Determinants of Orphans’ Psychosocial Needs: Counselling and Policy Implications

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Abstract  
This paper highlighted the alarming rate of orphanhood and its effect on the society. The paper also examined the psychosocial needs of orphans and factors that determine those needs. Among other measures, the authors recommended bereavement counselling for orphans to assist them overcome their condition. It has also been suggested that the government should put in place appropriate legislation and policies to meet the needs of the orphans.

Introduction  
There is an alarming rate of cases of orphan-hood in the society arising from different angles. According to Nicholas and Timeanus (2003), the word orphan is derived from Greek, meaning without parents. They further explained that the colloquial usage of orphans typically refer to a child whose parents have died. In the same perspective, USAID/WHO (2003) accepted orphans as those children whose mothers have died irrespective of the status of the father. Monks (2000) defined orphans as children who lost their mother (maternal orphans) their father (paternal orphans) or both parents as (double orphans) due to all cases. According to him, 18years has been argued to be the most appropriate upper age limit which is consistent with UN convention on the right of the child. Connolly (2004) in line with this argument found that the age range for which one can be considered an orphan varies across the country.

Foster (2002) estimated that in 26 African countries, the number of children who are orphans for many reasons will be more than double by 2010. He added that in 1990, AIDS accounted for 16% of deaths that left
children as orphans in these countries. By 2010, the proportion will be 68%. In Southern Africa, the number of children who have lost their parents will increase by a staggering 1600 percent (0.2 to 3.4 million). He further explained that in 11 countries in Africa with the population of 109 million people, 20 to 37 percent of children under the age of 15 years would have lost one or both parents by 2010, in most cases as a result of AIDS epidemic. In the same vein, Adikwu (2010) reported that the increase in the number of orphans as a result of HIV/AIDS in Nigeria has reached an alarming rate. He explained that WHO figures have shown that 5.6 million children are orphans or made vulnerable in Nigeria. Out of this number, 1.6 million are as a result of HIV/AIDS alone. Other causes include; road traffic crashes, armed robbery, homicide, naturally occurring events, fire and poisoning.

The implication of these alarming increases being expressed by Nigerians and other people all over the world is that, as more adults continue to die, so many children are made orphans and more children are potential orphans. It must be noted that the problem of orphanhood is quite complex. This is because orphans have several psycho-social needs which when not adequately met, predispose them to criminal acts such as stealing, drug abuse, bullying and gangsterism as well as problems of mental health such as low self concept and insecurity (Akume.2009). There is, therefore, need for counsellors and other stakeholders in human capital development to identify determinants of orphans' psycho-social needs with a view to offering appropriate intervention to improve on the condition of this vulnerable group in our society.

**Psychosocial Needs of Orphans**

Orphans have needs that are determined by many factors. Some of those needs are as follows:

**The Need for Shelter and Emotional Security**

As the family members, including the orphans, mourn the departure of their beloved parents or other relatives, the next issue is where his or her children will stay. According to Phiri (2005), several things can happen to children when their parents die. They may be absorbed and assimilated into another extended family. He added that there is a
growing scenario of grand mothers taking on the responsibility of looking after the orphans. This means that the grand mother relearns the act of rearing children and also the generational problem of age difference between the child and the grand parent as well as the capability to provide the social need of the child.

UNICEF (2004) reported that the child headed households where the orphaned children continue to live in their house as a family following the death of both parents; the oldest child assumes the responsibility for care and support of other siblings. They may still need comfortable accommodation with all the necessities as well as reliable and capable adults to provide the facilitative conditions for their optimum adjustment. If these children are not given these conditions, they are likely to become socially and morally maladjusted.

One other major thing that happens to orphans when the relations try to seek for household for them is the separation from the siblings. When the orphans are taken to foster homes or orphanage homes, they may be affected with the problem of breaking the psychological bond that existed in the family between the siblings which may compound the problem of missing all their acquaintances and having to readjust to their new homes.

The Need for Social Connectedness

UNICEF (1999) noted that, increasingly, children whose parents are dead are most likely to accumulate ever greater burden of responsibility as head of household when grand parent or caregivers die. These often make orphans emotionally vulnerable, and financially desperate, and are more likely to be abused.

The child headed households expose the child to assumption of roles which is above his age and capability as they need to be taken care of. This was buttressed by Kelly (2000:65) when he wrote that, "Children are being catapulted to adulthood loosing all the gaiety of growing up." He explained that children need adults who will assist them to become well adjusted adults in future. According to him, without such connectedness, children are exposed to robbery, delinquent behaviour, sexual exploitation, trafficking and other societal vices.
Adikwu (2010) cites Schwartz (2001) in his survey of the situation of orphans in Haiti and maintained that children living in households without adults are among the most vulnerable because they are living on their own. Such children are often misled by friends who may not be responsible or who also need guidance themselves. They also struggle on their own to make ends meet and feel most times that they do not own anybody explanation for any behaviour or any action they take.

**Education and Income Generating Needs**

Education is important to all children especially orphans who are disadvantaged. The response from the education sector to keep orphans in schools is paramount if education for all target is to be met. The need for education and income generation was expressed by Rogers in Uba (1987) when he said that every individual has the potential for productivity and creativity. Every child needs to be provided with education which is necessary for acquisition of skills which can lead to income generating activities.

Clarkes and Philip (1987) noted that the best investment in all children is giving them a good start in education which can be repaid many times as the children grow to be adults, provide leadership in their communities and raise their own children. She added that the quality of a child’s life depends on decisions made everyday in households, communities and by government. If we fail to secure childhood, we will fail to reach our larger global goals for human rights and economic development, therefore breeding more social misfit to the detriment of societal growth and development.

As important as education is to the development of the individual and the society at large, when parents fall ill or die of any cause, it becomes very difficult for most of the children to go to school, and to acquire any productive skill.

**Food Security and Health Care Needs**

Food security and health care are basic needs which have direct bearing on the social and physiological needs of children. Maslow believes that it is when these physiological needs are met that the individual will strive for all other needs. When the orphans are faced with problems of food

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insecurity and lack of health care, the security and safety needs are affected and the children may likely feel hopeless and emotionally destabilized. Many studies have shown that orphaned children are more likely to suffer from food insecurity and inadequate health care than non-orphans.

UNICEF (2004:29) describe the situation this way "in HIV/AIDS affected household lacking community support food consumption can drop by more than 40%, putting children at higher rate of malnutrition and stunting as seen through sub-national studies of the impact of an adult death on child nutrition. The study showed that both maternal and paternal orphans are much more likely to be short for their age than non-orphans.

Hennesy (2000) pointed out that childhood malnutrition is potentially one of the most severe and lasting consequences of an adult death in the household. Extended families caring for orphans struggle to provide enough nourishment for an increased number of children, and susceptibility to illness for all members of a household may rise as food intake declines.

These needs and all other needs are related to the psychosocial needs. The way and manner, the predictability and the consistency as well as the quality of food and health services matter a lot to the psychosocial needs of the child and contribute to the social and moral adjustment of the orphaned child. If the child is hungry, he cannot strive for other needs and can do any thing to meet that need- whether socially and morally accepted or not.

Need for Non-discrimination and Legal Protection
In a study reported in the African orphaned generation (UNICEF 2004:29), it was found that "children whose parents are ill because of HIV/AIDS or died of HIV/AIDS face stigma and discrimination. They may be rejected by their friends and school mates. It is in this regard that International HIV/AIDS Alliance (2000) suggested that care for orphaned children, whatever the cause of their parents' death, should be streamlined to avoid creating additional stigma and discrimination. It was added that these children have special needs, that care and support of such children should be integrated into existing support for PLWHA.
It is also noticed that the form of child labour involving orphans and vulnerable children is domestic service. The ILO 90th session 2002 reports that large number of children are in domestic services but are among the most invisible child labour that is difficult to survey and analyze as already indicated in the study. Child domestics are often ignored by policy makers and excluded from coverage of legislation.

All these portray a clear picture of threat to the safety and security of orphans. The parental love and care which every child requires is missing from their lives. This shows a need to provide alternative source of these experiences of love, safety and security which are often hardly available as noted by many scholars.

**Psychological Needs**

According to Monks (2000), the shame and guilt of not being able to help the parents could be one of the psychological problems. The sudden death of parents from communal clashes, road traffic accident or other causes of death could shocking him or her to become emotionally disorganized resulting to behaviour problem such as dishonesty, withdrawal, aggressiveness, vandalism, prostitution, stealing, among others.

If these social and psychological needs of orphans are not adequately attended to, the likelihood that they may turn into societal nuisance cannot be overruled. This is asserting the viewpoint of Rogers in Feldman (1999) that man is rational, constructive, creative, and full of potentials, forward looking and good. Anti - social behaviour, irrationality, aggressiveness, neurotic, delinquent and erratic behaviour exist in man as a result of frustration of basic needs such as love, acceptance, care, empathy, unconditional positive regards, respect among others. It is therefore pertinent that all stakeholders make concerted efforts to ensure adequate provision as well as change in attitude towards the adjustment of these vulnerable children for individual and societal growth.

**Determinants of Orphans’ Psychosocial Needs**

Psychosocial needs of orphans are determined by a number of factors.
The Age of the Orphan
Poulter (2000) observes that the early years are considered to be a critical stage in any child’s development. Age 0-8 year’s period has a tremendous effect on the future health, cognitive and social development, cultural competencies and productivity of the individual. The needs of orphans just like other children vary by their age and sex. She gave an example that all children are affected (even infant) but for emotional stress, children of age 4-7 appear to be more vulnerable. Older children are old enough to understand loss but lack the social skills to deal with it. The survey indicated that about 15% of orphans are 0-4 years old, 35% are 5-9 years and 5% are 10-14 years old. The need of these children will likely vary according to the age bracket. It is along this line that Maitafsir (2002) wrote that the early years of the child are very critical in the formation of social and moral character. This means that the need of an orphan may be determined by his or her age.

The Sex or Gender
UNICEF/USAID (2002) noted that the sex of children greatly determines their needs just like the orphaned children. It was added that orphaned girls are more likely to become vulnerable to social status and economic dependence.

According to UNICEF (2003), female children are at greater risk of sexual exploitation, abuse and denial of their rights. It was further explained that when children lose parents in a household, the girls among them are most likely to be denied schools, access to land and are often expected to take care of the siblings. They are most likely to drop out of school and experience early marriage. Others engage in sex at the behest of their families to obtain cash to pay brothers school fees, to settle a debt and meet other family expenses.

Age of Guardian
Kelly (2000:60) observed that there is the tendency to place a child with an uncle/aunt who may be too old to give young children the care they need, to provide for their material needs, to meet the cost of schooling and to exercise the control needed to ensure school attendance and attention to school work. According to Phiri (2005) there is the growing
scenario of grand mothers and great grand mothers taking on the responsibility of looking after orphans left by their children and grand children. The aged have to relearn the art of raising children all over again. This stands as another important factor in determining the variation of orphans needs.

Another instance given are cases where young people serve as household head with the other siblings being looked after by the eldest who may be too young and also need guidance for his personal adjustment. Such young heads of household are likely to lack the skills to bring up these children to enable them have the appropriate moral and social adjustment they require to fit into the society.

In the same vein Craig (2005) noted that child headed households are becoming more and more common place in the Kasisi children's home. The reason for their existence according to him is that there are no relatives to take over the children, either because they too have died or are too poor to take on extra responsibilities, or they may not just be willing. The children themselves may prefer to remain in the family home and try to continue living as a family unit than be broken up and separated to go to different relatives and household (breaking the sibling bond). In such situation according to Craig, children take up responsibilities that are far beyond their age.

**Number of Orphans in an Area**

The proportion of children orphaned in a geographical area may also significantly affect the variation in the needs of orphans. According to UNAIDS (2000), different areas in a country will not necessarily have the same concentrations of orphans. Particular areas may have higher or lower percentages of orphans, largely depending on the local prevalence rates. Literature has it that the increase in the number of orphaned children in sub-Saharan Africa led to the orphan crisis, which has given rise to the concern being expressed by various stakeholders towards securing the future of these children.

In that vein, UNICEF, USAID (2002) reported that the rise in the number of children orphaned by AIDS increased the needs of children which continue to increase the need for access to education, health, social amenities and basic needs. This is because these facilities became
overstretched and often out of reach for a good number of them, rendering them even more vulnerable.

**Discrimination and Stigmatization**
The society does not seem to sympathize with persons who fall sick or even die due to certain circumstances and causes such as HIV/AIDS infections. Rather, the orphaned children and relatives are stigmatized and discriminated against. For example, in every community in Nigeria when an HIV diagnosis in the family becomes known, friends may come to visit less often, and children may be tortured or harassed by schoolmates. The parents will subsequently die and their infected children become a liability. They are rejected by close family members, neighbours and their community, all forms of stigmatization will be vested on them. Furthermore children who lose a parent to AIDS suffer grief and confusion, like any other children who experience the death of a parent but there are special differences for one, the psychological impact can be even more intense than for children whose parents die from more sudden causes such as armed conflict or automobile accidents or other diseases.

**Available Care Capacity (safety net)**
When one parent dies, the tendency is for the children to live with the other available parent. When the two parents die, the available options from the literature so far include – a close relation taking in the orphan, or some body close to the family, some are taken to orphanages or adopted by individuals.

According to Phiri (2001) when parents die in most countries in Africa, the immediate relations are obliged to take in the children. This tradition, according to him, is fast eroding away due to the socio-economic status of most Africans and the growth of individualism in the continent. According to him, some of these children are abandoned after the death of their parents, some chose life on the street, some choose to stay together with the eldest sibling as child-headed of household, others rather than be maltreated and abused by their relations decide to live on their own on the street. Some are however taken to orphanages. UNAIDS/UNICEF (2002) noted that all orphans seem to have the same needs although children orphaned from HIV/AIDS may suffer additional
discrimination and stigma. Children affected by armed conflict and other forms of death, such as automobile accident may also suffer extreme shock about the suddenness of parental death.

Implications for Counselling and Policy Formulations
Counselling as a helping relationship has a role to play in the needs of the orphans. Due to complexity and intensity of the needs of the orphans, the counsellor should embark on community counselling in villages using village meetings, churches, households, market places to create awareness on the needs of the orphans, and the problems that would arise if those needs are not adequately met. It must be emphasized that the orphans would be prone to vices that affect their emotional, moral and social adjustment.

Bereavement counselling should be offered to the orphans. Activities should be organized by the counsellor for orphans in groups and also individually. During group counselling sessions orphans should be helped to appreciate the universality of their condition. They should be helped to overcome feelings of alienation, depression and hopelessness using a variety of psychological techniques available to the counsellor.

At the level of government, special attention should be paid to this vulnerable population of society. Free education and health services should be provided for orphans. Appropriate legislation should be put in place to protect the orphans from victimization and stigmatization.

The social welfare departments at all levels of government, should establish orphanages in all local government headquarters in Nigeria. Effort should also be made to provide educational and recreational facilities in the orphanages so that the orphans will enjoy the same rights to education as other children.

Appropriate budgeting provision should be made in government annual budgets for orphanages to ensure that the inmates do not suffer lack of amenities due to financial constraints.

Conclusion
It is established in this paper that orphans have psychosocial needs that are determined by a number of factors. These needs if not met are bound to jeopardize their moral and social adjustment as well as their
contribution to the development of the society. Therefore, steps should be taken to prevent this problem from reaching the crisis level and those already slipping out of safety net, should be assisted to attain adequate social and moral adjustment that would enable them to contribute to societal development.

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