

An Interpretive Phenomenological Analysis of Oppressive Orientations in Orphan Support Projects in Homa Bay County, Kenya

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1. Oppression of Orphaned Children

Extant and recent studies and policy papers in high HIV and AIDS countries in sub-Saharan Africa have documented that millions of children below age 18 years have been orphaned and made vulnerable by AIDS. UNAIDS (2010) estimated that globally about 16.6 million children aged below 18 years have reportedly lost one or both parents to AIDS. Prior estimates in Kenya have found that approximately 3.6 million children are orphaned or are vulnerable, and represent almost one-fifth of the total population aged <18 years (KNBS, 2010). It has been estimated that 1.1 million, or 44%, of these children have lost either 1 or both of their parents to AIDS (NACC, 2012).

While millions of other children in the region have been orphaned by other diseases, accidents, disasters and other factors, studies and policy papers in the region have focused exclusively on children believed to have been orphaned by the AIDS pandemic. What is notable about these studies and policy papers is that they have helped in documenting and telling the stories of the oppressive conditions and suffering that these orphaned children face in their communities, homes and in schools in the region.

In a region where effective relief for pain or other symptoms is often unavailable and expensive, children who have lived through their parents' painful illness and eventual death, frequently suffer from depression, stress, and anxiety. It is said that as HIV and AIDS continue to soar in the region and household poverty deepens, orphaned children are increasingly pressured to financially contribute to the household. In most cases, the streets have become the place where these orphaned children often turn to supplement lost wages, find refuge, and sometimes to find an escape from stigma (Salaam, 2004).

These children lose everything that once offered them comfort and security and hope for the future. The oppressive distress and social isolation experienced by orphaned children both before and after the death of their parents are strongly exacerbated by the shame, fear, rejection, powerlessness and dehumanization that often surround people affected by HIV and AIDS.

Studies conducted in Kenya have confirmed that children believed to have been orphaned by AIDS undergo oppressive conditions and suffering even in their communities. A study in Kenya found that 77% of children believed to have been orphaned by AIDS had no one outside of their families whom they could tell their troubles to (HRW, 2001). These children suffer social rejection, exclusion, and heightened sense of powerlessness, not because they are orphans, but because they are believed to have been orphaned by AIDS, a highly stigmatised disease condition in Kenya.

A report by UNICEF (2013) in Kenya found that the majority of orphaned children and their households are not receiving orphan-targeted support services. While these services are intended to address the basic or core needs of orphaned children (food and nutrition; shelter and care; legal protection; health care; psychosocial support; and education), millions of these children are socially marginalized and are not receiving the services as outlined by the global framework for the protection, care, and support of orphans and other vulnerable children (UNICEF, 2013). The marginalization and social exclusion of these children from the services exacerbates their oppression and suffering. There is also a strong possibility that the coverage of these services is limited to a few orphaned children, or not adequately financed and properly targeted.

Pfleiderer and Kantai (2010) conducted a study in Kenya on orphaned children, and they found that systems and services to prevent and respond to child maltreatment in Kenya are weak, and many cases of child abuse and maltreatment go unreported. Maltreatment of orphaned children includes child neglect, abandonment, assault, sexual abuse, child prostitution, harmful cultural practices, and exploitative labor. Orphaned children who lack adequate adult care and protection are at higher risk of all forms of child maltreatment. These are some of the worst forms of oppression and social injustice.

Sexual abuse of orphaned girls is one of the worst forms of oppression that are visited on orphaned children. A study undertaken jointly by UNICEF and the government of Kenya (UNICEF & GoK, 2006) in the coastal region of the country on the extent of sexual abuse and exploitation of orphaned girls indicate that some 10,000 – 15,000 orphaned girls living in coastal areas are involved in casual sex work – up to 30% of all 12-18 year olds living in those areas. A further 2,000 – 3,000 girls and boys are involved in full-time year round commercial sex activity in the region.

Exploitation of orphaned children has been documented in a number of studies across Kenya. For example, a study conducted by Biemba and colleagues in Kenya (2009) found that of 1520 orphaned children enrolled in the study, very few had received any medical (3.7%), psychological (4.1%), or material support (6.2%) in the past 12 months, in spite of the fact that there were projects funded to support these children. Although still low, school support was the most common type of support received for school-aged orphans aged 5–17 years, at 11.5%. These children also take on income- and sustenance-generating activities that put them further at increased risk of exploitation and abuse.

Psychological oppression caused by trauma and stress following parental death and the painful realities of exclusion have been documented in studies among orphaned children. For instance, a longitudinal study conducted in Uganda's Rakai District to determine the nature and emotional problems of orphaned children found out that majority of orphaned children felt angered about their parents' death, especially those living with relatives and that many of them were showing signs of stress and trauma (Sengendo et al., 1997). Orphans experienced additional trauma from lack of nurturance, guidance and a sense of attachment, which impeded their socialization process- through damaged self-confidence and motivation (Sengendo et al., 1997). When a parent dies from AIDS, trauma is often accompanied by stigma and discrimination. At school, AIDS orphans were singled out or rejected by their

peers, which created barriers to healthcare, education and access to social events (Subbarao et al., 2004).

A study conducted in Zimbabwe by UNICEF to determine children's needs found out that orphaned children were worried most of the time that they were growing up without parental care (24%), while 6%, 19%, 5%, and 21% mentioned ill health, poverty, shelter and not completing school respectively as their greatest concerns (UNICEF, 2005).

Sengendo and Nambi (1997 in a Ugandan study, found that most children felt hopeless or angry when their parents became sick and scared their parents would die. Most orphans were depressed, with lower expectations about the future: fewer orphans expected to get a job, wanted to get married or wanted children than non-orphans. Depression was more likely in 10-14 years old than 15-19 years and such children were more likely to be living with a widowed father than with a widowed mother, suggesting that the loss of a mother is more distressing than the loss of a father. Stigmatisation, dropping out of school, changed friends, increased workload, discrimination and social isolation of orphans all increase the stress and trauma of parental death.

Early evidence of the educational exclusion and poor outcomes for orphaned children came from Uganda (Muller & Abbas, 1990). There was early evidence that the financial strain led to households with orphans failing to raise funds to send these children to school, while non-orphans in the same households were going to school. World Bank (1997) in a study in seven African countries found that primary enrolment rates of orphans, especially double orphans, were generally lower than in non-orphans, especially in countries with low overall enrolment rates and in households with least assets.

The education of orphaned children is often disrupted when parents become sick, especially older girl children who are required to take over household and care giving chores. In Uganda, amongst children 15-19 years whose parents had died, only 29% continued their schooling undisturbed; 25% lost school time and 45% dropped out of school; school-age children with the greatest chance of continuing their education were those who lived with a surviving parent; those fostered by grandparents had the least chance (7%) (Sengendo & Nambi, 1997).

Analyses in 10 sub-Saharan countries found evidence of intra-household discrimination against orphans as manifested in schooling, with orphans having lower enrollment rates than non-orphans in the same household (Hepburn, 2001). In a study by UNICEF in Andhra Pradesh, Nepal (UNICEF, 2009) on barriers to orphaned children's wellbeing, found that orphaned children had very little say in decisions affecting their lives and that no advice was given to them nor were their opinions sought.

2. Conceptualization of Oppression

Various definitions of oppression have been advanced by scholars from diverse backgrounds. There is, however no agreed definition of oppression. Webster's Third International Dictionary defines oppression as unjust or cruel exercise of authority or power especially by

the imposition of burdens; the condition of being weighed down; as a sense of heaviness or obstruction of the body or mind.

The Social Work Dictionary defines oppression as the social act of placing severe restrictions on an individual, group or institution, with the oppressed group feeling devalued, exploited and deprived of privileges by the individual or group which has power. The Blackwell Dictionary of Sociology defines social oppression as concept that describes a relationship between groups or categories of between groups or categories of people, in which a dominant group benefits from the systematic abuse, exploitation and injustice directed toward a subordinate group. Social oppression becomes institutionalized when its enforcement is so of social life that it is not easily identified as oppression and does not require conscious prejudice or overt acts of discrimination.

Deutsch (2006) conceptualizes oppression as the experience of repeated, widespread, systems of injustice, and that it does not have to be extreme, involve the legal system nor violent for it to be called oppressive. Harvey (1999) has used the term ‘civilized oppression’ to characterize the everyday processes of oppression of normal life. Civilized oppression is embedded in unquestioned norms, habits, and symbols, in the assumptions underlying institutions and rules, and the collective consequences of following those rules. According to Young (1990) civilized oppression refers to the vast and deep injustices some groups suffer as a consequence of often unconscious assumptions and reactions of well meaning people in ordinary interactions that are supported by the media and cultural stereotypes as well as by the structural features of bureaucratic hierarchies and market mechanisms.

Other scholars like Gill (1994, Young ,1990) see oppression as the relations of domination and exploitation (economic, social and economic) between social groups and classes within and beyond societies, leading to injustices, discriminations, dehumanizing and development inhibiting conditions of living, imposed by oppressors upon dominated and exploited individuals, social groups, classes and peoples. Accordingly, these conditions are perceived to cause people to turn to social services for help. Seen from this perspective, oppression is seen to be motivated by intent to exploit and results typically in disadvantageous, unjust conditions of living conditions for its victims. It serves as a means to enforce exploitation toward the goal of securing advantageous conditions of living for its perpetrators.

3. Child Welfare Projects as Oppressive Systems

Dumbrill, (2003), argues that child welfare projects predominantly adopt a power over approach to practice and programming, rather than the power with approach. The power over approach predominant in these Projects allows professionals in these systems to control the power dynamics of relationships. When the power over approach to practice is exercised by an agency and its workers, it often forces the caregivers to play the game with the child welfare system (Dumbrill, 2003).

The power over dynamic is further reinforced by the ability of the child welfare project to draw upon the extensive networks and resources at its disposal, giving the project substantially greater resources and access than the orphaned children and families. Additionally, professionals in these Projects have the ability to control what information can

be made available to a child or care giver. This often makes orphaned children and their families from challenging the child welfare Projects, while conversely reinforcing the power being exercised by the professionals and the Projects (Dumbrill, 2003).

Child welfare projects operate within a bureaucratic framework. Weinberg (2006) argues that child welfare workers, who might want to address systemic oppression and marginalization, find it difficult to challenge the status quo, which in turn, reinforces the oppression of orphaned children in child welfare system. The bureaucratic culture in child welfare Projects, contributes to oppressive outcomes. The result is that child welfare project remains unchallenged about its oppressiveness, and the marginalized orphaned children continue to experience oppression

4. Statement of the Problem

Orphan support projects are designed and implemented to empower orphaned children and to keep these disadvantaged children from the social and structural oppressions and problems which pose a profoundly more universal risk to the wellbeing and survival of orphaned children (UNICEF, 2013; Pflaiderer & Kantai, 2010). While extant and recent studies in Kenya and other sub-Sahara Africa have documented the excruciating oppression and suffering that orphaned children experience in their families, schools and communities(see UNAIDS, 2010; Salaam, 2004; UNICEF, 2013; Pflaiderer & Kantai, 2010; UNICEF & GoK, 2006), few studies have explored how orphan support projects exacerbate the oppression and suffering of the orphaned children.

Moreover, no known study has explored the lived experiences of these children with oppressive projects and services. The research silence on the potential contributions of these projects in reinforcing oppressive feelings and conditions of the orphaned children have unwittingly made these projects and services ineffective. Notwithstanding this, there is an emerging demand for child welfare projects to design and implement anti-oppressive policies and interventions that empower disadvantaged children and their families (Dumbrill, 2012, 2011; Grant, & Ojo, 2008; Mullan, 2007).

Notwithstanding the oppressive conditions that orphaned children undergo long before they even get enrolled in support projects, these children may experience double jeopardy of oppression in the orphan support projects, since the structure of these child welfare projects and practices reinforce the oppression of the very disadvantaged orphaned children and they plan to support. Moreover, even studies that have attempted to examine the oppressive conditions and suffering that orphaned children experience as a result of inadequate and inconsistent services, have been expert dominated and have excluded the voices of these children and have not examined the experiences of these children with oppression in the very projects that are purportedly designed and implemented to protect them. The purpose of this study therefore is to examine how orphaned children experience oppression in orphan support projects.

5. Research Methods

5.1. Research Design

The study uses Interpretive Phenomenological Analysis (IPA), an approach to qualitative research concerned with exploring and understanding the lived experiences of a specified phenomenon (Smith, 2004). IPA involves the detailed examination of participants' 'lifeworlds'; their experiences of a particular phenomenon, how they have made sense of these experiences and the meanings they attach to them (Smith, 2004). Although firmly embedded in psychology, Smith, Flowers and Larkin (2009) have welcomed and encouraged those without formal psychology training to use IPA to answer questions of importance to their discipline.

A growing body of IPA work has enabled the voices of under researched groups to be heard e.g. orphaned children (Petals et al, 2009). The key theoretical perspectives of IPA are phenomenology, interpretation (hermeneutics) and idiography (Smith, 2004, 2007, Smith, Flowers & Larkin, 2009). While these three features are not unique to IPA, they have been combined and the specific emphases and techniques used within the method identify IPA as an affiliate but distinct approach in the field of phenomenological enquiry.

5.2. Research Participants

Eight (8) male and female orphans aged between 15-17 years enrolled in three orphan support Projects in Mbita sub-county, were recruited through the help of the Projects' social workers. The social workers contacted the guardians of the enrolled orphaned children and explained to them the purpose of the study, and requested them to allow their orphaned children to participate in the study. The social workers informed the guardians/ parents that the information was for academic purposes only and not for internal use by the project.

5.3. Ethical Issues

After the consent of the parents and guardians of the twelve orphans had been sought, the purpose of this study was further explained to the orphaned children and their assent received. Laws and Mann (2004), state that it will be necessary to seek the consent of parents and carers to work with individual orphaned children. However, the literature demonstrated that this process can be negotiated in a way that respects orphaned children's competencies and empowers them to make choices for themselves. For example, Mahon and others (1996) stated that in their study orphaned children were approached directly for their consent, with parents first being asked only for permission to make contact with the child. Thomas and O'Kane (1998) in their study of 12 year olds in the care and protection system empowered the child participants by seeking active agreement from the child and passive agreement from the parent.

Each child was informed individually that the information shared would be kept confidential and that participation in the study would not in any way affect their project sponsorship. The orphaned children were asked to share their experiences in the language they were most comfortable with and were reminded that each one of them was free to stop participating in the study at any time without giving any reasons and without penalty.

Articles 12 and 13 of the UNCRC require that orphaned children should be informed, involved and consulted about all decisions that affect their lives, and that this helps to increase involvement of orphaned children as participants and co-researchers (Johnson et al., 1998; Nieuwenhuys, 2001; Lansdowne, 2002; Kirby and Bryson, 2002; Sinclair, 2004). Majority of the orphaned children were comfortable with the Luo language (their mother tongue), while a few said that they would mix both Luo and English languages if they and when they found it necessary.

5.4. Data Collection Method

Significant time was invested in constructing an interview guide in English that ensured that the wording and sequence of questions were simple, easy to understand and well constructed. The final interview guide had three open-ended questions: (1). *Tell me, what does not make you happy in this project?* (2). *What can you say of the assistance that this project gives you?* (3). *If you had power to change things in this project, what would you change?* Wilson and Powell (2001) posit that open-ended questions are questions that do not make assumptions or assume a particular answer, and encourage more than a two or three word response. According to them open ended questions commonly use the six helpers of *Who? What? Where? Why? When?* and, *How?* Pretty (1995) advises those conducting research with children to use brief open ended questions to allow the children to describe their views in their own words.

These three questions avoided mentioning the phrase *oppression*, or words similar to oppression, to enable for deeper exploration of the lived experiences of the orphaned children with the Projects, and to empower the children to freely explore their experiences with these Projects. Davis, (1998) argues that to not only meet ethical obligations, but to improve the validity and reliability of the research data, a consensus has developed around the belief that the ethics, tools and roles employed in qualitative children's research should empower the children.

Eight in-depth individual interviews and an additional four focus group discussions were conducted with the recruited children in their schools at games times (when pupils are not in their classes) to avoid disruption of classroom instructional learning. A number of researchers have advised that to fully engage children in the research, the process of data collection should consist of more than a 'one off encounter' with children (Thomas & O;Kane,1998; Mason & Urquhart, 2001; Save the Orphaned children, 2001; Punch, 2002b; Jurak, 2003). Most of these researchers found that it was helpful to conduct a series of interviews or focus groups with children, especially when dealing with sensitive issues. The use of a series interview encounters assisted with things such as; developing rapport and trust, providing opportunities to follow up on issues and further explore or confirm participants' ideas and thoughts. This process helped in eliciting the children's subjective frames of reference and increased the reliability of the collected data (Kortessluoma et al 2003).

5.5. Data Analysis Process

The analysis of the qualitative data followed a sequential manner, beginning with analysis of individual-level information (person-by-person) for each of the 8 children before proceeding to a group-level analysis that brought together data for all the 8 children. Each interview

transcript was entered into NVivo 10 computer software project and subsequently coded through this software. Smith and Osborn (2003) noted that a meticulous case-by-case analysis of individual transcripts can be a lengthy process. IPA dictates that each interview should be analyzed separately to find emerging themes before examining across the interviews (Smith, 2004). For the group level analysis, a list of all the themes was recorded in each transcript. After this, operational definitions of all the themes were examined to find ones that were similar across all participants. Similar themes were combined under four broad higher-order themes. Smith (2011) recommends four or five themes, in order to give justice to each theme in writing manuscripts.

Next the themes were reorganized in NVivo 10 to fit a developed coding chart, which created a “code book” of all the freely translated quotes in each higher-order theme according to the sub-theme that the quotes supported. Operational definitions were subsequently carefully created to account for the various sub-themes. During group-level analysis, time was spent in expanding, delineating and delimiting operational definitions pertaining to these higher-order themes to ensure their alignment with constituent supporting quotes. Through NVivo’s Node Summary Report, the number of quotes and number of participants who were quoted were recorded in each theme to provide evidence of the prevalence and density of themes, as recommended by Smith (2011).

6. Research Findings

6.1. What Makes Orphaned Children Not Happy with the Projects

One of the dominant themes that kept on recurring in discussions with the orphaned children was the fact that some of those who work in these Projects refer to them as “AIDS orphans” or as ‘children orphaned by AIDS’. The children said that the constant reference to AIDS when referring to orphaned children is stigmatizing and humiliating to them. While a number of the orphaned children reported that HIV and AIDS is a major challenge in their villages, they argued that they honestly do not know what actually killed their parent or parents, and that it is unfair to call them by the ‘AIDS’ label.

Due to heavy stigma that those with HIV and AIDs experience in their villages, the children felt that the constant reference to orphans as AIDs orphans, or as children orphaned by AIDS, is not only embarrassing and humiliating them, but is a painful reminder that they will also die soon of the disease. They said that this affects their self esteem and makes them to be constantly worried that they have the disease and may not live long. One female orphan in class seven had this to say: *“One day I was called by one of the social workers to go to the office to meet some people.... I think they wanted to sponsor more orphans... I was shocked when she told the two visitors that I am one of the AIDS orphans in their project... that I am very bright and need a lot of support. I just stood there hoping for a big hole to come and swallow me alive.....why would she call me that?”*

Most of the children reported that a number of times they have been reminded by some of the staff working in the Projects that their parents died of AIDS and have been warned that they have to be very careful to avoid also being infected by HIV. The children said that the reference made by project staff to what had killed their parents when they (the orphaned children) make mistakes, brings back painful memories of their dead parents. They reported

that reference to AIDS having been the cause of their parents' death humiliates them and reminds them of a painful past they wish to forget.

The issue of inconsistent and at times unreliable services for the children by the project featured among some of the matters that make the orphaned children unhappy. Majority of the children reported that the Projects take too long to provide them with some of the critical services and materials like uniforms and sanitary pads. They reported that unreliable nature of support for learning materials like uniforms, sanitary pads for girls and school levies affects their learning as they are frequently sent away from school, while the other children continue with learning. A fifteen year old double orphaned girl in class six reported that for girls who have started experiencing monthly periods and those who have no one to support, they experience the pain of shame and humiliation when they cannot have sanitary pads when they are experiencing their periods, *“you are really ashamed and embarrassed when you start having (monthly period) while in school and you don't have sanitary pad. You get worried and cannot play with your friends in school and even pay attention in class when it (monthly flow) comes and you have no sanitary pads”*.

To address this challenge, girls reported that some of the girls that they know who have nobody to buy for them the pads are forced to use old clothes (rags) as sanitary pads, while some are forced to have boyfriends (mostly older sexual partners) who can give them money to buy sanitary pads. A number of orphaned children said they are worried that they cannot have support from the Projects when they need it, while some said that they believed that their supplies are given to other less deserving children who could be related to senior people in the Projects.

Arrogance of some of the project staff was identified by a number of the children as one of the issues that make them feel unhappy. A number of the orphaned children said that some staff are rude, abuse them, do not listen to them and at times misjudge them, even when they have done nothing wrong. *“Some people in the project treat you so bad, and make you just wonder what bad thing you have done”*. While a number of project staff were seen as friendly, some were reported as see the children as a bother and having little or no time for the orphaned children. The children also said that some of the project staff give them derogatory nicknames.

A number of the orphaned children reported that they have been publicly rebuked and abused by some project staff for making mistakes: *“Some of the staff will abuse you in the presence of your friends or even strangers, when they meet you when you are going home from school or church, for a mistake that you made”*, one orphaned male child aged 16 and in class six reported, while referring to an incident where he was abused by a social worker for failing to take his report form for filling by the project.

Some of the orphaned children reported that they have been threatened with deregistration from the project by some project administrators, allegedly for poor performance in school. The children reported that their poor performance in school is caused by the challenges that some of them face as orphans. They reported that the daily struggles that they face as orphans, including sometimes being out of school for long because their parents or guardians cannot pay school levies, have contributed to their poor performance in school. Most of the

orphaned children reported that a number of orphans do not do well in school because of the challenges that they face at home, including being involved in domestic chores after school like cooking, fetching water, not having kerosene for the lamps for evening homework, and even being forced by some of their guardians to go to the lake beaches to beg for food. The children said that these threats make them to be fearful, stressed and afraid.

Most of the orphaned children said that rumours in their villages that some of the support materials that the project buy for them are given to children or relatives of some staff working in the project, make them to be unhappy. Whereas the orphaned children said they have no means of verifying some of these rumours, the fact that they take too long before they get support from the projects, in spite of the assurances they receive that their needs are being taken care of, make them believe some of these rumours. In cases where the materials are procured, a number of the orphaned children said that these materials reach them too late when some of them have despaired, or in some cases, what they really need is not being procured and distributed by the project. These issues make the orphaned children to feel very unhappy with the project and the project staff.

While it is important for the children to get tested for HIV to enable the Projects enroll them into ARV treatment, some of the children reported that they have heard of cases where some of their peers perceived by the project staff to be HIV positive were forced to get tested for HIV. The children said that the being forced to get tested for HIV and the fear of being stigmatized if found positive have made some of them to be apprehensive, fearful, stressed and worried about their fate. The children said that since they depend on the project for some of their support needs, they are powerless to challenge forced HIV testing. They said that the fear is getting tested for HIV is threatening because they know that some of the project staff are not confidential and might start telling other people about their HIV status. Coupled with the humiliation that some of them have experienced in the Projects when they are reminded that their parents died of AIDS, and the sanctions that some of them have experienced in the hands of the project staff for alleged gross misconduct, the children said that the being coerced to get tested for HIV is a terrifying and stressful experience for a number of the children.

Lastly, the children reported that the constant reminder from some of the project staff that they are being helped makes them powerless and feel bad about their helpless situation. While it is true that the Projects and the project staff have helped a number of them, the children said that they are in this situation not because they want and like being helped, but because their parents who could have provided this help and support have died.

The constant reference to being helped by some of the staff is a source of humiliation and makes the children sorely miss the love and support of their departed parents. One of the girls, who reported that she has been constantly reminded that she is being helped by the project, said that at times she has completed getting married so that she can escape from this constant reminder. She said that it will be a lot better if she stopped going to school and getting married, even if she becomes a second or third wife, instead of the being reminded that she is being helped because most of the time.

6.2. What Orphaned Children Think of The Services Offered By The Projects

The issue of inconsistent and at times unreliable services for the orphaned children by the project featured among some of the matters that make the orphaned children unhappy. Majority of the orphaned children reported that at times the Projects take too long to provide them with some of the critical services and materials that they are entitled to, and that in some cases they donor the services and materials that the project staff had promised them.

The unreliable nature of services and educational support including support for learning materials like uniforms, sanitary pads for girls and other related learning materials badly affects the learning of these orphaned children. A 15 year old double orphaned girl in class six reported that for girls who have started experiencing monthly periods and those who have no one to support, they experience the pain of shame and humiliation when they cannot have sanitary pads when they are experiencing their periods, *“you really get worried and cannot socialize and even pay attention is school when it (monthly flows) comes and you have no sanitary pads”*.

Most of the orphaned children said that they have had rumours circulating in their villages that some of the support materials that the project buy for them are given to orphaned children or relatives of some staff working in the project, make them to be unhappy. Whereas the orphaned children said they have no means of verifying some of these rumours, the fact that they take too long before they get support from the project, inspite of the assurances that their needs are being taken care of, make them to believe some of these rumours. In cases where the materials are procured, a number of the orphaned children said that these materials reach them too late when some of them have despaired, or in some cases, what they really need is not being procured and distributed by the project. These issues make the orphaned children to feel very unhappy with the project and the project staff.

While the children had been promised by the project that they will be regularly visited by the social workers and home visitors at school and in their homes to enable the project know their situation and the challenges they face, the children reported that the home visitors and social workers rarely visit them and doubted if some of the social workers and home visitors really knew them and their situation well. Due to the erratic and infrequent home and school visiting, the children said that the project and the project staff are not in constant touch with them and this may explain, in their views why it took long for their needs to be addressed by the project, or why the project gave them materials that they did not really need at the time of distribution.

The children said that if they were visited frequently they would be in a position to share some of the challenges that they meet daily in their homes and in school, and that this would make the project to know their needs and thereby get timely support and intervention from the project and the project staff. Some of the children reported that they don't know who should be visiting them and that they don't know some of the home visitors who should be supporting them when in need. For children without adequate care giving support at home, due in part to the fact they are being cared for by aging grandparents or by ailing parents or caregivers, they have no trusted adult person to turn to for support and even advice when in need.

The quality of some of the services that children get from the Projects is reported to be of very low quality and embarrassing to the beneficiaries. Materials like sanitary pads and in some cases school uniforms were reportedly of very poor quality and reduce the children's self esteem. While the children agreed that the number of orphaned children may be many and thus making it difficult for the project to adequately meet the needs of all the enrolled orphans, the children said that the project staff should just try and give them things that make them feel like they are valued. Some of the girls said that the uniforms that they have been given by the project are of poor quality and that they get torn faster than the uniforms that other children use, and wondered where some of these things are bought.

As a result, the girls said that they have been forced to use torn uniforms that expose parts of their bodies thus making them feeling embarrassed and humiliated. One of the girls had this to say: *"I was one day give uniform that I think had been used... it was also poorly made and it did not take long for this uniform to be torn.... so I had to go to school with torn uniform and I was being laughed at by my school and class mates... I had to keep on stitching the torn parts of the uniform and it was not very good... you really wished that your parents are alive to buy you good clothes and good uniforms"*.

6.3. What Orphaned children Would Change in The Projects If They Had the Power

Majority of the children said that they would talk to the project staff to value the children under their support and see them as human beings. The children said that although they are orphans and some of them may be sick, they should be treated like everybody else. The views of the children was succinctly summarized by one of the boys, a double orphan aged 16 years, had this to say: *"we are orphans yes.... some of us may be sick and I may not know what led to the death of my mother and father, but I know am still a human being... and I want to be seen as a human being, and not as orphan"*. All of the children said that if they had the power, they will make people working on the Projects not to refer to them as AIDS orphans or as children orphaned by AIDS. They said that being called by this disease makes feel humiliated, and makes them think that they are about to die. They said that they should be seen just like other children who need support and care and should not be identified by AIDS.

Most of the children reported that if they had the power, they would give room for orphaned children to freely share their views with the project staff without being judged or rebuked as has happened in the project. They said that when the children are given room to share their views freely with the project staff, then the children will feel valued and listened to and this will also make the project staff to understand their needs and provide the needed support.

The children said that they would let the sponsored children to get the support when they need it, and also encourage the project staff to consult regularly with the children. They reported that giving support to the children when they need it will encourage the orphaned children not to lose hope and work hard in school, knowing that their needs are taken care of. Apart from this, the girls said that the project should ensure that they receive sanitary pads every month to reduce the embarrassment that they experience when they don't have the pads.

A number of children said that if they had the power, they would ensure that the Projects support the children to have meals in school since a number of children come from very poor families and do not have enough to eat at home. They said that school meals will enable the children to be attentive in school and also love going to school since they will be assured of food to eat. The children reported that a number of orphaned children perform poorly in exams because they go to class hungry and this makes them not to follow and remember what they are taught in class as they are constantly worried about what to eat.

Majority of the children reported that if they had the power to make decisions and change things in the Projects, they would ensure that the social workers and the home visitors regularly visit the homes and the local schools where the orphaned children are. They said that this is important since this would make the social workers, the home visitors to be in constant touch with the children and know the problems and challenges that they face and support the children to handle these problems and challenges before they get out of hand.

7. Brief Discussion & Conclusion

The purpose of this study was to explore the lived experiences of orphaned children with oppressive conditions in orphan support projects. A key finding in this formative study is that orphaned children perceive these projects as oppressive. From the results of this study, four critical components of oppression namely, humiliation, powerlessness, exploitation and dehumanization emerged as dominant oppression themes in this study. From discussions with the sampled children, orphan support projects and the services provided by these projects were found to institutionalize and perpetuate oppression of the very children who are supposed to be protected by these interventions. This project has provided evidence that orphan support projects, an important part of child welfare system in Kenya are pervasively oppressive to the children.

The threat of deinstitutionalization of none academically performing children is a form of what *institutional bullying*, which is a critical pillar of institutional oppression. Moreover, the attitudes and orientation of service providers was reported by the sampled orphaned children to be reinforcing the very oppression and suffering that these projects are designed and implemented to mitigate. The research findings have confirmed the theory of the double jeopardy of oppression: orphaned children not only experience oppression in their families, schools and communities, but are very projects that should be mitigating the suffering of the children. One of the important findings in this study is the pervasive stigmatizing and humiliation that orphaned children experience in the projects through association with AIDS. The oppressive dominant discourse in these projects is the association of these children to AIDS. They are variously called ‘AIDS orphans’ and or ‘children orphaned by AIDS’.

This study is one of the few studies that have explored the lived experiences of orphaned children with oppressive orphan support projects. This study was conducted among a few purposively sampled children enrolled in orphan support projects. To ensure that the study findings are generalized to the orphan population and orphan support projects, it is recommended that a larger sample of children and projects should be included in subsequent studies using a mixed method approach that integrate both quantitative and qualitative approaches.

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