphans, the topic of education arose frequently. Nearly every interviewee spoke to the fact that education was as much a reason for an orphan to come into care as basic care
needs were. “Because they don’t have parents, so they came here for care and education” (Focus Group Participant) It appeared that education was the least they could offer to help these children but it was the greatest thing in Malawi.

“When they take education, they will become independent after they finish their courses. So our aim is that they become independent leaders of this nation after completing their studies” (Participant 2).

“I think education is the way for everybody in Malawi, I think that will break a lot of poverty cycles. So I think the education they are getting, even though we are still working on it, I think that is a good thing that is happening” (Participant 1).

Currently, children at the orphanage are provided education from nursery school to university. Hired teachers conduct nursery school on site. When children reach primary school age, they go to the local primary school that is about a half mile from the orphanage’s campus. When the children come home from school, they attend afternoon classes at the orphanage with hired teachers. Grade 8 is the last year of Malawian primary schools. Once they have completed the national examinations at the end of grade 8 the children will go on to secondary school. In Malawi, grades 9-12 are referred to as “form 1-4”. The children are currently sent to boarding schools from secondary school but the orphanage is in the process of building a secondary school on campus. Once a child has completed secondary school, the orphanage will help them to get into a college, university, or trade school that fits the child’s abilities and desires.

The majority of the interviewees saw education at the orphanage as a success. When most children come to the orphanage, their ages do not match up with their grade level and some have never attended to school before. The orphanage supports these
children in school fees and additional tutoring from the hired teachers. Yet, it is still a challenge for the children to do well in the local schools. The housemothers identified large class sizes as a hindrance for a child’s success. In some classes there are over 100 pupils to one teacher.

When asked about improving the orphanage, several interviewees discussed the building of a new school on campus as a great need.

“I would build a new school for the kids...to encourage them about education” (Participant 3)

“I feel like if we try to build a primary school and a high school just on the campus that will help us. Because it is a lot of money to pay for our children a various secondary schools instead of just hiring a few teachers that can be paid and then we have everything that can help them” (Participant 2)

**Hope**

Another theme that was unique to each interview was that of a hope for the future of the orphans in care. Each of the interviewees conveyed that if the children in the orphanage were able to complete their education, they would surely get good jobs and become strong, independent leaders of Malawi. This was notable considering the research that shows that orphans have unique vulnerabilities that put them at a disadvantage for futures such as this one that the interviewees describe for the children.

“Just take heart…at the end of the day we find that they are becoming some people and some big men in the society” (Participant 2)

“150 children who have been taken out of the worst situation possible, out of abusive relationships, out of just hopelessness…they have seen so much
compassion (from the orphanage staff)...these children are impacted in a way I never knew...seeds are being planted in their hearts” (Participant 1)

“These children come here to be educated so that they in the future, will be independent leaders” (Participant 3)

“I feel like it’s very good to help them, so that they can transform this nation” (Participant 2)

Those who provide basic care for these orphans believe that somehow, with the help of the resources offered by the orphanage, these abandoned, vulnerable, and desperate children have the capacity to learn, develop, lead, and change the nation of Malawi.

**Discussion**

Orphans in Malawi are exposed to a specific stigma that puts them in both a position of vulnerability and, in some cases, privilege. However, among those who are in the business of caring for these children, there is a common hope. They see these children as having the ability to change and lead their nation. The results of this study show that in the midst of great tragedy, orphans in this institution in Malawi are receiving a chance to change their future. This study gives hope for the future of orphan care and shows that institutional care can be successful in a place like Malawi.

Upon examining why a child would come into orphan care in Malawi, it became evident that in many cases residential care was superior to the neglected life that many orphans lived when abiding with family that was not their biological parents. Through statements made by the interviewees it was shown that many of the children were in fact, double orphans and had no biological parent living. This study confirmed research that
orphans are susceptible to a greater vulnerability than non-orphans (Campbell et al., 2010; Case, Paxson, & Ableidinger, 2004; Kidman et al., 2012; Kirkpatrick et al., 2012; Panpanich et al., 1999; Sharma, 2006). The nutritional security that an orphanage can provide is clearly another positive factor supporting how orphanages can be effective alternatives to other forms of orphan care in an impoverished country like Malawi.

Even with the positive physical and circumstantial benefits that the children acquired after coming into care, there was also a noticeable time of transition that each child underwent when they first arrived at the orphanage. Between the culture shock of adjusting from village life into a more modern life, and the trauma of leaving the only family they have ever known, the children enter into a season of transition. Interventions such as CARE, which uses the continued relationship with the biological family to bring about better adjustment results may be of benefit to this orphanage, especially considering the fact that many of the children are greatly influenced by their continued relationship with family (Holden et al., 2010). The CARE intervention also includes additional training for caretakers on trauma and developmental learning that could greatly benefit this institution.

The current model of care examined in this study expresses how children at the orphanage are exposed to a greater chance at success educationally. Before coming into care, children were rarely educated, but within the institution, the children’s educations were funded through university level. In countries like Malawi where less than 30% of the population attend secondary school (unicef.org), education is vital to success and to breaking the chains of poverty. This study shows that children in orphanages have the potential of leading the nation; this is greatly due to the fact that they are being educated.
The orphanage examined in this study brought about a unique factor that contributed to its success: spirituality. In this case, spirituality was an intervention that effectively changed the culture of the orphanage. Based on the testimony from the interviews, the use of spiritual lessons and devotionals led to the success of children and their maturity. The stories from this orphanage lend support for the use of religion in nurturing orphans into responsible citizens. Studies such as one done in Sri Lanka with war orphans have linked spirituality and faith with resilience of orphans (Fernando & Ferrari, 2011). Fernando and Ferrari (2011) highlighted how faith teaches values that may be contrary to the trauma an orphan has experienced, but through spiritual beliefs orphans are able to obtain values that seem opposite of their experiences; for example, valuing peace and compassion after experiencing war.

The most obvious stumbling block that arose in this study was found in the discussion of children leaving care. There were multiple accounts of children leaving care due to misbehavior or by choice. There is a suggested need for interventions on behavioral issues that children may experience due to trauma. It was identified that behavioral issues are not regularly labeled or addressed within the Malawian culture. For this reason alone, it is notable that training on such topics may be beneficial to the success of the children. Interventions such as “CARE” and “Read me to Resilience” may be of interest to this orphanage (Holden et al., 2010; Wood, Theron, & Mayaba, 2012).

A study done in Tanzania may be of particular interest for this orphanage. Tanzania, much like Malawi, has millions of orphans that are no longer able to reside only with family. As a result of the growing number, there has been an increase in residential settings for Tanzanian orphans. A study done in 2011 examined and
intervened on behalf of the mental illness and aggressive behavior that was found at these orphanages. The intervention consisted of “training sessions for the caretakers that aimed for a better understanding towards the children and for a positive relationship between caretaker and child in order to reduce violent punishment and to foster secure bonding” (Hermenau et al. 2011. p. 4). The training covered four main topics; 1.HIV awareness training, 2.Developmental stages, windows of opportunity, attachment and bonding, 3.Grief, and 4.Positive Parenting Strategies based on the Oregon Model. Along with the training the intervention also included trauma therapy for all of the children. The therapy used was the KIDNET-Narrative Exposure Therapy for Children. This type of therapy takes a child through a chronological journey of their life and focuses in on the traumatic experiences with the intention of allowing the child to process feelings and emotions that they never discussed before. The study found a decrease in aggressive and disruptive behavior after implementing the intervention at the orphanage in Tanzania. The study also emphasized that with impoverished African nations, such as Tanzania, it is almost necessary for outside funding for any intervention to be made possible. (Hermenau et al. 2011).

Though the data collection for this study never addressed how caretakers are trained, the results concerning behavioral issues does lend a notion that an intervention such as the one done in Tanzania may be of great benefit. Having caretaker training and individual trauma training for children has the potential to not only benefit the child but also reduce the number of children who are forced to leave because of behavior. If behavior is addressed through therapy, the retention rate may increase, based on the results from Tanzania where unwanted negative behaviors were decreased after
intervention (Hermenau et al. 2011).

Along with the topic of behavior, sexual engagement arose as a potential contributor to the lack of success from certain children. Again, culture plays a role in the problem of pregnancy and unwanted sexual activity that this orphanage is experiencing. It is of special concern for girls who do not finish their education and thus drop out of both school and the orphanage. In Malawi, it is more likely for girls to be enrolled in primary school because in 1994 Malawi was the first country in Sub-Saharan Africa to eliminate school fees for primary school (Grant, 2012). This greatly benefited girls in Malawi. However, females are still at a disadvantage in Malawi to complete school. One of the greatest contributors to this disadvantage is the pressure to be involved with sexual activity. In Malawi, there is evidence that girls are more likely to drop out of school if they have been sexually active (Grant, 2012). In a study by Robertson, Gregson, and Garnett (2010), it was found that female double or maternal orphans in countries with high HIV prevalence are at a greater risk for early sexual debut and have a higher chance of contracting HIV or experiencing an unplanned pregnancy. A study that looked into abortions in Malawi in 2010 found that 52% of all pregnancies in Malawi were labeled unintended (Levandowski et al., 2013). According to Grant (2012), schoolgirl pregnancy is greatly feared in Malawi, but it is actually quite rare due to the fact that most of the girls under 18 that fall pregnant are actually married. It is more common for a girl to leave school because she is “ready for marriage” than because she is pregnant. But the phrase “ready for marriage” is used interchangeably with “sexually active” in the results. Gender perceptions also contribute to this phenomenon because in Malawi, girls are considered far more
susceptible to succumb to their romantic desires than boys. And boys can manage both education and sexual activity because they are able to go back to school, even if they impregnate a girl. It was even discovered that parents considered an unwanted pregnancy to be a worse fate than contracting HIV would be for their daughters (Grant, 2012). Grant’s study revealed that the conditions at many boarding schools in Malawi provide a place for sexual behavior instead of protecting against it. For this reason, many families sacrifice their daughter’s education to prevent them from becoming pregnant by simply removing them from school all together when they become sexually active.

There is obviously a need for a better intervention than simply removing a girl from school. Future research is needed to discover interventions that both empower education and prevent against unwanted sexual behavior for girls in Malawi. Research could also explore the differences in gender expectations in Malawi to better understand this phenomenon.

The greatest revelation of this study is that of the hope that the caretakers and administrators express when discussing the future of the children in the orphanage. In a country where orphans are treated as second-class citizens by their own extended families, it is notable that those who are not even related to them would consider them so highly. Future research could question where the source of this hope lies and how it impacts long-term success of children in international orphanages. It is suspected that this hope may come from the spirituality that was mentioned multiple times, or stem from the international supporters. If future research could determine the source of the hope then other African orphanages could benefit, and more children could succeed.
Limitations

One limitation of this study is that the sample size was small, with only one institution being examined. It cannot be determined that the results from this study could be generalized to any other institution. There is also call for concern over the honesty of the interviewees, due to cultural differences between the interviewee and the interviewer there is a possibility of a social desirability bias. The interviewer was a young white American female and each of the interviewees were Malawian. One potential limitation is that cross-cultural interviews can produce bias when the Malawian participants answer interview questions with the intention of pleasing the American interviewer. There is additional worry for this, based on the findings that American supporters fund the institution.

Conclusion

In Malawi, being named Masiye is less than desirable. As stated in the introduction, Masiye is a Chichewa name that translates as abandoned, left behind, orphan (Chirwa, 2002). With a name like Masiye, a child cannot easily escape the daunting fate that accompanies the label of “orphan”. An orphan has a fate that includes a lesser likelihood of finishing their education, a higher likelihood of becoming sexually active at young age, a high probability of being malnourished and emotionally unstable, and a status that puts them second to every other citizen who has someone to call them son or daughter. Through the lenses of research, the outcome is not promising for Masiye.
Over one million orphans reside within the small nation of Malawi (unicef.org, 2013). Almost 160 of the nearly 1.3 million have found themselves at the front gate of the orphanage that was examined in this study. To be precise, 157 Masiyes. The percentage may be small compared to 1.3 million, but there are 157 abandoned ones that have found a secure place to call home. With the help of interventions, access to the rare commodity that is education, and caretakers that believe in them, these 157 orphans have the potential to lead the nation. That hope is not something created by a western idealistic researcher, but rather it is something that was found in the heart of each of the caretakers and administrators. It was the common thread through each interview. It was the motivation behind their answers. The greatest discovery was not that there is a perfect model for orphan care found in an institution in rural Malawi. The greatest discovery was that there are individuals found in an institution in rural Malawi who believe that somehow the abandoned ones of this world can, in their resilience, overcome every challenge that is thrown their way, and lead a nation. The purpose of this study was to identify ways to better the lives of orphans in residential care in Malawi. While there were still many concerns to be addressed, the revelation is that lives are already changing. In rural Malawi, there is a place where Masiye are being redefined.
Reference

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