

KZN Human Settlements

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RESEARCH ON CHILD-HEADED HOUSEHOLDS

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ACRONYMS

CHH: Child-headed Household/s
AIDS: Acquired Immunodeficiency Syndrome
HIV: Human Immunodeficiency Virus
NGO: Non-Governmental Organisation
SA: South Africa
CBO: Community Based Organisation
NPO: Non-profit Organisation

SECTION A

1. EXECUTIVE SUMMARY

1.1 The Research Project

As a result of the increasing rate of mortality among adults due to the HIV and AIDS pandemic, violence, poverty and other such factors, there appears to be an increase in the number of orphans and vulnerable children. Families and communities are not always equipped to cope with the situation which has led to the phenomenon of CHH. A Child-headed Household is defined for the purposes of this research project as a household wherein the head child is younger than 18 years old i.e. a household consisting only of children.

1.2 The Objective of the Research

The aim of this research project was to determine the current status of child headed households in Kwazulu-Natal and its impact in terms the creation of sustainable human settlements.

1.3 Key Findings

The number of housing projects with child headed households varied vastly dependent on the nature of the project. The status of Child headed households requiring housing is mostly undetermined and where it is known, it is very minimal. Currently, CHH are either formally placed through the Department of Social Development or placed informally with family. The participants preferred or suggested form of accommodation for CHH's was mostly non-institutional family based care.

1.4 Recommendations

- 1.4.1 Existing Child headed households in a project area be referred to the Department of Social Development: Directorate: HIV & Aids, for formal placement preferably in a non-institutional environment.
- 1.4.2 Continue to provide the option of the Institutional subsidy through the Provincial Transitional and Aids Policies for NGO's, CBO's, NPO's and other section 21 companies to establish community family homes and transitional care centres. The home-based care model may also be used dependent on the evaluation of the pilot projects once completed.
- 1.4.3 Enforce the signing of a Will in respect of the appointment of a guardian to obviate challenges experienced with CHH in the event of the death of the beneficiary/s before registration of transfer and occupation. Liaise with the Department of Social Development: Directorate: HIV & Aids in respect of their succession planning programme.
- 1.4.4 The Departments of Human Settlement, Social Development, Health, Co-operative Government and Traditional Affairs and Home Affairs should establish and maintain a consultative and co-operative relationship through the relevant forums to deal with issues related to CHH.

SECTION B

RESEARCH REPORT ON CHILD-HEADED HOUSEHOLD

1. INTRODUCTION

The increasing rate of mortality among adults due to the HIV and AIDS pandemic, violence, poverty and other such factors has impacted on the basic structure of the nuclear and extended family systems due to an increase in the number of orphans and vulnerable children. In many cases families and communities are not equipped to cope with the situation resulting in the emergence of the phenomenon of CHH. Since the main focus of Department of Human Settlements is the provision of housing for families within sustainable human settlements, the concept of CHH introduces a variation on traditional approaches. Hence CHH needed to be investigated further to help determine the degree of the situation and its impact on the creation of sustainable human settlements.

1.1 PURPOSE OF THE RESEARCH

The purpose of this document is to report on the findings of a basic desktop research exercise that was undertaken to determine the current status of child headed households in Kwazulu-Natal and its impact in terms of the creation of sustainable human settlements.

1.2 BACKGROUND

The research emanated from concerns expressed by Human Settlement stakeholders citing the housing needs of child-headed households as a critical policy issue that should be addressed by the Department of Human Settlements. There is a huge demand to target the needs of CHH as part of the broad vulnerable groups as there is a concern that the increasing issues arising from CHH is not being adequately addressed by the Department's current policies and programmes.

The rights and interests of children have also been highlighted through policy decisions and legislative rulings. Following the judgment in the Grootboom case where the issue of children's rights was looked into in terms of Section 28(1) (b) and (c) of the Constitution which states:

"Every child has the right –

- (b) to family care or parental care, or to appropriate alternative care when removed from the family environment;
- (c) to basic nutrition, shelter, basic health care services and social services. "

Although Section 28(1)(b) and (c) does not create a primary obligation for the state to provide shelter on demand to parents and their children, it is implied that the state does have a primary obligation when the parents are not providing it. In October 1997 South Africa was signatory to the African Charter on the Rights and Welfare of the Child which obliges member states to meet the needs of vulnerable children. Article 20 (2)(a) contains a clause in respect of the obligation of the State to assist parents and others responsible for children to provide material assistance and support programmes, including housing.

1.3 DEFINITION OF CHILD-HEADED HOUSEHOLDS

The definition of "child-headed households" for the purpose of this research is, "a household wherein the head child is younger than 18 years old, i.e. a household consisting only of children".

2. LITERATURE REVIEW

According to A Situational Analysis of Child headed households in South Africa, conducted by the University of South Africa for the Department of Social Development, not all child headed households result from AIDS but are through other socio-economic development issues like war, displacement, desertion, separation and migrant work. This is further clarified in a Statistical Brief by the Children's Institute which states that most children living in child headed households are not orphans and that only 8% of children living in child headed households had lost both parents, 80% had a mother still living.

The Situational Analysis of the Department of Social Development focus group recommendations in respect of housing were that the procedure for the allocation of houses disadvantages CHHs whose head child is less than 18 years since the house sometimes gets allocated to relatives on behalf of the CHH which allows for the children to lose the house. Special provision should therefore be made for the allocation of houses directly to the head child, irrespective of age, especially if it is the wish of the children to remain together. The focus group also revealed that leaving these children in the community, especially in their own homes with adequate and effective support, was preferred since the children themselves did not want to be separated from each other through placement in extended families, with foster parents or in institutions. They preferred to remain in their homes and emphasised the need for support. This document also revealed that most of the CHH live in small houses, mainly informal dwellings where boys and girls often share a bed. On many occasions resulting in incest between brother and sister. Therefore it is imperative that CHH are supported to stay in their home but be provided with appropriate housing with adequate space and privacy.

iMediate Development Communications compiled a child participation exercise report on Child headed households conducted with more than 50 girls and boys from child headed households identified by the Thandanani Children's Foundation in Pietermaritzburg. The report's observations about access to basic social services for children revealed that "Most of the children live in dilapidated informal housing. Two-thirds of the homes had electricity at the time of the research but most of these were either illegally connected or the account had not been paid. Nine out of ten households used a pit latrine and most had to collect water from a communal tap." Also as part of a focus group exercise, the children had to list priorities for themselves and the result of this revealed "homes" to be number 1 for them.

3. STATISTICS ON CHILD HEADED HOUSEHOLDS

According to the Statistics SA Census 2001 the following figures are for Head/Acting head of a housing unit in KwaZulu-Natal. Since these statistics are provided in 5 year categories, it exceeds this documents definition of a child by a year, extending to the age of 19 years resulting in higher statistics.

KwaZulu-Natal	Male	Female	Male & Female
0-4	359	383	742
5-9	308	261	569
10-14	1478	1330	2808
15-19	17255	16490	33745

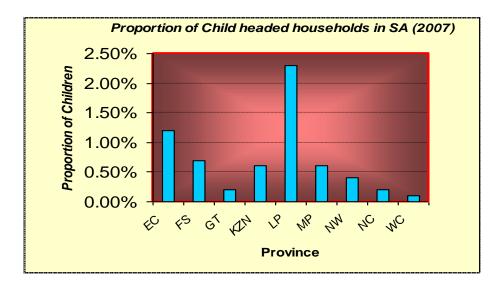
3.1 Census Statistics of CHH for Kwazulu-Natal

3.2 Number of CHH per Province

According to the Children's Institute, University of Cape Town, the proportion of children living in child only households in South Africa in 2007 based on Statistics SA's General Household Survey 2007, is illustrated as follows

Province	Number of CHH	Proportion of Children*	
Eastern Cape (EC)	37 000	1.2 %	
Free State (FS)	8 000	0.7 %	
Gauteng (GT)	6 000	0.2 %	
KwaZulu-Natal (KZN)	24 000	0.6 %	
Limpopo (LP)	57 000	2.3 %	
Mpumalanga (MP)	9 000	0.6 %	
North West (NW)	5 000	0.4 %	
Northern Cape (NC)	1 000	0.2 %	
Western Cape (WC)	2 000	0.1 %	
Total in South Africa (SA)	148 000	0.8 %	

* sample surveys are always subject to error & proportions reflect the midpoint of a possible range



Proportion of Childrer 2.00% 1.50% 1.00% 0.50% 0.00% 14 000 30 000 104 000 148 000 0 - 5 years 6 - 11 12 - 17 Total in SA years years NUMBER IN AGE GROUPS

3.3 Number of CHH in the different age groups

The Statistical Brief of Child Headed households in South Africa compiled by the Children's Institute found that in 2006, 0.67% of children lived in CHH, this being approximately 122 000 of the 18.2 million children in the country while in 2002 it was 0.65% (118 000) and in 2007, 0.81% (148 000). This shows that there has been no significant increasing trend in the proportion of child headed households although the proportion of orphans is increasing and not all orphans live in CHH. Ninety percent (90%) of CHH are located in Limpopo, KwaZulu-Natal and the Eastern Cape. Eighty-eight percent (88%) of CHH have at least one child over the age of 15. The significant observations are that CHH tend to live in informal dwellings and lack access to adequate sanitation and water. This is partly as a result of them living outside of urban areas.

4. METHODOLOGY

A basic desktop research was undertaken through a brief questionnaire consisting of open-ended and closed-ended questions which was forwarded to the Department's Project Management officials, Municipal officials, Implementing agents, Non-Governmental Organisations and welfare organisations to determine the extent of the problem and its impact in terms of the creation of sustainable human settlements. A copy of the questionnaire is attached as *Annexure 1*. Eight responses to the questionnaire were received and analysed for this study.

5. FINDINGS

The following findings are based on the responses received to the questionnaire as contained in *Annexure 2*.

- 5.1 The number of projects with child headed households range from nil to 27% of the developer's total projects except in the case of NGO's implementing special needs projects which makes 100% of their projects.
- 5.2 The number of Child headed households requiring housing is mostly undetermined and where it is known, it is very minimal.
- 5.3 Currently, CHH are either formally placed through the Department of Social Development or placed informally with family.
- 5.4 The preferred or suggested form of accommodation for CHH's was mostly non-institutional family based care.

6. CONCLUSION

The findings of this research although based on a small sample seems to be a true reflection of the overall view on CHH in that there is no reliable data on the subject in South Africa. The statistics that are available are provided to the reader with a warning that the figures should be treated with caution since it forms a very small sub-sample of the GHS resulting in its reduced reliability. There are also frequent inaccurate assumptions made about CHH resulting in statements that are not based on evidence. The Statistical Brief (2009) challenges these assumptions by among others, stating that most children living in CHH are not orphans at all and there is also no significant increasing trend over time in the proportion of children in CHH. The rationale for this research document can be seen as an example of such an inaccurate assumption based on the lack of actual responses and data received from participants on the subject.

It must however be noted that although there is a small proportion of children living in CHH, approximately 148 000 (2007), this number is not insignificant since these households are at risk especially in terms of their lack of formal housing and services as well as the absence of adult support. So although the scale of the problem is not as extensive as assumed, the degree of the problem remains severe and requires

effective intervention. However, in order to advise appropriate decisionmaking that will ensure policies and programmes are targeted and formulated accordingly to address the problem, more reliable research into CHH over a period of time is required.

7. **RECOMMENDATIONS**

- 7.1 Existing Child headed households in a project area during the beneficiary identification stage, be referred to the Department of Social Development: Directorate: HIV & Aids, for formal placement preferably in a non-institutional environment.
- 7.2 Continue to provide the option of the Institutional subsidy through the Provincial Transitional and Aids Policies for NGO's, CBO's, NPO's and other section 21 companies to establish community family homes and transitional care centres. The home-based care model may also be used dependent on the evaluation of the pilot projects once completed.
- 7.3 Enforce the signing of the proforma Will developed by the Department to ensure the appointment of a guardian and executor to obviate challenges experienced with CHH in the event of the death of the beneficiary/s before registration of transfer and occupation. Liaise with the Department of Social Development: Directorate: HIV & Aids in respect of their succession planning programme.
- 7.4 The Departments of Human Settlement, Social Development, Health, Cooperative Government and Traditional Affairs and Home Affairs should establish and maintain a consultative and co-operative relationship through the relevant forums to deal with issues related to CHH.

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SURVEY QUESTIONAIRE ON CHILD HEADED HOUSEHOLDS IN KZN

The Department of Human Settlements is committed to delivery of sustainable human settlements and wishes to determine the current status of child headed households and its impact in terms the creation of sustainable human settlements. The Definition of a "child headed household" is, *a household where everyone who lives there is younger than 18 years old, i.e. a household consisting only of children.* Your response and inputs are extremely valuable and will help to determine the extent of the situation and to assist the Department to identify its role in addressing it.

We appeal to you to complete this questionnaire and submit your response by not later than the **13th April 2010.** Your completed response must be submitted to Sherin Ramluckan via e-mail or facsimile at : <u>Sherin.Ramluckan@kznhousing.gov.za</u>./ Fax No: 031 336 5358.

Na	me of your organization/municipality:						
Ho	How many housing projects & subsidies are you administering? &						
	Within the abovementioned number of projects, how many have child headed households?						
	Within the abovementioned number of projects is there child headed households that needed/applied for housing assistance? Yes No						
lf y	If yes, how many?						
Ple	Please name the projects/ area where these households were identified.						
Ho	w are child headed households housing needs currently being addres	sed?					
a)	Informal family placement						
b)	Formal placement through Department of Social Development						
c)	Informal NGOs or unregistered homes						
d)	Other (please specify)						
Wł	What is your preferred accommodation for child headed households and why?						
Thank	you for your participation.						

Product Development

ANNEXURE 2: SUMMARY OF RESPONSES

Organisation Project Management: Inland Region	Number of Projects	Number of projects with CHH	Number of CHH requiring housing (within area)	 Projects / areas with CHH Magongqo rural project Impendle Wards 2, 3 & 	CHH current housing Formal placement through Department of Social Development	Preferred accommodation for CHH Within the project, close to relatives
Newcastle Municipality	16	16	-	-	Formal placement through Department of Social Development	Construct low-income housing for CHH to remain in family environment
Mpofana Municipality	1	0	0	-	Informal family placement	None
Stedone Developments	21	0	Anecdotal	-	-	-
Mthonjaneni municipality	6	Unknown (profiling of beneficiaries still in process)	Unknown (profiling of beneficiaries still in process)	 Thubalethu Extension Victoria Street Project Matshansundu Project Yenguye project Umgabhi Project eDubeni Project Makhasaneni project 	Formal placement through Department of Social Development	Children's Home
Give a child a Family: Place of Restoration Trust: Ugu District	-	-	Unknown	-	 Formal placement through Department of Social Development Informal family placement 	Family based care with adult supervision
Child Welfare: Port Shepstone: KwaNdwalane Traditional Authority	-		13	-	-	Government Housing projects
Built Environment Support Group (BESG)	3	3	19		Informal family placement	Non-institutional "special needs" housing