

**SES, NARRATIVES AND RESILIENCE IN ORPHANS'  
ADJUSTMENTS TO EMOTIONAL AND PSYCHOSOCIAL  
CHALLENGES FOLLOWING THE DEATH OF PARENTS IN  
SOME SELECTED TOWNSHIPS OF LUSAKA URBAN  
DISTRICT**

**BY**

**JOHN AARON NKHOMA**

**A Dissertation Submitted in Partial Fulfilment of the Requirements of the degree of  
Master of Arts in Child and Adolescent Psychology**

**The University of Zambia  
Lusaka**

**2012**

### **Notice of Copyright**

All rights reserved. No part of this dissertation may be reproduced, stored in any retrieval form or transmitted in any form or by any means such as photocopying without the written permission of the author.

**Declaration**

I, **John Aaron Nkhoma**, do declare that this dissertation is my own work and that it has never been submitted for a Degree, Diploma or other qualification at this or any other university by anyone.

Signature: .....

Date: .....

## **DEDICATION**

I dedicate this dissertation to my family, Mrs. Stella Tembo Nkhoma and the children Taonga and Ngoza for the support and patience they endured throughout my research.

## Certificate of Approval

This dissertation by **John Aaron Nkhoma** is approved as a partial fulfilment of the requirements for the award of the Degree of Master of Arts in Child and Adolescent Psychology.

Signed: .....	Date: .....
Signed: .....	Date: .....
Signed: .....	Date: .....

## ABSTRACT

Losing parents and other significant adults can render children vulnerable including increased risk of experiencing negative outcomes such as stress, loss of self-esteem, depression, anxiety etc. Some children develop capacities to rebound from such challenges while others don't. Children who rebound from challenges are called resilient children. Fiese et al, (1999), found that family narratives which are telling of positive stories can be considered as a way of instilling hope, encouragement, and resilience in children. Zambia has a growing number of orphans, for example in 2004, it was estimated that the number of orphans was 1,147,614 and it was expected that the total number would increase by about 16 percent to 1,328,000 in 2010 (NAC, 2007). Identifying factors that strengthen resilience in children assist families, care givers and child service professionals in addressing unacceptable behaviour such as substance abuse, delinquency, early pregnancies etc among children. The purpose of this study was to investigate how Socio-Economic Status (SES) of the adoptive homes and Family Narratives to Orphans including, the content, context and tone of the caregivers supported resilience. The sample of the study comprised 110 orphans drawn from Chaisa, Chipata and Garden compounds and their 110 primary caregivers in Lusaka district. The ages of the participating Orphans ranged from 07 to 11 years and they were all males. Child Behaviour Check List (CBCL) and a pre structured interview questionnaire on family narratives were used to collect information. The findings of the study did not support our hypotheses as expected. Descriptive means differences revealed that families whose orphans lived on an average expenditure of less than K900, 000 on food per month exhibited more withdrawal, thought problem, attention, and delinquency and aggression behavior problems compared to those whose expenditure was of more than K1, 200,000. When the means were subjected to ANOVA the results were not statistically significant. The results on family narratives did not supported Fiese, et al, (1999) and Taylor, Aspinwall, Giulian, & Dakof, (1993) findings of family narratives.

Future researchers should spend more time on family visits in order to elicit quality family narratives and the measure of socio-economic status should be broadened to capture more information.

## ACKNOWLEDGEMENTS

This dissertation is a result of the help and cooperation of many people to whom I owe my gratitude.

My special thanks go to my Supervisor Professor Robert Serpell who put in so much towards my work. Had it not been for his resolute probe towards the work that I had put across to him, I could not have attained this far. He subjected every piece of information presented before him to a very rigorous academic scrutiny in order to come up with some excellence that would reflect the originality of the work. I would like to thank him for his immense contributions towards this piece of work whose value is too enormous to mention.

Lastly I would like to thank my research assistant Mr. Lutango who did a great job in ensuring that data were collected timely. He was very helpful to me and we worked cordially with little difficulties during data collection and entry. He was very dedicated to work and his immense contribution went beyond data collection as he also played an advisory role in translating the questionnaires in local languages to all those respondents who could not understand the language. I thank him and many more who contributed to my work too many to mention.

## TABLE OF CONTENTS

Copyright Declaration . . . . .	i
Declaration.....	ii
Dedication.....	iii
Approval.....	iv
Abstract . . . . .	v
Acknowledgements.....	vi
Table of contents.....	vii
List of Tables . . . . .	viii
Acronyms . . . . .	ix
<b>CHAPTER ONE: INTRODUCTION.....</b>	<b>1</b>
1.1 Background.....	1
1.2 Theoretical framework.....	2
1.3 Statement of the problem.....	4
1.4 Aim of the study.....	4
1.5 Objectives of the study.....	5
1.6 Hypotheses . . . . .	5
1.7 Significance of the study.....	5
1.8 Conceptual definitions.....	6
1.9 Operational definitions of terms in the study.....	7
<b>CHAPTER TWO: LITERATURE REVIEW.....</b>	<b>8</b>
2.1 Introduction.....	8
2.2 Global Context.....	8
2.3 African Context.....	9
<b>CHAPTER THREE: METHODOLOGY.....</b>	<b>15</b>
3.1 Introduction.....	15
3.2 Research design.....	15
3.3 Study population.....	15
3.4 Sample size.....	15



3.5	Sampling procedure.....	15
3.6	Research instruments.....	16
3.7	Ethical considerations.....	16
3.8	Pilot study.....	16
3.9	Data collection.....	17
3.10	Data analysis.....	17
<b>CHAPTER FOUR: PRESENTATION OF FINDINGS.....</b>		<b>18</b>
4.1	Introduction.....	18
4.2	Age of Caregivers . . . . .	18
4.3	Occupation and sex of caregivers.....	18
4.4	Relationship of caregiver to the orphan.....	19
4.5	Background characteristics of the Orphans.....	20
4.5.1	Age of Orphans.....	20
4.6	Average expenditure of caregivers on food per month.....	20
4.7	CBCL checklist.....	20
4.8	Occupation of caregivers.....	22
4.9	Whether SES of adoptive homes influenced resilience.....	23
4.10	Correlations between CBCL subscales and SES.....	25
4.11	Correlations between CBCL subscales as reported by orphans.....	25
4.12	internal subscales: withdrawal; anxiety; somatic and SES . . . . .	26
4.13	Correlation between CBCL externalising subscales, aggression, delinquency and SES.....	27
4.14	Family narratives.....	28
4.15	Qualitative findings.....	29
<b>CHAPTER FIVE: DISCUSSION OF FINDINGS.....</b>		<b>33</b>
5.1	Introduction.....	33
5.2	Hypothesis one.....	35
5.3	Hypothesis two.....	34
5.4	Statistically significant findings.....	35
5.5	Limitations.....	35

CHAPTER SIX: SUMMARY, CONCLUSION AND RECOMMENDATIONS.....	37
6.1 Introduction.....	37
6.2 Conclusion.....	37
6.3 Recommendations.....	38
6.4 Future research.....	38
REFERENCES.....	39
APPENDICES.....	45
Appendix 1: Orphans Questionnaire	
Appendix 2: Caregivers Questionnaire	
Appendix 3: Pre structured questionnaire on family narratives	

## LIST OF TABLES

Table 1:	Sex and age of caregivers.....	18
Table 2:	Occupation and sex of caregivers .....	19
Table 3:	Caregivers relationship to the orphans.....	19
Table 4:	Average expenditure on food per month per orphan.....	20
Table 5:	Correlations between CBCLscales for caregivers and orphans.....	21
Table 6:	Employment status of caregivers and CBCL internalizing, externalizing and total problems.....	22
Table 7:	ANOVA for occupation of caregivers.....	22
Table 8:	Average expenditure and CBCL internalizing, externalizing and total problems reported by caregivers.....	23
Table 9:	ANOVA for average expenditure on food.....	24
Table 10:	Correlations between CBCL subscales scores and average expenditure on food per month reported by caregivers.....	25
Table 11:	Correlations between CBCL subscales and meals taken per day as reported by orphans as a measure of SES.....	26
Table 12:	Correlations between CBCL internal subscales.....	27
Table 13:	Correlations between CBCL externalizing subscales.....	28
Table 14:	Correlations-Caregivers narratives.....	27
Table 15:	Correlations-Orphans narratives.....	30
Table 16:	CBCL responses .....	31

## ACRONYMS

AIDS	-	Acquired Immune Deficiency Syndrome
ANOVA	-	Analysis of variance
CBCL	-	Child Behaviour Check List
CSO	-	Central Statistical Office
GRZ	-	Government of the Republic of Zambia
FEI	-	Food-Energy Intake
FNC	-	Family Narrative Consortium coding system
HIV	-	Human Immunodeficiency Virus
ICAD	-	Interagency Coalition on AIDS and Development
JCTR	-	Jesuit Centre for Theological Reflection
NAC	-	National AIDS Council of Zambia
SES	-	Socio-Economic Status
SOS	-	Social Society
SPSS	-	Statistical Package for the Social Sciences
UNICEF	-	United Nations International Children Emergence Fund
UNAIDS	-	United Nations Acquired Immune Deficiency Syndrome
ZNS	-	Zambia National Service