

The Quality of Life of Children living in Residential Child Care Facilities

A comparative study of three Children's Homes in
Accra and Cape Coast, Ghana

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ABSTRACT

This study is concerned with aspects of the quality of life of children in three residential child care facilities (Children's Homes) in Accra and Cape Coast Municipality. It is comparative in its nature and aims to investigate how the material and social structures and supplies of the Children's Homes contribute to similarities and dissimilarities in aspects of the children's quality of life, both between and within the homes. The theoretical framework of the study is based on a quality of life approach, where quality of life is seen as an all-embracing conception, which includes a basic needs approach (BNA) and is supplemented by a subjective well-being approach (SWB). The theory of structuration is used to understand how material and social structures and supplies at the Children's Homes affect aspects of the children's quality of life. The theory of structuration is a framework to investigate to what degree the children are able to act as competent social actors. The study was carried out in two different regions; the Greater Accra Region and in the Central Region at three Children's Homes. Osu Children's Home (governmental) is located in Accra, the capital of Ghana, Ahotokurom (private) in a peri-urban area outside the city of Cape Coast and Lighthouse Children's Home (private) is located just outside the Cape Coast city centre. Methodologically this study applies a qualitative approach and includes the triangulation of a variety of qualitative instruments of data collection. The data has been collected through 14 interviews with children from the ages of twelve to nineteen and eight key-informant interviews with the staff at the Children's Homes, two interviews with additional informants, as well as observations and some quantitative data. The thesis concludes that the material and social structures and supplies available at the Children's Homes have strong bearings on the children's lives and aspects of their quality of life. The Children's Homes represents sets of structures that both enable and restrict the children to act as competent social actors. Even though the material and social structures and supplies at the homes determine much of the children's lives, the children have some degree of freedom to act within these structures and are able to influence their own lives. The degree of freedom to act as competent social actors varies between the homes. At Osu there exists a stronger accumulation of conditions creating poorer aspects of quality of life, such as poor food, shelter, clothing, education, safety, leisure, love and belonging and social networks. The children at Ahotokurom and Lighthouse generally enjoy conditions creating better aspects of quality of life, the only exception being perhaps healthcare. This difference seems to be connected to the type of ownership, gatekeeping, finances, location and contact with the local community.

ABBREVIATIONS AND ACCRONYMS

AIDS – Acquired Immune Deficiency Syndrome
AMA – Accra Metropolitan Area
BNA – Basic Needs Approach
CRC – Convention on the Rights of the Child
CRI – Care Reform Initiative
DMJ – Daughters of Mary & Joseph
DSW – Department of Social Welfare
fCUBE - free Compulsory Universal Basic Education
GDP – Gross Domestic Product
GHDR – Ghana Human Development Report
GPRS – Ghana Poverty Reduction Strategy
GSS – Ghana Statistical Services
HIV – Human Immunodeficiency Syndrome
ILO – International Labour Organisation
JAM – Jesus and Me
JSS – Junior Secondary School
LEAP – Livelihood Empowerment Against Poverty
MDG – Millennium Development Goals
MESW – Ministry of Education and Social Welfare
MMYE – Ministry of Manpower, Youth and Employment
MOESS – Ministry of Education, Science and Sports
MoEYS – Ministry of Education, Youth and Sports
MOWAC – Ministry of Women and Children
NHI – Norsk Helseinformatikk AS
NGO – Non Governmental Organization
NTNU – Norwegian University of Science and Technology
OA – OrphanAid Africa
OVC – Orphans and Vulnerable Children
QoL – Quality of Life
PRB – Population Reference Bureau
SCF – Save the Children Foundation
SHC – State Housing Company
SSS – Senior Secondary School

STD – Sexually transmitted diseases

SWB – Subjective well-being

UN – United Nations

UNAIDS – United Nations Programme on HIV/AIDS

UNDP – United Nations Development Programme

UNFPA – United Nations Population Fund

UNICEF – United Nations Children's Fund

USAID – United States Agency for International Development

WFP – World Food Program

WHO – World Health Organisation

WHOQOL - World Health Organisation Quality of Life Group

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CHAPTER 1: INTRODUCTION

1.1 General introduction

Orphans and Vulnerable Children (OVC) in Sub Saharan Africa

Sub-Saharan Africa is the region in the world with the highest percentage of orphans. In 2003 the UN estimated the total number of orphans (all reasons included) to be over 43 million, that is 12.3% of all children in the region. This is an increase of over 1/3 since 1990. The highest concentrations of orphans are in countries that have a high HIV prevalence level or recently have been involved in armed conflict. Even though children lose their parents for many different reasons, the issue of HIV/AIDS is hard to avoid when talking about orphans and vulnerable children in Sub-Saharan Africa. It is the leading killer worldwide of people between 15-49 years old and orphanhood is the most visible and measurable impact this disease has on children's lives. The numbers of orphans in the world would be declining if it were not for HIV/AIDS (UNICEF, 2004) and by 2010 UNICEF estimates the number of children orphaned by AIDS in Sub-Saharan Africa to reach 15.7 million, nearly twice as many as by 2001. The UN states that "*the worst is yet to come*", as young adults now living with HIV eventually develop AIDS and die, they will leave behind large number of orphans (UNICEF, 2008; UNICEF, 2003). The number of orphans generally increases with age, hence older orphans greatly outnumber younger ones (UNICEF, 2004).

These children will suffer long before they lose their parents. They may miss out on their education as they may be taken out of school to care for their sick parents. This is especially a problem for girls as they are often the first ones to be given the responsibility of caring for the sick. Studies show that in addition to being deprived of their education, these children often live in households with less food security and have a higher risk of suffering from anxiety and depression. Orphaned children may also be forced to relocate and in this process lose their social networks and the community they are familiar with (UNICEF, 2008). There is no doubt that the children orphaned by AIDS and the problems they face need attention and solutions. However, this focus on children orphaned by AIDS has put the sufferings of orphans of other reasons in the shadow (Foster, 2005), as donor and aid campaigns have often been directed at solely helping children orphaned by AIDS. This study does not make any distinctions between orphans and vulnerable children of AIDS and orphans and vulnerable children of other reasons.

The vast majority of children orphaned in Sub-Saharan Africa are cared for by the extended family system, a coping mechanism that have cared for orphans and vulnerable children, aged people and disadvantaged family members for generations. However, the extended family system is overburdened by poverty, as households who take in orphans are likely to become poorer, and due to the huge number of orphans in need of care. Studies show that the biological ties to the caregivers are an important factor in how the orphans are treated. Children taken in by their extended families risk living in households that are already overburdened and where they are really not welcome (UNICEF, 2008; Foster, 2005). This increases the children's risk of being neglected, abused or exploited. Ahiadeke (2003) also points to the discrimination and stigmatisation that follows orphans and vulnerable children, especially orphans of AIDS, as another reason for rejection by the extended families. All this combined leaves many children to fend for them selves and they often end up as street children as they migrate to urban areas in order to survive. The problems and dangers street children are at risk of facing are many, such as malnutrition, sexually transmitted diseases (such as HIV/AIDS), drug and alcohol abuse, prostitution, sexual abuse and violence (Ahiadeke, 2003).

Residential Child Care Facilities

By 2003 an estimated 8 million children worldwide were living in residential child care facilities (International Save the Children Alliance, 2003). Countries heavily affected by HIV/AIDS have often responded by development of residential child care facilities as a solution to the growing number of orphans and vulnerable children. The arguments for doing this are based on the lack of alternatives as the extended family system and the communities are claimed to be overburdened and that foster care or adoption are non-traditional forms of child care and may expose the children to abuse and exploitation. Residential child care facilities seem to have a high level of “donor-appeal”, as donors tend to favour residential child care as it provides a visible and tangible manifestation of their donations. They also have a high level of appeal to media as they are seen as easy to monitor, as opposed to a family based setting. They can also be preferred by social service professionals as they are organizationally convenient (Forster, 2005; Tolfree, 1995).

There is a growing understanding that residential child care facilities are not an appropriate solution to the increasing numbers of orphans and vulnerable children. Research literature have shown that residential child care facilities can have serious damaging effects on children's development and on children's rights and there is little or no empirical evidence to contradict these findings. In the worst cases children's rights are being violated by systematic sexual abuse, exploitation, lack of proper

nutrition and health-care that severely damages the children's health, educational deprivation and strict, regimented discipline. Even where the physical conditions are good there will most certainly exist problems associated with any form of residential care. Damaging effects residential child care can have on children include segregation, discrimination and isolation, risk of institutional abuse, lack of personal care, stimulation and attention to specific psychological needs and lack of opportunities to learn about adult roles. In addition, admission is often not based on the child's best interest, but on the needs of the parents or extended family. Children living in residential child care facilities often have trouble adjusting to adult life when they move out (Foster, 2005; Tolfree, 1995 and 2003).

In recent years there has been a move towards community-based approaches as a means to prevent unnecessary family-separation and to ensure that children who lose their parents, in one way or the other, can live in a family based setting within their local community. The cost of caring for a child in residential child care facilities is five to ten times higher than foster care. It produces poor results for a small number of children at a high cost. They also produce a "magnet effect", as they draw in children that are not orphans and do have parents or other family members who can act as caregivers. This undermines the traditional family and community responsibility for orphans and vulnerable children (Tolfree, 1995; Foster, 2003).

It is important to look at aspects of quality of life (QoL) of this group of children because this time in their life is a determinant of how their adult life will be. A problematic and difficult childhood will most likely result in a troubled adulthood. Children who do not get the care and safety that only primary caregivers can provide are more vulnerable to health risks, violence, exploitation and discrimination (UNICEF, 2004).

1.2 Statement of the problem

The UN estimated the number of orphans (maternal, paternal and double orphans) in Ghana to be 1 million in 2003. This is a relatively high number as it comprises almost 10% of all children in Ghana (UNICEF, 2004). A study made for the Ghana Aids Commission and UNDP in 2003 concluded that the largest concentrations of orphans and vulnerable children in Ghana are found in the Greater Accra, Ashanti and Western regions. The number of orphans of AIDS is not well documented in Ghana, but UNAIDS (2004) estimated that at the end of 2003 the number of orphans of AIDS (under the age of 17) was between 120.000 and 250. 000 (UNAIDS, 2004). Findings also

suggest that the heaviest concentrations of both vulnerable children and children orphaned by AIDS lie in the age segment 10-14 years old (48.6% for boys and 46.8% for girls). Evidence suggests that HIV/AIDS have hit the economically active population hardest, indicating that children and the elderly will suffer as they are the dependant segment of the population. Despite the fact that children orphaned by AIDS are the most vulnerable group affected by AIDS, they have received little attention, both in terms of sectoral plans and practical programs. This is partly due to the lack of knowledge of their actual numbers, and as a consequence their living conditions and needs have not been focused on. The number of people infected by HIV/AIDS is believed to still be on the rise and this indicates that the number of orphans of AIDS in Ghana will continue to climb in the years to come (Ahiadeke, 2003).

The extended family system care for most of these children, but there are still many that are left on their own (Ahiadeke, 2003). Like in the rest of Sub-Saharan Africa, the functioning of the extended family system is changing. It has for generations functioned as a safety-net for orphans and vulnerable children, but due to modernisation this is changing. Migration to urban areas creates a distance between people and their extended family and people tend to lose their feeling of responsibility towards more distant family members. The growing idea of the nuclear family also contributes to the notion of the family consisting of mainly mother, father and children, leaving out “the rest” (Everett, 1993; MMYE and DSW, 2008). Poverty is also a major reason why orphans are rejected by their extended families. The sheer number of orphans are becoming too much to handle for poor households. They simply do not have the resources to care for them. The children that have been taken in by their extended families sometimes risk abuse and neglect, but as a result of poverty they also risk being sent out to steal or practice prostitution. The latter is especially a problem for girls. Some children are also denied access to basic education, proper healthcare and nutrition (Ahiadeke, 2003).

Ghana has responded to the staggering numbers of orphans by a sudden boom of residential child care facilities, or Children’s Homes, all over the country. In 2007 the Department of Social Welfare (DSW) estimated that there exists 148 Children’s Homes in Ghana, where only 5 operate legally and are actually approved and registered. As the majority of Children’s Homes are run illegally and without supervision of any sort, there is much concern expressed as to how these homes are managed and what quality of care the children living there are receiving. In collaboration with OrphanAid Africa (OA), the DSW launched a five-year programme called the Care Reform Initiative 2006-2011 (CRI). The aim is to make sure that Children’s Homes comply with the

requirements by various political and international legislations (The Children's Act, 1998, the Convention on the Rights of the Child, 1990 and the UN Guidelines for the Protection and Alternative Care of Children without Parental Care, 2007) and to reinforce the regulations and standards for operations of residential care settings in Ghana. In 2007 the DSW also conducted a study with the aim of mapping the quality of care given at the 148 Children's Homes. The study conducted by the DSW revealed that most Children's Homes did not comply with these standards. Problems identified were; poor management as they often operated without annual budgets and economical planning, arbitrary expulsion of children in economically difficult times, poor adult to child ratio, lack of qualified staff, bedding, poor nutrition, health-care and poor academic and training facilities for the children. It was further revealed that the main reason for sending children to these residential child care facilities was poverty. Almost 80% of the children were not actual orphans and have families that are willing to care for them, but feel they are unable to do so for various reasons (MMYE and DSW, 2008; OrphanAid Africa, 2008; DSW, webpage, 2008).

The official view in Ghana on residential child care facilities as a main response to the orphan crisis is that it should be an absolute last resort. Residential child care facilities are seen as undesirable and inappropriate. The DSW has with the CRI a new approach to the solution of the orphan crisis based on family and community care. The findings of the 2007 study revealed that 80% of the children had alternative caregivers to return to and the main goal of the CRI is to get the children presently living in Children's Homes *out*, and back with their families. Where this is not possible, fostering or adoption is seen as good alternatives. The prevention of future institutionalisation of children is of equal importance and families are to be empowered to care for their own children through programmes such as the Livelihood Empowerment Against Poverty (LEAP) (MMYE and DSW, 2008; OrphanAid Africa, 2008; DSW, webpage, 2008).

This study provides a comparative analysis of aspects of the QoL of children in three Children's Homes in Accra and Cape Coast; Osu Children's Home in Accra and Ahotokurom and Lighthouse in Cape Coast. It analyses aspects of the children's QoL based on a basic needs approach, supplemented by a subjective well-being approach. One of the basic assumptions of this study is that aspects of the children's QoL vary according to the material and social structures and supplies of the homes.

1.3 Objectives of the study

The aim of this study is to analyse how material and social structures and supplies of residential child care facilities in Ghana (Children's Homes) affect aspects of children's QoL. It seeks to understand the role of the Children's Homes in resource mobilization and how this can contribute to elements of better QoL for the children. This study adopts a comparative approach of the study of QoL at three different Children's Homes; Osu Children's Home in the Greater Accra Region and Ahotokrom and Lighthouse in the Central Region. The first one is governmentally owned and operated, while the latter two are private.

The general objective is to analyse how aspects of the children's QoL are satisfied from a basic needs approach and supplemented by a subjective well-being approach. QoL is seen as an all embracing conception which includes both basic needs (food, shelter, clothing, health and education) and other non-material needs (safety, leisure, aspects of love and belonging and social networks). The latter could be expanded by elements such as basic mood, self-esteem, satisfaction, thriving, well-being and so on. This would however, be outside the scope of this study and would demand a much broader time frame and a deeper level of investigation. There are three demanding challenges for research and insight this thesis encounters;

1. The thesis concerns aspects of *children's* QoL and children are also the primary informants, which makes it a more demanding and difficult task compared to investigating aspects of adults QoL.
2. The Children's Homes represents sets of structures that limits and enables the children's action. They are not what Aubert (1964) calls *total institutions*, however most aspects of the children's lives are determined by these structures. This creates a living situation which is very different from living in an "ordinary" family based setting.
3. The thesis is conducted in a *foreign culture*, which implies that understanding and interpreting of several subjective QoL aspects are demanding.

The main objective is:

- How do the material and social structures and supplies of the Children's Homes contribute to similarities and dissimilarities in aspects of the children's QoL?

Within this objective, two specific objectives are:

- To what extent are collective resources available and individual resources utilized among the children at the various homes. How does this affect aspects of the children's QoL?

- How do the type of ownership of the homes (governmental vs. private) influence the material and social structures and supplies in a way that affects aspects of the children's QoL?

1.4 Significance of the study

The significance of the study is illustrated by the constantly growing number of orphans and vulnerable children, especially in Sub-Saharan Africa mainly due to the HIV/AIDS-epidemic. The numbers of children that are left alone without parental care are staggering and the extended family-system are crumbling under the weight of the number of children that are in need of care. Many of the children that falls outside the extended family system ends up as street children having to fend for themselves in an adult world where the dangers and risks are many. Ghana has responded to this growing problem with a sudden mushrooming of Children's Homes. The question is what do these Children's Homes have to offer the children? What quality of care can they provide? What can the Children's Homes offer so that the children develop into independent and productive adults? This thesis is essential because it contributes to the knowledge of how residential child care facilities impacts aspects of children's QoL in a very profound way. It shows how the Children's Homes acts as a set of structures that allows or limits the children's access to various resources and how this affects aspects of the children's QoL. It also investigates to what degree the children are able to act as competent social actors within these structures. As a comparative study it reveals how structural inequalities work to create differences in aspects of the QoL between the Children's Homes. The Children's Homes in this study meets the children's needs differently and this creates differences in aspects of the QoL. MacLeod (2001) claims that only 1-3 percent of orphans in Africa are in residential care settings, but even though this number seems small, this should in no way affect the importance of these children in research. Even though they are relatively few in numbers compared to other groups of OVC's, their problems are just as real, their lives are just as valuable and every one of them is worth our attention.

1.5 Organisation of the Thesis

This chapter is divided into 7 chapter with sub-chapters. *Chapter 2: Concepts and Theory* introduces the concepts and the theoretical framework this thesis is built upon. The chapters starts with clarification of some important concepts and then moves on to the theoretical framework for this study; the theory of structuration and children as competent social actors, the QoL approach, with the basic needs approach and subjective well-being.

Chapter 3: Methodology and Research Process deals with the choice of using qualitative methodology and the research process. The methods of data collection, sampling, background of the informants and the data analysis is presented here. It also discusses ethical issues when working with children, the reliability, validity and limitations of the study.

Chapter 4: Background to the study area starts with a general background of Ghana and the two districts in this study, Accra Metropolitan Area and Cape Coast Municipality and their socio economical characteristics. The chapter aims to give the reader a contextual background to how these socio-economic conditions influence children's lives. The three Children's Homes are presented under the district they belong to.

Chapter 5: Collective resources and *Chapter 6: Individual resources* analyse the empirical findings and aims to answer the main objective and the specific objectives.

Chapter 7: Conclusions, limitations and recommendations makes concluding remarks about the study, the limitations of the study and suggestions for further study.

CHAPTER 2: CONCEPTS AND THEORY

This chapter is concerned with the conceptual and theoretical framework this study is built upon. The first part clarifies some concepts that are important in the understanding of this thesis; children, childhood, orphans and vulnerable children (OVC), residential child care and poverty. The second part is an introduction to the analytical theoretical framework; the theory of structuration and the QoL approach, with the basic needs approach and subjective well-being. Children as competent social actors will also be discussed here. These theories are used as guidelines in the analysis and they help to understand how the material and social structures and supplies affect aspects of the QoL of the children in this study.

2.1 Children and Childhood

The Convention on the Rights of the Child (CRC) defines a child as “*every human being under the age of eighteen years, unless under the law applicable to the child, majority is attained earlier*” (The Convention on the Rights of the Child, Art.1, 1989). The CRC was presented by the UN in 1989 and even though a Human Rights Convention already existed there was a growing understanding that children as a group are in need of special attention and protection.

In the Children’s Act from 1998, the Ghanaian Government defines a child as “*a person below the age of eighteen years*” (Government of Ghana, The Children’s Act, 1998:6). Ghana was the first country to ratify the CRC in 1990 and in 1992 Ghana included an additional chapter to protect Ghanaian children from harmful traditional practices. In 2001 the Ministry of Woman and Children’s Affairs (MOWAC) was established. MOWAC has set objectives that treat children as a group that deserves special attention and protection. These objectives have later been followed up by numerous legislations, policies and programs (MOWAC, webpage, 2008).

The new sociology of childhood claims that the concept of childhood is a social construction which varies across cultures and societies. Hence, it’s meaning and contents varies across time and space (James and Prout, 1997). In the Western societies childhood has become more or less synonymous with the first eighteen years of human life. This age-set criterion and the contents of childhood varies with what expectations and responsibilities a specific culture or society puts on a child. Childhood is not just a word to describe certain years of the human life. UNICEF (2005) claims that

the concept of childhood also “refers to the state and condition of a child’s life: to the **quality** of those years”, (UNICEF, 2005:3). Poverty is a factor that can affect children’s childhood in a profound way. Children that live in poverty and that are denied access to basic needs like proper food, shelter, sanitation facilities and education are denied their childhood (ibid). Poverty can force children into early adulthood. Where a child’s contribution to the family household is absolutely necessary for survival, the child can be forced to “grow up” much faster than its peers. Poverty can create social differences of childhood within a society, where children from better off families are given the opportunity to “be a child” longer than their peers from poorer families.

2.2 Orphans and Vulnerable Children (OVC)

2.2.1 Orphans

There exists a large number of ways to define orphans depending on the usage of the definition; epidemiologically, legal or as a social and cultural definition. The latter will vary between people and societies. I was constantly told that “*in Ghana we have no orphans*”. People explained this with the existence of the extended family system and how this ensured that no child was ever left on its own. People did not refer to children that had lost their parents as orphans, because (at least in theory) these children still had caretakers and thus were not orphans by their definition. In addition to the usage of various age-groups when defining orphans, there is also the pattern of parental death; maternal, paternal or double orphans. All these different ways of defining orphans have program and policy implications and need to be thoroughly considered and fully understood before set into practice.

2.2.2 Vulnerable children

Vulnerable children are those “*whose safety, well-being, and development are, for various reasons, threatened*” (Subbarao et al, 2004:1). Lack of care and affection, adequate shelter, nutrition, education and psychological support are some of the most important factors that accentuate the vulnerability of children. The types of vulnerability children are exposed to, are highly contextual and will vary between different settings (ibid).

The definition above is a very broad one and includes a huge number of children for various reasons. It is therefore a difficult definition to use in the field. In this study however, what children to include as *vulnerable* have already been determined by the Children’s Homes by their rules and standards of gate-keeping. In this study vulnerable children are those that for one reason or another cannot or do not want to live with their parents or extended family. Like orphans they have in a way

“lost” their primary caretakers. Often these children are neglected, abandoned, abused or their parents may simply lack the resources to take proper care of them. Children that have lost their primary caretakers are more vulnerable to health risks, violence, exploitation and discrimination (UNICEF, 2004).

In this study I will use the term orphans and vulnerable children as one single category. It proved very difficult to separate between the children that were actual orphans and the ones that were not. This was due to the fact that in some cases the Children’s Homes did not have any information about the children’s families, either because the children did not want to reveal anything about their families for fear of being sent back or because the Children’s Homes were unable to locate any family. There are some dangers associated with the usage of labels as it can affect people’s behavior and labeling may have negative and stigmatizing effects.

2.3 Residential Child Care

The term *residential care* has more or less replaced the negatively associated term *institutional care* when referring to child group-care settings. Tolfree (1995) defines residential care as: “*a group living arrangement for children in which care is provided by remunerated adults who would not be regarded as traditional carers within the wider society*” (Tolfree, 1995:6). As mentioned above, Ghanaians claim that they do not have orphans and as a consequence they do not have *orphanages* and only refer to residential child care facilities as *Children’s Homes*. Another reason for this is the fact that these residential care-settings do not only house children that have lost their parent(s), but also vulnerable children that for one reason or another can not or do not want to live with their families. The three residential child care facilities in this study will be referred to as Children’s Homes.

2.4 Poverty

Spicker (2007) describes poverty as a “*complex set of ideas which mean different things to different people*” (Spicker, 2007:iv). How people understand the concept of poverty impacts the problems they identify. Poverty can be absolute or relative. The first relates to not having enough subsistence to survive (Lund et al, 2008). This is often referred to as basic needs, including food, safe water, sanitation facilities, health, education and information (UN, 1995). Poverty can also be relative, meaning people's ability to sustain a lifestyle in line with the norms and standards of the society in which they live (Lund et al, 2008). This means that poverty is socially determined and when

assessing poverty one has to take the specific cultural context into consideration. The concept of poverty also changes with time, as societies change so does the standards of what is considered poverty (Spicker, 2007). Poverty is a multi-dimensional concept and there has been a shift from the income focused approach to a broader approach. This includes both basic needs and non-material needs, such as rights and liberties (Shanmugaratnam, 2003). Three approaches are used in this study; poverty as non-material deprivation, social exclusion and vulnerability.

The first approach is poverty as non-material deprivation or as Sen calls it; capability deprivation. The approach of poverty as capability deprivation came as a response to the mainstream perception of poverty as mainly focused on income. The thought was that even though proper income levels are important as a way to eradicate poverty, it is far from enough. According to Sen development is an *“expansion of people’s capabilities, as a process of emancipation from necessities that constrain fuller realisation of human freedom”* (Sen in Shanmugaratnam, 2003:5). Hence, poverty is not only connected to the state of impoverishment a person experience, but also the lack of opportunities due to social constraints and personal circumstances (UNDP, 1997).

Social exclusion is *“the process through which individuals or groups are wholly or partially excluded from full participation in the society in which they live”* (European Foundation 1995 in Shanmugaratnam, 2003:8). Social exclusion can manifest itself in a variety of arenas in society, such as the social, economical and cultural arena. Children living in residential child care facilities can be socially excluded in a number of ways. The mere fact that their lives are institutionalised makes them excluded from the advantages of a normal family life and parental love and attention. Their contact with the local community can be limited, especially so if the residential care facility have their own school. This will impact their level of involvement with local children, which also is dependant on the local community's attitude towards orphans and vulnerable children, as stigma and discrimination tends to follow these children.

The third approach is poverty as vulnerability; *“Vulnerability is a stage of high exposure to certain risks, combined with a reduced ability to protest and defend oneself against those risks and cope with their negative consequences”* (Khan, 2003:7). The level of exposure to risks and the ability to cope with them changes through different stages of life. The types of risks can also change depending on circumstances and situations. Vulnerability changes over time and space and is thus a dynamic and relative concept (Khan, 2003). Children are a very vulnerable group of people and being an orphan contributes greatly to this vulnerability. They are in a situation of having lost the

centre-point in life; the parents. Different types of vulnerability can act to reinforce others, so it is likely to assume that a child who has lost her parents, and thus already in a vulnerable situation, will suffer a higher rate of malnutrition than a child with both parents alive. The level of vulnerability is also influenced by the level of assets possessed, the risk-asset balance. The degree and type of vulnerability children are faced will vary between different contexts and must be analysed accordingly (Subbarao et al, 2004).

2.5 The theory of structuration

Understanding the underlying structures in a society and what impact the actions of the agents have on these, is important when trying to understand fundamental problems in a society. The theory of structuration as developed by Anthony Giddens emphasises the concepts of “structure” and “agency” and how these work to recreate and reshape each other. The main idea of Giddens’ theory is the duality between “agency” and “structure”; structures shape practices and actions and these can again create and re-create social structures (Gatrell, 2002). This balance between agents and structures are called the *duality of structure*; neither agents nor structures are prominent to the other. In other words, structures set the premises for human actions, but at the same time they are the result of human actions. The theory of structuration gives room for the idea that people, especially the poor, are not free to make their lives as they wish, but in most instances they are able to shape the structures surrounding them to their advantage (Corbridge, 1995). This means that people live and act within structures that both limits and enables them and also that people as agents are able to influence and change these structures.

Agency is human action and refers to people’s capabilities, their actions and behaviour. Human agency is “*the capacity to make a difference*” (Giddens 1984:14). People are not mere puppets, powerless under the structures of society. People are competent, knowledgeable agents whose actions are intentional and reflexive, as they create and recreate society and its structures. Even though agents have skills and competence, their knowledge is limited and thus, their actions can have both intended and unintended consequences on others and on society. Agency has the power to lead to both the reproduction and the transformation of society and its structures.

Structures are rules and resources that constrain and enable the actions of human agents. According to Giddens structures are sets of rules and resources that They are “*...sets of rules and resources that individual actors draw upon in the practices that reproduce social systems*” (Giddens, 1995:203) Hence, structures are the product of human action, as the human agents create, maintain

and change the structures through actions. Structures can be highly formal such as laws, bureaucratic regulations and prohibitions. They can also be informal, unwritten social rules, such as social norms and codes of conduct, which are implemented through people's daily interaction. They guide people through the social situations in life. These informal social rules are often difficult to identify for the people frequently using them, because they often appear to be deeply embedded in people's behaviour and ways of thinking. The extent to which the use of these social rules is conscious or unconscious is dependant on the level of which they appear to be self-evident. Giddens (1984) claims that the most important aspects of structures are rules and resources recursively involved in institutions and institutions are by definition the most enduring feature of social life.

Resources “...are structured properties of social systems, drawn on and reproduced by knowledgeable agents in the course of interaction” (Giddens 1984:15). Resources can either be allocative or authoritative. The first is control over material relations and objects, such as finances, access to land and so on. Authoritative resources enable control over other people, such as status, education, knowledge and authority. *Collective resources* are available to all people within a group. As the children in this study live in residential child care facilities they are in many circumstances treated as a single group. In residential child care facilities this is often done due to organisational and financial demands. Collective resources in this study are; food, shelter, clothing, health and healthcare, education, safety, leisure, love and belonging. *Individual resources* relates to resources that are special for one single human being. In this thesis individual resources includes shelter, clothing, personal possessions, education and social networks. The children's ability to gain and utilize individual resources is highly dependent on individual characteristics, such as personality, age, cognitive abilities, creativity, resourcefulness and level of maturity.

The theory of structuration is relevant to the problem under consideration because it is essential in understanding how the material and social structures and supplies that surround the children in the study areas affects aspects of their QoL. The theory of structuration also gives room to see the children as competent social actors that act as individuals rather than a homogeneous group. The children are not passive objects under the structural constraints that surround their lives. Resources provided by the homes intended to benefit all the children equally, can be redistributed due to hidden hierarchies among the children and create differences in aspects of their QoL.

2.5.1 Children as Competent Social Actors

Past literature and research on children have had the tendency to emphasize how structures impact and shape children's lives. Hence, the focus has been on the structures as being the active forces and children as passive and non-reactionary to these forces. Human competence has traditionally within research been viewed as essentially dependent on age. People develop human competence through the transformation from “*an immature child to mature adult, simple to complex, irrational to rational behaviors, and dependent childhood to autonomous adulthood*” (Boyden et al, 2000:24). In this line of thought, children and childhood are deemed as being “less” than adults and adulthood. The ultimate goal of the development of human competence is adulthood and childhood is seen merely a stage of learning and training in order to achieve adulthood. Children are defined by their special needs and what they lack in relation to adults, such as power, abilities and responsibilities. Hence, this view rejects the notion of children as competent social actors (Youniss et al 1994 and Schildkrout, 1978 in Boyden et al, 2000).

With the emerging of *the new social studies of childhood* there came recognition of children as competent social actors that actively contribute to and influence their own lives (Barker, 2003; James et al, 1998; Lewis, 2000; Holloway et al, 2000). Boyden et al (2000) claims that children are social and economic contributors, but their contributions have systematically been ignored and their views, experiences and perspectives denied. “*Even in adversity children are not the passive recipients, but active survivors of experience*” (Boyden et al, 2000:8). James and Prout (1997) insist that children must not be seen as small versions of adults, but as beings in their own right. Children do not remain passive to changes and difficulties in their lives. They are competent social actors and researchers must acknowledge this. It is important to see children as individuals with their own opinions, thoughts and needs. “*Children are and must be seen as active in the construction and determination of their own social lives, the lives of those around them and of those societies in which they live. Children are not just passive subjects of social structures and processes*” (James et al, 1997:8).

The thought that children are competent social actors does not dismiss the role structures play in shaping children's lives. James et al (1997) and Holloway et al (2000) claim that to recognize children's agency is *not* the same as automatically rejecting the fact that their lives are shaped by structures beyond their control. They point out that the extent to which the individual child can be seen as to act as fully competent social actors vary. Children are not a homogeneous group and individual characteristics and capabilities, such as age, cognitive abilities, personality, creativity,

resourcefulness and level of maturity, will influence the way and to what degree the individual child is able to cope with the structures influencing his/her living conditions. The child's social, economic and cultural background will influence his/her abilities, behavior and capacities. In other words, not all children will respond in the same manner when faced with the same structural externalities. This view makes it clear why it is so important to conduct research that focuses on children and their lives.

2.6 Quality of Life (QoL)

The term quality of life (QoL) may at first glance seem rather uncomplicated and straightforward. People have always had a more or less clear idea of what constitutes "the good life", at least what makes their own lives worth living. The term QoL has become more and more popular during the last 40 years, academically, politically and in peoples everyday language. The content of the term is however far from universal and the meaning people place in QoL varies widely. As Higginson put it: "*People may value different areas of life, and therefore quality of life means different things to different people*" (Higginson, 2003:2). In academic circles the meaning of QoL also varies widely depending on the context and purpose of its use in the different academic disciplines and their traditions.

The models of QoL-measurement are often overlapping, but nonetheless the controversies between them run deep. There is little controversy concerning the indicators of QoL at the *collective* or *macro* level, that of communities and societies. These often include income, employment, housing, education and other living and environmental factors. The problems emerge when moving towards the *individual* level and a more specific definition, as these includes peoples own perceptions of their QoL. As already mentioned, these will vary as people value different aspects of life (Philips, 2006; Bowling, 2004; Higginson, 2002). Models of QoL range from needs based approaches, such as Maslow's hierarchy of needs, the basic needs approach (BNA) to models solely based on psychological well-being, happiness, life satisfaction and the individuals unique perspectives (Bowling, 2004). In other words, the two main opposing strands are; subjectivists and objectivists. The subjectivists focus on pleasure as the most important aspect of peoples individual QoL, following the work of J. Bentham with his "pleasure-principle and "hedonic calculus" where the aim is to maximize pleasure and J. Stuart-Mill's theory of "utility" which ultimately leads to maximizing the QoL of *the greatest happiness of the greatest number* (Philips, 2006). In contrast to this, objectivists focus on meeting needs. In other words, the most important questions concerns peoples access to proper food, housing, their economical security and education (ibid).

The World Health Organization Quality of Life (WHOQOL) Group define QoL as: *“an individual’s perception of their position in life in the context of the culture and value systems in which they live, and in relation to their goals, expectations and concerns...incorporating...physical health, psychological state, level of independence, social relations, personal beliefs and their relationship to salient features of the environment...quality of life refers to a subjective evaluation which is embedded in a cultural, social and environmental context”* (WHO, 1993). In this definition peoples perception of the quality of their own lives is important. It is unsatisfactory to simply measure peoples QoL in terms of material things. This way of defining QoL emerged when people became aware that a simply materialistic way of looking at life was not enough. There are other non-material things that can be just as important for people. Cohen (1984) says that: *“the simple listing of quality of life domains is not a satisfactory way of measuring quality of life because it is unknown whether all important domains have been included. Researchers who construct health-related quality of life measurement scales are seldom philosophically sophisticated or concerned with competing accounts of the good life”* (In Bowling 1999:5) Peoples own perceptions and experiences has become important.

QoL is a multidimensional and multi-layered concept. Its various parts can affect each other (“knock on effect”) and also the sum. QoL is also a dynamic concept as it consists of both negative and positive indicators and due to the fact that peoples values and their perceptions of their own QoL changes over time as a response to changes in life situation, health and various experiences (Bowling, 2004).

2.6.1 Quality of Life and Children

“A basic Quality of Life should be the right of all children, rather than a privilege enjoyed by a few” (UNICEF, webpage, 2007).

Measuring the quality of life in children is difficult and this has resulted in a lack of research on the topic. Many models used to measure the QoL in children are essentially developed for adults and are thus inappropriate due to lack of relevant content and also because children have different perceptions and interacts differently with the world. The development of valid and practicable ways of measuring children’s quality of life has been made difficult by the lack of agreement concerning models for measuring children’s QoL (Higginson, 2002). The way children assess their quality of life may differ from that of adults, as children may value different things and in a different way.

The frames of reference and people's previous experiences are important when they assess the quality of their own lives. Choices available and the knowledge of these are also important. These aspects are of special importance when doing research on children, as children usually have more narrow frames of reference than adults, their level of knowledge of choices and alternatives may be limited and their ability to reflect upon their own life situation will depend on age and level of maturity (Næss, 1979).

2.6.2 Quality of life in a cross-cultural setting

This study is conducted in a cross-cultural setting and some issues concerning the use of QoL in this regard have to be mentioned. The research that has been conducted in developing countries has for the most part focused on objective indicators of QoL and the use of individual QoL measurement is a relatively new focus. How the "poor" view themselves, their lives, their surroundings and the larger social situation in which they live has become important (Schmidt et al in Gough, 2007). QoL is a multidimensional and relative concept and as mentioned, people place value in different things and thus, the concept is not universal. There are different challenges with the use of quality of life cross-culturally, such as culturally specific connotations of QoL, language, body language, different cultural codes and values. There is also the concern related to possible ethnocentrism connected to the measures and approaches used. The possible normativity of the concept QoL is another concern, as the selected aspects may not be value neutral and can act as standards to which people are expected to live up to (Schmidt et al in Gough, 2007; Diener, 2003).

2.6.3 The Basic Needs Approach (BNA)

Needs are necessities that are lacking in people's lives. Meeting needs are the requirement for human survival and for people to be able to live decent lives. Needs are often divided into fundamental or basic needs and wants. Wants are not essential for human survival, but can have implications for people's QoL (Næss, 1979). The BNA emerged in the mid 1970's with the realization of the failure of the mainstream development approaches' ability to solve various problems in the developing world. *"[...]It has become increasingly evident, particularly from the experience of the developing countries, that rapid growth at the national level does not automatically reduce poverty or inequality or provide sufficient productive employment"* (ILO, 1976:15).

The BNA attempts to define the absolute minimum standards for a decent and acceptable life. The main idea is that everyone should have the same chance of living a decent life and the ultimate goal is to eradicate mass deprivation (Streeten, 1981). However, the objective of the basic needs

approach have not been the issue of controversy, but the content of the term *basic needs* have been, and still is heavily debated; What constitutes *basic needs* and what makes them different from other needs? The BNA assumes that some factors are more prominent, or more basic, than others. The *basic needs* are the preconditions for a minimally decent life. In other words, people have to have access to enough food, good health and enough education as to be able to enjoy other aspects of life (Stewart, 1996). This is however no easy and straightforward definition. The term *basic needs* is difficult to define as human needs vary across both time and space. Human needs vary between individuals, among societies and across generations. What people perceive as needs is very much determined by their expectations and aspirations. What were previously considered luxury items might now be necessities. What people perceive to be a minimally decent life is culturally and historically specific (ibid).

The most minimalistic BNA, basic goods, have a rather limited list of factors that are perceived as necessary for a decent life; nutrition, health and some level of educational attainment. The justification for using these three factors is threefold; first, they are most likely to reach universal agreement as the most essential human needs. Second, they can be seen as preconditions for the enjoyment of other aspects of a full life. Third, they are relatively easy to identify and measure, as there exist international indicators on life expectancy, child malnutrition and educational attainment to be used as proxy measures (Philips, 2006; Stewart, 1996). Other and slightly broader lists of what to include under the term basic needs exists and include adequate nutrition, health, shelter, water and sanitation, education and “other essentials” (Streeten, 1981).

In low-income countries these needs contribute to the QoL even though culture and the level of comparison and personal preferences influence such assessments. In developing countries like Ghana where the majority of people struggle every day to have their needs for survival met, it is relatively easy to identify and classify what constitute their basic needs. It is also worth noting that any opportunity for personal fulfillment is reliant upon the choices available and the knowledge of these. When people do not even have their most basic needs for survival met, it is futile to talk about self-fulfillment needs. In this study the focus is both on basic needs (food, shelter, clothing, education and health), but also on safety and social needs. The basic needs approach offers an opportunity to set some relatively clear and specific terms for measuring the QoL.

2.6.4 Subjective Well-Being (SWB)

Subjective well-being is concerned with how people perceive their own lives, meaning their emotional and cognitive evaluations, at the present moment and over longer periods of time. In contrast to the traditional models of health and mental health, which mostly focus on the absence of illness and negative experiences, subjective well-being focuses on both positive and negative affective experiences (Næss, 1996; Diener, 1997). Diener (2003) points to two factors that influence the subjective well-being; personality and culture. These two factors are intertwined as both are influenced by social learning, genetics and their interactions. Findings suggest that culture is important when it comes to subjective well-being and that the causes of subjective well-being can vary between cultures. People's individual personalities also influence how people perceive and react to various circumstances. Major personality traits that are associated with subjective well-being are extroversion, neuroticism, optimism and self-esteem (Diener, 2003; 1997).

There are controversies as how to apply the concept of subjective well-being into the field of QoL approaches. As mentioned above, the subjective well-being concept is focused on how people evaluate their own lives. It is a subjective state of mind. Næss (2001) has a rather narrow definition of QoL which is closely related to subjective well-being, as it relates to individuals feelings and experiences. It is a subjective psychological phenomenon and social indicators, such as living conditions, only indirectly influence peoples quality through the consequences of people's experiences (see fig. 2.1) (Næss, 2001;1996). Næss (1979) claims that a person enjoys a high QoL to the degree that that person is active, relates well to others, has self-esteem and has a basic mood of happiness. Næss (2001) also claims that *“a person's quality of life is high when the person's conscious cognitive and affective experiences are positive and low when the person's conscious cognitive and affective experiences are negative”* (Næss, 2001:10). Affective experiences are related to feelings, such as happiness or despair. Cognitive experiences are people's perceptions, thoughts and evaluations of their lives. Given similar circumstances, people that have a personality with elements of neuroticism are more likely to experience anxiety and worry and thus might assess their QoL in more negative terms than a person with a more basic mood of happiness would have done.

Fig. 2.1: Quality of life as a subjective well-being conception

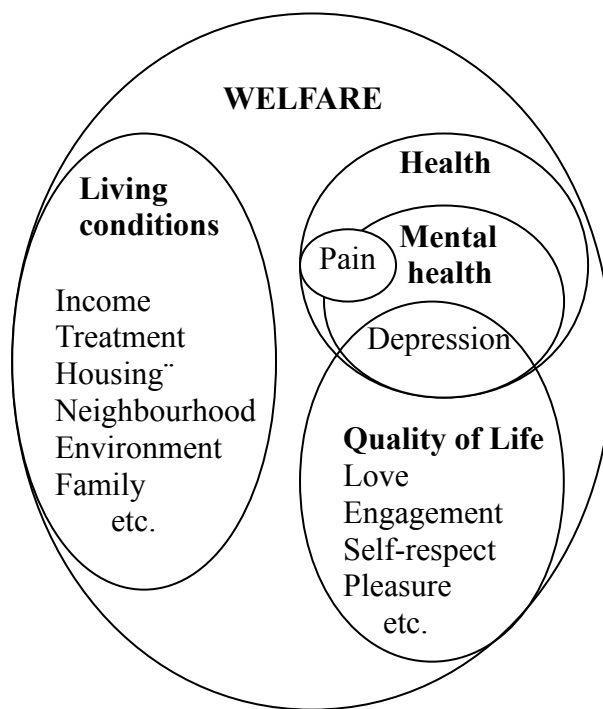


Fig 2.2: Quality of life as an all-embracing conception

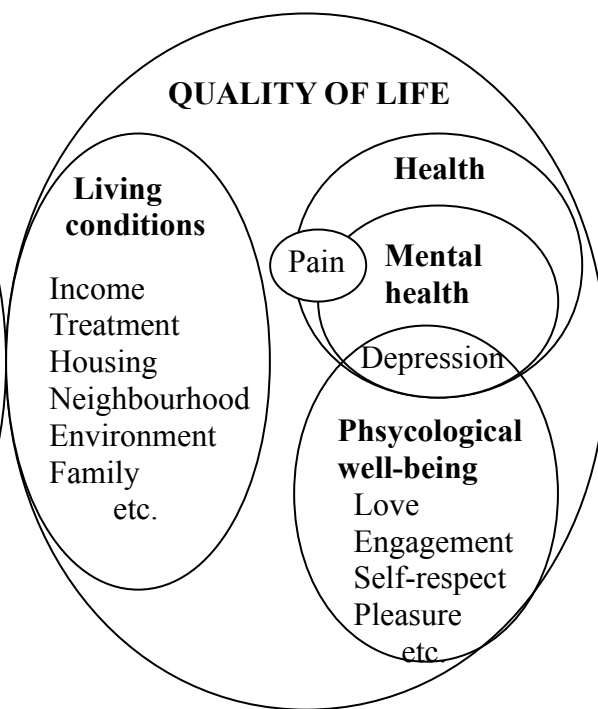


Figure 2.1 illustrates how Næss (2001; 1996) views QoL; as a subjective well-being conception. As mentioned, this view is rather a narrow one, where the concept of welfare is viewed as the all-embracing conception, comprising health, living conditions and QoL. A much broader view of QoL is depicted in figure 2.2. Here, QoL is the all-embracing conception and what figure 2.1 calls QoL is here psychological well-being. Thus, QoL is a very broad conception and includes living conditions, health, mental health and psychological well-being. The arrows illustrates how living conditions affects other aspects of QoL. This study will use the broader conception of QoL associated with figure 2.2 (see fig. 2.3).

Diener (1997) views social (objective) indicators and subjective well-being as complementary. He claims that “*despite the conceptual and methodological differences between social indicators and SWB, scientific approaches to wellbeing need to take a comprehensive view of the phenomenon by incorporating the strengths of each perspective*” (Diener 1997:192). Hence, subjective well-being is necessary for the “good life”, but not sufficient on its own. Subjective well-being is one of three ways to assess people’s QoL, along with economic and social indicators (Diener, 2003).

Figure 2.3: Quality of life as used in this study; an all embracing conception

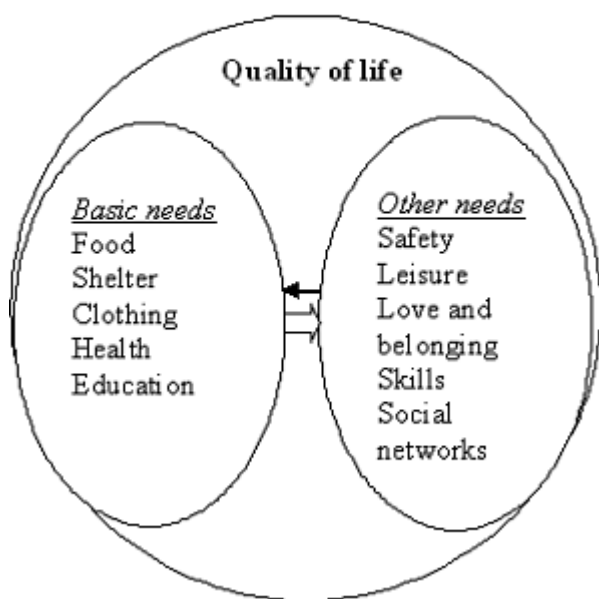


Figure 2.3 illustrates how basic needs are prerequisites in for example poverty studies, if the children, as in this study, are to enjoy other aspects of life. The children in this study come from deprived backgrounds where the access to the very basic needs for survival, such as food, shelter, clothing and so on, can not be taken for granted. Their backgrounds are diverse and range from being previous street children to orphaned, some are from families that are unable or unwilling to care for them for various reasons (poverty, broken families, illnesses with parents, imprisonment). Some children have also willingly left their families because of abuse and/or neglect.

The basic needs affect the other needs in various ways. For example, access to proper shelter can affect the children's feeling of safety in a positive way as it provides protection from external forces, both human and nature. Basic needs can affect each other and can also have an impact on other needs. Lack of proper food has a negative impact on the children's health and their education. For example, there is no use in sending a child that has not eaten for three days to school. Any positive effect education could have on the child's QoL will be lost due to the negative effects caused by lack of food. For many of the children in this study, the access to food means that they no longer have to spend their days working or begging for food. This opens up for time that they can spend on other things, such as education, learning a skill or nurturing their social networks, which again can affect their QoL in a positive way. Access to proper food affects the children's health in a positive way. Good health will affect many aspects of the children's lives as it is a prerequisite for their participation and performance both in educational settings, in development of their skills, in social situations and it will affect to what extent they are able to enjoy qualitative leisure.

CHAPTER 3:

METHODOLOGY AND RESEARCH PROCESS

To do fieldwork in a culture that differs from one's own is very rewarding. Both on a professional and a personal point of view this fieldwork in Ghana has been a valuable experience. When you do fieldwork in a country like Ghana, the unexpected soon becomes the norm. Conditions seeming clear and simple in theory, turned out to be quite the challenge. The first part of this chapter focuses on the choice of qualitative methods. The next part deals with the methods of data collection and the advantages and challenges connected to them. The selection process of the respondents will also be discussed here. The last part is a brief discussion of the ethical issues when working with children, the reliability, validity, some limitations of the study and the role as a researcher.

3.1 Methodological approach: why a qualitative approach?

Qualitative methods are frequently used in human geography and the need to defend the use of these, rather than the use of quantitative methods, are no longer regarded as necessary (Limb and Dwyer, 2001). When choosing one methodology over the other, the emphasis is placed on making an appropriate and sensible choice based on what kind of knowledge the researcher is seeking (Patton, 1990). The choice of methodology is strongly influenced by the theme and the objectives of the study, the theoretical approach and also the personal view of the researcher. As Elliot says: "*and the question shall determine the method*" (Elliot, 1999:240).

According to qualitative methodology, knowledge is something that is constructed in the interaction between the researcher and the informant. In qualitative research there is a subjective understanding of knowledge (Limb and Dwyer, 2001), where the goal is to gain an in-depth understanding of a theme. This involves the uncovering of people's personal feelings, thoughts and perceptions. A qualitative approach is chosen for this study due to the purpose of the study which is to gain an in-depth understanding of how structures surrounding the children have an impact on their quality of life. A qualitative method will also allow the researcher a glimpse of the children's world, as seen through the eyes of the children themselves, as qualitative methods are considered "*more effective in enabling children to communicate in their own terms*" (Barker; 2003:50) and more suitable when doing research *with* children (Greig et al, 2007).

Research with children has for a long time not been the focus of attention in geography or any other social science. Children have mainly been a part of research projects where the focus has been on more “important” themes, such as education and family. These traditional ways of doing research have been criticized for doing research *on* children, rather than *with* children. The focus has also been on adult interests and the research built on adults assumptions (Hood et al. 1996; Valentine, 1999). Hence, children have not been given a real opportunity for their voices to be heard (Oakley, 1994; Christensen and James, 2008). This is now changing with the emerging of *the new social studies of childhood* where children are seen as competent social actors, as beings in their own right (Christensen and James, 2008, James et al, 1998, Qvortrup et al, 1994). Children are in this line of thought no less able or competent than adults (Holloway and Valentine, 2000). They are the experts of their own lives and it is necessary find meaningful ways of communicating with them (Roberts in Christensen and James, 2008).

Is research with children the same or entirely different from research with adults? Usually, research with children has been viewed as one of two opposites: as essentially the same or as very different from research with adults. James et al (1998) have suggested a third option: to see children as similar to adults, but with different competencies (James et al, 1998; Punch, 2002). This study is placed within this last approach. Research with children is potentially different from research with adults for three main reasons: adults’ perceptions and attitudes towards children, children's marginalized position in the adult society and that children are similar, but not the same as adults. In other words, children are inherently different than adults (Punch, 2002). Reflexivity is therefore of great importance when doing research with children. The researcher should reflect upon his/her role and assumptions and also on the methods used and their application (Davis 1998; Punch 2002; Christensen and James, 2008).

3.2 Methods of data collection

Each method of data collection has its weaknesses and strengths and this is why researchers often apply two or more methods in a study. Esterberg (2002) claim that studies that use multiple/complimentary methods tends to be the strongest. This is called triangulation.

Three types of triangulation methods are relevant to this study:

- 1) Theory triangulation – the use of different analytical perspectives in data interpretation. This includes the theory of structuration and various elements of well-being perspectives
- 2) Methodological triangulation – application of different methods to a single problem
- 3) Data triangulation – use of variety of data resources (Mikkelsen, 1995)

No method alone can ever be adequate to solve the problem of rival casual factors (Denzin, 1989) and triangulation can be used as a response to the arguments that the findings are artefacts of one specific method (Smith, 1975). Triangulation is used to obtain confirmation of the data that has been collected. Where the data collected by different methods converge may be seen to represent “the reality”. Triangulation can employ both qualitative and quantitative methods in the same study. As mentioned above, in this study the choice fell on using only qualitative methods: interviews, observation, field notes and document-analysis.

3.3 Sampling

This study was conducted in Accra and in and around the city of Cape Coast. Even though I was so fortunate to have access to some very helpful people at the University of Ghana and the University of Cape Coast, locating Children’s Homes to be a part of this study turned out to be a real challenge. Very few people seemed to know of any Children’s Homes and did not know where to start the search. All Children’s Homes in Ghana are supposed to be registered and approved by the Department of Social Welfare (DSW), but only five of an estimated 148 actually are. This made it much more difficult to locate and gain access to the Children’s Homes. It was remarkable how difficult they were to locate, even for the local people.

The Children’s Homes were not in any way hidden away in remote areas far away from the local community. Still the impression was that, with the exception of the immediate neighbourhood, the presence of the Children’s Homes for the most part went unnoticed. This study does not involve inquiries into the Ghanaian culture's attitudes towards the Children’s Homes, hence it is not possible for me to answer the question of why the Children’s Homes seemed to be able to “hide in plain sight”. In Accra staff from the University of Ghana and World Vision finally guided me in the direction of Osu Children’s Home, the only home in this study that is registered and approved by the DSW. In Cape Coast the process of locating Children’s Homes proved to be much more time-consuming, cutting short my time to do interviews and observations at the homes.

3.3.1 Selection of the informants

The managers at the Children’s Homes acted as my key informants and as a source of access to the rest of my informants: the children and the additional staff members. My original plan was get access to 4 Children's Homes. The aim was to interview the manager at each Children's Home, 2 additional staff members and 6 children (3 girls and 3 boys). This would give me a total of 36 interviews. However, for various reasons this did not go exactly as planned. After much

consideration I decided to drop one Children’s Home from the study. The interviews at this particular Children’s Home were done with the help of an interpreter. When using an interpreter it is of the utmost importance to make sure that the meaning of the information is not lost in translation (Esterberg, 2002). There is also a risk of the interpreter only translating what he/she considers to be of importance. Unfortunately the latter is what happened when conducting these interviews. I could very easily tell that my interpreter only translated a small fraction of what the informants were saying. After several attempts to correct this without any improvement and realising that I did not have the time to find a new interpreter and do the interviews again, the decision was made to not include this Children’s Home in the study. The negative outcome of this decision was that the children that did not speak English were eliminated from this study. On the other hand I felt the interviews done in English were more enriched and had more depth and flexibility. I finished my fieldwork with 3 Children's Homes and 25 interviews in total; 14 children, 3 managers, 6 additional staff and 2 additional informants (see Table 3.1).

Table 3. 1: Children's Homes and primary, key and additional informants

| Location | Urban | | Rural | | Total |
|------------------------------|--------------|-------------------|-------------------|------------------|-----------|
| | Governmental | Non-Governmental | Non-Governmental | Non-Governmental | |
| Children's Homes | Osu | Lighthouse | Ahotokurom | Ooeim | |
| Children interviewed | 4 | 5 | 5 | 5 | 14 |
| Managers interviewed | 1 | 1 | 1 | 1 | 3 |
| Additional staff interviewed | 2 | 2 | 2 | 2 | 6 |
| Additional informants ** | 1 | 1 | - | - | 2 |
| Total | 8 | 9 | 8 | 8 | 25 |

* Planned selection of rural Ghanaian Children's Home that were dropped because the children did not speak English. These numbers are not included in the "total" columns/rows.

** Additional informants at the Children's Homes. Two male informants that did not fit into the age range of the study. One still living at the Home (age 26) and one moved out of the Home (age 22).

Primary informants

The children are the primary informants in this study and as already mentioned the managers were my source of access to the children. When working with children, it is important to go through “the proper channels” and the managers were the authority figures with the power to give permission to interview the children. As a consequence, all the children interviewed were picked out by the managers. A negative aspect due to the fact that I was not able to choose the children myself, was

that the managers could have selected the children that are doing well, are the most resourceful and who they think will present a positive image of the Children’s Home.

Purposive/judgemental sampling was used to select the children and some pre-set criterion were used to ensure the children were represented equally by sex (3 boys and 3 girls at each Children's Home) and at different ages within the age range (12-19 years old) (see table 3.2). Another criterion was that the children had relatively good qualifications in English so they would be able to express themselves and fully understand the questions and the themes that would be discussed. However, some of the Children's Homes simply did not have enough children meeting the pre-set criterion (age and language) and because of the limited time frame, locating other Children's Homes was not an option. This lack of time stems from the fact that the time-frame of this study was set to two months and the time used to locate and get access to the Children's Homes in this study took a lot longer than anticipated, cutting short the time for doing interviews and observations. Sometimes I also had to take “whoever was available” at the moment, since some of the children actually meeting my pre-set criterion were at school and I did not have the opportunity to return to the Children’s Home at a later time due to a combination of restrictions set by the managers at the homes and the time restrictions set for this study. One interview was excluded from my final sample because I felt this child (female, age 10) was too young to give any relevant information. For these reasons I ended up with 14 interviews with children instead of 18 as planned (see tables 3.1 and 3.2). Even though I had to exclude one interview and 3 are missing, the gender distribution among the children is totally even; 7 girls and 7 boys (see table 3.2).

Table 3.2: The children by age and gender *

| Age | Male | Female | Total |
|--------------|----------|----------|-----------|
| 12 yrs old | - | 1 | 1 |
| 13 yrs old | - | 2 | 2 |
| 14 yrs old | 1 | 2 | 3 |
| 15 yrs old | 1 | 1 | 2 |
| 16 yrs old | 1 | 1 | 2 |
| 17 yrs old | 3 | - | 3 |
| 18 yrs old | - | - | - |
| 19 yrs old | 1 | - | 1 |
| Total | 7 | 7 | 14 |

* Ooem Orphanage and additional informants are not represented in this table.

Additional staff members

In addition to interviews with the managers, interviews with additional staff members were used to gain supplementary information. The additional staff members were in three cases selected by the manager and in three cases by me. As in the selection of the children, this can be said to be a disadvantage because the managers may have selected the staff members they think will portray a positive view of the Children's Home. Where I was able to influence the choice of, or to choose the additional staff members to be interviewed, I chose to interview both Ghanaian staff members and Western volunteers/students working at the Children's Homes. The latter are also included under "additional staff members" because they worked at the Children's Homes every day for an extended period of time (see Table 3.3). I chose to include Western volunteers/students because they may offer a different view than the Ghanaian staff and they may also feel more "free" to include critical remarks in the interviews. In total I interviewed 9 staff members, the manager and two additional staff members at each Children's Home. The additional staff members were all people who worked in close, direct contact with the children every day. The time the different staff members (interviewed in the study) had worked at the homes varied tremendously, from one month to 35 years (see Table 3.3). There is an uneven distribution of gender among the staff interviewed: 3 males and 6 females. Amongst the managers the numbers are: 1 male and 2 female (see Table 3.4).

Table 3.3: Years worked by staff members at the Children's Homes

| Children's Home | Manager | Ghanaian staff members | Volunteers/students |
|----------------------------|----------|------------------------|---------------------|
| Osu Children's Home | 10 years | 35 years | 7 months |
| Ahotokurom | 23 years | 17 years | 3 months |
| Lighthouse Children's Home | 3 years | 3 years | 1 month |

Table 3.4: Staff members by gender

| Children's Homes | Male | Female | Total |
|---------------------|------|--------|----------|
| Osu Children's Home | - | 3 | 3 |
| Ahotokurom | - | 3 | 3 |
| Lighthouse | 3 | - | 3 |
| Ooem * | 2 | 1 | 3 |
| Total | 3 | 6 | 9 |

* Planned selection of Children's Home that were dropped.
These numbers are not included in the "total" columns/rows.

3.4 Primary data

Interviews with the children, the managers and the staff at the Children's Homes are the primary source of information in this study, but observation, field notes and document-analysis are also used to gain supplementary information.

3.4.1 Interviews

The advantage of this approach is that it is sensitive and people-oriented, allowing interviewees to construct their own accounts of their experiences by describing and explaining their lives in their own words", (Valentine in Flowerdew et al, 1997: 111).

Interviews are a popular method in social research. It is a conversation between two people where the relationship between the researcher and the respondent is very uneven. Esterberg (2002) calls this a "lopsided exchange" of information. The aim of an interview is *"not to be representative but to understand how individual people experience and make sense of their own lives"* (Valentine in Flowerdew et al, 2000:111). Feminist scholars claim that interviews are a very good way to study marginalized groups, such as children, because it allows them to tell their stories in their own words. It is valuable as a method because it allows the researcher to obtain the children's own perspectives (DeVault, 1999 and Reinharz, 1992 in Esterberg 2002, Grieg et al, 2007).

The advantages of using interviews are many. The information one get is constructed in such a way that it allows the informants to construct their own accounts of their experiences of different issues. It also allows people to explain various conditions in their own words and lets them raise issues or points that the researcher may not have thought of. The researcher can also go back in the interviews and explore an issue further (Flowerdew et al, 1997). This gives the interview a flexibility and strength that would have been lost in a more rigid interview or by using questionnaires.

There are also some disadvantages in using interviews that one has to be aware of. Using interviews requires very close attention from the interviewer. This can be very exhausting because in order to get good and valid information you have to pay very close attention not only to *what* is being said, but also *how* things are said. Biases the interviewer brings into the interview situation can cause misunderstandings and misinterpretations. Lack of trust between the informant and the interviewer may cause the informant to tell lies or try to hide information or the "truth". Informants can also monopolize the interview. Children, both as individuals and as a social group, are potentially more

vulnerable to the power-imbalance between the adult researcher and the child informant (Punch, 2002; Barker, 2003; Hood et al. 1996). This can affect the interview and can potentially lead to situations where the child informant tries to please the interviewer by telling what they think he/she wants to hear. The data collected from qualitative interviews can also be difficult to organize and analyze. This is because this type of interview can become less systematic and comprehensive.

When interviewing children it is important to take their age and level of maturity into consideration. As the age of the children interviewed varies from 12 to 19 years old, there is a big difference in their ways and abilities of expressing themselves, hence the length of the interviews and the “depth” of the information gathered vary. The children’s ability of expressing themselves is not only dependant on their age, but also on their individual level of maturity, their personality and their cognitive abilities and the level of stimulation they are exposed to. I used a semi structured interview guide during the interviews (see appendix A). This gave me freedom and flexibility to explore issues more deeply as they came up during the conversation. The use of semi-structured interviews as opposed to a more rigidly structured interview or a questionnaire, was useful in this study because what is considered a *good* QoL is very much an individual experience which is dependant on both personal preferences and level of comparison. The children were given the opportunity to raise issues that were important to *them* in the interviews. Themes that were discussed during the interviews with the children were education (present and future), leisure time (including chores), social networks, the staff, personal place and life at the Children's Home in general.

All the interviews were conducted at the various Children's Homes in a place where none of the other children or the staff could hear the conversation. However, sometimes the children became concerned and almost looked over their shoulder before answering some of the questions. At all the Children's Homes the managers lined up the children selected for the study and I interviewed them one by one. The average interview took about 30-40 minutes and the longest lasted approximately 1 ½ hours. None of the children refrained from or wanted to stop the interviews, but in some instances I still felt that the children at Osu and Lighthouse to some degree felt obligated to do the interviews because they had been chosen by the managers. These interviews were the shortest ones and with less “rich” and descriptive information. In comparison to these interviews, many children were excited about the interviews and enjoyed talking about themselves and their life situation. This was especially the case at Ahotokurom, where the children talked very freely during the interviews and seemed to be very relaxed with the interview-situation, which can be seen as a quality in itself.

Informal conversations with a volunteer at Ahotokurom also confirmed that the children chosen to participate in the study were excited about being interviewed.

The interviews with the children were demanding for both the children and the researcher because they sometimes were so intense. It was an emotional conversation in the way that the children would sometimes “put up a wall” and refuse to talk about sensitive issues and that they could get very emotional. The children also had very different reactions to the topics. What one child could talk very freely about, another might not want to answer at all. I always had to “feel” my way through the interview and try to see what each child was comfortable with. All the interviews, except one, were recorded so that I could follow the conversation more naturally and not be preoccupied with my notebook.

I used a simple language to form the questions so that the children would not have difficulties understanding them. However, because of the age range in my study (12-19 years old) the interviews with the oldest children became more advanced as they could reflect deeper on their life situation and had a more sophisticated way of expressing themselves. There was an apparent difference between the children in the lower age range and those in the upper age range in terms of how well they expressed themselves and how reflected their answers and comments were. All the interviews had the natural flow of an ordinary conversation and thus made the informants, especially the younger children, more comfortable with the situation. I used the interview guide as a tool to structure the interviews to be able to compare them later in the analysis.

3.4.2 Key informant interviews

Key informants are persons that possess particular knowledge or insight in the topic under study (Mikkelsen, 1995) and may also act as a “gateway” to other informants. As described earlier, the managers at the Children’s Homes were my key informants. The interviews with the managers were always the first ones I conducted when arriving at a Children’s Home. This was very useful because these interviews gave me a quick and often thorough introduction into the history of the Children’s Home, the everyday life and the struggles and challenges they face as an residential child care facility. It also gave me a rough introduction of the children and the staff living and working there. These interviews were more structured than the other interviews and had more specific questions rather than just topics to be discussed (see appendix B).

When using key informants there is however a risk of getting a biased representation, due to the fact that one person can not represent all views and aspects of the topic being studied. To minimize this limitation I also interviewed two additional staff members at each Children's Home, of both Ghanaian and Western origin. As already mentioned, all the additional staff members were people who worked directly with the children on a daily basis.

3.4.3 Observation

Observation assumes that people's behaviour is purposeful and can express deeper values and beliefs. What people *say they do* and what they *actually do* can be two very different conditions. Observation can thus be a valuable tool in order to supplement other methods and checking the validity of a study. Observation is very useful when dealing with children because it may reveal patterns of behaviour the children themselves are unaware of or cannot describe to a satisfactory degree (Kitchin and Tate, 2000).

There are many advantages with using observation. The most obvious is perhaps that one can study people's behaviour in their natural setting. The fact that I was able to observe the children in their most familiar surroundings, the Children's Homes, was an advantage since children are especially reactive to strangers and strange situations (Greig et al, 2007). This meant that I was able to watch the children doing their daily activities in their everyday surroundings and I could see how they responded to situations as they unfolded. Observation is also a valuable tool because it can create more reliable responses by putting informants more at ease. The sample in such a method will be small but it will in return give a greater depth of the understanding of an issue (Dowler in Limb and Dwyer, 2001).

Even though observation is a good method in addressing certain issues, there are some problems connected to it. The sample size is small and generalizations can hardly be done. The presence of the researcher as a stranger may also influence the behaviour of people. People act more as "expected" or what *they believe* is expected too when they are overtly observed by a stranger. The fact that the children may have perceived me as an authority person could also have contributed to this. Since qualitative methods state that there is no such thing as a totally objective study, the researcher brings different biases into the field. One can never be fully aware of all ones personal biases, but this is still important to have in mind when collecting and interpreting data. Both as an adult and as a person with a Western cultural background, it was necessary for me to try as much as possible to be aware of and put aside my preconditioned ways of thinking about how *childhood* and

children are supposed to be like. As the manager at Ahotokurom put it;

“You can’t come here and assess it with the European eye [...] It’s different. It’s not right. It’s not wrong. It’s different”, (Manager, Ahotokurom).

There are different ways of conducting observation; participant and non-participant and overt and covert. I used overt non-participant observation because of the limited time frame. The purpose of my observations was to look at both the material and social structures and supplies at the Children’s Homes. The theory of structuration argues that a focus only on the level of the actors forgets to take into consideration the material context and physical structures that people act within. The social structures are however also important in order to give a broader impression. I used a check list when doing my observations in order to make my data comparable (see Appendix D). Things that were of importance for the observation were the physical surroundings at the homes, the children’s personal place and also the social interaction, such as the child-child and child-staff interaction.

However, time was one of the factors working against me. I had limited time to do the fieldwork and in some cases it took me a long time to get access to the Children’s Homes. My observations were also restricted due to a busy and hectic everyday life at the Children’s Homes. At Osu Children’s Home I was given permission by the manager to do observations at the Boys House. Hence, my observations here are based mainly on the boys’ conditions of living. I was however allowed to interview both boys and girls. In the other two Children’s Homes I was welcomed to do my fieldwork, although they preferred me to restrict the fieldwork to just one or two days. Hence, my observation of the social structures at these Children’s Homes became very limited.

To supplement the observations I took photos at all the Children’s Homes. This was to document the material structures of the Homes, like the bedrooms, the bathrooms, toilets, the compound and all socio-material structures that might exist.

3.4.4 Field notes

All my observations were carefully written down in my field notes every day in the field. I kept this with me at all times during my fieldwork. I used every available moment to jot down notes when I was in the field. I did notes while I was doing the observation, but in some situations I felt the notebook was distracting the people I was observing, so I had to put it away and write down my observations later. I was very uncritical in writing down any observations and when writing in my field notes. I felt the most important thing was to get as much information as possible down on the

paper before I had time to forget. Sounds, smells, noises and all sorts of things that made an impression on me were written down. Everything was of importance in order to get a detailed and vivid description of what I experienced as a researcher.

3.5 Secondary data

To supplement the primary data I used information from various secondary sources. These include national research documents concerning the socio-economic situation in Ghana (poverty, education, health, residential child care settings and the situation of OVC's), such as the Ghana Human Development Reports, Ghana Poverty Reduction Strategy Papers. Reports from the UNDP, UNAIDS, UNICEF and USAID along with various reports and documents from the Ghanaian Government (MMYE, DSW, MOESS and GSS) were also used to shed some light on these issues. National websites have been as a source of information to the specific study areas. This was very valuable because it allowed me to gather information on regional and district level, thus making the study more contextual in regards to differences that might exist between different regions and districts, for instance the outdoor environment in which the homes are located. The secondary sources also include documents obtained at Osu Children's Home. These were monthly records kept for the children concerning their health, education and social interaction with the other children and staff. In addition I gathered material from the official web-pages of all three Children's Homes; background information and their written goals and guidelines. E-mail correspondence between me and the Department of Social Welfare (DSW) in Accra have been used to clarify certain issues and questions in this study.

3.6 Data analysis

Using qualitative methods often means that you in the end are faced with a huge amount of data which at first glance may seem hopelessly overwhelming and unstructured. Coding is a way to make the analysis of the information more structured and comprehensible. This is done through several stages as to avoid that the researcher jump to premature conclusions (Jackson in Limb and Dwyer, 2001). All interviews, with one exception, were recorded making the first task transcribing these word by word, which proved to be a very slow and time consuming process. All data, including observations and field notes, were then divided by Children's Home, key informant interviews, primary informants and the latter was also divided by gender. The next step was to organize the data from the interviews, observations and field notes into various themes, such as food, education, health, shelter and others. The information gathered was checked against the

themes of the interview guides and the check-list for observation. In the search for meaningful data I looked for patterns, structures, commonalities and differences. The aim was to locate differences and similarities between and within the Children's Homes in regards to material and social structures and supplies available.

3.7 Ethics when working with children and sensitive information

Research ethics is “concerned to which extent the researcher is ethically and morally responsible to his/her participants, the research sponsor, the general public and his/her own beliefs” (Kitchin and Tate, 2000:35). *Anonymity, confidentiality* and *informed consent* are important issues here. When it comes to children the ethical and moral aspects are especially important to bear in mind (Scott in Christensen and James, 2000). The issues of ethics are very often thought to be the imperative difference between research with adults and research with children. This is because children are a group that are more vulnerable and in more need of protection than adults. It is thus widely recognised that “gatekeepers” that can restrict the researcher's access to the children, is the proper way to gain access to child participants. Children's marginalized position in the adult society, adult's perceptions and attitudes towards children and the children themselves are reasons why research with children requires special ethical attention (Punch, 2002).

Important issues that should be taken under consideration when working with children are; is it morally appropriate to interview the children? Do they really understand the purpose of the study? Do they understand the questions? Do they fully understand the consequences of their answers? In light of these questions it is very important to get informed consent and to fully explain to each child the purpose of the study (Scott in Christensen and James, 2000). It is also important to bear in mind what *consequences* there might be for the informants by taking part in the research, as the informants should not be harmed by the research in any way (Kitchin and Tate, 2000). It is the responsibility of the researcher to ensure that children do not suffer any harm as a result of participation in a research project (Morrow and Richards, 1996). The justification for doing research for and with children is to allow their voice to be heard in the adult society (Hood et al. 1996). An interview is not a conversation between equal parts. It has been widely recognised that children are potentially more vulnerable than adults when it comes to the uneven power-relation between the child participant and the adult researcher. This has to be taken into consideration when working with children.

In this study the ethical considerations will, with the exception of informed consent and the use of “gatekeepers”, be the same as in research with adults. Special attention concerning the power-relation between the child participant and the adult researcher will be taken into consideration. The interviews were conducted while taking into consideration the age, level of maturity, cognitive abilities and personality of each individual child. As this study was conducted in a cross-cultural setting, it was important for me as a researcher not to impose my Western attitudes concerning moral and ethical issues on to the culture under study. This is potentially a complex and difficult task as I, as a researcher, at the same time have to maintain a level of moral and responsibility. The information I was seeking touches parts of the children's lives in the most intimate ways. These children come from difficult backgrounds and might still live under unfavourable conditions. In this study I got informed consent from the manager at each Children’s Home, who all received a letter in English describing the purpose of the study. Before each interview I sat down with the children and explained to them who I was, the aim of the study and that this was voluntary and that they at any time could refrain from answering questions and/or stop the interview if they felt uncomfortable. As discussed above, I felt that some children felt a sense of obligation to do the interviews because they were picked out by the managers. Others however, seemed to enjoy the opportunity the interviews gave them to talk about themselves and their life. Some children refrained from answering certain questions, but none of them wanted to stop the interview.

In this setting where the children come from such difficult backgrounds and their present living conditions are potentially deprived, it is especially important that I, as a researcher, do not create expectations that can not be followed up. It was also important that I as an adult, Western, white, female student reflected upon my beliefs, ethical standpoints, knowledge and my preconditioned ways of thinking and how this would affect the research process all the way from the “drawing board”, through the fieldwork gathering data, through the analysis and finally the writing of the thesis.

3.8 Validity and reliability

Validity “*concerns the soundness, legitimacy and relevance of a research theory and its investigation or practice*” (Kitchin and Tate, 2000:34). In other words validity is the truthfulness of the data collected or how relevant the data is for the research questions. Since every method of data collection has its shortcomings I chose to apply complementary methods to ensure the validity of the study. Mikkelsen argues that “*biases do not disappear, but the use of triangulation for cross-checking information enhances the validity of research results*” (Mikkelsen, 1995:31).

Several factors influence the validity of the data collected. It is important that the informant understands the subject of the study and for what purpose the collected data will be used. I therefore made it clear at all times during the data collection that I was a student from NTNU and I also carried with me a letter of introduction from NTNU and from the University of Cape Coast explaining the purpose of the study.

Where the interview takes place and the amount of privacy provided ensuring the informant feeling comfortable, is of vital importance to the validity of a study. All the interviews took place one on one, in a private area of the compound or in a separate room where we would not be disturbed. These attempts of privacy were sometimes compromised due to the curious nature of the other children making them peek in the door at times or roam around us at a distance. If the informant was distracted by this and became nervous I brought them back into the interview again by asking more “harmless” everyday questions to make them feel more at ease, leaving the more sensitive questions to be dealt with at a more appropriate time during the interview. I also made sure the questions being asked were not leading and that the language was not difficult to comprehend, both because of the differences between me and my informants as an adult-child issue, and also our cultural differences. The potential problems of validity due to the cultural differences was limited by having a Ghanaian student at NTNU and two staff members at the University of Cape Coast, Ghana go through the interview guides beforehand. To avoid misunderstandings informants were asked to explain issues and statements that were unclear to me.

As a result of the uneven power-relation between adult-child and the way *childhood* and *children* most often are viewed in the adult society, children are often used to having to try to please adults because of fear of the adults’ reactions to what they say. Children may lie to avoid talking about sensitive and painful issues, because of fear, shame, and a desire to please or to create a positive impression (Ennew, 1994; Gersch, 1996; Richman, 1993). I asked follow-up questions to test the consistency and validity in what the children told me. I also followed up topics from the interviews in informal conversations with the children, the staff and/or the volunteers at the Children's Homes. The setting and the theme are sensitive and demanding. Nevertheless, the information gathered is reasonably valid.

Reliability “*is the extent to which a method of data collection yields consistent and reproducible results when used in similar circumstances by different researchers or at different times*” (Hay 2000:195). Kumar (1999) claims that it is not possible to control the factors affecting the reliability

of a study in qualitative research. Such factors can include the respondent's mood, the nature of interaction, wording of questions and the physical setting. It is possible that how the staff members presented the aim of this study and my presence at the Children's Homes for the children, affected their answers and behaviour. This was however, done without my presence and I can only speculate on this issue. There is also the question whether the findings would be somewhat different if the fieldwork was conducted at a different point in time and if my information would differ from the ones obtained by for example a Ghanaian, middle aged man.

My role as a Western, white female student could possibly influence the kind of answers I got and hence, the reliability and validity of the study. Throughout the whole fieldwork it was quite clear that I was an outsider, but the fact that all the children in this study is used to communicate with and be around Western people, such as the volunteers and students working at the Children's Homes, may have toned down the cultural differences that existed. Several times the children would start explaining issues, cultural codes and meanings, before I got the chance to ask them to explain. It was obvious that they took it for granted and was used to that some things Western people, simply did not understand and they had to explain it. Being a foreign female in her 20's interviewing children may be an advantage as I might seem more "harmless" than a Ghanaian middle-aged male, making the children feel more at ease when telling their stories. However, it is not wise to treat children as one single category and so the level of intimacy and trust that develops between the researcher and the informant is very individual and situational. Due to time-restraints I did not get the level of familiarity with the informants that was desired.

3.9 Limitations of the study

Despite all the efforts to make this study both valid and reliable, there were still some limitations I was aware of, but could not totally eliminate. The short time frame was a factor that forced me to change my expectations and also some of my methods during the field work. It took me a long time to locate the various Children's Homes. The location and number of Children's Homes where chosen randomly depending on what Children's Homes my contacts were able to locate. Because of this I had to accept "whatever" and "whoever" available at the time. Also, as already mentioned earlier, my observations were cut short compared to my initial preferences. Initially I wanted to do participant observation, but this proved not to be possible due to the limited time the managers at the Children's Homes allowed for me to do my fieldwork.

There were only time to do one interview with each of the children and the lack of follow-up interviews could have affected the reliability of the study. There was some difference in the amount of time I had to my disposal at the various Children's Homes. At Ahotokrom and Lighthouse I only got two days for fieldwork, the first day was used to gain access and the second day for interviews and observations. At Osu Children's Home I had approximately one week to do interviews and observations. Here, I also got the chance to have informal conversations with staff, volunteers and children, which strengthen the reliability of the information gathered.

Limitations also occurred because the children and some of the staff members were selected by the managers. However, it was not possible to re-examine or “over-rule” this decision. This can cause a bias in that the managers might have chosen children and staff members that where likely to portray a very single-minded, positive and non-nuanced image of the Children's Home, as the managers might have chosen their “favourite” staff members and children. The children chosen may also have been the ones that where fairly well adjusted, positive and extrovert, as opposed to children that where more introvert, negative and aggressive. Alternative views and experiences might have been lost as a result of this.

It can be argued that language presents a limitation in that only children who speak English were interviewed. The non-English speaking children are not represented. The interviews were all done in English, which is not the informants or the researcher’s first language. The children's varying level of the English language complicated some of the interviews. Rephrasing and explanations was necessary at times to ensure the children did not misunderstand the questions.

Language was also a limitation when it came to observation. The staff and the children communicated in a local language (Fanti or Twi) and a lot of the communication were lost for me as a researcher. Here, the use of a local interpreter could have proven valuable and given different results. I had to focus my understanding of the situations on the tone of voice and the body language I could observe. These are things that might be difficult to interpret, especially when working in a different culture, as norms, expectations, belief, value systems vary greatly from ones own. People may use different cultural codes and body language the researcher might miss out on or is not familiar with. After discussions with a Ghanaian student familiar with both the Ghanaian and Norwegian culture, I decided to drop the observations that involved communication in Twi or Fanti, because the chances of misinterpretations of body language and cultural codes where too great.

When doing fieldwork in a different culture one has to be aware of the ethnocentrism we bring with us. Mikkelsen (1995) calls this “*our cultural ballast*” or “*images of others*”. When we go out into the world we take with us all we have learned and “know” through our own culture. Our own culture is usually the basis from where we see and interpret things we encounter in the field. It is therefore vital to be aware of this and take these biases into consideration. Value systems, beliefs and practices that are different from what we are used to can be difficult to interpret and understand properly.

Problems researchers often encounter is the expectations the status as researcher can give. Some may believe that the researcher have more power than what really is the case. People may expect that you can make a big difference in their lives. They may believe that you have the power to “make things happen”. When you as a master-student clearly do not have this kind of power, it can feel a bit overwhelming to be faced with people’s expectations and hopes.

CHAPTER 4:

BACKGROUND TO THE STUDY AREA

This chapter gives a brief introduction to the socio-economic situation in Ghana, with special emphasis on poverty, health and education and how this affects children's livelihoods. It gives an overview of the situation of orphans and vulnerable children in Ghana, the official political aims and regulations for Children's Homes and the official political position on caring for OVC's. Then follows an introduction to the specific regions and districts where the study was conducted:

- 1) The Greater Accra Region and Accra Metropolitan Area (AMA)
- 2) The Central Region and Cape Coast Municipality

The Children's Homes are presented under the region and district they belong to.

4.1 Background

Ghana is a highly indebted low-income country with a population of 22.9 million and a growth rate of 1.9% per annum, 2007 estimate. The population is a young one with approximately 40% being under 15 years of age and the median age of the population being 20.2 years (PRB, 2008; CIA 2008). Ghana is well endowed with natural resources such as cocoa, gold, diamonds, manganese and bauxite, and is in a far stronger economically position than other West-African countries. Nonetheless, Ghana is dependant on international financial and technical assistance. Agriculture is the main sector in the domestic economy and employs approximately 55% of the work force and accounts for 35% of the national GDP (CIA, 2008).

4.1.1 Poverty

Ghana is considered to be one of the most stable countries in West Africa, but poverty still remains one of its biggest problems. According to UNDP there has been a reduction in the overall poverty from 52% in 1993 to 40% in 1999. During the same period the number of people living in extreme poverty was reduced from 36.4% to 27%. Despite this positive trend there are still problems in the sense that poverty in Ghana is gender and occupationally biased (UNDP, 2005). In an attempt to support growth and poverty reduction Ghana implemented the Ghana Poverty Reduction Strategy (GPRS) (UNDP, 2005; Government of Ghana, 2003).

Increased poverty levels, especially in the northern regions (Ghana Statistical Service 2000; Government of Ghana, 2003), and conflict situations has led to an increase in child migrants into

urban areas, especially to Accra Metropolitan Area (AMA). This has in turn led to a higher number of street children and working children in the urban areas. Ghana's Ministry of Employment and Social Welfare (MESW) reported in 2000 that of Ghana's 800.000 working children, 18.000 were located in Accra. Most of these children live under very poor conditions and are vulnerable to health problems, especially STD's like HIV/AIDS (Awumbila et al. in Awusubo-Asare, 2005).

4.1.2 Health

The importance of people's health to the quality of life is well recognized within development circles. While there has been an increase in the health status of Ghanaians since 1990, there are still marked geographical disparities. The situation is especially difficult for people living outside the major cities of Accra, Kumasi and Takoradi. Major challenges that Ghana faces when it comes to enhancing peoples health is easier access to health facilities, increasing the number of doctors and health professionals, replacing the cash-and-carry system and access to safe water and sanitation (UNDP, 2004).

A positive development in child mortality and childhood malnutrition in the 1990's is now turning into a negative trend. A 2003 assessment of the 2005 Ghana Poverty Reduction Strategy (GPRS) goals showed that from 1998 to 2003 infant mortality had increased from 57 to 64 per 1000 live births, child mortality increased from 108 to 111 per 1000 live births and malnutrition in children under five years increased by nearly 10%. Malnutrition makes children more vulnerable to ill health and death. Taken into account that these indicators are sensitive to the living conditions and the general health status of the population, the picture drawn is a very grim one for the general outlook for poverty reduction (UNDP, 2004).

4.1.3 Education

Basic education is important because it provides the necessary foundation for higher education and for the development of working-skills. Basic education can affect the poverty and thus the level of livelihood of a household in many ways. Children with educated mothers tend to have better levels of nutrition (Glewwe, 1999 in Oduro, 2000) and infant mortality rates go down (Strauss and Duncan, 1996 in Oduro 2000). This is due to the fact that educated women have the knowledge to manage their household resources more efficiently. Tansel (1997) showed that there also exist a positive correlation between a mother's education and her children's schooling (Oduro, 2000).

The Ghana Vision 2020 document states that the formation of human capital is of critical importance for the development of the country (ibid.), but the Ghanaian education system is failing on several areas. The national gross enrolment ratio at the primary level was 81.1% in 2003 and the numbers steadily drop when looking at education at higher levels. 1/3 of those entering primary school drop out before they complete the sixth grade. Only ½ of those entering Junior Secondary School (JSS) complete JSS3 and only 1/3 starting Senior Secondary School (SSS) complete their education. Problems the Ghanaian education system are struggling with are lack of competent teachers, over-aged enrolment (when children enter class one as old as 10 or even at 15 years of age), poor school facilities, poor quality of the education given, low motivation and interest from the pupils and/or the parents/guardians and poverty.

Poverty in a household keeps children away from school when children are needed to help generate immediate income in their household. A study carried out by UNICEF and the Ministry of Education in 1992/1993 showed that the most common reason for parents/guardians not sending children to school was lack of money. HIV/AIDS also keep children away from school as the number of child-headed households grows and children have to nurse sick parents and take on the financial burden of the household. These children are in grave danger of ending up as street children as a way to survive due to the lack of parental guidance, care and access to material resources (UNDP, 2004).

On the positive side, Ghana has taken several measures to improve its educational system in recent years. There has been an increase in the number of primary schools and Junior Secondary Schools from 1998 to 2003. The Ministry of Education, Youth and Sports (MoEYS) has also implemented a programme to enhance the quality of the education; free Compulsory Universal Basic Education (fCUBE) by 2005 and universal primary school enrolment by 2015, a Millennium Development Goal (MDG) (UNDP, 2004). The achievement of these goals is however a slow process. Even though public basic education is now tuition free due to fCUBE, there are still non-tuition expenses that parents/guardians have to cover, like school uniforms, registration, travels to school and food. Such expenses can prove insurmountable for families already struggling to make ends meet (Oduro, 2000).

4.2 Orphans and Vulnerable Children in Ghana

UNICEF estimates that in 2003 the total number of orphans (0 - 18 years old) in Ghana was 1 million. This number includes maternal, paternal and double orphans. This is 10% of all children in Ghana. Orphans due to HIV/AIDS constitute 17% of all orphans in Ghana. It was also estimated that in 2003 alone there were 110,000 children orphaned in Ghana (all reasons included) (UNICEF, 2004).

Many of these children will be or already have been taken in by their extended families, but many are left with no one to care for them. The extended family system has for a long time functioned as a safety net for orphaned and vulnerable children. This is now changing. People are becoming more focused on the nuclear family and less on the extended family. Migration to urban areas removes people from their families and the emotional ties become weaker. People do not feel the same responsibility when it comes to relatives in the way they used to (Everett, 1993; MMYE and DSW, 2008). People's changing attitudes towards the family is not the only cause for the growing number of children that fall outside the extended family system. Almost 90% of all orphans in Sub-Saharan African countries are taken in by their extended families, but the fast growing number of orphans puts this system under tremendous pressure. They are simply becoming too many to handle. Households that take in orphans will most likely become poorer because of the increased dependency ratio (UNICEF, 2003).

Other reasons for not taking in orphans and vulnerable children are the discrimination and stigmatization that tends to follow these children. This is especially true when it comes to HIV/AIDS orphans. HIV/AIDS is associated with sexuality and promiscuity and people do not want to be associated with it. Ahiadeke (2003) claims that this stigma against HIV/AIDS is not so much focused at the persons that actually has HIV/AIDS, but more so to the patients families. In the case of HIV/AIDS orphans this means that the stigma will follow the children, even if they do not have the disease themselves. For this reason many children are rejected by their extended families and are left on their own. Thrown into a situation where they are left without adult caretakers, the chances of survival are dramatically lower (Ahiadeke, 2003). Children that are left on their own are most likely to end up as street children as many of them migrate to the urban areas in hope of finding a way to survive. Street children in the urban areas are faced with grave health risks such as malnutrition, HIV/AIDS, drug and alcohol abuse, violence and sexual abuse. For many children, especially girls, prostitution sometimes presents itself as the easiest and even the only way to generate an income (Ahiadeke, 2003).

4.3 Children's Homes in Ghana

European Missionaries were the first to establish Children's Homes in Ghana as a way of caring for children that were abandoned, orphaned and where cultural constraints did not allow certain categories of children to be cared for within the traditional family system. In 1949 Osu Children's Home was established as the first officially recognized Children's Home in Ghana. After the 1950's the number of children without family care has grown dramatically due to rural to urban migration, the HIV/AIDS epidemic and the disintegration of the traditional family ties. As a result of the extended family systems failure to absorb these children, there has been a mushrooming of Children's Homes all over the country (MMYE and DSW, 2008; OrphanAid Africa, webpage 2008).

In 2007 the Department of Social Welfare (DSW) estimated that there were 148 Children's Homes in Ghana. Only five of these are officially approved and registered by the DSW. These are run by NGO's, private persons and private institutions. Because these Children's Homes are practising illegally and without governmental supervision, the DSW has expressed its concern about the way they are managed (MMYE and DSW, 2008).

4.3.1 The Care Reform Initiative 2006-2011 (CRI)

“The proliferation of orphanages and children's homes is not a good development for this country. It is gradually breaking down the social fabric by disintegrating the time tested and cherished extended family system. Some of the children in these orphanages are not orphans at all. They have been assembled by greedy and selfish people who are using these children to solicit alms in kind of cash for their personal use. This shameful exploitation of children must stop somewhere and some time; and it is now.”

Part of speech made by Social Welfare Director Mrs. Mary Amadou at the DSW/OrphanAid Africa National Training Seminar for Social Workers. July 2006, Cocoa College, Bunsu, Ghana (in MMYE and DSW, 2008:8)

As a response to the growing number of children without family care and the mushrooming of unregistered Children's Homes, the DSW, UNICEF and OrphanAid Africa (OA) have joined forces in a five-year programme called the Care Reform Initiative 2006-2011 (CRI). The CRI aims to update and reinforce the regulations and standards for the operation of residential care settings and to ensure that Children's Homes comply with the requirements of The Children's Act 560 (1998), the Convention on the Rights of the Child (1990) and the UN Guidelines for the Protection and Alternative Care of Children without Parental Care (2007). A major data collection conducted in

2007 by the DSW and OrphanAid Africa at all the 148 Children's Homes in Ghana, showed that most of the Children's Homes did *not* comply with the minimum standards for operation as determined by the DSW. Problems connected to the operation of the Children's Homes were poor management as they often operate without annual budgets and without planning for expenses such as education, food and medical care. Hence, leaving the children in a very vulnerable position when it comes to the access and fulfilment of these basic needs. The lack of financial planning also leaves the children at risk of being arbitrarily expelled in times of financial distress. Other problems were poor caretaker to child ratio, lack of qualified staff, lack of adequate bedding, food, medical care, academic and training facilities for the children (MMYE and DSW, 2008; OrphanAid Africa, webpage 2008; DSW webpage 2008).

The data collection also revealed that the main reason for children ending up in Children's Homes is poverty. Almost 80% of the children are not orphans, but have been placed in residential care by their poor families. The census also revealed that there is a tendency to house children without looking for alternative care within the extended families and local community. The majority of these children do in fact have families or extended families that are willing to care for them if they are empowered to do so. In line with these findings the CRI represents a new family focused approach to the care of OVC's, where the goal is to get children *out* of the Children's Homes and back in family based care, either within their own biological families or through adoption or fostering. Institutionalisation of children should only be considered as an *absolute* last resort when all other options have been tried. Prevention of the disintegration of families is also an important part of the CRI. Families are to be empowered to care for their own children through programmes such as the Livelihood Empowerment Against Poverty (LEAP), a cash grant scheme operated by the DSW for caregivers of OVC's and the aged (MMYE and DSW, 2008; OrphanAid Africa, webpage 2008).

The official view of the past (and present) trend of continued institutionalisation of children is that it is inappropriate and undesirable. It is also an economical issue because the per capita cost of raising a child in residential care is often 5 to 10 times more than in foster care. As mentioned above, the aim of the CRI is to get the children *out* of the Children's Homes and close down as many of them as possible. However, the DSW wants to find alternative roles for the existing Children's Homes. One suggestion is to let them take on the role as community-based resource centres and use their staff and expertise to follow up children placed in the local community and also train and follow up foster-parents and guardians (MMYE and DSW, 2008).

4.4 The study areas

Ghana is divided into 10 regions and 138 districts. The two regions where my fieldwork was conducted, the Greater Accra Region and the Central Region, both lie in the south along the coast.

Figure 4.1 Ghana regions



Source: University of Texas Libraries, 26.09.08

4.4.1 The Greater Accra Region

The Greater Accra Region is the smallest of the ten regions in terms of size, but has been the most densely populated since 1960. In 2000 the population was set to 2.9 million. From 1984 to 2000 the number of persons per square kilometre has risen from 441 to 895.5. This dramatic rise in population density is partly due to migration into the region (Ghana Districts, webpage 2008).

The dependency ratio has dropped from 79.9 in 1984 to 58.7 in 2000, meaning that there are now approximately 20 fewer dependants for every 100 working persons. This is an effect of the falling fertility rates which has reduced the proportions of non-working persons under 15 years. Greater Accra Region has an unemployment rate at 13.4%. This is higher than the national average of 10.4%. In this region 42% of the economically active population is in sales and service occupations. The private informal sector is dominant in the regions economy and employs 60% of the economically active population (ibid).

4.4.2 Accra Metropolitan Area

Accra Metropolitan Area (AMA) is one of ten districts in the Greater Accra Region. Most of AMA's 1.69 million people (2000 National Population Census) live in the shanty towns surrounding the city. The population is youthful with almost 45% of the population being under 19 years. The population is growing fast with an annual growth rate of 3.3%. AMA's strong position as an administrative, educational, industrial and commercial centre attracts people from all over the country. Migration is the major reason for the rapid population growth and now stands for 35% of the population increase (Ghana Districts, webpage 2008). AMA is a major centre for manufacturing, marketing, finance, insurance, transportation and tourism. The economy is urban and the service sector employs the majority of the labour force (65%). It is the second most industrialized area in Ghana, contributing to over 10% of the GDP. The unemployment rate in AMA is 12.2%, merely one percentage lower than the regional average (Ghana Districts, webpage 2008).

As mentioned earlier there are great geographical disparities when it comes to poverty in Ghana. Poverty is mainly a rural phenomenon and the differences are very evident when looking at the statistics. According to the Ghana Poverty Reduction Strategy 2006-2009 the overall poverty incidence in AMA in 2005 was 8, the lowest in the country. Even though the poverty incidence vary greatly throughout Ghana, this is far lower than most other districts, and dramatically lower than Bongo and Bawku East in the Upper East Region, topping the grim statistics with an overall poverty incidence of 99 (Government of Ghana, 2005).

About 10% of AMA's population live in high-income areas and 32% in middle-income areas. The high-income areas are well planned with well developed infrastructure and spacious and landscaped plots. The middle-income areas are also planned, but in need of infrastructural services. The low-income areas houses 58% of AMA's population. Most of these areas are built with little room for expansion. This is especially true for the inner city areas. Osu is a typical low-income area and is characterised by haphazard housing development, poor housing infrastructure and high population concentrations. Buildings are for the most part made of materials such as mud, untreated timber and zinc roofing sheets for walling. Like in the rest of AMA, the sanitation in the Osu-area is very inadequate, with clogged drains and uncollected waste. There is also a very high pressure on facilities in the low-income areas. Most of the activities in the informal sector takes place in the low-income areas and migrants looking for work are drawn to these areas (Ghana Districts, webpage 2008).

Figure 4.2 Osu District, Accra Metropolitan Area



Source: africaguide.com

Major health problems in AMA are communicable diseases due to poor environmental sanitation, ignorance and poverty. Malaria is the number one disease, followed by STD's, diarrhoea, chicken pox and enteric fever. During the rainy season the population also struggles with cholera. The major cause of infant death in AMA is low birth weight, infections, malnutrition and anaemia (Ghana Districts, webpage 2008). The net enrolment ratio in AMA was in 2006/2007, 68.9% for primary schools and 48.9% for Junior Secondary Schools (JSS). These numbers are lower than the national average of 76.8% for primary schools and 50.7% for JSS. The enrolment of boys is higher than girls

at both levels. High drop-out rates for girls at primary and secondary levels gives an uneven gender distribution at higher school levels. Regardless of gender the drop-out rates are very high at Senior Secondary Schools (SSS) as almost 70% of JSS graduates do not enter SSS (Ghana Districts, webpage 2008).

4.4.3 Osu Children's Home

Osu Children's Home is the largest Children's Home in Ghana. It was started in 1949 by an NGO called the "Child Care Society" and as stated in their homepage it is "*a community for orphaned, abandoned and needy children from ages zero to eighteen*". In 1960 the Department of Social Welfare took over the home and moved it from the suburb Kaneshie to Osu, a central part of the Accra Metropolitan District.

On the Home's website they state their aim is to "*provide a future of hope through:*

- quality residential care, education and counselling*
- to children who for some reason has no access to a normal family life*
- to protect and preserve the rights of children in difficult situations*
- to afford needy children the opportunity to realize their potentials"*

(Osu Children's Home webpage, 16.10.2007)

Osu Children's Home is the only home in this study that is run by the Ghanaian Government and which is approved by the DSW. It is funded by the government, but this funding is not nearly enough to meet the needs of the children living there. According to the manager the governmental funding just covers the salaries of the staff and not much more. Osu Children's Home is a part of the UN's World Food Programme (WFP), but they are totally dependent on donations and gifts from private persons, organisations, groups and churches. These donations comes both from local sources and from outside Ghana. A huge part of the manager's time is spent on meetings with what hopefully will become or continue to be financial contributors. The staff at Osu can be divided in three groups; volunteers, the office workers and the "mothers" working directly with the children on an everyday basis. The majority of the latter have little or no formal education. It was difficult to determine exactly how many "mothers" and volunteers that actually work at Osu as no one seemed to know the answer. The only number I was told was ten "mothers" working shifts at the boys house and I counted four volunteers at the whole home. The volunteers decide themselves how much and how long they want to work at Osu. Sometimes it is only a few hours a week for two weeks, but some also stay for several months.

The home was originally intended to house 65 children, but due to the growing number of children in need Osu now house between 140-150 children at any given time. The home started by taking in only maternal orphans, but now they house children that are orphaned, abandoned, abused, that have run away from home, that have mothers in prison or in hospital and children with HIV. The children are referred to Osu by hospitals, the police, social workers and the courts. When a child comes in without any known family, Osu, in collaboration with the police and the Department of Social Welfare, tries to locate any family members that might exist. In most cases this is a very difficult task. Reasons for this can be that the child is too young to tell where he/she comes from, the child can be unwilling to tell where the family is because he/she does not want to go back, the family does not want to be found or there simply is no family to look for. If the efforts to locate any family has been unsuccessful after three months, the child is recommended for adoption. However, because of the cultural stigma against adoption, this rarely happens. Children that are above the age of 18 and are still in school or do not have anywhere to go, continues to be cared for by the Home until they have a job and can take care of themselves.

There are four different home units; a nursery for 0 – 3 years old, one for children between 3 – 6 years old and two separate houses for girls and boys over 6 years old. Each unit has their own head mother and a staff. Because of the growing number of children there is an immediate need of more appropriate housing. When this study was conducted there were plans to set up a fund for a three storey building on the premises. The plan was to get a new boys dormitory, a library and a sick bay.

All the children that are of school age are attending schools in the neighbourhood, both private and public. Although in recent years there have been problems with older children arriving at Osu with little or no schooling. There are plans to start an educational programme at the home to prepare these children to enter the educational system. The home does not provide higher education beyond Senior Secondary School. The reason for this is a combination of lack of money and the fact that the children are supposed to move out when they turn 18.

4.4.4 The Central Region

The Central Region with its population of 1.59 million is the second most densely populated region in Ghana. The region is rural of nature, but the regions urban centres Cape Coast, Awutu-Efutu-Senya and Agona are constantly growing, holding approximately 37.5% of the regions population (2000 estimation). The major economic activities are agriculture and related activities (fishing, animal husbandry, forestry and hunting) and employs between one-third and two-thirds of the

labour force in all the districts in the region, with the exception of Cape Coast (Ghana Districts, webpage 2008). Even though the region is an important educational centre, almost 40% of the population is illiterate, the exception being Cape Coast Municipality. For those living outside the Cape Coast Municipality access to educational facilities is much more difficult. Another explanation for low school participation levels in these parts of the region is poverty. Poverty levels are higher in these districts and parents have to send their children out to earn a living instead of sending them to school. As many as 5% of the children under 15 years old are in some districts engaged in economical activities, and child labour is recognized as a problem in the region (Ghana Districts, webpage 2008; MOESS, 2008).

4.4.5 Cape Coast Municipality

Within Cape Coast Municipality lies the two remaining Children's Homes in this study; Ahotokurom and Lighthouse Children's Home. Ahotokurom is located outside the city of Cape Coast in a rural area, the latter is located just outside the city centre in the suburb Abouro. The 2000 Population and Housing Census estimated the population in Cape Coast Municipality to roughly 82.000, thus making it the most populous settlement in the Central Region. Cape Coast town is the capital of the Central region and the main centre for economic activities. Wholesale, retail trade and manufacturing constitute a large part of these activities. Much of the economic activity in Cape Coast takes place in the informal sector, which is dominated by women. Because of the districts role as an educational centre the educational sector is quite large and employs about 10% of the labour force. Fishing and agriculture also plays a big role in the economy, employing roughly 15%. The unemployment rate in Cape Coast is 11.3%, and thus exceeds the region as a whole (8%) and the national average (10.3%). In 2005 the overall poverty incidence in Cape Coast where 36, with the variations of 27 in the urban areas and 54 in the rural areas. With exception of the rural areas, Cape Coast has the lowest poverty incidence in the Central Region (Ghana Districts, webpage 2008).

When travelling through Cape Coast Municipality it is quite easy to see that the standard and quality of housing varies immensely between different residential areas. The high standard residential areas are located around the Ridges and Cape Coast University. Most of these areas are state owned and developed by the State Housing Company (SHC). These areas enjoys large plot sizes, good landscape planning and are well serviced with good roads, power supply, water and telecommunications. In stark contrast to this are the rural and older residential areas, characterized by poor quality of housing, unsatisfactory service of water, power and telecommunications. Poor sanitation and waste disposal are major problems people in these areas face every day. As an

immediate solution to this problem some communities have created their own unapproved dumping sites or households simply dump their waste in the bushes and on the beach. Plot sizes are small and overcrowding is a problem. The materials used to build houses vary, the most common materials used being concrete and mud with roofs of fermented steel plates. The present state of sanitation is a major problem in the area, with the lack of proper and organized disposal of both solid and liquid waste (Ghana Districts, webpage 2008).

Figure 4.3 Cape Coast



Figure 4.4 Fishermen near Cape Coast Castle



Source: photos by Marthe Kristiansen

Like in Accra Metropolitan Area (AMA), major health problems in Cape Coast are communicable diseases due to poor environmental sanitation, ignorance and poverty. Malaria is the number one killer disease, followed by anaemia, pneumonia, tuberculosis and HIV/AIDS. The local authorities has expressed concern for the spread of diseases such as HIV/AIDS, malaria, cholera, typhoid and tuberculosis because of the socio-economic impact they have on the community and especially on the younger part of the population. The child survival rate for Cape Coast is 83.4%, something that could be explained by good access to health services, as the municipality enjoys a high number of health facilities and health personnel (Ghana Districts, webpage 2008).

School enrolment rates in Cape Coast are quite high, close to 100% at primary level and 81.5% at JSS. The districts role as an educational center and the fact that the educational costs are among the lowest in the country can help explain the high numbers of school attendance. As on the national level and in AMA, the number of boys compared to girls are higher at all educational levels (Oduro, 2000; MOESS, 2008).

4.4.6 Ahotokurom – Place of Serenity

Ahotokurom lies west of the city of Cape Coast, located in a peri-urban area. In the 1940's Ankaful Camp was established near Cape Coast. Ankaful Camp was a so called *Leprosarium*, a place where leprosy sufferers came to receive treatment for the disease. The stigma associated with leprosy made the leprosy sufferers to be shunned from the rest of the society. When Ankaful Camp opened, the word spread and leprosy sufferers who had nowhere else to go settled down on nearby government land. This area became known as the Camp. American Franciscans established a mission in Cape Coast in the 70's and in an effort to help the people in the Camp, they opened the Padre Pio Rehabilitation Centre in 1983, with the help from the Daughters of Mary & Joseph (DMJ) Sisters. The place became more commonly known as Ahotokurom, "*Place of Serenity*". The centre worked with the leprosy sufferers and their families. Rehabilitation into the society was their primary goal and over the next 20 years many families were re-united and moved back to their home villages. For some however, returning to their former homes was not an option. The Camp had become their home. A group that calls themselves "Friends of Ahotokurom", based in the UK, helped raise funds to rebuild the Camp. In 2000 the construction was completed and the Camp was renamed Enyindakurom, meaning "*the village we did not expect*".

Ahotokurom now consists of:

- St. Clare residential home (nursing care for elderly people)
- A child care centre (residential facility for 26 children. Many of whom are disabled)
- St. Elizabeth's Nursery and Infant School
- Medical centre
- Workshop (sheltered employment for many living in Enyindakurom)

I have been looking at the child care centre at Ahotokurom. It started as a place for children affected by leprosy, either directly (suffering from leprosy themselves) or indirectly. The work with the child care centre started in 1981, although it was not until 1983 they started taking in children. They started with 31 boys that had been turned out of the hospital because the WHO decided that leprosy sufferers should be treated in their home towns. This meant that a lot of children were abandoned and had no infrastructure to support them. In the beginning the DMJ Sisters were working out of hostels and in 1984 the child care centre had been built and grown to what it is today.

The child care centre at Ahotokurom has no written aims as such, but they put a primary emphasis on the biological families of the children. As the majority of the children here are from the local community, Ahotokurom sees it as very important to maintain and nurture the bonds between the children and their families and the local community. Their web page also states that the home is responsible for that all the children are fed, clothed and receive an education (Ahotokurom, webpage, 2008). The staff at Ahotokurom consists of two sisters of DMJ, one full time care staff, three assistant house-parents, two cooks and a laundry lady. The home is collaborating with four universities in Europe, the US and in Canada and they always have one or two social science students working at the home. At times they also have volunteers from Europe, the US and Canada. The students and volunteers stay for at least 3 months and usually no longer than 9 months.

Ahotokurom is a privately financed Children's Home. They are totally reliant on donations coming from abroad. They have Dutch, American, Irish and English sponsorships. Every year the manager travels to these countries in order to meet with their benefactors and to raise more money through churches and youth groups. They have also set up a link on their website where people can donate money. Because many of the children at Ahotokurom are disabled or sick, the amount of money needed every year is quite high due to high and frequent hospital bills.

The children that come to Ahotokurom are often abandoned or orphaned. Others are disabled and cannot be cared for by their families. The children are sometimes brought to Ahotokurom by the police or villagers in the area. On average they have to turn away 13-14 children a month. In addition of taking in children in need, Ahotokurom supports children that are disabled or disadvantaged in the local community through food aid and school fees. The aim of these projects is for the children to be able to continue to live with their families. There also exists an outreach program to teach families parenting skills. All the children of school-age are enrolled in local schools, both public and private. There are also a few older children attending Cape Coast University with the support of the home.

4.4.7 Lighthouse Children's Home

Lighthouse Children's Home is located in the suburb Abouro, just outside the city of Cape Coast. The home is non-governmental and is managed and supported by Lighthouse Ministry International, a Canadian based non-profit, Christian organization. The home was opened in 2002, but the idea of starting a Children's Home in Cape Coast came a few years earlier, when the current manager and his wife worked as volunteers at another Children's Home in the Cape Coast

municipality. The couple decided to leave Canada and move to Cape Coast where they started and now run Lighthouse Children's Home.

Lighthouse Children's Home's statement is:

- *To partner with native people by establishing a residence for orphans and needy children.*
- *To provide the children with the essentials of life that they need to become a positive influence to their communities.*
- *To endeavour by the grace of God to minister to the spiritual, physical, emotional, and educational needs of the children.*
- *To surround this ministry with enterprises that would both subsidize the expenses and provide valuable hands-on education.*

(Lighthouse webpage, 20.10.2007)

Lighthouse Children's Home does not receive any financial support from the Ghanaian government and are totally reliant on private sponsors. Most of the donations comes from the managers' home community in Canada. They receive some support from groups in the Netherlands and the US and some donations also come from the local community in Cape Coast. The home started out with 3 children and now have 28, 6 girls and 22 boys. The manager and his wife also adopted a baby girl that was brought to the home. The manager at Lighthouse claims that the home is approved and registered by the DSW, but this was denied by the DSW main office in Accra. Nonetheless, Lighthouse collaborates with the local DSW office in Cape Coast when a child is brought to the home.

The home is located in two rented, separate houses in Abouro. The two houses were originally private family houses that now have been converted into Lighthouse Children's Home. Both houses are enclosed by large fences which separate them from the street and the main house also has a watch post. The 28 children are divided between the two houses, 19 children in the main house and 9 in the second house. Each house has two house-parents (a man and his wife) and their biological children living together with the children taken in by the home. The staff at the home consists of the two pairs of house-parents (this includes the manager and his wife), two cooks, a watchman and volunteers. The volunteers are recruited through Lighthouse Ministry International. Most of the volunteers do one year turns and the home aims to have four volunteers at all times in addition to the regular staff members. The home also have two teachers that come in and do extra classes in the

evenings and a football coach.

Most of the children that are of school age attend private schools. This is due to the manager belief that the quality of the private schools is much better than the public schools. A few children attend public schools because the home did not want to pull them out of the schools that they attended previous of coming to the home. In addition to this the oldest child (19 years old) is attending Cape Coast University. The home also run a youth drop-in centre down town called the JAM (Jesus and Me) House. It is run by the staff at the home and volunteers from New Generation, a local youth group. The JAM House is open five days a week and is a place where children from Lighthouse and the local youth can come and play games, attend devotion, join the JAM Bible Club or just hang out with friends (Lighthouse, webpage 2007).

CHAPTER 5:

COLLECTIVE RESOURCES

This chapter is concerned with the material and social structures and supplies of the Children's Homes that can be considered collective resources. It analyses how these collective resources affects aspects of the children's QoL. The chapter also aims to compare and explain similarities and dissimilarities that might exist between the three Children's Homes; Osu Children's Home, Ahotokurom and Lighthouse. The chapter begins with material resources, such as food, shelter and clothing, and goes on to explore non-material resources; health, education, leisure, safety and love and belonging. The fact that the children in this study live in residential child care facilities means that collective resources play a major part in their everyday lives. In residential child care facilities the children are often subjected to administrative procedures and routines, as a way for the homes to meet the needs for order, efficiency and conformity (Save the children, 2003).

The Children's Homes are not “total institutions”, such as prisons or mental institutions, where people's lives are subject to “total control” (Aubert, 1964). Nonetheless they represent sets of structures that both constrains and enables the children's actions. The children are in many circumstances treated as a group, rather than individuals, and in most circumstances they have access to the same resources, such as the same food, clothing, shelter, health-care and education. These resources are all part of a “total package” as provided by the home and are available to all the children. Hence, most resources they have access to are considered collective resources.

5.1 Material resources

5.1.1 Food

Food is the most basic need for human survival and is an important aspect of human well-being and QoL. Sufficient quantity and quality of food are of fundamental importance if children are to reach their full genetic development. If this need is not met it will negatively impact all other aspects of the children's lives. Malnutrition and lack of access to safe and stable water sources are often followed by frequent infections and/or diseases. Malnutrition is one of the major causes for health problems in Children's Homes in Ghana (OrphanAid Africa, webpage 2008). At the Children's Homes food is considered a collective resource because the food is purchased and prepared for them as a group, not as different individuals with different preferences and needs.

Osu Children's Home

Osu Children's Home was the only home that had a health-worker (a nurse) in their staff. I was also able to spend more time doing observations at Osu. This gave me the opportunity to observe the children at meal times, something that was not possible at the other Children's Homes. I therefore have more detailed information about both the quality and the quantity of the food at Osu. When this fieldwork was conducted the nurse had been running the health-station at Osu for seven months. According to the nurse, all the children received sufficient quantity of food, but the quality of the food was often poor;

"They don't eat so well. There are mainly fruits and vegetables that are lacking. There are too many carbohydrates and not enough of the rest" (Nurse, Osu Children's Home).

In her professional opinion, the staff that were responsible for the buying and preparation of the food did not have enough knowledge about proper nutrition to be able to present the children with a varied and healthy diet. The meals mainly consisted of meat and rice and very little fruit and vegetables. The diet contained too many carbohydrates and too little vitamins, protein and trace minerals (NHI, 2008). This greatly affects the children's health, which will be discussed in more detail under *Health and healthcare*. All the food is paid for by donations and is bought at the local market by the staff. Osu Children's Home also receives food from the UN's World Food Programme and they sometimes receive food from private donors.

The children do not experience food insecurity in the sense that they wake up every morning not knowing where their next meal will come from and the children mentioned the fact they get food every day as one of the positive things about living at Osu. Several children said that food insecurity was one of their biggest everyday problems before they came to live at Osu. However, interviews with the children and observations revealed that the quantity and the access to appropriate food were not always guaranteed. If a child was late or did not show up at meal-time the staff might give his/her portion of the food to another child. The absent child then ran the risk of not eating at all at that meal. The children expressed concern because they did not trust the staff to make sure that all the children were fed at mealtimes;

"They (the staff) don't save food for you. They give the food to another person" (Boy 17, Osu Children's Home).

The children's concern about food security was confirmed by observations, when at meal-times a boy (aged 8) was a few minutes late and all the food was already gone. The staff then had to go around and take food back from the other children's plates for him to eat. Another boy (age 11)

walked around after he had finished his own food, asking the children that were still eating to give him some of their food. When everyone told him no, he became quite angry. After finishing the meal some of the children crawled around on the floor looking for food that had fallen down to eat. This is a strong indication that the quantity of the food is not always sufficient.

Ahotokurom

I did not get the opportunity to observe meal-times at Ahotokurom, but the interviews revealed that the meals mainly consisted of traditional Ghanaian food bought at the local markets and prepared by the home's two Ghanaian cooks. I did not have access to a health-worker at Ahotokurom, so information gained about the quality of the food are based on interviews and observations. The children seemed to be energetic and in good health. That is, as good health as can be expected, since most children living at Ahotokurom suffers from serious diseases or handicaps. Observations showed that the children had access to fruits between the regular meals. None of the children were concerned about meal-times or worried about not receiving enough food. This suggests that the children receive a varied diet of good quality and sufficient quantity.

Lighthouse Children's Home

I was not able spend enough time at Lighthouse to observe any meals. The food is bought at the local market and the home occasionally receives shipments of canned goods from their sponsors in Canada. The food is prepared by the manager's wife and two Ghanaian cooks. The food is mostly traditional Ghanaian food, but it is also mixed with Canadian cooking and sometimes they also use Canadian foodstuffs.

The children seemed to be healthy, energetic and in good shape. None of them seemed to be underweight or sick and none of the children were worried about the access to proper food. Food insecurity was however pointed out as a big problem in their life before arriving at the home.

"I don't have to beg people to give me food any more. That is the best part. I didn't like begging" (Boy 15, Lighthouse Children's Home).

"You don't have to worry how you will get money for food" (Boy 17, Lighthouse Children's Home).

This suggests that the food the children are given are of good quality and that the quantity is sufficient. However, the home is planning to start a poultry to be able to serve more meat at the meals. Does this mean that the meals do not have the ideal composition when it comes to the amount of meat versus vegetables? The wish to have more meat could just be a subjective point of

view. It does not necessarily mean that the meals are of poor quality. The home also wants to grow a vegetable garden. The desire to start a poultry and a vegetable garden could also be a financial issue, as it is likely that this would be cheaper than having to buy everything at the market. Due to shortage of time, I was not able to clarify this issue.

Comparison

Osu Children's Home stands out from the other two Children's Homes in a negative way when it comes to both the quality and quantity of the food. Osu is the only home where the quality and the quantity of the food is so poor that it clearly affects the children's health negatively and hence aspects of their QoL. The children at Osu were also the only ones expressing concern about the access to food. The fact that the children worry about not receiving food or enough food can lead to stress and concerns in the children's everyday lives, which again is detrimental to aspects of their QoL.

At Ahotokurom and Lighthouse the children did not express any concern about the access to food. This could be a consequence of the children trying to portray a positive image of the homes, but my observations does not support such a notion as the children at Ahotokurom and Lighthouse were in general more open during the interviews and more extrovert then the children at Osu. The access to proper food will have a positive impact on aspects of the children's QoL, such as good health which again can impact the children's performance in educational and social situations. Good performance in the educational setting can impact future job opportunities and in social settings it may impact the children's chances of broadening their social networks. Doing well in school and having a broad social network is also likely to have a positive effect on their self-esteem.

When it comes to food as a resource, the children at Ahotokurom and Lighthouse seem to be far better off than those at Osu Children's Home. This difference could be due to different economical situations, as Osu is in a worse financial situation and have far more children to feed, but it can also be due to different levels of knowledge about nutrition among the staff at the different homes. The nurse at Osu pointed out that the Ghanaian staff at Osu did not have enough knowledge of proper nutrition and how this affects children's health. However, I was unable to attain good information about the level of knowledge of proper nutrition among the staff at Ahotokurom and Lighthouse.

Hence, food is a collective resource that creates great differences between the children's QoL at Osu at one end and Ahotokurom and Lighthouse at the other. Access to food of good quality and

quantity is important as a basic need, because it is a prerequisite in order for the children to fully enjoy and participate in other aspects of life. Lack of access to proper food can affect the children's vulnerability in a very negative way, as it directly affects their health and their participation in various areas of life.

5.1.2 Shelter

The right to shelter or housing is important as protection against threatening elements, like violence, abuse, disturbances and noise. Shelter is also important as an arena for privacy, personal space, dignity and peace. Having four walls and a roof does not automatically mean that one has a place to call home. A home is a place where one feels comfortable and safe. The kind of housing that is deemed adequate depends largely on the specific economic, cultural, climatic and environmental context. Adequate housing indicates legal security of tenure, availability of essential services, materials, facilities and infrastructure, affordability, habitability, accessibility and cultural adequacy (Kälin et al, 2004).

Osu Children's Home

As mentioned in Chapter 4, Osu is a low-income residential area characterized by overcrowding, poor infrastructure and hazardous housing development. Buildings in this area are typically made of mud, untreated timber and zinc roofing sheets for walling (Ghana Districts, webpage 2008).

Osu has four home units located in three separate buildings where the children live. There is also an office building, a health station, a social service centre, a laundry (the washing is done by hand as the home does not have washing machines) and four houses where some of the staff and their families live. The buildings at Osu Children's Home all had concrete walls and floors, it varied however if the roofs were made of concrete or metallic roofing sheets. The buildings seemed to be of fairly good quality, even though many places there were pieces of glass missing from the windows. With the exception of the office building, the buildings were very scarcely furnished, with only the most essential. The home has electricity, piped water and water toilets. The manager at Osu Children's Home claimed that they have the largest compound of all Children's Homes in Ghana. At first glance the compound seems quite large, but when remembering that 140-150 children share the compound, it suddenly seems a lot smaller. The compound contains a football field and a playground. The playground was richly equipped with both swing sets and climbers of different sorts, but as one of the volunteers pointed out; all the playground equipment was made of metal and when the hot African sun was burning from a bright blue sky, the playground equipment

would get burning hot and the children could not use them. This might help explain why I rarely saw any children on the playground.

The children's personal place

There were four different home units; a nursery for children from 0-2 year's old, one for children from 2-6 years old and two separate house units for girls and boys over the age of 6. Each home unit has a head mother and two subordinate staff members. In 2005 the home decided to divide the children over the age of 6 years old by gender between what they called the Boys House (44 boys) and the Girls House (27 girls). This was done because of lack of space and the fact that the home now had many teenagers living there. According to the manager the children concerned were consulted before the move was made and the children loved the idea of being separated;

“It (the home) was not built to take a lot of children. And it was probably not built to take children for a long time. The rooms are very small. The toilets are small and you can imagine teenage boys and girls using the same facilities. Sometimes when somebody is taking a shower, the boy is standing behind the window and trying to watch and that kind of things. So we decided that for privacy's sake we had to let the girls be in one home” (Manager, Osu Children's Home).

As mentioned in Chapter 2, my observations at Osu are mostly based on the boy's conditions of living. Observations along with interviews disclosed that none of the children, neither boys nor girls, had their own bedrooms. There were however differences in whether the children had their own bed and how many they shared a bedroom with. All the bedrooms were of approximately the same size and the number of children sharing a bedroom ranged from 3 (the three oldest boys) to 17. As mentioned above, the manager claimed that the children chose their own room mates, but observations and interviews with the children reject this statement to be true, at least for the majority of the children. The great difference in number of room mates seemed to be based on age and may have been influenced by a hidden social hierarchy among the children, but during such a short field study this is not possible for me to neither confirm nor reject. Nonetheless, *shelter* and *personal space* as resources creates individual differences between the children at Osu and will be discussed further in Chapter 6.

The general condition of all the bedrooms were poor. Some of the bedrooms had once been painted by volunteers that wanted to cheer up the children, but the paint on the walls was now worn and had begun to chip off, leaving the bedrooms with a feeling of neglect and despair. The bedrooms were scarcely furnished, with just beds and a closet. Most windows were lacking one

or more pieces of glass and had no curtains. At the very best there was a rag hanging in the corner of the window. The windows were covered by mosquito nets that had been repaired by an NGO not long before this study was conducted. Before that, all the mosquito nets had been torn and were full of holes. The rooms did not have any fans or air conditioning. For the children sleeping in the most overcrowded bedrooms this led to lack of oxygen during the night and they complained about frequent headaches in the mornings.

Figure 5.1: Boys sharing a bedroom at Osu Children's Home



Source: photo by Mads Nissen

Most bedrooms were so overcrowded that any feeling of privacy and personal place was lost. All the children, except the three oldest boys, said that they did not like sharing a bedroom with so many others. The fact that some children would steal from the others was another problem that contributed to the feeling of lost privacy and safety. With the exception of the three oldest boys, none of the children referred to their bedrooms as a comfortable and safe place, it was just a place to sleep at night. Hence, at Osu the bedrooms were not important as a social arena where the children would meet to play and interact.

Ahotokurom

The quality of housing varies throughout the Cape Coast Municipality, but most often materials such as concrete and mud are used for walls and floor and fermented steel plates for roof (Ghana Districts, webpage 2008). Ahotokurom is located in the rural part of Cape Coast Municipality where

the quality of housing generally is poorer than in the urban areas, however the buildings of Ahotokurom was of better quality than the surrounding villages.

The buildings at Ahotokurom all had concrete walls and floors, with metal roofing sheets. The home has electricity and piped water. Due to scarcity of time I did not get the opportunity to see all the buildings and rooms at Ahotokurom, including the sanitary facilities. Ahotokurom consists of “the children’s house”, a separate building where the children had their bedrooms, a pre-school with a fenced in playground, a laundry and several private houses where the manager and some of the staff lives with their families. The buildings and the compound gave the impression of being well looked after. The physical structures of the home did not seem neglected or worn down. The pre-school was tidy and clean. The furniture looked whole and there where posters on the walls and books on the shelves. The playground attached to the pre-school was surrounded by a fence and some of the playground equipment where of good quality and some had just been painted. The laundry also looked clean and well taken care of. The laundry looked new and had washing machines. The common room in the “children’s house” was also of good quality. It was equipped with a sofa, a table, a TV, a DVD-player, a few DVD-movies and some books.

The children’s personal place

All the children shared bedroom with others, usually two or three children within approximately the same age-range to one bedroom. The rooms where of good quality and every child had his/her own bed. The windows were whole and had curtains. The painting on the walls looked fairly fresh and there where furniture, like tables, chairs and shelves in all the bedrooms. Some children had also put up posters on the walls. The children’s personal items such as clothes, toys and books where scattered across the rooms. One of the staff members showed me around the bedrooms, but some of the children also tagged along. The children seemed proud when they showed off their bedrooms and their belongings. One boy even picked up his drum and started playing. In some of the bedrooms children where relaxing in their beds or playing. The children’s bedrooms where important as a social arena as they functioned as a meeting place, as the children often visited each others bedrooms to play, do homework or just “hang out”. The bedrooms also offered opportunities for retiring, as they where a place to rest and where the children could be by themselves. The children felt that their bedroom was a place to feel safe and secure. Stealing was not an issue at Ahotokurom and the children expressed trust in each other. The fact that they where usually two-three children in one bedroom offered good opportunities for privacy.

Figure 5.2 Children’s bedroom at Ahotokurom **Figure 5.3 Boy showing off his drum**



Source: photos by Marthe Kristiansen

Lighthouse Children’s Home

Lighthouse is located in two rented, separate houses in Aboro which were originally private houses that now have been converted to its present purpose. The two houses are located in two different streets, so it takes a few minutes to walk between them. Both houses are made of concrete (floors, walls and roofs) and are enclosed by large fences which separate them from the neighbourhood. “The main house” also has a watch post and a security guard. Both houses have electricity, running water and water toilets. Both houses seemed to be in good quality and well taken care of. The paintings seemed fresh and the common rooms were well equipped with furniture.

Figure 5.4: The main house at Lighthouse Children’s Home



Source: photo by Marthe Kristiansen

The children's personal place

The children were divided between the homes two houses; "the main house" and what was called "the second house" Each house has two house-parents (a man and his wife) and their biological children living together with the children taken in by the home. At the main house there are 19 children divided in three bedrooms; 6 girls, 6 boys and 7 boys. The girls' bedroom has its own bathroom and toilet, while the 13 boys share one toilet and one shower down the hall. All the children have their own beds. At the second house there are 9 boys divided in three bedrooms, all of approximately the same size. The condition of the bedrooms seemed to be of good quality; the painting on the walls seemed fairly fresh and the beds were whole and of good quality. There was no other furniture in the bedrooms besides the beds. There were no posters on the walls or toys in the bedrooms.

The children did not express any dislike towards any of their room mates or the fact that most of them shared a bedroom with 6 or 7 persons. The bedrooms were referred to as a social arena by the children as a place to retire to alone or with friends to "hang out" and play. The children expressed trust in each other and stealing was not an issue. Lighthouse had problems with break-ins and this corrupted the children's feeling of safety at the home in general, but also their feeling of safety in their own bedrooms.

Comparison

The general condition of the buildings were about the same at Ahotokurom and Lighthouse. Osu stood out in a negative way as the physical surroundings here were more deprived and neglected. It is however important to remember that Osu is the oldest of the homes and was built in the 1960's, while the buildings at Ahotokurom and Lighthouse were built in the early 1980's and in the late 1990's (the latter is an estimated guess from the manager at Lighthouse). The difference can also reflect the financial situation at the various homes, as Osu undoubtedly is the "poorest" of the three homes and can only afford to upgrade their facilities when they are fortunate enough to receive earmarked donations for this purpose. Osu is also the largest home in terms of the number of children they house, with between 140-150 children compared to 26 at Ahotokurom and 28 at Lighthouse. Hence, the every day wear and tear over the years will be much greater at Osu. Living in overcrowded and deprived physical conditions will most likely affect aspects of the QoL of these children negatively, however it is important to remember that the point of reference and expectations are important in how the children assess the quality of their living conditions. I do not have any information about these children's previous living conditions to make judgements on this.

The quality of the bedrooms were undoubtedly much poorer at Osu than at Ahotokurom and Lighthouse. Osu was also the only home where some of the children did not have their own bed. At Osu the accommodation situation for the children is very serious as the home is overcrowded and as many as 17 children have to share one relatively small bedroom. All the bedrooms are of roughly the same size, so it is quite clear that when the numbers of children to a bedroom vary from 3 to 17, the amount of space they have to their disposal is very uneven. Living in an overcrowded bedroom undoubtedly diminished aspects of the children's QoL as any feelings of privacy and safety connected to their bedrooms were lost. This overcrowding also affected their health in a negative way, which again impacts their performance in school and in the everyday life.

At Ahotokurom there were on average fewer number of children to one bedroom than at the other homes. All the bedrooms at Ahotokurom were of approximately the same size, giving the children approximately the same amount of space to their disposal. At Lighthouse the number of children to one bedroom varied between three and seven. The room size at Lighthouse is taken into consideration when distributing bedrooms between the children, so the smallest bedrooms held fewer children. Thus, the amount of space the children has to their disposal was quite even.

A striking feature at Lighthouse and Osu was the lack of personal items in the bedrooms, such as toys, clothes, posters and books. The children living at Ahotokurom had to a much greater extent personalized their bedrooms, giving the impression that one in fact entered someone's personal place. The fact that Lighthouse is a fairly new Children's Home and that the children may have just lived there for a short period of time, can help explain the lack of personalization. At Osu, the high number of children sharing the bedrooms led to a lack of feeling of privacy and personal place. This along with the fact that the children did not have their own clothes, toys or books can help explain the lack of personalization. The children at Osu did not consider their bedrooms to be a place for privacy and safety. This lack of privacy and safety was connected to issues *inside* the home, as the children blamed each other and the overcrowded bedrooms for this.

Only at Ahotokurom and Lighthouse was the children's personal place considered an important social arena, at Osu it was just a place to sleep at night. To have a place to call their own, where they feel safe and can retire from the surrounding world is important as it gives the children a chance to "take a break" and rest. This opportunity will undoubtedly help reduce conflicts between the children and also help reduce stress and frustration in the everyday life, thus reflecting positively on aspects of the QoL. Not having a place that they can call their own, that they can retire

to, be alone and feel safe will contribute to stress, frustration and increased conflicts between the children.

The privately run homes, Ahotokurom and Lighthouse, are in a position where they can determine their own rules for gatekeeping and turn children that comes to their door away. In contrast to Osu, they are in a position where they can say “no”. This is a problem at Osu because they are run by the government and they have to take in every child that “comes knocking at their door. Ahotokurom and Lighthouse can thus avoid being put in a situation where they become overcrowded.

The material structures surrounding the children are thus important factors in assessing aspects of the children’s QoL because they set some conditions concerning the children’s feeling of privacy, safety and they can also affect the children’s health and mental health in a negative or positive way. The material structures can also act to reduce or increase the children’s vulnerability, as at Osu the children are made more vulnerable due to a poor physical environment and overcrowding, while at the other end, the sick and disabled children at Ahotokurom are less vulnerable due to a physical environment that positively contributes to aspects of their QoL.

5.1.3 Clothing

Osu Children’s Home

Osu receives all their clothes from donations. NGO’s, churches and local people bring the Children's Home second hand clothes. The manager claims that they get too much clothes, so she saves some of it and gives it to other Children's Homes that do not get as much donations. The manager said that she does not want the children to have “too much” clothes, so she gives them “just enough”. The quality of the children’s clothes varied some, but as a general rule the clothes were worn out, dirty and sometimes had holes and were too big for the children wearing them. The clothes that are provided by the home are not the children's personal property. Some of the clothes at the Boys House were in a cupboard in the classroom room and the children had free access to them. If they needed a t-shirt they would just go and get one. The children over 10 years old have to do their own laundry. This is done by hand in the laundry house as there are no washing machines on the premises. There were some individual differences between the children regarding clothes and this will be discussed in Chapter 6.

Ahotokuroom

Ahotokuroom buy the children's clothes at the local markets. The children's clothes looked clean and whole. The clothes also seemed to fit the children wearing them. The children have their own clothes and as long as their handicaps or illnesses do not prevent it, children that are over 10 years old are responsible for doing their own laundry. The laundry is done with washing machines in the laundry house.

Lighthouse Children's Home

Lighthouse buys the children's clothes at the local market. The clothes were clean, seemed fairly new and were whole. The clothes also seemed to fit the children wearing them. The children have their own personal clothes.

Comparison

Osu stands out negatively from the other homes when it comes to the quality of the clothes. Osu is also the only home that gets clothes solely through donations. This means that the children at Osu only receive second-hand clothes. They also have to share the clothes as they do not have their own personal clothes. Because of the strained economic situation at all three homes, it is most likely that younger children inherit clothes and that new clothes are only bought when absolutely necessary. This could indicate that the oldest children who do not have anyone to inherit from are more likely to receive new clothes. There did not seem to exist any dress codes among the children. This is most likely because they are in such a position that they can not afford to choose clothes with this in mind. The most important thing was that the clothes were whole and clean. It is important to note that this is difficult to observe in such a short period of time and that it would require in-depth understanding and knowledge about the existing youth cultures and their codes. Individual differences in clothing will be discussed in Chapter 6.

5.2 Non-material resources

5.2.2 Health and health care

The World Health Organization (WHO) defines health as "*a complete physical, mental and social well-being rather than a mere absence or disease or infirmity*" (WHO, 2006:1). This definition sets good health as a prerequisite for people's general well-being. Health is important in people's QoL as one's health sets certain premises for the performance and level of activity in other aspects of life, such as in educational and social settings. Access to health services is also important as it can present an opportunity to improve or regain one's health.

Osu Children's Home

As mentioned earlier, Osu Children's Home is the only home in this study with its own health station. When this study was conducted the health station had only been there for 7 months. The health station was established by an NGO called OrphanAid Africa (OA). The health station is run by a nurse from the Netherlands and an assistant that both works as a volunteers for OA. Their job is to improve the children's health by giving them basic health care and to teach the staff about issues related to health, hygiene, diet, basic childcare and how to care for children with various disabilities or conditions. This is however no easy task. Just a few staff members have shown any interest in learning about these issues. The nurse held a course in basic childcare, but only two of the staff members showed up. According to the nurse the children are often sick. They are first sent to the nurses' office and she refers them to a doctor or hospital when necessary. The home does not pay for consultations at the hospital, only for the medications the children might need.

“The diet is poor and the malaria is high. So, malaria usually gives a lot of anaemia. They recover (from the malaria), but the anaemia stays” (Nurse, Osu Children's Home).

Due to the poor diet, the children are often sick from vitamin and iron deficiency. This combined with the frequent incidents of malaria results in frequent incidents of anaemia. Typical symptoms of anaemia are: paleness, reduced coordination, difficulties breathing when doing something strenuous, fatigue and an increased need for sleep (NHI, webpage 2008). This clearly affects aspects of the quality of their everyday life and how they perform both in school and in social situations. The introduction of proper diet is of vital importance in order to recover from anaemia (ibid). This means that unless a real change is done to improve the quality of the food the children are offered at Osu, the children will continue to suffer from anaemia.

Ahotokurom

Ahotokurom is in a special situation in comparison to the other two Children's Homes when it comes to the children's health, as many of the children living at Ahotokurom have serious illnesses or disabilities. I did not observe any malnourished children at Ahotokurom, but the manager pointed out that many of the children were sick and/or malnourished when they first came to the home and that I was now looking at the “after”-picture. The manager claimed that they have only lost two babies in 23 years. Proper health care for the children was emphasized as very important for the home. They spend a considerable amount of their budget on hospital bills and medications each year and on the managers annual fund raising trips this is one of the biggest priorities. When needed the children are sent to the local hospital in Cape Coast for treatment.

Lighthouse Children's Home

The children looked healthy and energetic. The staff and manager emphasised proper health care as a very important part of the basic child care at the home. The local hospital in Cape Coast is contacted if the children get sick or hurt. Shortly after this study was conducted the home had a breakout of typhoid. Nurses and doctors from the hospital in Cape Coast came to Lighthouse to test everyone for the disease. Cases like this take a big chunk out of the annual budget, because everyone has to be checked and so many actually had typhoid and needed medications.

Comparison

As Osu is the only home with its own health station and health worker on the premises, this gives the children an advantage as they can receive professional treatment very quickly if they become sick or injured. This health station is however funded by OrphanAid Africa and run by their staff. Its existence is totally dependant on continued support from this NGO. If they decide to redraw their support the children at Osu will experience more harmful conditions and reduced quality of life. Ahotokurom is as already mentioned in a very special situation since many children suffer from serious illnesses or disabilities. Because of the children's frequent need for treatment this puts an enormous strain on the homes budget. On the other hand, Ahotokurom does not take in more children than they are able to support and in this way the home ensure that they are able to give each child good quality of care according to their individual needs.

All the homes contacts professional health personnel if the children get sick or injured. At Osu and Ahotokurom many of the children have disadvantages when it comes to health, because in addition to the "ordinary" illnesses and injuries they may sustain, they already struggle with health problems every day. At Osu the children suffer mainly from lack of a proper diet and poor shelter, while at Ahotokurom many children have inborn disabilities and other illnesses. At Osu the children's health suffers from conditions *at* the home and already vulnerable children are made even more vulnerable as their health suffers due to lack of proper food and overcrowded living conditions. At Ahotokurom the children's issues with health are diseases and illnesses, conditions that are *beyond* the control of the home. Here, most children are vulnerable due to their inborn health situations, but the home tries to make up for this vulnerability through proper health care adapted to their individual needs. The children will most likely receive much better healthcare at Ahotokurom than would have been possible otherwise and can be able to fully enjoy other aspect of life, such as education, qualitative leisure and social networks.

Hence, the children's quality of life in terms of health is best cared for at Ahotokurom and Lighthouse, as these homes do not produce harmful conditions for the children, such as poor living conditions and poor diet. This is despite the fact that the children at Osu may seem to have an advantage in having a health station on the premises. This advantage is more or less "eaten away" due to the fact that other conditions set by the home are responsible for the majority of the children's health problems.

5.2.3 Education

In addition to adequate nutrition and health care, adequate education is essential for the growth and development of children's full potential. Education is deemed adequate when it is available and accessible for all. The methods and content of the teaching must also be of sufficient quality and adapted to the particular level of education or type of school (Kälin et al., 2004). Education is important for the personal development of children as they need basic life skills if they are to become productive and independent adults.

The education offered at all the three homes is differentiated, as it varies if the children attend public or private schools. As discussed in Chapter 4, the public schools in Ghana struggle with poor quality of education. The fact that some children are offered education at private schools and some are not makes the education function as a sorting mechanism. The reason why the educational offer is differentiated varies between the homes and will be discussed further in Chapter 6.

Osu Children's Home

Osu has a pre-school to prepare the youngest children for primary school. All the educational expenses are paid for by private donations and because of the strained financial situation at the home, the general rule is that they send the children to different public schools in the neighbourhood, since this entails considerably lesser educational costs. The majority of the children receive the same education, but there are some exceptions (see Chapter 6).

According to documents I was given access to at Osu and interviews, the Ghanaian staff does not follow up the children's education in any significant degree. The children have to rely on volunteers to help them with their homework. This may be due to the low educational level of the Ghanaian staff. Homework is done outside on benches and the Boys House has a "classroom" where the volunteers sometimes teach the children different subjects. What kind of subjects the volunteers teaches depends on the volunteers individual qualifications.

None of the children attends higher education. The children's chances of receiving higher education are small as the home does not provide education past Senior Secondary School. Higher education is quite expensive and it is hard for children to attend higher education without any support.

It was difficult to get any information from the children about their education. Most of them did not seem interested in the topic at all and answered just “yes” and “no” to the questions. One girl (age 13) refused to answer *any* questions about school. Access to education was by some children pointed out as one of the good things about living at the home;

“...sometimes we the boys have been sitting here chatting [...] if we where at our parents place we'd be suffering like: no education, nothing to eat, no clothing. So, that is an advantage here” (Boy 17, Osu Children’s Home).

Ahotokurom

At Ahotokurom they have a kinder-garden, a special unit for children with mental disabilities and a day-care assessment unit for the smallest children. All the children of school age are attending school. The children attends both private and public schools as the manager did not want all the children to attend the same school as she believed it could create a “bad mentality” among the children at the home. The home started sending the children to private schools because they felt that the quality of the education given at the local schools where not good enough. Homework is for the most part done in the children’s bedrooms. One of the most important tasks for the students and volunteers is to teach the children different subjects or skills and to help them with their homework.

Many of the children that have moved out of the home have higher education. Ahotokurom views education as one of the most important tools in making the children independent. The home supports the children's higher education both financially and emotionally;

“We don't play with our work and if you want to create a sound rootedness and a healthy mind, then they (the children) have to be given the facilities to do that” (Manager, Ahotokurom talking about providing the children access to higher education).

Lighthouse Children’s Home

The children attend both private and public schools. Like Ahotokurom, Lighthouse Children's Home prefers to send the children to private schools because they believe that the quality of the education is better than in the public schools. Providing access to education for all the children is a constant source of frustration. It was emphasised that this was both a financial and a cultural issue.

The managers expressed frustration about the way the teachers treat the children;

“The worst thing of all is the way the children are treated. Not by the other kids, but by the teachers and the headmistress of the school. [...] The most difficult behavioural problem we deal with here (at the Home) is the insulting of each other. We have discovered why we feel like we are running against a brick wall in that area; they hear it constantly at school from the adults that should be role models for the children” (Manager, Lighthouse Children's Home).

The manager indicated that the difference of opinion between the manager and the teachers when it comes to how the children should be treated in school is most likely the result of cultural differences, as the manager and his wife is Canadian and has brought with them values and culture from their home country. The manager claimed that there is a social stigma attached to living with someone that is “different” in the eyes of the majority; the children are stigmatized because;

“They are living with a white man” (Manager, Lighthouse Children's Home).

“If one of the children comes into trouble at school, then right away it's because we should have caned him” (Manager, Lighthouse Children's Home).

These statements suggests that because of differences in methods of disciplining between the Ghanaian and the Canadian culture, the children living at Lighthouse might be seen as more “difficult” and “troublesome” than compared to children living in households consisting solely of Ghanaians. This attitude from the teachers can potentially create problems for the children in the educational setting.

Like at Ahotokurom one of the tasks for the volunteers is to help the children with their homework. In addition, they also have two teachers that come in to do extra classes in the evening. The Home has only one boy attending higher education, the University of Cape Coast. This is because the Home was established in 2002 and none of the other children are old enough to attend higher education. The home’s plan is to give the children that want to, access to higher education. This will largely depend on the homes finances and the children’s performance in school.

Comparison

Each of the three homes provides access to education, but the quality of the education varies. At Osu the children mainly attends public schools. This is because the expenses attached to the public schools are considerably lower than at the public schools. Ahotokurom and Lighthouse are able to pay for and prefers to send the children to private schools, which in the Ghanaian educational system often is synonymous for education of better quality. Some children at Ahotokurom and Lighthouse are attending public schools, but the homes then made a point of “checking” the quality

of the education given at these schools. The choice of schools at these two homes were based on the *quality* of education given, as opposed to Osu, where the choice of schools for the most part were the result of *financial issues*; what schools can they afford to send the children to?

Having *access* to proper education is of vital importance, but access alone is not enough. The *quality* of the education is also very important, as the quality of the education given can directly impact on the children's chances of achieving higher education and their future job opportunities. Often the public schools in Ghana do not offer children a good education, due to overcrowding, lack of trained teachers and poor facilities. It is important to remember that there will exist differences between the various public schools and that some of these schools will provide education of good quality. However, I do not have enough information about the different schools the children attend to make any in depth comparisons on the quality of the education given.

At all the homes, the children are reliant on volunteers to help them with their homework, as the Ghanaian staff did not seem to help with this in any significant degree. The situation of help from the volunteers seemed to be more "random" at Osu, than at Ahotokurom and Lighthouse where the homework-situation seemed to be more "organized" and the children received more help with their homework. The kind of help the children can expect to receive will be reliant on the volunteer to child ratio at the various homes. The number of volunteers at Osu varies as to how many people NGO's like OrphanAid Africa are able to send at any given time. It was difficult to identify exactly how many volunteers worked at Osu when this fieldwork was conducted, as even the manager could not tell me how many they were. At a large Children's Home like Osu that houses up to 150 children, the number of volunteers have to remain quite high if the children are to receive help of good quality. In contrast to this, Ahotokurom and Lighthouse house far fewer children (26 and 28) and thus needs fewer volunteers to give the children good help and also had the homework situation in mind when determining how many volunteers they needed.

At Osu the children do not get a chance to take education beyond Senior Secondary School (SSS). This is because the children are expected to leave the home after they finish SSS and/or are old enough to care for themselves, hence Osu does not give any economical support to higher education. Osu has limited or no contact with the children after they leave and even if they would want to support children taking higher education, they do not have the financial resources to do so. The chances for these children to receive higher education are virtually non-existent. The situation at Ahotokurom and Lighthouse is quite different, as both homes have children

attending higher education. This is a result of a better financial situation and the fact that the two homes continue to care for the children after they move out. The fact that they also have far fewer children to potentially put through higher education in the years to come, may result in a much more optimistic view on this issue from the managers side. This means that in terms of education as a resource, the children at Ahotokurom and Lighthouse is in a far better situation, as they receive more help with their education (homework), thus improving their performance and their chances of attending higher education. They are also actually given the opportunity to attend higher education and this will directly impact their future job opportunities. This can again impact their self-esteem positively. All the homes send their children to schools outside the home and this can impact aspects of the children's QoL positively as it gives them a chance to broaden their social networks and to maintain contact with the local community. Thus, Ahotokurom and Lighthouse reduces the children's vulnerability by giving them access to proper basic education and higher education. Education acts as a authoritative resource that can positively affect the children's knowledge and status, both in the present and in the future.

5.2.3 Safety

Osu Children's Home

The children at Osu did not feel safe *inside* the home. This was partly because some children did not get along well at all with each other. The children complained about frequent fighting among the children. This was for the most part a problem at the Boys House. Interviews with the children and documents from the home indicated that some of the younger children feared the older boys and the oldest boys sometimes treated the other children badly;

"He (age 17) is fond of beating the little ones up" (extract from monthly journals attained at Osu Children's Home, written by the Ghanaian staff).

"Sometimes the oldest kids will beat us" (Boy 14, Osu Children's Home).

This boy (latter statement) also said he wished the oldest boys would move out, preferably to another city. Observations confirmed the younger boy's statements, as during my short stay I observed several quarrels and fights among the boys. The older boys seemed to take advantage of their physical strength to dominate the younger ones, indicating the existence of a hidden social hierarchy among the children. The children also expressed a strained relationship with most members of the staff. Some said that they do not always know what to expect when certain staff members come to work. Some said that they feel very unfairly treated and that *"just a little mistake"* will cause a negative reaction, usually in the form of hitting or verbal abuse (yelling and/or insulting). The children did not expect the staff to protect them from the other children. They

did not trust that the staff could or would protect them in all situations that might occur at the home. The children felt that some staff members would treat the children very different and unfair.

Some of the children at Osu have a history as street children and have experienced first hand the dangers and troubles that can be found on the “outside” of the walls of the home;

“One of the things that is good here is that you get away from the outside” (Boy 14, Osu Children’s Home).

The children clearly expressed that they knew what a life on the outside could entail and what dangers that can be found on the outside, but at the same time they were not worried about intruders and felt quite protected from the “outside”. The girls at Osu expressed concern about going outside the premises alone, something that affected their sense of safety negatively and constrained their radius of action (will be discussed further under *Leisure*).

Ahotokurom

Lack of safety was not an issue here, neither on the inside or the outside of the home. Instead the children emphasised the fact that they trusted each other like siblings and that they felt comfortable and safe in the home. The children expressed trust in the staff and they felt safe with them. The fact that many children come from the neighbouring villages and have family and friends there was important for the children’s feeling of safety. The many ties between the neighbouring villages and Ahotokurom made the children feel like they were as much a part of the local community as any of the other households.

Lighthouse Children's Home

The children felt comfortable with each other, even though the home is fairly new and some children may not have been there long. They also expressed trust in the staff and their intentions. The only concerns about safety the children expressed were related to circumstances *outside* the home, as the home had problems with intruders breaking in. This made the children uneasy at the thought of being in the house without adults present, which led to the hiring of a security guard. The girls at Lighthouse also expressed fear when talking about walking outside the home alone. This was something they would avoid;

“The girls don’t go anywhere. We will stay in the house for a long time. We can go out, but we don’t want to [...] in Ghana here some of the boys are dangerous” (Girl 16, Lighthouse).

The fact that people would come begging at the home shows that Lighthouse is considered as a

source of wealth, or to at least be much better off than the rest of the neighbourhood. This is a problem since it also attracts people with dishonest purposes and can thus pose a security risk for the children.

Comparison

Ahotokurum was the only home where the children did not express any concern about safety in any way. The good feeling of safety *inside* the home was linked to the good relationship between the children and the fact that they trusted that their caretakers truly wanted the best for them. *Outside* this was linked to a good relationship between the home and the local community. At Lighthouse the children felt safe with both the other children and the staff, but were worried about people from the *outside* coming in. At Osu the main concern was that the children did not feel safe *inside* the home, because they did not trust the other children or the staff.

Any lack of feeling of safety, from forces *outside* or *inside* the home, will affect aspects of the children's QoL in the most fundamental way. Even though the children at both Osu and Lighthouse struggle with issues of safety, the lack of safety the children experience at Osu is even more detrimental than at Lighthouse. At Osu the children do not feel safe with the people they live with and that surround them in the every day life. The fact that they do not trust certain staff members to have their best interest in mind, that they will not be protected by these in various situations and that they feel they are unfairly treated, creates a feeling of unpredictability and insecurity, as the staff operates by different rules of conduct and what is tolerated and not, depends largely on who is at work. Lack of safety can also affect other aspects of QoL such as education and leisure, as it can cause fear, anxiety and nervousness, making it difficult to get proper rest/sleep, do homework and to participate and enjoy leisure time.

In this respect the children may feel they have lost all lines of defence and that although they are surrounded by many people every day, they are in reality left on their own. The fact that the feeling of lack of safety is connected to issues *inside* the home will affect the children's feeling of love and belonging. If they do not feel protected by their caretakers and that they have their best interest in mind, how can they feel truly loved and wanted? If they do not feel comfortable and safe with the people they live with how can there exist a true sense of safety and how does the violent behaviour from older children affect the sense of safety amongst the smaller more defenceless children?

5.2.4 Leisure

The Convention on the Rights of the Child (CRC) states in article 31 that children have the right to rest and leisure. Children shall be able to engage in play and recreational activities (UNHCHR, 1990).

Osu Children's Home

After school most children said they would do some chores or their homework if they had any. The children roamed about on the compound as they pleased. Some would play together or just sit and talk while others were doing homework. The children at the Boys House and the Girls House had chores every day they had to do. Chores the children had to do were sweep the compound, dust and wash clothes (children over ten years old) and help out during meal times. However, the chores did not occupy the children's leisure time in any significant degree. Several children said that they have a lot of time for "just doing nothing";

"When I come home I do nothing" (Girl 13, Osu Children's Home).

The weekends are quite free with just a few chores and church. The children were sometimes taken on trips to the beach by the volunteers and the Ghanaian staff. The presence of the volunteers is important if the home is to be able to do these trips.

The children can move freely between the different home units. There is however some restrictions to this as the children from different home units are not allowed in other units bedrooms. In other words; no girls in the boy's bedrooms and vice versa. They also have curfews as to when they have to be back at their own home unit. The children are allowed to go outside the Children's Home, but they have a curfew as they have to be in bed by 8 o'clock, the oldest ones at 10 o'clock. There is a difference between boys and girls when it comes to their radius of action outside the home. One girl (age 13) said that she does not leave the home other than going to school. She did not want to explain why. Girl (age 14) said that, besides going to school, she can go outside for 30 minutes before she has to be back at the home. One boy (age 17) said that he spent a considerable amount of time outside the home. He claimed that he could leave the home during the day and be gone as long as he wanted. He also said that he could go anywhere he wanted to outside the home.

The children are not restricted from having friends outside the home, but only boys said that they had friends outside the home. The boys had friends that would visit them sometimes or they would go out to meet them. This will be discussed in more detail in Chapter 6.

Ahotokurom

All the children, except the smallest ones, have chores. How much and what kind of chores the children have depends on their age and their health. Typical chores would be sweeping the compound, cleaning their bedrooms, washing their clothes and help out during mealtimes. Like at Osu, this does not occupy a significant part of their leisure time. At Ahotokurom this is partly due to the limitations their illnesses or disabilities put on them;

“[...] most children in Ghana would be working. My kids have more free-time than anybody, simply because of their sicknesses [...] bearing in mind that the majority of the children in this area would be up at 3.30 – 3.45 in the morning and going to farm and doing three hours of work before they go to school. They find it (their chores) very easy” (Manager, Ahotokurom).

During the weekends the children's free time is quite open with just some chores and church. All through the week the children are mostly free to engage in activities of their own choosing, like playing soccer, watching TV, hang out with friends or just rest.

The children move freely between the different bedrooms and on the compound. All the children, both boys and girls, have friends outside the home which they are allowed to visit, but they have to get permission from the staff and be back before dark.

“I’ll ask for permission and if she (the manager) says yes, I’ll go and have fun with my friends and playing soccer” (Boy 19, Ahotokurom).

“If they want to go and visit their friends, they’ll go” (Boy 17, Ahotokurom).

Lighthouse Children’s Home

Like at the other homes the chores occupy a just a small fraction of the children’s leisure time and weekends are more or less free to engage in activities of their own choosing. The home has a football team that plays in the local minor football league. They have their own football coach, trains almost every day and on the weekends they often play games against other local teams. Lighthouse runs a youth drop-in centre, the JAM House (Jesus and Me) which is open five days a week in down town Cape Coast. Here, the local youth can come and hang out and play games with the children from Lighthouse. Lighthouse encourages the children to have different hobbies and interests. One boy (age 12) has his own pigeons that he feeds and takes care of;

“My favourite thing about the Lighthouse is the pigeons I have” (Boy 12, Lighthouse Children’s Home).

Organised trips for the Children's Home as a whole is very rare and depends on the financial situation. In 2005 all the children at Lighthouse went to Accra on a sponsored trip. This trip was something out of the ordinary and was only possible because they got funding earmarked by the sponsor for a trip for the children. Sometimes a few children are also sometimes allowed to travel with the manager and his wife to Accra to do errands. The home also takes the children to local beach resorts if the finances allow them to.

The children can go as they please between the two houses and outside, but they always have to let the staff know where they are going. They all have to be back at the main house at 5.30 for meal time. Like at Osu there is a difference between boys and girls when it comes to the radius of action outside the home. The boys said that they often go outside the home and they went town more often than the girls. The girls were afraid to walk alone outside the home and they only went to town if someone from the staff was with them. The girls were afraid to go outside alone;

“The girls don't go anywhere. We will stay in the house for a long time. We can go out, but we don't want to [...] in Ghana here some of the boys are dangerous” (Girl 16, Lighthouse).

None of the children are allowed outside after dark.

Comparison

The amount and types of chores the children have to do is very similar at the three Children's Homes, leaving them approximately the same amount of time for leisure. The exceptions are some of the children at Ahotokurom whose ill health prevents them from doing the same amount of chores as their peers. All the children enjoy a lot of leisure time where they are able to do activities of their own choosing. The manager at Ahotokurom pointed out that “her” children enjoys much more free time than is the general rule for the neighbouring children, as these children spend much of their time working to contribute to their households. It is likely that this in some degree also applies to the children at Osu and Lighthouse.

Osu and Lighthouse occasionally take the children on trips. The difference is that the trips at Osu are very local (the local beach), while the children at Lighthouse have been given the opportunity to travel much further (Accra). To be able to go on longer trips broadens the children's and their level of knowledge. It also gives them a chance to broaden their social networks and all this can positively impact aspects of their quality of life.

There was a gender based difference at Osu and Lighthouse in regards to radius of action in the local community outside the homes. The girls said that they feared going outside and this impacted their social networks, as they spent most of their leisure time inside the homes. However, at Lighthouse, the JAM-house gives the children (both boys and girls) a social arena where they can meet the local children on a regular basis. This can help broaden their social networks and to establish a good relationship between the children and the local community.

5.2.5 Love and belonging

“It is the responsibility of residential staff and carers, acting on behalf of society at large, to promote these children's well-being and to minimise the negative consequences of separation”, (M. Hill in Chakrabarti, 2000:9).

Osu Children’s Home

The children and the staff

As mentioned in chapter 4, the staff at Osu can be divided in two; the office and the ones working directly with the children in the everyday life. This information is based on the latter.

“I want to change their attitude towards the children. Because they are...they seem to much a bother. If they cry, it bothers them. If they are hungry, it bothers them. It's like it's work. They see it as work. They see it as work instead of the child behind it. They lost complete touch with the child behind the work” (Nurse, Osu Children’s Home).

This is a very strong statement concerning the staff’s attitude towards the children they are responsible and for the home as a workplace. When this study was conducted, the nurse had worked at Osu for 7 months and according to her, the general attitude among the staff was as described in the above statement; a prevailing negative attitude towards the children and to their needs. According to the nurse this can partly be explained by the fact that they work in poor physical facilities and are overworked and underpaid. Most staff members have already worked at Osu for an average of 25-30 years. All this combined makes it very hard to stay motivated;

“They (the staff) work in a dark environment with screaming children. There is no one saying to them: You are doing a wonderful job! [...] How can you stay motivated? I don’t know. I don’t know what I would do” (Nurse, Osu Children’s Home).

One boy (age 17) said it quite blunt: *“They hate us!”* These are very strong words for a child to use when explaining how he believes his caretakers feel about him. When remembering that a child's caretakers are supposed to be his/hers strongest support and defence in this world, one can only

speculate about the kind of pain and disappointment hidden behind such a statement. One child did not want to answer any questions about the staff. Most children divided the staff into the ones they liked and the ones they did not like at all;

“Some are good, some are not good. [...] They shout at you, hit you, and insult you”

(Girl 14, Osu Children’s Home).

“Just like a small mistake and they will be shouting at you and they start insulting you” (Boy 14, Osu Children’s Home).

“If you don’t treat us well, how can I treat you well? That’s the thing” (Boy 17, Osu Children’s Home).

The lack of respect and trust between the children and the staff is clearly illustrated by these statements. When the children are shown little or no respect from the staff, this is what the children give back and this pushes the staff-child relationship deeper into a negative cycle. The children’s complaints about the staff were generally the same; some mothers would not bother check up on all the children when they came to work. Some children also said that they were more or less ignored by certain staff members. That some staff members does not bother to check on all the children sends a signal that some staff members does not consider all the children to be of equal importance. Some children are simply not worth the effort and attention. As discussed earlier, there was also the problem that the children did not trust the staff to make sure that all the children were fed during meal time. Some children did not feel that the staff would protect them from the other children. The feelings towards the volunteers working at the home varied. Some children said that they had only had positive experiences with the volunteers, while others would divide them into the ones they liked and disliked. One boy (age 17) was sceptical towards volunteers as he had experienced that some would “talk down” at him and be unfriendly.

The relationship between the children

The manager’s hope that the children would see themselves as siblings is not consistent with the image drawn by the children themselves in the interviews. One girl (age 13) said that she does not like any of the other children because: *“They are all bad”*. The children did not express having any close ties to each other. Instead, the fighting and stealing from each other where pointed out as the most typical feature of the relationship between the children. Some of the older boys would insist that there were no fighting amongst the children, something that was not consistent with my observations and interviews;

“He (age 17) is fond of beating the little ones up” (extract from monthly journals attained at Osu

Children's Home, written by the Ghanaian staff).

"Sometimes the oldest kids will beat us" (Boy 14, Osu Children's Home).

As mentioned under *Safety*, I observed many fights and quarrels among the boys and the older boys seemed to use their physical advantage to dominate the younger ones. This could indicate that there exists a hidden social hierarchy among the children based on age and physical strength, however I do not have enough data to confirm or reject this.

Information derived solely from my interviews might give the impression that none of the children have friends and that none of them get along. To draw such a conclusion would be to oversimplify the truth. The children *do* play together and seem to have their friends, but it is striking that when asked it is the negative aspects that were always emphasised.

Figure 5.5: Children playing at Osu Children's Home



Source: photo by Mads Nissen

The children's feeling of belonging towards the home

"I don't like it here! The biggest problem is that I want to leave here. I don't want to stay" (Girl 14, Osu Children's Home).

She went on saying that she would leave Osu Children's Home with anyone that would take her. When I asked if there is anything she likes about living at Osu, she just shook her head. The wish to leave the home was also expressed by other children:

"If I get the chance I'll move out. Not only me. We are many. We want to move out from this orphanage. [...] I don't feel like staying in this orphanage" (Boy 17, Osu Children's Home).

The manager pointed out that some children do not want to leave the home and that they will be on

their best behaviour, stay out of trouble and some also try to make themselves “invisible”;
“Sometimes they don't want to do anything to draw attention to them. Because if you are misbehaving to much maybe they think (...) will go look for this boys parents or family and take them back. And those who do not want to go they try to behave so that it does not happen. And some of them know that they have nowhere to go. They don't have another place” (Manager, Osu Children’s Home).

This shows that some children actually want to stay at the home, in contrast to the statements above. The children may fear to be sent away because they like living at Osu and they consider it to be far better than their previous living situation. However, it is also possible that the children do not see Osu as a good place to live, but it is the only place they have. Living at the home could be considered as the better option of bad alternatives; going back to an abusive family situation or living on the streets. The statement from the manager shows that some children consider their stay at Osu to be highly insecure, as they do not know when or if they will be “kicked out”. It does not matter if this threat is real or imaginary, as long as the children have to live with this nagging feeling of fear it will affect their quality of life negatively.

Ahotokurom

The children and the staff

“They (the staff) are doing very well in order to make everything possible. To make this (Ahotokurom) a home. A very happy home” (Boy 22, Ahotokurom).

One thing that differs from the other homes is that some of the staff is actually the parents of some of the children. This will undoubtedly create a stronger feeling of belonging for both the staff and the children. It is likely that the staff will care much more about their work, when their biological children live here. There is always the chance that the staff will give their own biological children benefits on behalf of the other children, but I do not have any evidence to support or deny this. However, there is also a chance that there will be less unfair treatment or abuse from other staff members in a situation like this, as the presence of the biological parents will act as a preventive mechanism.

The children only spoke positively about the staff and the volunteers. The volunteers and students stay for a minimum of three months and nine months at the most, which gives the children considerable more time to develop a relationship than at Osu where they stay for an average of one month. There is always the chance that the children wanted to portray a positive image of the home, but I find this unlikely since the children at Ahotokurom were very extrovert and open in their

statements. As mentioned in chapter 3, the children at Ahotokurom were the most relaxed, open and outgoing during the interviews of all the children in the study.

The relationship between the children

The children living at Ahotokurom seemed to get along well. This was confirmed by interviews and when asked about this issue, one volunteer answered;

“[they get along] like brothers and sisters. You'll have the fights, but you have the good times as well. [...] It's the same as any family” (Volunteer, Ahotokurom).

Statements from the children also confirmed this impression;

“We are good friends, but sometimes not that good. Sometimes it will be a bit trouble with some of us [...] We love each other” (Boy 19, Ahotokurom).

“Sometimes we fight about little things, like choosing a DVD, but we get over it” (Girl 12, Ahotokurom).

The children and the staff described a nuanced image of the relationship between the children, as they viewed it as basically good, but with occasional problems and conflicts, as would be the case in most sibling-relationships.

The children's feeling of belonging towards the home.

The children talked about the home as something that would always be a part of their life. Even when they talked about moving out and making a life of their own, they talked about the home as a “family” they always could return to;

““It has been very good growing up here. [...] Here (the home) can not be separated from my future” (Boy 22, Ahotokurom).

The image drawn was of Ahotokurom as a *base* from which the children go out and explore the world. Thus, when the children move out, the home will always be there as a safety-net which the children can go to for support. Some children also talked about how they wanted to get their education and come back and work for Ahotokurom, so they could give something back.

Lighthouse Children's Home

The children and the staff

Like at Osu, some children divided the staff into the ones they liked and the ones they did not like as much. The main reason was that some staff members would shout at them for misbehaving or not doing their chores. All the children said that they liked the volunteers. One boy (age 16) pointed out

that he liked the volunteers because they were so hard working and they liked playing with the children. No one mentioned unfair treatment by the staff or being ignored, in contrast to the children at Osu. This could be an attempt to portray a more positive image of the home than what really is the case. This can not be denied or confirmed, as I do not have enough data to do so.

The relationship between the children

All the children were somewhat reluctant to talk about this topic, so the information here is very limited. However, one girl (age 16) said that the children; “*kind of get along*”, but she did not like that the boys sometimes would beat the girls. Quarrels where also quite common, but even though the relationship between the children were not described in very warm an loving terms, it was pointed out that they get along better with each other than with other children from the neighbourhood.

The children's feeling of belonging towards the home.

Lighthouse is a fairly new Children’s Home and the fact that some children may only have lived there for a short time could have an effect on their feeling of belonging towards the home. This was also a topic that the children were not eager to talk about. However, one boy (age 16) said that he preferred living at Lighthouse, as compared to living with his family. He pointed out that life at the home was easier in that the children got what they needed for survival, such as food, clothes, education and health care.

Comparison

The children and the staff

The children at Ahotokurom were the ones that expressed having the best relationship with the staff and Osu was without a doubt the home with the worst child-staff relationship. The main issues at Osu were concerned with unfair treatment, being ignored, abuse (verbal and physical) and a prevailing negative attitude towards the children. The unequal treatment can contribute to envy and quarrels between the children, diminishing aspects of the QoL of those that feel unfairly treated. In a situation where many children feel they live in an unsafe and unstable environment, close and loving bonds between the children and the staff are more likely to be the exception, than the rule. For many children this means that once they leave the home, they might not have any adults to turn to for support. Even though the children expressed that they liked some staff members, the child-staff relationship was for the most part referred to in negative terms. This creates an environment where the children feel unsafe, unloved and unwanted, which can lead to nervousness, anxiety, fear,

depression and a low self-esteem.

As already mentioned, Ahotokurom where undoubtedly the home with the best child-staff relationship. The children used very positive terms when describing the staff and drew the image of an environment where they felt safe, well taken care of and where they truly believed that the staff had their best interest in mind. The bonds seemed to be much stronger, than as compared to Osu and also Lighthouse. Hence, the Children's Homes and its staff create structures that impact aspects of the children's QoL in a very fundamental way.

The relationship between the children

The children at Ahotokurom where the ones with the best child-child relationship. The children did not only speak positively about the other children, as they emphasised how they would quarrel sometimes, but in general they got along very well. This feeling of having a basically good relationship to the other children will affect aspects of their QoL in a very positive way. It gives the children a broad social network that will affect aspects of their QoL in the present, but it could also prove valuable later in adult life. Having a good relationship with the ones they live with is important when it comes to the feeling of being safe within the home and as already discussed, lack of safety was not an issue at Ahotokurom. In such an environment it is easier to relax, enjoy life and to develop as a human being.

At Osu and Lighthouse the situation was different, but Osu stood out as being the worst, as the children here complained about frequent fights and quarrels among the children. The younger children expressed fear and anger towards the oldest boys because they would beat them. Living in a situation where they live in fear of the ones they live with is detrimental to aspects of the children's QoL. The situation is made worse by the fact that the children do not trust the staff to protect them in for instance a fight or in situation where they are bullied or unfairly treated. In this respect, the structures of the homes are failing the children they are supposed to protect and contribute to make already vulnerable children even more vulnerable.

The children's feeling of belonging towards the home

Ahotokurom and Osu ends on opposite sides of the scale here, as the children at Ahotokurom has a strong feeling of belonging, while many children at Osu wanted to leave because they did not like living there. Having a fundamental feeling of belonging towards the home is positive for aspects of the QoL as it provides the children with a safe “base” from which they can explore the world. It will

provide them with a sense of identity that children raised in residential care facilities often do not have due to the lack of family contact. If they feel that the home is a safe place to return to, that will always be there to support them, their courage when going out in the world, both as children and as adults will increase and their levels of achievements can increase. For children raised in residential care facilities, having a safe base to return to in difficult times is not a given. Often they do not have families to rely on and when leaving care, they are virtually all alone. This along with the fact that the majority of these children have difficulties adjusting to the adult life, as they often lack the skills to cope properly in the community, can make their adult lives very difficult and troubled.

5.3 Summary

This chapter has analysed and explained how collective resources at the three Children's Homes affects aspects of the children's QoL. Many similarities and dissimilarities seem to be connected to type of ownership of the homes (governmental or private). The material and social structures and supplies available at Ahotokurom and Lighthouse (both private) are quite similar and the outcome these have on aspects of the children's QoL are also very similar. The general "rule" seems to be that Osu occupies the bottom end of the scale and Ahotokurom and Lighthouse are at the other end. The material and social structures and supplies at Osu contributes to reinforce the vulnerability of already vulnerable children. Poor access to resources and fulfilment of basic needs work to create a negative domino effect where poorly met needs negatively affect other needs. At Osu poor quality and quantity of *food* affects the children's health negatively, which again will affect their performance and participation in various situations such as education and social situations, with implications for job opportunities.

The material structures are important as they set some conditions that affect various aspects of the children's QoL. This is very apparent at Osu where inadequate *shelter* and overcrowding negatively affects the children's health and their feeling of safety. It is also likely that the children's mental health can be negatively affected by overcrowded living conditions and deprived and neglected physical surroundings. Shelter as a resource has direct connections to the economical situation at the homes and the gatekeeping. Ahotokurom and Lighthouse (private) decide the number of children themselves, something that Osu (governmental) can not. The result is that Osu now house over twice as many children as originally intended, which puts an enormous strain on the home's finances, the material and social structures and supplies.

When it comes to *health*, Osu is the only home in the study where the material structures contribute

to create harmful living conditions for the children. The advantage of having immediate access to a health station does not compensate for the health problems caused by the poor material structures of the home, such as poor food and shelter. Ahotokurom and Lighthouse are the only homes that offer the children *education* beyond Senior Secondary School. These homes also made a point of checking the quality of education the various schools offer and to provide the children with more help with homework.

The children's feeling of *safety* differed between the three Children's Homes. At Ahotokurom lack of safety was not an issue, but at Lighthouse and Osu the children struggled with a lack of safety, although in different ways. At Lighthouse this was connected to elements *outside* the home, while at Osu the lack of safety was connected to elements *inside* the home. This difference is important when considering aspects of the children's QoL. At Osu the lack of safety will have a greater negative impact on aspects of the QoL as it is directly connected to the child-child and staff-child relationships. Many children at Osu lack a fundamental trust in the other children and their caretakers and this can result in nervousness, fear and anxiety and it will also affect the children's feeling of love and belonging towards the home.

The children's amount of *leisure* time and how they spent it was very similar at the three Children's Homes. At Osu and Lighthouse there was however a gender based difference in the radius of action outside the homes, as the girls had a more restricted radius of action than boys. This was not a result of restrictions set by the homes, but rather a result of fear of threatening elements on the "outside" that made the girls restrict their own radius of action. This has a negative impact on the girls chances to develop broad social networks and to become familiar with their local community. Ahotokurom enjoys a better location, a peri-urban area of their own choosing, and a very good and active relationship with the local community.

When it comes to the children's feeling of *love and belonging*, Osu stands out in a negative way. Here, the child-child and child-staff relationships were almost always referred to in negative terms. Ahotokurom was the only home that functioned as a safe base for the children both living at the home and those that had moved out. At Osu, the children are on their own ones they move out as many do not have families to rely on. Since Lighthouse is a relatively new Children's Home there is still some insecurity as to what role the home will have in the lives of the adult children. Thus, the social structures at Ahotokurom is the only ones that continue to play an active and supporting role in the children's adult life.

CHAPTER 6:

INDIVIDUAL RESOURCES

This chapter is concerned with the material and social structures and supplies that can be identified as individual resources. As discussed in chapter 5 the children are most often treated as a group and thus, most resources are collective. Collective resources are more easily recognised compared to the individual resources which are more difficult to identify. When so many children live in the same institution, there is a chance that some sort of “pecking order” exists, especially in Children's Homes where the adult to child ratio is poor and the staff do not have the time or energy to deal with or even identify these problems. To uncover such hidden hierarchies a much deeper and time-consuming research is needed than what has been possible in this study. This is not a psychological in-depth study and was never intended to be so. Nonetheless it was possible to identify some individual resources that contribute to differences between the children; shelter, clothing, personal possessions, education and social networks.

6.1 Material resources

6.1.1 Shelter – the children's personal place

The structural facilities of the Children's Homes as a whole is the same for all children and is thus a collective resource, but there exists great differences when it comes to the bedrooms, *the children's personal place*. There were in some cases indications of inequality based on a hidden social hierarchy, mainly based on age.

Osu Children's Home

There was a big difference between the children concerning their *personal place*; their bedrooms. There was a marked difference between the three oldest boys and the younger ones. The three oldest boys at the Boys House shared one bedroom and they all had their own beds. This bedroom was the best furnished of the four bedrooms I was given access to; there was a sofa, a table and a stereo. There were also personal items such as clothes, shoes, books and magazines in this room. In contrast to this the neighbouring bedroom, of approximately the same size as the first one, was shared by 17 boys from the age of 6 to 16 years old. They shared five beds and those that did not have a bed slept on mattresses on the floor. All the children in this room had their own designated place for sleeping. Meaning that some of the children always had access to a bed, while others always had to sleep on the floor. The beds were the only furniture and there was no bed sheets. I

did not see any personal items in this room. None of the bedrooms had fans or air conditioning. For the children sleeping in the most overcrowded bedrooms this led to lack of oxygen during the night and they complained about frequent headaches in the mornings. Even the oldest boys who are only three to a bedroom expressed concern on behalf of the smaller children living in the most overcrowded rooms;

“The rooms here are a big mistake [...] because you see the second bedroom, they are too many over there. They are about 17 in that small room and there is no fan [...] they don’t feel well because there is no air there [...] It’s not good!” (Boy 17, Osu Children’s Home).

This statement clearly indicates that the children themselves are not happy with the living arrangements and that the overcrowding in some bedrooms is a constant source for worry and frustration.

The fact that the children would steal from each other was by many children considered a big problem in the everyday life;

“I don’t like people (the other children) sometimes. They steal things” (Boy 14, Osu Children’s Home).

Stealing was not considered a problem by the oldest boys. This could be because of the other children’s fear of the oldest boys.

According to interviews with the manager and the additional staff, all the children got to choose their own room mates. As mentioned in Chapter 5, observations and interviews with the children contradict this information. With the exception of the three oldest boys, all the children expressed their dislike over the current living arrangements. However, the claims from the manager and the staff concerning the choice of room mates may have some truth to it when it comes to the three oldest boys. A system of hierarchy based on age may have affected the dividing of the bedrooms, as the staff expressed an “understanding” that the oldest children needed more space than the younger ones. It is therefore possible that the three oldest boys were presented with a real choice and that the rest of the boys were divided more or less randomly in the remaining bedrooms. It is most unlikely that 17 children actually wanted to share one small bedroom. The staff expressed full awareness of the problems created by the existing divide, but seemed to be unwilling or unable to make any changes that would benefit the youngest children.

As mentioned in Chapter 5, I was only given access to the Boys House and thus I do not have much information about the girl’s condition of living when it comes to their personal place. The Boys

House and the Girls House are two separate, but identical buildings, and hence some broad conclusions can still be drawn. The Girls House accommodates 27 children, as compared to the Boys House which house 44 children. Since the two buildings are totally identical this means that the girls have much more space at their disposal as they are fewer children to the same number of bedrooms and thus enjoy more privacy.

Ahotokurom

As already discussed in chapter 5, at Ahotokurom the children were usually two or three to a bedroom, the quality of the bedrooms were the same (quite good) and the amount of place at their disposal were evenly distributed. There did not seem to exist any difference between the children regarding age and gender in the quality of the bedrooms, the room size or the number of room mates.

Lighthouse Children's Home

The 28 children are divided between the two houses. In the main house the six girls share one bedroom at the end of the house with their own shower and toilet. The boys share two bedrooms with access to their own bathroom and shower. The last bedroom is reserved for 2 volunteers. In the second house the manager and his wife lives together with 9 of the boys. In the second house there are three bedrooms with three boys each. These boys all share one shower and one toilet. None of the children complained about room size, room mates or difficulties with the living arrangements. As mentioned in Chapter 5, there is no difference in the quality between the different bedrooms, and the size of the rooms is adjusted to the number of children living there. Hence, the children enjoy quite even amount of place and quality of bedrooms. There could of course be a slight difference in the feeling of privacy where those that are only three to a room enjoy more privacy than those that are six or seven to a room.

Comparison

The general quality of all the bedrooms at Osu were poor, so the greatest difference was in terms of the amount of space the children had to their disposal and how well the bedrooms were furnished and personalized. These are factors that clearly affect aspects of the children's QoL in a number of ways. The three oldest boys undoubtedly enjoyed more privacy and a better feeling of safety. It is also very likely that the oldest boys enjoys better sleep and as compared to the children living in the most overcrowded rooms, they enjoy a better quality of air during the night and hence to not have to struggle with constant headaches because of lack of oxygen. The constant headaches some children

experience will affect the quality of their every day life and can also affect their performance in school. In contrast to this, the overcrowding in some of the other bedrooms means that the children lose their feeling of privacy and safety.

When sharing a small bedroom with as many as 17 others the children, small issues can suddenly become huge. The children here clearly do not have a place to call their own and there is no place to retire to for rest or simply be alone. It is also possible that few chances of being alone are mentally tiring for the children. The level of noise and the disturbances in these overcrowded bedrooms will be very high and the chances of a good nights sleep diminish. There is also the chance that these children will more often get sick as the acute living conditions will cause one sick child to infect the others. The question of what happens in these rooms when the lights are out and no adults are watching remains unanswered, but there is the chance that some children will become victim of a hidden social hierarchy and that they experience picking and bullying.

Expectations and basis for comparisons are important factors when assessing aspects of children's QoL. At Osu, the children living in the most overcrowded rooms are every day faced with the fact that the three oldest boys have far more privacy and personal place at their disposal than the rest of the boys. This will undoubtedly influence how the children perceive their own situation in terms of their personal place. The majority of the boys at Osu can thus be left with a very negative image of their living conditions, as the differences are so easy to see. The three oldest boys might feel that their living conditions are quite good, as compared to the rest of the boys. At the other homes the differences between the children concerning their personal place are not so apparent. At Lighthouse there exist differences in the number of children sharing bedrooms, but these are somewhat compensated for by other benefits, such as the six girls that have the biggest bedroom and also their own bathroom. At Ahotokurom the children enjoyed the most privacy and seemed to be most content with their living arrangement. Hence, the expectations and basis for comparisons for the children at Ahotokurom and Lighthouse is not likely to impact their own perceptions of their QoL in such a negative way, as the children are treated quite equally in terms of personal place.

The existing divide of personal place was supported by each of the three homes and the children's caretakers, hence the home supports the existence of inequality or equality among the children concerning personal place.

6.1.2 Clothing

At Osu there were some differences between the younger children and the three oldest boys. The oldest boys had clothes and shoes that were noticeably newer than the others. Information gathered indicated that these were the only children that had their own personal clothes. The oldest boy (age 29) works and earns his own money and is in a position to buy for himself. The other two boys are not engaged in any work, as one is still in school and the other has unsuccessfully been looking for work. I do not have any information that indicates that they earn any money as to be able to buy clothes for themselves. I saw no difference based on gender. At Ahotokurom and Lighthouse all the children had clothes of good quality and I did not see any difference in the quality of clothes, based on age nor gender. At both homes the children have their own personal clothes.

Comparison

The youngest children may not put so much emphasis on the types of clothes they wear and thus may not affect aspects of their QoL in any significant degree as long as the clothes are whole and clean. The importance of clothes as a status symbol typically increases with age. So, there is likely to be a marked difference between the youngest children and the older ones when it comes to how much emphasis they put on the types of clothes they wear. In other words, the type of clothes is likely to have a much bigger impact on the older children's QoL than it has on the younger ones.

Osu was the only home where the children do not have their own clothes, with the exception of the oldest boys. The fact that a few children have much newer clothes than the rest can impact how the children with old, worn out clothes view their QoL. They could get a feeling of discontent with their own situation and vice versa, the children with new clothes could get a more positive view of their situation. Ahotokurom and Lighthouse were similar in quality of the clothes and there did not seem to be any difference between the children, hence clothing is likely not to impact aspects of their QoL in any negative way.

6.1.3 Personal possessions

Osu Children's Home

I received contradicting information about whether the children had personal possessions or not, as some staff members said no, others said yes. The children claimed that they do have personal possessions, but they do not have much personal possessions, only a few small items, like pens, school books and so on. The children have access to toys, but these are owned by the home and shared by all the children. There was a difference between the three oldest boys and the younger

ones. The bedroom of the oldest boys was better furnished and had a stereo. There were new shoes and new clothes in the room. The oldest boys were a bit better dressed than the rest of the boys. This could be because the oldest boy (27) was working and earning money. Due to restrictions set by the manager I was not able to do observations at the Girls House, hence the information here is very limited and I am unable to draw any conclusions about gender-differences here.

Ahotokurom

All the children had their own personal things, like clothes, books, shoes, toys and so on. I saw no difference between based on age or gender. Some children are given a plot of land by the home when they move out. This practice is first and foremost for the children that are unable to get other types of work due to illnesses or disabilities. Most of the children that have been given land have serious leprosy and farming land is often the only way for them to support themselves.

Lighthouse Children's Home

The children have their own toys, clothes, books and so on. They are given lunch money for school, but the children can spend this money however they chose. If they want to save the money and spend it on something else, they are free to do so. Lighthouse also encourages children to have hobbies, as one boy was allowed to have his own pet pigeons. I saw no difference between older/younger and boys/girls.

Comparison

At Ahotokurom and Lighthouse the children have their own personal items. Personal possessions is an allocative resource that can affect the children's quality of life, as this can provide them with valuable social training for the adult life, as they learn to take responsibility for their possessions and to respect others. It is likely that respect for the property of others is something the children learn at both Ahotokurom and Lighthouse, as stealing was not an issue here. This will thus give the children valuable social knowledge to bring into the adult life.

6.2 Non-material resources

6.2.1 Education

The children have different starting points in terms of level of schooling when they arrive at the Homes. The children that have the level of schooling that is intended for their age group clearly has a huge advantage compared to the ones that has little or no schooling at all. Older children with little or no schooling have a lot more “catching up” to do and this becomes harder the older they

are. The older the children are, the harder it is to motivate them to study and to recognize to value of education and it demands dedication and resources from the homes to even out these differences. Children that arrive at the Homes early in life have an advantage because they get access to education they otherwise may not have had access to.

Osu Children's Home

At Osu there are some differences in the kind of education the children are given access to. There are some children that falls outside this arrangement, some for the positive and some for the negative. One small group of children that benefits from not being a part of the ordinary educational arrangement at the home are those that have “sponsors”. A “sponsors” is a private person (usually non-Ghanaian) who is willing to pay for one or more of the children’s education. The children that have sponsors usually attend private schools, which in Ghana often mean better education. Some children are chosen by the sponsors themselves and some sponsors leave it up to the home to choose the children that will be sponsored;

“If someone comes and tells me that: “I will pay for six children to go to this school”, then I will have to look for six (children) that are good [...] It depends on the children’s performance. Some of the schools will not accept a child that cannot perform. So, when it comes to that we take them for interviews in the schools and we pick the best” (Manager, Osu Children’s Home).

So, what kind of education the children receive depends on “luck”; if they are fortunate enough to be chosen by a “sponsor”, and on their individual intellectual abilities; if they perform well enough to be accepted to a private school. What kind of school the sponsored children will attend depends on the terms set by the sponsor; if the sponsor is only willing to pay for one specific school and how much money they give;

“[...] if someone tells me that they can pay 700.000 cedi for a child every semester to go to school, then I would have to look for the school that takes 700.000 cedi. Some take 2 million, some take 800.000 cedi. It depends” (Manager, Osu Children’s Home).

Having a “sponsor” does not however ensure that the child in question makes good use of this offer. One boy (age 17) had a private sponsor and attended a private school, but according to interviews with additional staff members and documents from the home, he performed rather poor in school. He was not at all interested in studying, skipped classes a lot and did not get accepted in Junior Secondary School because of weak results. This makes it very clear that access to proper education is in itself not enough if the children are to truly benefit from the education offered.

According to the manager, the home strives to give every child the same opportunities when it comes to education, but this is a challenge. I was given contradictory information about whether all the children of school-age attended school. In interviews with the additional staff members I was told that all the children of school-age attended school. However, when talking to the manager I was told a different story;

“[...] sometimes a child comes and he is already 10 or 12 and has never been to school. What do you do? We want them to have some formal education, but we cannot take them to school because here (in Ghana) you have to have some pre-school knowledge before you can go to school”, (Manager, Osu Children’s Home).

This statement suggests that there are children at Osu of school-age that does not attend school and that this depends on their individual level of schooling before arriving at the home. I was unable to attain information about the actual number of children this concern, but the manager claimed that this was a relatively new problem for the home, increasing in scope only for the last few years. It requires a lot of dedication and resources from the home to prepare these children for school. In most cases the children concerned are not even interested in going to school. When this field work was conducted, Osu was planning to start a special class to give the children over school age with no educational training upon arrival at the home, the pre-school knowledge that they required. However, I do not have information to confirm or deny if this has been achieved.

As already mentioned, the children have to rely on volunteers to help them with their homework. The volunteers are at the home only a limited amount of time, ranging from a few weeks to 6 months. This means that the volunteers do not have a lot of time to get to know the various children and to become familiar with their strengths and weaknesses connected to their education. When a new volunteers arrives it could be argued that the children are “back to scratch” as it would take time for the new volunteers to know their educational history, their strengths and weaknesses. This implies that there is little stability in the kind of help the children receive. It is also likely that the children that are interested in and motivated for school as well as those with the more extrovert/outgoing personalities receive more help, as it would be difficult for the volunteers in such a short time-span to catch the children that do not actively seek their help and guidance.

At Osu there was one boy (age 27) that still lived at the home due to a disability. He had learned the skill of sewing dresses which he sold on the street outside the home. He was the only example of children learning skills here. The fact that he had the chance of earning his own money (I was unable to determine if he was allowed to keep all the money he makes or if he has to give some to

the home) could be a source of envy and conflicts, as having an income provides freedom to buy various items. These potential conflicts could reduce the joy of practising a skill and earning money, even though skills in itself is a positive authoritative resource that can improve aspects of the QoL.

Ahotokurom

Ahotokurom sends “their” children to both private and public schools in the neighbourhood. Some children are going to their public local village schools because these children need the support of the village around them, but that does not need the “extra” they would get in a private school.

“[...] I’ve put others (children) into the local schools. Kids who I feel need to feel that the village is around them. Kids who are bright, that would not need the extra you get in private schools” (Manager, Ahotokurom).

When choosing a school for the children, Ahotokurom takes into consideration not only the individual abilities of a child, but also the importance of the child’s existing social network. Since the home offers support for higher education, it could be argued that very intelligent children could miss out on such an opportunity because public schools in Ghana have a poor reputation when it comes to the quality of the education. The manager at Ahotokurom justified the decision of sending some children to public schools by saying that the quality of the local schools had improved immensely the last few years;

“I have faith in the local government school up the road. The last four years I have had faith in the school. Before that: NO! That is why I had to go looking for schools outside (private schools)” (Manager, Ahotokurom).

Unlike at Osu, the problem of older children arriving at the home with little or no education was not mentioned as a problem. Interviews with the manager, the additional staff and the children confirmed that all the children of school-age attended school.

As mentioned, the home provides higher education for the children that want this opportunity, even when this means that they have to move out of the home. When this fieldwork was conducted, there was one boy (age 22) attending Cape Coast University. He had moved out and lived at the University Campus. He received financial support for his education and would come back to the home on weekends and holidays. Over the years, the home has provided higher education for many of “their” children, among others a senior nursing officer. The ultimate goal is to make the children independent;

“We have to make them (the children) independent” (Manager, Ahotokurom talking about the

importance of higher education).

The kind of higher education the children are offered is based on their intellectual abilities and their interests, and also on the homes financial situation.

Ahotokurom emphasises the importance of education, but does not see skills as any less important than having a higher education. What the children want from their lives is more important than having a high education. All the children are given access to higher education if they want to. This focus on the children's skills and wants is perhaps a result of the fact that many children have chronic illnesses or disabilities that prevents them from taking higher education.

Lighthouse Children's Home

At Lighthouse the children are enrolled in both private and public schools. The home prefers private schools, but a few children attend public schools because the home did not want to pull them out of the schools they knew and where they had their friends;

“Two or three children that had been in a school before they came in and instead of pulling them out and starting them in a different school, we just left them in the school they where at” (Manager, Lighthouse Children’s Home).

Like at Ahotokurom, Lighthouse in some cases takes the importance of the children’s existing social network into consideration.

“[...] Some of the children prefer not to be all in the same school [...] they feel more that they can be as normal as the other children out there, you know” (Manager, Lighthouse Children’s Home).

The manager also felt that it would be stigmatising for the children to all attend the same school, that they would be viewed as one homogeneous group, rather than the individual personalities they actually are.

Like at Osu, some of the children have different starting points when it comes to level of schooling. This was not however pointed out as a big problem. Nonetheless, it requires a lot of resources from the home to prepare these children for education and it is likely that these children will stay at the home longer than “normal”;

“We have one boy who’s 19 and he’s only in grade 8. So, he’s got a number of years left in school and so if we make it that they have to get out at a certain age then it’s not going to benefit them if they haven’t finished (school) and they do not have any way of providing for themselves ” (Manager, Lighthouse Children’s Home).

There was one boy (age 19) who attended the University of Cape Coast. The home has been around for a few years and no other children were old enough to attend higher education. The home did not have a plan as how to deal with more of the children getting older and wanting to attend higher education, but the home stresses the importance of education;

“Before we sent them out we want to have them equipped with education and maybe some skills so that they can provide for themselves” (Manager, Lighthouse Children’s Home).

The children’s chances of attending higher education depend on their own performances and the homes financial situation.

As Lighthouse is a relatively new children's home and the majority of the children living there are quite young, they have not yet decided how to deal with the issue of skills. However, the manager was positive to the idea of letting the children “follow their dreams” so to speak, if the homes finances and the abilities of the children allowed that to happen.

Comparison

Education functions as a “sorting-mechanism” at Osu, dividing the children into three groups: those that attend the public schools, children with “sponsors” and children that are unable to attend school because of their low or non-existing level of education before arriving at the home. The latter group of children have a huge disadvantage as the home has little or no resources to help them catch up with their peers in terms of educational level. The vast majority of the staff has low education and their general motivation for helping the children with their education is also low. Children with sponsors may have an advantage because the quality of the education in private schools tends to be better. This does not automatically mean that the children make good use of this resource. Being chosen to receive a “sponsorship” would most likely mean that the sponsored child will be taken out of his/her current school and this could bring with it a loss of some of the child’s established social network; friends and teachers. There is also an insecurity connected to these children’s education because their education at the private schools depends on the continued financial support from the sponsors. If the sponsor withdraws the financial support, the children will be forced to leave their current schools and go back to public school.

When looking solely at education as a resource and taking into account that most children are sent to the homes by their poor families which most likely are unable to send them to school, one can speculate if the children that has arrived at the homes at a young age have an advantage, as they are able to follow the standard progress of the basic education.

The children at Ahotokurom and Lighthouse are in a very favourable position in terms of education, as they receive more help and the homes strives to ensure that the children receive a relatively even level of quality of the education. Hence, the structures as determined by the homes create inequalities when it comes to education as an authoritative resource at Osu, as compared to Ahotokurom and Lighthouse where they strive to achieve equality. At Osu education as a sorting mechanism can cause envy among the children and be a source of conflict, diminishing aspects of the QoL. Access to proper education can affect future job opportunities, provide broader networks and positively affect the children's self-esteem.

There was no gender-based difference in the access to primary education, but it is noticeable that only boys attended higher education (Ahotokurom and Lighthouse). This does not necessarily reflect the views of the various homes, but could be the result of a cultural phenomenon as the percentage of girls is much lower than that of boys in higher education in Ghana.

Both Osu and Ahotokurom have children that have learned special *skills* that can improve aspects of their QoL positively, although at Osu this might be seen as the exception rather than the rule. Ahotokurom takes on a more active role when it comes to providing the children the opportunities to learn different skills. As already mentioned, having a skill can lead to having an income which will provide freedom to buy items, such as clothes, food, a home and so on. This can again lead to a better aspects of QoL. Having a skill can also have a positive effect on the self-esteem and self-realization.

6.2.2 Social networks

Osu Children's Home

Friends

Most of the children at Osu has been there for most of their childhood and are most likely to live there until they are 18 years old. So, many of the children have more or less grown up together and thus one should think that they have had the opportunity to form strong bonds. The manager at Osu expressed that the home wants the children to form strong and lasting bonds;

“We want them to see themselves as siblings” (Manager, Osu Children's Home).

Interviews with the children indicate that the home has not been entirely successful with this. Even though all the children said that they have friends at the home, everyone also mentioned conflicts and problems among the children living at Osu. It was very difficult to get the children to specify

what these conflicts and problems were, but two issues were repeatedly brought up; stealing and fighting. Fighting seemed mainly to be a problem among the boys and as mentioned earlier, under the discussion of *the children's personal place*, the younger boys expressed dislike and fear of the oldest boys as they would sometimes be violent against the smaller ones. One boy (age 14) said that he did not like the other boys at all. He did not like the fact that some children would steal from the others and that the boys would fight so much. He especially mentioned the oldest boys in regards to fighting. He would like to see the oldest boys move out of the home;
“*Some of them like fighting with us*” (Boy 14, Osu Children's Home).

Another statement also illustrates the lack of close bonds between the children at Osu;
“*They are all bad*” (Girl 13, Osu Children's Home, when asked how she felt about the other children living at Osu. She refused to elaborate any more on this statement).

In contrast to these two last statements there was one girl (age 14) that said that she liked all the other children. This contrasting experience between the children could be a result of a social hidden hierarchy where the children that claimed they did not like any of the others, are at the bottom of the hierarchy and have been exposed to picking, bullying and abuse or it could be a result of fear of the consequences of saying something bad about the others.

According to the manager the home did not restrict contact with children living outside the home. However, it is interesting to note that only boys said that they had friends outside the home. The boys had friends that would visit them at the home sometimes and they could go out to meet them. None of the girls had friends outside the home.

Relatives

Osu does not actively encourage or work to maintain ties between the families and the children. In cooperation with the police and the social services, Osu tries to locate the families, but first and foremost for the sake of bringing the children back to their families and out of the home. Some children do not have any relatives or it has proven impossible to locate them. In some cases, the children do not want to have any contact with their families and conceal information of their whereabouts. This may be because the children have been mistreated, neglected and/or abused and are afraid they will be sent back. One such example is a girl (age 13) that was living with an aunt before she arrived at Osu. She does not want to go back because she was mistreated and refuses to give any information about her aunt. She also conceals information about the rest of her family for the same reason.

Very few relatives come to visit their children. The manager only knew about one father that would come to see his children.

“The father, he visits. It’s good. We like it that he is able to” (Manager, Osu Children's Home).

Because he is very poor the manager would give him money for transport when he visits his children. The manager thought poverty to be an issue when relatives did not visit their children, as many would not be able to afford the transportation costs and the fact that they had to spend one day not earning money.

The local community

The main social arena for the children at Osu participating in the local community where the schools, but some boys said they had friends they would visit outside the home. The girls did not go of the home by themselves. This was based on fear of being assaulted. Thus, there is a difference in how boys and girls are able to participate in the local community.

Ahotokurom

Friends

The children living at Ahotokurom seemed to get along well. This was confirmed by interviews and when asked about this issue, one volunteers answered;

“[they get along] like brothers and sisters. You’ll have the fights, but you have the good times as well. [...] It’s the same as any family” (Volunteer, Ahotokurom).

Statements from the children also confirmed this impression;

“We are good friends, but sometimes not that good. Sometimes it will be a bit trouble with some of us [...] We love each other” (Boy 19, Ahotokurom).

“Sometimes we fight about little things, like choosing a DVD, but we get over it” (Girl 12, Ahotokurom).

The statements made by the children confirm the statement from the volunteer, in that the children describe the relationship between the children as basically good, but with the occasional conflicts.

Ahotokurom supports friendships extending outside the boundaries of the home. The home had at one point problems with neighbourhood children stealing things, so there have been implemented some restrictions on whom they can bring to the home. They can have visitors, but they can not let “anyone” into the house. All the children interviewed said that they had friends outside the home. The children that are old enough to attend school are naturally the ones with the most friends outside the home;

“If they go to school, they have a lot of friends” (Boy 19, Ahotokurom).

Children from the neighbourhood often come to visit and play;

“[...] almost always they (children from the neighbourhood) want to come here (the home)”,

(Boy 22, Ahotokurom).

“Sometimes we have friendly matches. We have games that involves people from other villages”

(Boy 22, Ahotokurom).

“Sometimes they come here to play with us and they go back in the evening” (Girl 14,

Ahotokurom).

Neighbourhood children will come to Ahotokurom to play soccer, play and to just hang out. The manager pointed out that Ghanaian children do not usually go in and out of each others houses like that, that is a Western thing to do. Ghanaian children usually have to work when they are not in school and naturally do not have as much time for play as the children at Ahotokurom.

The children have a good relationship with children in the neighbourhood. This can partly be explained with the fact that many children at Ahotokurom have their biological families in the local villages and that they have access to a lot of things that neighbouring children do not, like TV and a DVD-player.

“[...] almost always they want to come here and play with us” (Boy 22, Ahotokurom).

There was no gender based difference when it comes to friends outside the home.

Relatives

“It is important for the children to maintain some contact with their families even if it is unlikely that they will ever be able to live at home” (Ahotokurom webpage, 16.10.2007).

From this statement it is clear that Ahotokurom sees the contact with the biological family as an important resource and as a valuable part of the children’s lives. Nothing can truly replace the children’s families;

“[...] it is no use isolating them from their families. It's no use because their families are their richness, their wealth. They may not be financially secure, they may be terribly poor. Even if a child has a parent with or without limitations [...] the bond is there. I have never known it not to be there. Even if they are being cruelly treated, and we have had some horrendous cases here; mentally sick parents doing horrendous things to their kids [...] but the bond is there” (Manager, Ahotokurom).

Ahotokurom works actively to maintain the contact between the children and their families.

Whenever it is possible the home tries to ensure that the children have frequent contact with their

relatives and that they are able to spend holidays with their families, if they want to. Some parents also work at the home.

The local community

Most children at Ahotokurom have a natural bond to the local community as many of them have parents from Enyindakurom, the village for leprosy sufferers, or from other neighbouring villages. One boy (age 17) pointed to the fact that his family comes from the neighbouring village and that he for that reason is good friends with the children in that village. The fact that Ahotokurom is only one part of the Daughters of Mary & Joseph (DMJ) Sister's work in the local community, this impacts how the local community views the children. In addition to Ahotokurom the DMJ runs a medical centre, a nursing home for the elderly, a nursery and infant school and a workshop. Ahotokurom also supports disabled or disadvantaged children in their local community and provide outreach programs for parents. The DMJ works in many different aspects in the local community and this reflects positively on the children living in the home.

Lighthouse Children's Home

Friends

As discussed in chapter 5, the children were reluctant to talk about this topic. None of the children called any of the others their friends. The children seemed to get along well, but my information on this is too limited due to the lack of openness from the children on this issue, to draw any conclusions on this.

Lighthouse encourages the children to have friends outside the home, however the home does not want the children to copy the “*bad life of the outside children*”, (staff, Lighthouse). In the past the home had problems with some of the boys making friends with “bad boys”, so now they use the JAM House to construct a positive setting for the children making friends.

The children revealed that even though many children have friends in the neighbourhood and the fact that the home gives both money and food to neighbouring children, all is not just positive, as the children at Lighthouse are often teased;

“We get food to eat, so they are jealous about that. So, they insult us that we are orphans. [...] They insult us every day” (Girl 16, Lighthouse).

The home put a stop to neighbourhood children visiting, because there was a big problem with stealing. It was decided that the JAM-house was a more appropriate arena for meeting other children.

Relatives

Lighthouse does not object to contact between parents and children, but sees this as very difficult. The home does not stand in the way of relatives visiting their children, but does not play an active role in making this happen either. According to the home, most relatives do not show any interest in visiting the children and thus, the children rarely have relatives visiting.

The local community

The main social arena for the children to meet local children is school and the JAM-House. Like at Osu, there is a gender based difference in terms of the children's radius of action in the local community, as the girls do not want to go outside. Lighthouse is considered a source of wealth by the local community;

“Every day children from the neighbourhood come to us after meals for leftover food. I quickly noticed how our children are to help them, sometimes even giving a little of their own money”, (staff, Lighthouse, newsletter).

“After supper at the main house all the remaining food is scraped together and divided into small plastic bags [...] Outside the gate is a cluster of usually six boys waiting for what is considered their evening meal”, (staff, Lighthouse, newsletter).

The fact that the home is considered to be wealthier than the neighbourhood can cause envy and conflicts between the local children and the children from Lighthouse.

Comparison

Friends

All the children in this study claimed to have friends inside the homes. However, at Osu the negative aspects with the relationship between the children were emphasised, such as fighting, stealing and quarrelling. At Osu and Lighthouse there was a gender based difference when it comes to friends outside the home. The girls are restricted in their level of interaction with local children outside the school setting as they do not want to go outside the home. At Ahotokurom the situation is quite different as the children refer to the others as friends and there is no gender based difference concerning friends outside the home. The fact that the girls do not fear going outside at Ahotokurom can be because Ahotokurom is located in a peri-urban area with fewer potential dangers, while Osu and Lighthouse are located in urban areas.

Having friends is important to the children's development of social skills. When living in a Children's Home, a child is almost constantly in contact with other children, as may not always be

the case for children living with their families. Thus, the Home has the potential of providing the children with a lot of friends. However, this depends very much on the children's individual personalities and how they view each other. It is not a given that just because two children share a bedroom they become close friends. Having friends at the Children's Home can undoubtedly be a huge positive experience for the children. Friends that have the same experiences as themselves are very valuable, as they are able to truly understand the daily struggles and frustrations. Friends at the home can also strengthen the children's bonds to the home and influence the feeling of safety in a positive way. Friends that have similar backgrounds are also very valuable as they are more capable to understand the fear, frustration, anger, sorrow and feelings of rejection that these children often struggle with, as most of them are either orphaned, rejected by their families, abused, neglected, or has a history as street children.

However, a social network only consisting of friends from the home, will undoubtedly narrow the children's perspectives and experiences in a significant degree. Having friends that live *outside* the home is equally important for the children's development. A social network where people have different experiences and backgrounds will undoubtedly enrich the children's lives. Having a social network that reaches beyond the boundaries of the home gives the children more and diversified impulses and impressions. It can give the children a sanctuary or “breathing space” away from the home, provide a place to develop and explore different sides of their personalities than they would normally do. It can also give them the opportunity to expand their own social networks outside the home as they can benefit from the fact that children living outside the homes have other and different social networks. In other words, it will give them more “strings to play on”. So, having a social network of friends will influence the children's quality of life both in the present and the future.

The kind of social networks the children have access to, will to a great extent influence how they perform later in life. When entering the adult-life it is of vital importance to have a social network to “fall back on” in times of trouble. Hence, the structures at Ahotokurom work to the advantage of the children and aspects of their quality of life.

Relatives

Osu and Lighthouse has a similar practice in regards to the contact with relatives. The homes does not forbid or hinder contact with family, but they do not actively encourage this either. The children's contact with relatives is very limited as few relatives come to the home for visits.

Ahotokuroom does encourage contact with the biological families and also states this as one of the most important aims of their mission. Ahotokuroom encourages a close bond between children and family. It has become increasingly acknowledged that to maintain family bonds is very important when children are placed in residential child care facilities. Family contact is important in order for children to form and develop their social identity and to support children's sense of self-esteem. Contact with the family will broaden the children's social networks as the family in itself is a resource in this regard, but the children can also benefit from the established social network of the family. Family contact can give the children knowledge and experience of what family life is like, which can improve their chances of creating a well-functioning family of their own one day. The continued nurturing of family bonds are also important is children are to return to their families again. Family contact tends to erode over time and it is thus important that the Children's Homes takes an active part in the maintaining of these bonds.

The local community

The contact the children have with the local community is mainly through the local children, with the exception of Ahotokuroom where many children in varying degree also have contact with their families in the local community and also benefits from DMJ's strong involvement in the local community. At all the homes the children participate in some sort of activities with the local children outside school, such as visiting and playing football, but school remains the main social arena in this regard. At Osu and Lighthouse gender based differences restricts the girls chances of broadening their social networks and their social skills. Contact with the local community enforces the feeling of belonging and social identity. The local community represents strong resources and possibilities for the children. It can provide broader and stronger networks which increases the chances of succeeding as positive and productive adults. It provides a network to draw benefits from when they leave the homes, such as job opportunities, marriage, friends, an active life (politics, leisure activities).

6.3 Summary

This chapter has shown that some resources that at first glance seemed to be the same for all the children are also partly individual resources as some children are able to utilize the collective resources to their own benefit. To what extent they are able to utilize these resources depends on individual characteristics, such as personality, age, cognitive abilities, creativity, resourcefulness and level of maturity. Individual resources contributes to create differences between the three homes, but also within the homes.

There exists great differences between Ahotokurom and Lighthouse on one hand and Osu at the other when it comes to the *children's personal place*. The majority of the children at Osu have less space and room for privacy compared to the children at the other homes. The exception is the three oldest boys at Osu that have been able to utilize this to their own individual benefit. This creates a big difference between the children *within* the home and reflects positively on aspects of the QoL of the oldest boys and negatively on aspects of the QoL for the rest. The staff at Osu is aware of the grave difference in personal place and some of the problems this creates, such as health problems and lack of privacy and safety. The three oldest boys are enabled to act as competent social actors through the homes structures and possibly a hidden social hierarchy. Thus, the material and social structures at Osu contributes to and reinforces this inequality among the children, which benefits a few on the expense of the majority. In contrast to this, such great inequality does not exist at Ahotokurom and Lighthouse. This is partly due to the fact that these homes can limit the number of children they take in and that the homes treat the children fairly equal in regards to personal place. Hence, there is no need for the children to utilize and exploit potential hidden social hierarchies to achieve individual benefits when it comes to shelter and personal place.

Education as a resource works as a sorting mechanism at Osu, dividing the children in three groups: the ones attending public schools, children with sponsors attending private schools and children unable to attend school due to low level of education prior to arriving at the home. This creates a divide between the children as the home is unable to even out these differences. The structures at Osu favours the children with the best educational abilities, motivation and diligence and provides them with a freedom to act as competent social actors and to influence aspects of education of good quality which will provide a valuable investment in the children's future. At Ahotokurom and Lighthouse the children's access to education is quite similar. All the children are given the opportunity to influence their own lives and the help to utilize education as a positive resource.

All the children in the study claimed to have *friends*, there where however some differences both between the homes and within the homes. At Ahotokurom the children benefit from a good relationship between the children living at the home and from a good relationship with children from the local community. Here, the structures of the home enables the children to act as competent social actors so they can develop their own personal social networks that reach well beyond the boundaries of the home with QoL consequences. In contrast to this, the children at Osu and Lighthouse did not seem to have the same opportunity to develop such broad social networks. The fact that Lighthouse is a fairly new Children's Home can help explain why the children did not

seem to be so close friends.

At Osu and Lighthouse the children have minimal contact with their *relatives*. Very few relatives visit their children at the homes and the homes do not work actively to promote family contact. As family bonds tend to erode over time, it is vital that the homes are actively involved in this. Thus, at Osu and Lighthouse the structures of the homes create a situation where the children miss out on important family contact and the experience of family life. They also miss out on the chance of broadening their social network and to benefit from the already established social network of their families. In contrast to this, Ahotokurom actively work to make sure that family contact is maintained and nurtured.

Ahotokurom is the home with the closest bonds to the *local community* and where the contact with the local community was not referred to in any negative terms. As already mentioned, the girls at both Osu and Lighthouse had a more narrow radius of action outside the home and this limited their contact with the local community. This limits their freedom to act as competent social actors and to build broader social networks, to receive inputs from outside the home and benefit from local knowledge and feeling of social identity. Hence, the children at Ahotokurom are in a favourable situation when it comes to their freedom as competent social actors to develop and maintain broad social networks that can benefit aspects of their QoL in the present and in their adult life.

CHAPTER 7: CONCLUSION, LIMITATIONS AND RECOMMENDATIONS

“Placement in an institution solves the problems of the placers, and not those of the placed”,
Defence for Children International (Tolfree, 1995:48).

7.1 Conclusion

The main aim of this study was to investigate *how the material and social structures and supplies of the Children’s Homes contribute to similarities and dissimilarities in aspects of the children’s QoL*. The study revealed that the material and social structures and supplies have strong bearings for all the children in this study. Using the theory of structuration as a framework, the Children’s Homes are institutions that represents sets of structures that both limit and enables the children as competent social actors. The material and social structures and supplies are interrelated and all contribute to reinforce each other. This means that the way the homes cover basic needs such as food, shelter, clothing, health and education will cause the basic needs to reinforce each other and also affect other needs, such as safety, leisure, love and belonging and social networks.

The material and social structures and supplies at Osu Children's Home, a governmentally owned home in Accra, creates a great difference between Osu and the two privately owned homes in Cape Coast, Ahotokurom and Lighthouse. Osu also had the greatest difference in aspects of the children’s QoL *within* the home. Osu had a stronger concentration of conditions creating poorer QoL aspects, such as poor food, shelter, clothing, education, safety, leisure, love and belonging and social networks. Poorly met basic needs, such as food, shelter, clothing and education, at Osu reflects negatively on other aspects of the children’s QoL. A deprived physical environment, overcrowding and poor salaries also creates unmotivated staff members that are unable or less willing to give the children the care they need. The children in this study come from difficult backgrounds and most likely need more support from their adult caretakers than “other” children would. This means that these are vulnerable children made even more vulnerable due to a deprived physical environment and lack of proper care. Children at Osu, especially the girls, are in a position where they on several areas experience social exclusion. The children experience this both from lack of close contact with their relatives, the local community and having few close friends, both inside and outside the home. Hence, the socio-material conditions are strongly structuring their life conditions.

In contrast to Osu, Ahotokurom and Lighthouse cover the children's basic needs in a very similar way that reflects positively on aspects of the children's QoL. The material and social structures and supplies at these two homes works, in most aspects, to create a situation where the children feel more safe, loved, cared for and wanted, than what is the case at Osu. At Osu, the social structures and relations are mostly focused on distrust and insecurity. The lack of close bonds with adult caretakers curbs the children of valuable life experience and support. The children at Osu are also more likely to be left without any safety-net once they leave the home.

Ahotokurom and Lighthouse experience aspects such as good, stable financial situation, good staff-child ratio and a favourable location of the home that can contribute to a situation where the children are given more freedom to act as social competent actors that work actively to shape their own lives. A good and stable financial situation enables the home to meet the children's basic needs in a satisfactory way. It also enable the home to provide the children with stable access to education, which is a valuable, but differential investment in their future. In this regard Ahotokurom and Lighthouse are in a favourable situation.

Even though the material and social structures and supplies at the two private homes, Ahotokurom and Lighthouse, are very similar in many QoL aspects, there are some differences. The children at Ahotokurom enjoys more and somewhat better personal place, a better relationship between the children at the home and also with the local children. The children also enjoys a better feeling of safety as compared with Lighthouse, where elements outside the home threatens the feeling of safety. The girls at Lighthouse are also more restricted in their radius of action as they somewhat fear going outside. Thus, Ahotokurom enjoys the benefits of a better location and a good relationship with the local community. Seen in a structure-agency perspective the material and social structures and supplies at Ahotokurom provides the children with more freedom of action.

The first specific objective of the thesis was to identify how *collective resources available and individual resources utilized among the children at the various homes and how this affects aspects of the children's QoL*. In most aspects of life the children are seen as a collective group that have access to the same collective resources. There are however, some resources that can be classified as individual or partly individual. This can partly be explained by the homes giving the children access to different resources, such as access to private vs. governmental schools. Some resources, such as shelter, clothing and education, that are intended to be collective resources may be redistributed among the children as a result of hidden informal social hierarchies. Osu had the greatest

differences *within* the home concerning individual resources, thus creating a wider gap between the individual children living at Osu. At Ahotokurom and Lighthouse the distribution of individual resources were more even and did not contribute to such grave differences between the children *within* the homes.

The children are in this study seen as competent social actors that influence and actively contribute to their own lives. However, collective resources as determined by the homes, are structures that the children only to a certain degree can influence. These children live in nearly “total” institutions which represents sets of structures that both enable and limit the children’s actions. Hence, the collective resources have strong bearings for all the children and various aspects of the children’s QoL. The children’s freedom to act within these structures are determined by the homes material and organisational structure and vary between the Children’s Homes. This freedom is limited by the scarcity of supplies and the deprived material conditions particularly at Osu, but it also created a situation where some children were able to utilize the available resources to their own personal benefit. This sometimes happens at the expense of others, creating a difference between the children here in aspects of their QoL such as shelter and education. However, even when having access to good material and social structures and supplies, the children must be enabled to act as competent social actors in order to make good use of these resources. For example, access to good education is worthless if the child does not utilize this resource to his/her own benefit.

The second specific objective was to investigate *how the type own ownership (governmental vs. private) influence the material and social structures and supplies in a way that affects aspects of the children’s QoL*. In this study there seems to be a clear connection between type of ownership and how it affects aspects of the children’s QoL. The privately owned and run homes (Ahotokurom and Lighthouse) are in a better position when it comes to finances and decisions concerning gatekeeping and location. First, the private homes are in a better financial situation than Osu. This can to some extent be explained by the fact that the private homes have strong connections to financial donors in Europe and the US, who donate substantial grants regularly. These homes are also smaller in terms of number of children living there, meaning that they need far less money than Osu to cover the most basic daily necessities. The financial situation affects the structures and supplies the Children’s Homes are able to offer the children, such as the quality and quantity of food, shelter, education, child-carer ratio and the educational level of the staff. A good financial situation can also offer the staff better salaries and a better workplace, thus help creating more motivated staff members.

The private homes have also been more free to make their own decisions concerning for example the location of the home, which will affect the children's outdoor environment and what kind of local community they grow up in. The children here can thus enjoy extra mural activities in a more gentle and attractive outdoor environment. Another important issue here is that the private homes can set their own premises for gate keeping. This means that they can decide how many children they want to take in and on what basis. This way they can ensure that they do not become overcrowded, something that Osu can not.

7.2 Limitations and further approaches

This study encountered some demanding challenges concerning research and insight. First the study concerns aspects of children's QoL. Researching children's QoL is a demanding and difficult task. Second, the children in this study live in Children's Homes which acts as structures that to a great extent determine the children's lives. Third, the research is conducted in a foreign culture which means that interpreting and understanding of several subjective aspects of QoL is demanding. All of the above sets some limits to both the width and depth of the interpreting and understanding of certain QoL aspects.

Another limitation this study was faced with was the short time limit for gathering information. An already short time limit was cut short due to difficulties of locating the Children's Homes and by strict time limits set by the managers at the various homes. Hence, the time left for doing interviews and observations was shorter than wanted. However, I was granted much more time for observations at Osu Children's Home, hence the amount and depth of the information gathered here is broader. The time limit prevented follow-up interviews and more in-depth interviews which would have strengthened the study further. It would also take a much more in-depth and time consuming approach in order to unveil the possible hidden hierarchies and social structures that might exist at the homes.

It would be interesting to study how these children cope once they leave the homes and to see how structural inequalities at various homes impact their adult life and how they cope with this. Even though this study includes Children's Homes in both rural and urban settings, this is not the focus of the study. Another interesting study would be to compare urban and rural Children's Homes as to how place and interaction with the local community affects the children's quality of life.

In line with the Ghanaian Governments plans towards a family based care for orphans and vulnerable children, another approach could be the study of children's quality of life in family based settings, such as fostering, adoption and reintegration in the extended family. It would also be useful to look at the economically and social programmes, such as Livelihood Empowerment Against Poverty (LEAP), that are constructed to empower families to care for their own children.

7.3 Recommendations

This research has made evident that there exist substantial inequalities in how the Children's Homes are able to care for the children in a way that improve aspects of their quality of life. Ghana faces a potential orphan-crisis in the years to come and the need to address this properly is urgent. Even though the Care Reform Initiative (CRI) 2006-2011's ultimate goal is to make Children's Homes redundant, it is unlikely that this is possible in the near future. Hence, some steps should be taken in order to improve the quality of care the children living in Children's Homes receive and also to avoid that children are placed in residential child care facilities unnecessary.

Governmental control of Children's Homes

As the majority of the Children's Homes in Ghana operates without any form of governmental control, guidance and support, there is an immediate need to ensure that the existing Children's Homes are registered and approved by the Department of Social Welfare (DSW) in order to make sure that the homes comply with the minimum standards for operation as set by the DSW. In this study Osu is the only home registered and approved by the DSW. Another reason for the importance of registration and governmental control is to ensure that the motivation for starting a Children's Home is the best interest of the children and not own financial benefits. It is also important to ensure that Children's Homes have a stable and predictable economic situation to avoid arbitrary expulsion of children in financial difficult times.

Physical conditions

The DSW has showed that the physical conditions at many Children's Homes in Ghana are very poor and improving the physical conditions will benefit the children in many ways. To prevent the spread of infectious diseases there is a need for better infrastructure, such as better latrines, sinks and access to safe water. A higher level of hygiene will improve the children's health and their performance in school and other areas of life. Educational programs to teach the staff the importance of proper hygiene and food handling should be implemented. Many homes are also overcrowded and this leads to poor living conditions for the children and a lack of privacy. These

homes are in need of expansion of their existing structures or to find alternative care for the children.

Educational programs for staff members

As many staff members working in direct and daily contact with the children have little or no formal education it is important to focus on educational programs concerning basic child care, child development, child health, basic hygiene and proper nutrition. This study revealed that at Osu, knowledge on these areas is inadequate. Through such educational programs it is also important to focus on the value and importance of caring for these children. In other words to let the staff know that their hard work and efforts are appreciated and valued in order to improve the staff's sense of pride in their job and their self-esteem. At Osu it clearly seems that the staff struggled with low self-esteem and little interest in their work and the children they care for.

Gate keeping

As the majority of children presently living in Children's Homes in Ghana need not be there at all, there is a need to look at the policies and practises of gate keeping at the homes. Before a child is admitted to a Children's Homes the child's needs and family situation should be thoroughly investigated, to ensure that admission happens only as an absolute last resort. After admission there should also be regular reassessments of the child's needs and family situation, in order to properly evaluate if the child can return to his/her family and thus minimise the length of institutional stay.

Cooperation with the local community

Children's Homes are to various degrees closed environments and they have physical boundaries separating them from their surroundings. Children's Homes should therefore aim to work closely with the local community to make sure that children don't lose their connection to their home community. One way to achieve this is to open services, such as healthcare and education, to the local community. This way Children's Homes can become what people perceive as a positive element in the community. A close connection with the local community will also benefit the children when they move out of the homes as they are likely to have better knowledge of the "outside" world and also to have broader social networks to rely on. It can also help reduce the stigma and discrimination that often follows children living in residential care settings.

Maintain family bonds

Whenever possible, Children's Homes should always make sure that children do not lose contact with their families. Family contact is important for the children's feeling of love and belonging. Children need their families, even just for emotional support. Family bonds need to be nurtured and encouraged, thus the Children's Homes has to work *actively* to ensure regular contact between the children and their families. In this study, Ahotokurom was the only home taking on an active role to nurture and maintain family bonds, compared to Osu and Lighthouse who took on a rather passive role in this regard.

Stigma and discrimination

As already mentioned, stigma and discrimination tends to follow children living in residential child care facilities. This is especially a problem for orphans of HIV/AIDS, if they can be identified, due to the stigma associated with the disease. There is a need to change the way these children are viewed by their communities.

Prevention of family disintegration

The root causes for why parents and families send their children to Children's Homes need to be identified and properly addressed. Poverty has been identified as the number one reason for child abandonment in Ghana. Children's Homes are often wrongly perceived as being more capable of caring for children than the biological family, as the children will at least receive regular meals, clothes and have better chances of receiving a basic education. Poverty reduction programmes are important in order to empower families to care for their children. Even though Ghana has implemented the Free Compulsory Basic Education Programme (fCUBE) which ensures a tuition free public school, this is not enough as there are other costs connected to education families still struggle with, such as school uniforms, books and transport. Thus, there is a need to reduce the costs of attending education.

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APPENDICES

1. Interviews and checklist for observations

A. Interview with the children

Background information

- Name (will be kept confidential in the study)
- Age
- How long have you lived at the Children's Home?

Education

- Class
- How often do you go to school?
- Likes and dislikes?
- Homework
- Future education

Leisure time

- Activities after school and on the weekends
- Radius of action inside/outside the home
- Activities outside the Children's Home
- Chores; What kind of chores? Amount of time spent on chores

Friends

- Friends outside the home
- Friends at the home. What is the relationship between the children living at the Children's Home like?

Staff

- Likes and dislikes about the staff. How do they treat you?
- The relationship between the staff and the children
- Volunteers

The children's personal place

- How many do you share bedroom with? Do you have your own bed?
- Room-mates

Life at the Children's Home

- Positive things about living here
- Negative things about living here
- What is the biggest problems in your life and how do you deal with this?
- How would you describe your life?
- If you could; what would you like to change in your life?

B. Interview with the managers

Personal information

- Name (will be kept confidential in the study)
- Position at the Children's Home
- How long have you worked here?
- Positive and negative aspects about the job

Background information of the Children's Home

- Establishment of the Children's Home; when and why?
- Private or official initiative?
- Privately or officially funded? Gifts and other contributions?
- Official regulation the Children's Home has to follow?

The staff

- Number of staff members and their educational background
- Volunteers
- Stability in the staff; do many quit?
- Others working at the Children's Home? Students?

The physical features

- Is the Children's Home divided into different wards? Reasons for dividing/not dividing?
- Interaction between different sections.
- What kind of facilities exist here? What are the usage of the different buildings?
- The children's personal space; dormitories or smaller rooms? How many share rooms?
- Rules for using the different facilities such as showers, playrooms etc.

The children

- How many children live at the Children's Home?
- Reasons for admittance; How many are here because they are actually orphaned? How many children are here for other reasons? What kind of other reasons?
- Locating relatives
- Do the children know why they are here? If not; why?
- How long do the children usually stay here? How long can they stay?
- Contact between the children and the Children's Home after they leave?
- Referral to the Children's Home; who refers the children to the Children's Home? Social Services, the police, dropped of by relatives or others?
- Attitudes towards the children living at the Children's Home; the neighbourhood and in general.

The everyday life

- What is an ordinary day like?
- The everyday-rhythm
- Meals; common breakfast, dinner?
- Activities outside the Children's Home
- Leisuretime

Rules and chores

- Curfew
- Can the children go outside the Children's Home by themselves?
- Chores
- Different rules and chores depending on gender and age?

- Personal items

Education

- Financing
- Location of the school
- Public or private school
- How do the children get to school?
- How often do they go to school?
- Homework
- Future education

Relatives

- Do the relatives contribute to the Children's Home in any way?
- Visits
- Relationship between the Children's Home and the relatives

C. Interviews with additional staff members

Personal information

- Name (will be kept confidential in the study)
- Position at the Children's Home
- How long have you worked here?
- Positive and negative aspects about the job

The everyday life

- What is an ordinary day like?
- The everyday-rhythm
- Meals; common breakfast, dinner?
- Activities inside/outside the Children's Home
- Leisuretime

Rules and chores

- Curfew
- Radius of action inside/outside the home
- Chores
- Different rules and chores depending on gender and age?

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Education

- Financing
- Location of the school
- Public or private school
- How do the children get to school?
- How often do they go to school?
- Homework
- Future education

Relatives

- Do the relatives contribute to the Children's Home in any way?
- Visits
- Relationship between the Children's Home and the relatives

D. Checklist for observation

The physical surroundings

- Neighborhood
- Compound
- Playground
- Buildings – condition of and the use of various buildings. Different wards?
- Rooms for social recreation.
- Sanitary facilities
- Electricity, running water
- Food

The children's personal place

- 2 Bedrooms – condition of bedrooms, beds and other furniture?
- 3 How are the bedrooms used by the children? Just for sleeping or as a social arena?
- 4 Clothes

Social interaction

- Amongst the children
- The children and the staff
- The children and relatives
- Others?

- Leisure time
- Mealtime

2. Informed consent form

UNIVERSITY OF CAPE COAST STUDY ON YOUNG PEOPLE

Consent Form for Young Person

Interview

My name is Marthe Kristiansen and I am a student at the Norwegian University of Science of Technology. I am currently spending part of my graduate program at the University of Cape Coast (UUC). As part of my stay in Ghana I will undertake research on orphans in Ghana and their Quality of Life.

I would like your participation in an interview about this issue. Your participation is entirely voluntary. If you decide to take part, you have the right to not answer any particular question(s) and to stop at any time if you do not want to continue.

The interview will be audio recorded so that I can review the topics and responses later so that I will not miss any details. Participation in this study is only possible if you are willing to have the interview recorded.

All information you provide in this study will be kept strictly confidential – I will not share information you provide in the interview with anyone. No information which could identify you will ever be released.

Consent of Young Person

The purpose of the study has been explained to me in English/mother tongue to my satisfaction. I have understood the purpose of the study. I also understand I have the right to opt out of the discussion at any time, if I so wish.

Following the discussion I agree/do not agree to participate in the study.

(Respondent – Signature/Initials/Right Thumb Print)

(Date)

(Signature of Interviewer)

(Date)