**Caring for African Orphans:**

**A Comparative Review of Existing Institutional Arrangements**

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**Abstract**

Africa's orphan population has trebled in the last two decades, and this growth raises questions about how societies care for these orphans. My paper addresses two questions: (1) Do extended families –that have historically been relied upon-- still adequately accommodate orphans in sub Saharan Africa? (2) How effective are alternative arrangements –notably international adoption, foster care, and orphanages-- relative to extended families? I begin with a typology of existing care institutions then develop a framework for analyzing their relative effectiveness. My analysis shows that the extended family system still provides the greatest coverage for African orphans; yet, it is limited in quality and accountability. I then discuss possible complementarity and synergy between the various care institutions.

**Introduction**

In the last few years, major media outlets raised the global visibility of African children with extensive coverage of African "orphans" being adopted by prominent Western personalities[i] and NGOs such as Zoe's Ark in Chad (Africa Research Bulletin 2007). Much of the media presentation of these transnational acts of kindness portrayed international adoption as an option for African nations struggling with their orphan crises. Yet, the reports fail to shed light on the limits of this system especially when compared to other alternative mechanisms available for the care of orphans. The reality is that other local mechanisms exist, whether formal (domestic adoption, foster care, and orphanages) or informal (extended family systems and child headed households). What remains unclear is their relative effectiveness in caring for, and educating, orphans.

This moment is timely for understanding the landscape of orphan care because of the depth and pace of the AIDS crises, the international mobilization around universal literacy, and the global economic downturn. While sub Saharan Africa accounts for 10% of the world's population, it carries the greatest burden of the global HIV infection (64%) and its related burden of orphanhood (80% of all orphans). According to UNAIDS, about 20 million children in sub-Saharan African will have lost at least one parent to AIDS by 2010 (UNAIDS 2004, 2008; UNICEF 2006). Most of these orphans will be concentrated in a handful of East and Southern African countries such as South Africa (2.5 million), Tanzania (2.4 million), Kenya (2.3 million), Mozambique (1.5 million), Zimbabwe (1.4 million), and Zambia (1.2 million). A growing body of research on African orphans has monitored the growth in this population (Mishra and Bignami-Van Assche 2008) and investigated its educational outcomes or living arrangements

(Case and Ardington 2006; Case, Paxson and Abdeilinger 2004; Ainsworth and Filmer 2006), health (Bledsoe *et al* 1988 & 1992; Deininger *et al* 2005; Phiri and Webb 2002; Foster 2000; Subbarao, Mattimore and Plangemann 2001; Deininger Garcia and Subbarao 2003; Madhavan 2004; and Rehman and Eloundou-Enyegue 2007).

While some of these studies have enriched our understanding of the institutional care available to these children, individual studies tended to focus on a single or a small subset of existing institutional arrangements. For instance, some studies critiqued the resilience of the extended family system (Madhavan 2004; Foster 2000); some compared the extended family system to Non Governmental Organizations (NGOs)-supported child headed households and international adoption (Rehman and Eloundou-Enyegue 2007); some described trends in international adoption (Menozzi 2008) or discussed the practical feasibility of orphanages compared to the extended family (Subbarao, Mattimore and Plangemann 2001); finally some evaluated the feasibility of domestic adoption, orphanages and community family models compared to the extended family (Phiri and Webb 2002) or examined innovative community foster homes (Sanuo *et al* 2008). Clearly, the moment is ripe for a more comprehensive assessment. This study expands previous research in three ways:

(1) It develops a typology to describe the range of formal and informal mechanisms available for the care and education of African orphans.

(2) It provides a framework for evaluating the efficacy of each mechanism in improving the wellbeing of orphans and their education.

(3) it examines the possible complementarities of these mechanisms in mitigating the negative impacts of orphanhood among children.

The paper's results corroborate other studies which underscore the vital role played by informal social safety nets. More formal alternatives such as foster care, institutional care, and adoption may play a supportive but limited role. The rest of the paper is organized as follows. First, I summarize the current debate in the literature on orphans and education in sub Saharan Africa. I then provide a typology of institutional arrangements available for orphan care. Third, I present a framework for evaluating the efficacy of these institutional arrangements and their salience in the sub Saharan African context. Fourth, I apply this framework and discuss the effectiveness of formal mechanisms (adoption, orphanages and foster care) as well as informal mechanisms (extended family system and child-headed households) in caring for orphans. I conclude by recommending more focused studies that examine how various support systems for orphans could be strengthened.

**Orphans and Education in sub Saharan Africa**

Because this study assumes orphans to be a disadvantaged group, a good starting point is to check the validity of this premise. Some studies found no evidence of orphan disadvantage (Lloyd and Blanc 1996) or find this disadvantage to be smaller than that associated with poverty (Ainsworth and Filmer 2007). Yet the bulk of the literature shows evidence of profound disadvantages (Case, Paxson and Ableidinger 2004; Kendall 2007; Case and Ardington 2006; Evans and Miguel 2007). Kendall and O'Gara (2007) find Malawi orphans to be at a particular

disadvantage because of absenteeism before and after parental death. The use of longitudinal datasets has helped isolate the impacts of parental death events on orphans' school access, persistence and achievement (Case and Ardington 2006; Evans and Miguel 2007). Case and Ardington (2006)'s study from KwaZulu Natal found no significant differences in enrollment odds between orphans and non-orphans but detected profound divergence in educational attainment and school quality. Maternal orphans were thus 0.12 of a year behind in their schooling and had 7 percent less spent on their education. This was true of orphans in poor, as well as wealthy, households. Overall, this study clearly shows that parental death *causes* inferior educational outcomes for children, including those fostered into better endowed households. These results were supported by Evans and Miguel's analysis of a five year panel dataset of 20, 000 children from Kigera in Kenya, where parental death reduced children's participation in school.

Overall, longitudinal studies confirm that orphans face inferior educational outcomes than do non orphans. Even where differences in basic school enrollment are not striking, there is evidence of disadvantage on subtler aspects of wellbeing such as school quality, emotional nurturing, or social networks (Rehman and Eloundou 2007). Where striking disadvantages exist, they are usually tied to living arrangements. The development of mitigating programs therefore requires focus on orphans' living arrangements. Since the orphan population is projected to grow in the next two decades, the "orphan caring" capacity of various African societies deserves research attention. Below, I outline a typology of institutional arrangements available for the care of orphans.

**A Typology of "Orphan Care" Institutions**

Available living arrangements for orphans in sub Saharan Africa combine the old and new. Most African orphans are raised among kin within the extended family, a system derived from the belief that children belongs not just to their biological parents, but to the broader family and community. Today however, new forms of orphan care have emerged, ranging from formal child adoption (both national and international) and institutionalization (orphanages) to new family structures (child-headed households). Table 1 gives a typology of these various forms, according to (1) sector of society and (2) proximity to the child's community.

**Table 1 Typology of Alternative Institutional Arrangements for the Care of Orphans**

| | Proximity to child's community | | |
| Sector of Society | Local/Family Based | External (to community) | Foreign |
|---|---|---|---|
| **Market** | Domestic Adoption | | International Adoption |
| **State** | Community Family Homes<br><br>Collective Foster Care | Orphanages | |
| **Civil Society** | Extended Family System<br><br>Child Headed Households with community support | Orphanages<br><br>Child Headed Households with NGO support | |

In this typology, the market, the state, or civil society offer different modes of regulation, whether demand and efficiency (in the case of the market), need and formal rules (in the case of the State) or altruism and informal rules (in the case of civil society). State institutions include

orphanages and they are managed by an elaborate bureaucracy. Additionally, the State can provide financial support to individuals willing to foster orphaned and vulnerable children. It can also at times provide financial support to community members and religious groups acting as surrogate parents who choose to live in the orphans' homes, a phenomenon observed in South Africa (Phiri and Webb 2002). Civil society carries the greater burden of raising orphans especially within the extended family networks. Civil society organizations such as churches and (NGOs) establish and manage orphanages outside of family or community control. While orphanages, foster care, and adoption have been a feature of orphan management for a long time, what is new is the emergence of new forms of families commonly known as "child-headed households." Some of these households exist with the support of unpaid community volunteers while others are supported by community volunteers paid by NGOs. The term "child-headed households" is not entirely accurate, as even most of these households do benefit from the oversight of adults in the community. In fact, some of these exist only *because of* --not *in spite of*-- support from NGOs (Rehman and Eloundou-Enyegue 2007).

**Evaluating Alternative Institutional Arrangements**

To evaluate the effectiveness of alternative institutional arrangements, I develop a framework based on three criteria considered in previous studies, including (1) current existence and sustainability (2) quality of orphan coverage and (3) accountability of each institutional arrangement (Phiri and Webb 2002; Rehman and Eloundou-Enyegue 2007).

The first criterion, current existence and sustainability, has to do with questions such as (a) How pervasive is the practice in terms of number of proportion of children it is able to absorb? (b) How overwhelmed is the current system? Can it afford to absorb more orphans? (c) Does the model have political and legal support; and is it cultural acceptable? (d) From whom does the model derive its financial support? The second criterion, quality of coverage, addresses (a) the depth of coverage, i.e., to what extent does the model provide access to education and all wellbeing needs of orphans (b) the duration of coverage, i.e., how long the institution takes care of orphans? (c) Selection issues, i.e., are some orphans systematically or implicitly excluded? (d) exclusivity, i.e., does the institution focus exclusively on orphans or is there competition with other children? The third criterion is about accountability to both children and the larger society: to what extent do children or their legal guardians have a say? Are these institutions accountable to the larger society when it comes to the wellbeing of children who are placed in their care? Ultimately, the goal is to identify which institutions have the greatest potential and to discern how various institutions complement each other. Using the criteria above, I evaluate five institutional arrangements, including (1) formal adoption (2) orphanages (3) foster care (4) extended family system and (5) child-headed households. I conclude with a discussion of potential synergy among these institutional arrangements.

## 1. Formal Adoption

*Existence and Sustainability:* Formal adoption, both domestic and international, is a legal act of transfer of rights over a child. Unlike fosterage within the extended family system, an adopted child is moved permanently and assimilated into the culture and tradition of the adopting parents.

More than any other institution, adoption, especially its international form, receives the greatest media attention compared to all other institutional arrangements for the care of orphans, as attested by past frenzy around Madonna's and Jolie/Pitt's adoptions[ii]. While this coverage usefully highlighted the emerging orphan crisis in Africa, it lacked depth and glossed over the limits of this solution. It thus created erroneous perceptions that the African orphan crisis can be solved through international adoption. For instance, Sarah Mraz said:

> *"The reason these children are placed with international families is because they cannot*
> *be cared for in their country of origin,"*
>
> *(ABC news, 2005)*

Such statements are misleading because they fail to acknowledge that most Africans would rather take care of their own kin's children, if they had the means. Additionally, they uncritically propose international adoption as a panacea for the African orphan crisis. Fortunately, the debate on African orphans and adoption has gathered momentum. For instance, the charity "Save the Children" was vocal in its opposition to Madonna's desire to adopt a second child from Malawi, suggesting that African orphans are best kept among their kin or community. Still, these critiques are flawed or incomplete as well. Often they romanticize the extended family system uncritically and fail to question its quality and depth of care. Second, they under-acknowledge the merits of attempts at reuniting siblings through double adoption (in the case of Madonna) or adopting other children who become sibs to the first adoptee. Despite its appeal overall, international adoption has fundamental weaknesses such as its limited coverage, cultural unacceptability, and limited accountability, once the adoption if finalized.

Adoption statistics are hard to come by, but UN data (Menozzi 2008) suggest that international adoptions are rare. For the 118 world nations with available data, only a quarter of a million adoptions (i.e., 12 out of every 100,000 children under the age of 18) occur each year. The numbers are lowest for sub-Saharan Africa, where fewer than 25 children per year are adopted internationally. To put these numbers in perspective, at best 1 in every 60,000 South African orphans has a shot at adoption. The odds for adoption are about 40, 000 in Malawi or Mozambique. Clearly, international adoption is limited in scope unless it grows dramatically in the near future. Such growth is unlikely because old age or perceived health problems compromise the desirability of orphaned and abandoned children in the international adoption market (Graff 2008). AIDS orphans are often stigmatized because of their presumed HIV sero-status.

Most African societies view formal adoption as culturally foreign. In Zimbabwe for instance, the extended family system is built within the limits of traceable lineage along totem lines. Adoption also lacks the political support that would streamline its laws and increase its frequency. Even in places with adequate legal frameworks, adoption is curtailed by lack of public funds, and the onus is typically on the adopting individual or family to demonstrate financial ability to adopt a child.

*Quality of Orphan Coverage:* Because prospective adopters are subjected to background checks, the physical and economic needs of adopted children are expected to be met. What remains unclear is whether psychological needs are equally met. Because orphans experience traumatic experiences (not least, watching their parents get sick and die, and being transferred from one

home to another), their relocation into another country is potentially traumatic. Furthermore, international adoption permanently cuts the socio-cultural and kinship ties by transplanting the child to a geographically distant location. Adoption also suffers from unidirectional selection: the adopting family has an opportunity to select the child but seldom is a child given the chance to choose which family it wishes to live with. Finally, orphans compete with other poor and vulnerable children who may equally need a home and family.

*Accountability:* While international adoption is usually expected to dramatically improve the life chances of African children, these improvements are not monitored and the adopting families are not held to strict account. Within the receiving societies, adopted children are protected by the same laws that safeguard the rights and privileges of all children. As such, adoptive parents will presumably ensure that their adoptees access adequate healthcare and education. However, subtle aspects of psychological wellbeing are harder to monitor and enforce. Adopted children may not fully understand their rights and possible recourse if rights are violated. Second, because the adoptive parents are their only family in the foreign land, they are socially isolated. Third, adoptees may have limited recourse in negotiating to be reunited with their siblings. On the other hand, if the adoptive parents can be emotionally scarred if they end up with a "problem" child. They could send the child into foster care, respond with violence, or experience guilt, blaming themselves for the child's struggles even if they tried their best to provide a good home for the child.

At the broader policy level, international adoption involves a network of diverse stakeholders such as the state, lawyers, non-governmental organizations, private consulting

adoption agencies, among others.  The infamous Zoe's Ark case illustrates the consequences of a malfunctioning international adoption system. In October 2007, six members of the French NGO 'Zoe's Ark' were arrested together with three journalists and seven crew members for attempting to illegally smuggle 103 Chadian children to France (Africa Research Bulletin, 2007).  Zoe's Ark maintained that it aimed to provide foster care for Darfuri orphans from the Sudan.  Yet, the evidence showed that most of these children were in fact not Sudanese. Most had traceable relatives and many had been lured by promises to receive sweets or candy. This scandal, which stirred a massive diplomatic row between France's and Chad's presidents, is significant in our understanding of international child transfers.  First, it put to test France's position on the sovereignty of African judicial systems as Parisians interfered with due process in Ndjamena after the arrest of the Zoe's Ark team.  Second, it brought into light issues of differential power relations and Western perspectives on the locus of solutions to perceived African crises.  Zoe's Ark, like many NGOs, used their financial muscle to charter a flight that almost airlifted more than a hundred Chadian children without the consent of their parents or relatives.  In fact, Chadian President Idriss Deby expressed his fear that these children could have been sold to European pedophiles, or even killed for valuable body organs.  Because Zoe's Ark employees did not make efforts to understand the context and perhaps seek local solutions, they reinforced the faulty assumption that Africa is a continent that needs pity rather than partnership. What Africa needs is not a proliferation of unaccountable NGOs that thrive on misplaced pity, but partnerships rooted in a desire to work with communities in developing enduring strategies for managing orphans. Where international adoption is the best recourse, it should be managed through a system that is closely regulated by the state.

Overall, international adoption remains very limited in scope of coverage, with problematic implications for children's education and emotional wellbeing. As highlighted by the Zoe's Ark incident, effective international adoption requires comprehensive legal frameworks as well as clear accountability for all participants involved.

**Orphanages**

*Current Existence and Sustainability:* Orphanages represent the formal institutionalization of large groups of children, including orphans and non orphans. Children's lives are systematically monitored and conditioned according to standard routines similar to boarding schools or prisons. Even though their organizational structure is similar, African orphanages vary depending on the source of their funding; the State, NGOs, and Faith-Based organizations (FBOs). In terms of coverage, orphanages cater to very few orphans. Recent data suggests that only seventy six orphanages are found in Zimbabwe, and they cover less than one percent (4,000) of the country's million orphans.

It is unlikely that this formal institutional arrangement will to take up an increased proportion of orphans. First, African States and international NGOs may experience declines in revenue due to economic downturns. Phiri and Webb (2002) contend that orphanages are the most expensive and least cost effective of all alternative institutional arrangements for the care of orphans. Figure 1 shows the costs per child. It costs between US$245 (South Africa) to over US$1300 (Eritrea) to keep one orphan in an orphanage per year.
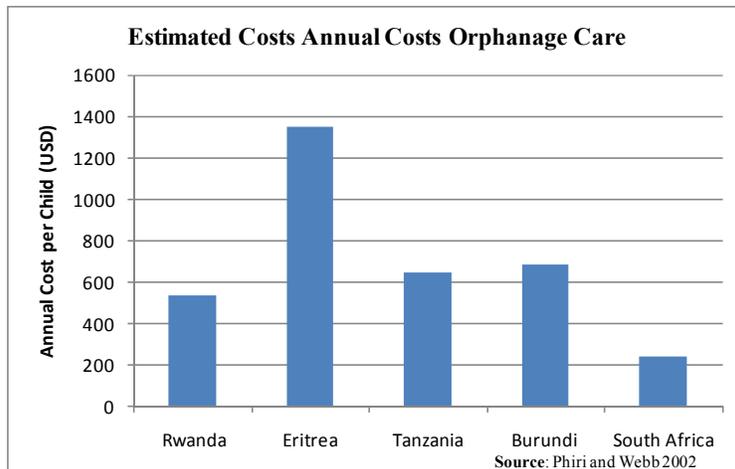
**Estimated Costs Annual Costs Orphanage Care**

Source: Phiri and Webb 2002

**Figure 1: Comparison of Estimated Annual Cost of Keeping One Orphan in an Orphanage/Year**

While Phiri and Webb (2002) estimated an average cost of $720 for Zimbabwe, recent data shows that this figure has remained constant as data for the year 2009 show an average annual cost of $732. Zimbabwean orphanages reported a minimum of $30 per month and a maximum of $100 per month. Clearly, this institutional arrangement is too expensive to be relied upon for the care of orphans.

The high cost of institutional care is more striking when compared with other mechanisms (Figure 2). In South Africa, orphanages cost 6 times more than foster care; 9 times the cost of community-based support; and up to 8 times the cost in the traditional extended family system.
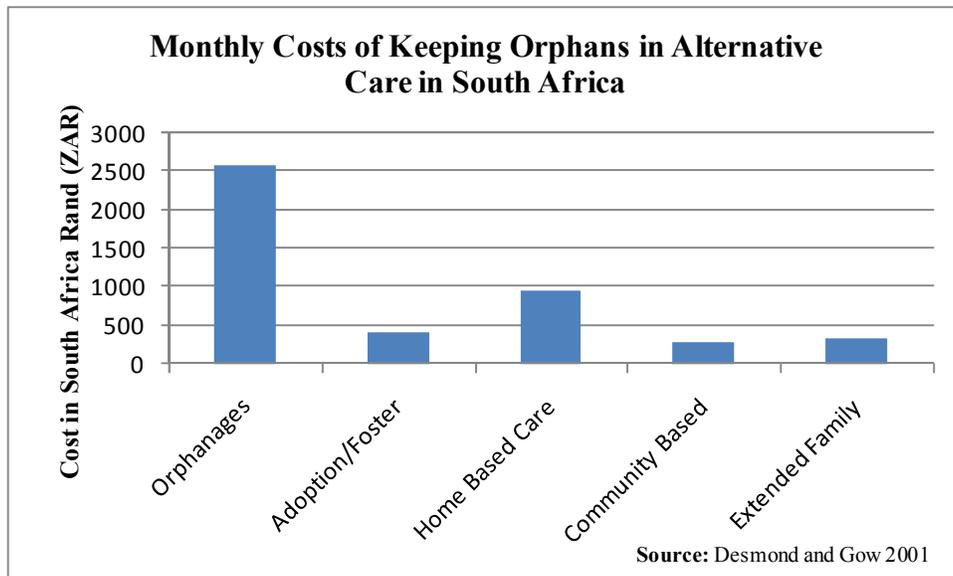
15

**Monthly Costs of Keeping Orphans in Alternative Care in South Africa**

**Source:** Desmond and Gow 2001

**Figure 2: Comparative Cost of Keeping Orphans in Alternative Care**

Second, orphanages are not widely accepted culturally. Because they uproot orphans from "normal" communities and family life, orphanages raise children who may have trouble fitting into the larger community when they become adults. Other limitations are outlined below.

*Quality of Orphan Coverage:* Phiri and Webb (2002) argue that communities and individuals like orphanages because they presumably provide basic needs in food, education and health. Yet, they fail to attend to children's psycho-social needs (Subbarao, Mattimore and Plangemann 2001). Because orphans grow up institutionalized in environments with few adults, many have difficulties forming relationships in their adult lives (ibid). Institutionalized orphans may also develop a "misplaced sense of entitlement without a parallel sense of responsibility" (Phiri and Webb 2002). Importantly, orphanages cater for orphans only for a brief time period. As children

become adults, they join mainstream society. First, just as the child is scarred from the loss of parents and possible separation from kin, the fragile friendships and acquaintances made in orphanages are ruptured at the time of graduation. Institutionalized orphans thus face transient relationships because their daily milieu is shaped by constantly changing bureaucracies or staff and fellow orphans. It is not surprising that most fail to bond. Readjusting is potentially challenging for those who do not excel in school, because the best asset most orphans can get from an orphanage is education.

To what extent do orphanages face selection issues? Because communities and individuals often perceive orphanages as havens of good health, food, and education, they often end up raising children who could otherwise have grown up with their own parents and relatives. Phiri and Webb (2002) note that as many as half to three quarters of children in orphanages in Uganda and Zimbabwe, respectively, had contactable relatives or both parents alive. Orphanages end up being crowded out by other needy children, and there is little room left for actual orphans. Moreover, in low literacy settings, it is difficult to verify the status of children because of poor recordkeeping on parents' living status. Besides, orphanages could face moral and ethical dilemmas when it comes to recruitment. How does one justify extending benefits to orphans alone when the community is filled with children from poor socio-economic backgrounds who also deserve access to education, food, and healthcare?

*Accountability:* Orphanages are top-down bureaucracies with defined chains of command. Children in orphanages live by formal rules and regulations that were codified without their input. Moreover, while parents can provide individualized attention, bureaucrats who manage

orphanages could be too preoccupied with the overall performance of the group than individual children. Perhaps one way to assess the contribution of orphanages is to take a life course approach and track cohorts of orphans and retrospectively evaluate their trajectories compared to similar groups of children in alternative care. In-depth research on the selection and long-term management of orphans is needed. Overall, however, most orphanages clearly need public oversight to improve accountability to children and to society.


### 3. Foster Care

*Current Existence and Sustainability:* Foster care differs from other forms of orphan management because it is temporary and transient. A child with no parental support protection is placed with an adult caregiver, and the State covers the cost of care. This legal arrangement is typically made by the State social welfare services or by court order. Foster parents or individuals do not have custody because they do not formally adopt the child. The State, however, expects them to treat the foster child as their own with regard to food, housing, clothing and education. Foster care is often chosen for delinquent and neglected children, but it is highly uncommon in Africa. It has been documented in Burkina Faso (Sanou *et al* 2008) and South Africa (Phiri and Webb 2002) where it takes two forms: community family homes and collective foster care[iii]. Whether it can expand to absorb more children is unclear. It has received little political support in few African countries outside of South Africa (Phiri and Webb 2002) but it is desirable because it keeps children rooted within family structures and local communities. The Collective Foster Care model is particularly appealing because it keeps children rooted in their parental homes, thus providing a sense of stability and continuity. Still,

because children still live on their own without a resident adult, this model still suffers from the same weaknesses as "Child Headed Households," discussed later.

*Quality of Coverage:* Because they receive government grants to cover basic expenses, foster parents should theoretically be able to cover the educational expenses of orphans. The system should also meet emotional needs when the foster parents bond with the children. The ideal situation is one in which the foster mother treats orphans as "their own," participating fully in the child's life (beyond providing food and shelter). The true measure of the quality of foster care is when one cannot easily differentiate between orphans and biological children.

South African models of foster care differ from Western models in that the latter are temporary and transient. The Collective Foster Care model clearly caters for those orphans whose parents *owned* homes. In that regard, it discriminates against orphans from low-income families whose parents *rented* homes and who typically get evicted (or voluntarily move out) upon the death of their parents. Given that African State bureaucracies are often concentrated within cities, rural orphans are at a disadvantage for various reasons. First, potential care givers are less aware of existing financial incentives to care for orphans. Second, even those who are aware might find it difficult to travel the long distances it takes to collect and cash government issued checks for orphan upkeep. Additionally, some rural communities have poor transportation infrastructure that limits the State's ability to monitor the wellbeing of the orphans. Yet, the majority of the African children population lives in rural areas. While in Western contexts foster care caters for the welfare of a smaller proportion of needy children, the growing numbers of

orphans in Africa is likely to add pressure on the system as it creates more demand than supply of foster caregivers.

*Accountability:* Who holds the foster mothers, fathers or the community surrogate mothers and fathers accountable for the children's wellbeing? As with adoption, orphans in foster care have limited recourse. In a strong State, the bureaucracy has the administrative apparatus to monitor upkeep of children. In much of sub-Saharan Africa, community monitors are perhaps more desirable than social welfare supervisors. The former are more able to detect emerging problems whereas State social welfare supervisors only come periodically and might be late in noticing these problems. Community monitors are akin to the extended family. Ideally, they view the orphans in foster care as if they would their own. The greatest appeal of this system is that it involves multiple monitors. As a result, it limits possibilities for corruption that arise when orphans' wellbeing in placed in the hands of a limited number of monitors.

### 4. Extended Family System

*Current Existence and Sustainability:* The extended family system is the most common form of orphan care in Africa. It takes in almost 9 out of 10 orphans and it pre-dates the HIV/AIDS orphans crisis. As early as the mid 1980's, Isiugo-Abanihe estimated that close to a fifth of all African children spent part of their childhood among kin (1985). Given that the Population Reference Bureau (PRB 2008) estimates that 43% of Africa's 809 million people are below the age of 15, it follows that up to 70 million children of school-going age spend part of their childhood living among kin. These informal fosterage mechanisms are distinctive from formal adoption in that the arrangements between sending and receiving families are mutually beneficial (Eloundou-Enyegue and Stokes 2002). For instance, an urban family that receives and raises a

child from the countryside might benefit from receiving foodstuffs and other supplies from the biological parents of the fostered child. Recent studies, however, have challenged the effectiveness of this system because times have changed. In particular, the sheer number, and proportion of children orphans who need fosterage under crisis has increased (Rehman and Eloundou-Enyegue 2007). They also observe that the rise in street children, and "child headed households" partly indicates that the informal safety net is becoming overstretched. Additionally, Madhavan (2004) points to the stigma associated with orphanhood where children are largely assumed to be HIV positive. Relatives shun them either because they are afraid of contracting the disease, or anticipate large costs associated with managing their health and possibly funeral expenses. Further, if Eloundou-Enyegue and Stokes' (2002) evidence from Cameroon holds true in other countries, we can expect that fewer families will be willing to foster orphans during periods of rapid economic decline such as is taking place currently[iv]. Yet, in spite of these problems, the future of orphan care lies primarily within this informal system because the other alternatives have limited coverage, are financially infeasible, or are generally culturally unacceptable.

While fosterage along kinship lines is grounded in African culture and tradition, it receives the least support from the State compared to foster care for instance. Perhaps the greatest threat to the capacity of the extended family to respond to the needs of African AIDS orphans is family nucleation. Madhavan (2004) cautions that the African extended family system is under assault as more people embrace Western modernization values that celebrate the virtues of smaller nuclear families. This movement challenges the notion that individuals are responsible for their kin. Instead, it depicts kinship loyalties and norms of reciprocities as privileges and optional. Nucleation is therefore centered on raising fewer and "quality" children.

Indeed, this notion is naturalized through representations in many forms. For instance, most text books in Africa reflect images of urban nuclear families comprising of a father, mother and two children; often a boy and a girl (Maganda, 2009). In short, a new form of individualism is slowly gaining ground in African societies. Yet, while nuclear families survive in Western contexts, they only do so because of a strong publicly-supported social safety net that caters for the poor and marginalized. But, most African States do not have similar institutions. In fact, given the emerging problems around universal safety nets in the United States, as well as in other European nations such as France, Africa could be better served by preserving and adapting the extended family system.

*Quality of Orphan Coverage*

The extended family system provides deep care, as it meets physical and social needs such as food, shelter, health, education, psycho-social and spiritual care (Phiri and Webb 2002). Ideally, a child that is fostered among kin is raised within a family that reinforces community bonds while instilling local values and beliefs. Because the child grows up among family and kin, s/he has positive role models and mentors for professional success, community participation and selfless stewardship. Additionally, the extended family spiritually grounds orphans within chosen faiths in ways that build morality and reduce deviance. Moreover, an orphan who is fostered among kin may be able to develop deeper social ties. But, recent evidence suggests that the extended family system is not effective as a custodian of orphans' education (see Case and Ardington 2006; Evans and Miguel 2007; and Ainsworth and Filmer 2007). Below, I discuss three fundamental reasons that may explain the poor outcomes for fostered orphans including (1)

underlying motivation for fosterage (2) direction of fosterage flow (3) commitment to honor sibling ties.

Whether extended family can provide high quality care to orphans depends on host families being able and willing to provide continued support. Recent evidence suggests a changing demographic where the landscape of caregivers is increasingly comprised of old grandmothers who are physically and financially unable to provide care (Madhavan 2004; Foster 2000; Rehman and Eloundou-Enyegue 2007). Even when families are able, their willingness to provide such care is crucial. This in turn depends on whether the family was motivated by altruism, social pressure, or reluctant acceptance of "visiting" relatives (Eloundou-Enyegue and Stokes, 2002). Importantly, fosterage may also be used instrumentally to meet the domestic labor needs of the receiving household. When altruism –a genuine desire to help others without expecting any return—is the motivation, then orphan should receive the greatest care and support. On the other hand, inferior outcomes are likely if fosterage is driven by all other motives listed above. Caution is therefore warranted against romantic perceptions of extended family networks as un-problematically harmonious and altruistic. Indeed, the future potential of this system could be enhanced by ensuring that children are placed with people who are not only able, but are also *willing* to be custodians of their wellbeing and education.

Furthermore, the potential of the extended family to buffer inequality between orphans and non-orphans largely depends on the direction of fosterage flows along a socioeconomic gradient. Eloundou-Enyegue and Kandiwa (2008) suggest that flows can be horizontal, downward, or upward, with each type having different implications for aggregate inequality among children. Circulation or horizontal flows occur when orphans are adopted into families of

similar economic and demographic profiles as their own. The flows are downward if orphans end up in families that are worse off than their original families. In such cases, the extended family network has the least potential to improve or maintain the wellbeing of orphans. Upward flows can occur within short distance and in this case, orphans from one socio-economic group are adopted into families of slightly better socio-economic status. Finally, orphans can get bumped into much wealthier and smaller households in ways that improves resources that are available for their wellbeing. Therefore, the true measure of the effectiveness of the extended family system in buffering the inequality in educational access and achievement of children is driven by the proportion of orphans who are circulated, compared to those who experience positive transitions after their parental death. A recent study by Ainsworth and Filmer (2007) suggests evidence of negative transfers of orphans, especially paternal orphans, along economic lines.

A third measure of quality care is whether extended families can keep siblings together where possible. Although this aspect is important, it is vastly under-researched. While separating siblings is heart wrenching (Brodzinsky 2008), separation might at times be the only workable option, even if the system occasionally provides for communication and periodic reunions between these siblings. Apart from depth of care, the extended family system may also suffer from selection bias. As Rehman and Eloundou-Enyegue (2007) note, orphans tend to displace other poor children, and this becomes a zero-sum game where the care of orphans comes at the cost of other poor children. Moreover, fosterage opportunities often accrue along kinship lines rather than on need, conforming to The Hamilton Rule (see Case, Paxson and Ableidinger 2004).

Even with these limitations, the extended family system offers the greatest coverage. It also means that a greater proportion of orphans are falling through the cracks in ways that limits their

life chances. As such, efforts towards improving the wellbeing of orphans should be targeted towards strengthening the extended family's commitment to orphans.

*Accountability:* The extended family system, at present, is lacking in accountability. Traditionally, fosterage decisions between sending and receiving families had socially sanctioned, albeit unwritten, rules of accountability. This compact breaks down for orphans because the receiving household does not have to respond to the child's biological parents in the case of inferior educational outcomes. Even when other relatives can play this monitoring role, this is clearly a weaker mechanism. The child has little recourse when faced with discrimination in terms of educational access (enrollment), participation (attendance) or investment (clothes, uniforms, fees, supplies, transportation, etc). In most African States, orphans suffer silently or they move to other relatives. The State neither enforces rules nor monitors families to ensure that children stay in school. Again, efforts towards promoting the wellbeing of orphans can easily focus on education. A rights-based approach should inform how foster parents treat and raise orphans. It is naïve to suggest that children claim their "rights" because of the obvious imbalance of power and the backlash that would result. Instead, mechanisms of accountability should be placed within the communities (by monitoring progress and wellbeing of orphans) and within the fostering families (by providing them with the financial and institutional support that eases the burden of fostering).

## 5. Child Headed Households

*Current Existence and Sustainability:* Child Headed Households (CHHs) are households where children live without an adult. This recent construction has no precedent in African culture because traditionally, each household always had an adult to nurture children. The literature identifies three forms of CHHs, namely those who live alone; those who live alone with regular community contact, and those who live alone and receive financial and other support from religious organizations and NGOs (Rehman and Eloundou-Enyegue 2007; Foster 2000). There are few independent CHHs in most African countries. Where they do exist, their livelihoods are precarious. When journalists encounter them, they tend to paint graphic pictures of despair and social exclusion. In part because this system is recent, it is not yet overwhelmed. In theory, every home with orphans can become a CHH. Rehman and Eloundou-Enyegue (2007) note that some orphans may downplay their familial ties in order to justify eligibility for material support from NGOs. The question, though, is not whether CHH can cover many orphans, but whether society should allow it to grow? Clearly, this becomes a moral question. To my knowledge, this system lacks both political and legal support. Additionally, it defies the traditional African culture of the concept of "family" or "household". One could argue that the CHH is at the margins of the old and the new. On one hand, the community supervised model lends itself to traditional expectations of adult presence and oversight over children. On the other hand, the NGO-supported and independent households belong to the new forms of existence where children raise themselves.

Most CHHs exist without State or external support. However, a growing number of NGOs, including World Vision, support these family forms (ibid). NGOs are well positioned to mobilize financial support locally and abroad. Yet, their financial backing is short-term in nature. Orphans often become even more vulnerable when NGOs withdraw their financial and other

material support. In periods of rapid economic downturns (such as the current global economic crisis), NGOs that depend on corporate generosity are at special risk of funding cutbacks. A possible solution may be to identify adults that join these CHHs, with state support. Where adult volunteers cannot be found, orphans could be absorbed into existing households.  The State could provide financial resources to cover the costs of identifying living relatives.  In the absence of willing relatives, those orphans could be placed with a non-related foster care family, again, trying to keep siblings together as much as possible.

*Quality of Orphan Coverage:* Compared to the extended family, orphanages, and foster care, CHHs provide the most questionable and variable depth of care. It makes it possible for children to remain stewards of their inheritance, where any exists, and subject to enforcement of inheritance laws in particular national and local contexts.  However, it does not permit effective socialization. While some CHH have contact with NGO personnel or community volunteers, these adults fall short of replacing the constancy of parents in a child's life.  Clearly, children who live alone often have to look within for support and for solutions to social, economic and psychological problems.  In fact, their very existence provides a platform for rights violation as adults are not always present to protect them at night. In that regard, girls, especially those reaching adolescence, are particularly vulnerable to rape and other forms of sexual abuse. Overall, the existence of CHHs exacerbates inequality among children because it is likely that the poorest children are the ones who fail to attract relatives that are either willing to care for them and ensure their continued access to education.

*Accountability:* Orphans growing up in CHHs are most vulnerable because no one is a custodian or can be held accountable for their wellbeing. Society at large is the main guardian of their safety and wellbeing. Human capital theory suggests that it is in the best interest of society to tap all available human resources and provide equal opportunities to all children to explore their potential. This ideal is best tested when it comes to children's education because one never knows where *"the next Einstein"* could come from. Therefore, society loses if it fails to make use of all its human resources. Society also stands to lose by raising a subset of children, and later adults, who feel disenfranchised, and may therefore be more prone to deviance. Indeed, any credible efforts towards maintaining a façade of meritocracy must begin by providing real and substantive opportunities to less fortunate children. Orphans unambiguously meet this criterion.

**Conclusion**

At a time when many sub Saharan African countries must deal with rapidly growing orphan populations, this study critically analyses the strengths and weaknesses of existing mechanisms for orphan care. The review covers both formal institutions --such as local and international adoption, foster care, orphanages-- and informal mechanisms like the extended family system and child headed households. Results corroborate previous studies in suggesting that the future of orphans' care largely belongs to the extended family system. However, since this system is showing signs of fatigue and is becoming overburdened, research is needed to examine how its weaknesses could be addressed, especially with regards quality of care and accountability. Also, this paper highlights areas where alternative institutional arrangements may complement the extended family system in raising orphans. The paper contends that society cannot (or should

not) let orphans bear the burden of their circumstances by growing up in Child Headed Households. Indeed serious efforts aimed at improving the wellbeing of orphans should identify what is best across all models and find areas in which ideas, methods, and practices could be cross-fertilized.

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**Notes**

[i] ABC News (2005) Angelina Jolie Inspires International Adoptions, http://abcnews.go.com/GMA/Story?id=1175428&page=1, October 1st.

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[ii] Mainstream media headlines such as "Angelina Jolie Inspires International Adoption" by the ABC News in 2005 captured the imagination of domestic and international audiences.

[iii] In the Community Family Home system, the State pays a foster mother to provide care for up to six children, making sure to keep siblings together. The foster mother is provided with a furnished home, an allowance for her services, and grants from the State for the upkeep of the children. The system also tries to establish a cluster of foster homes in ways that allow community leaders to monitor the welfare of the children. The second model, Collective Foster Care, refers to a system where orphans remain in their own parents' homes while getting supervision and guidance from adult volunteers from the community or from local religious groups.

[iv] . Eloundou-Enyegue and Stokes (2002) estimated that the odds of a Cameroonian child being fostered were 25% lower during economic crisis years compared to previous non-crisis years.