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Approaches for psychosocial support towards orphans and vulnerable children by community-based workers in the Vhembe district, South Africa

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Abstract

Introduction The orphan and vulnerable children crisis has raised the need for alternative solutions to their problems. These new alternatives gave prominence to the growth of community-based organisations and their interventions. Community-based interventions are a crucial component of the response to ensure that the demands of orphans and vulnerable children are mitigated as they offer initial support and act as well-being nets.

Methods A qualitative exploratory-descriptive and contextual design was used to explore possible approaches to psychosocial support for orphans and vulnerable children from community-based workers. This study was conducted in four municipalities in the Vhembe district: Thulamela, Makhado, Collins Chabane, and Musina. The population consisted of community-based workers working with vulnerable and orphaned children in the Vhembe district. Data were collected in focus group discussions with the community-based workers using a focus group discussion guide with open-ended questions. The data were analysed according to Tesch's open analysis guide to analyse qualitative data. The measures to ensure trustworthiness included transferability, conformability, credibility, and dependability.

Results Data analysis generated the following theme and subthemes: Psychosocial interventions provided included Physical support, educational support, psycho-educational support, activities and socialisation, caregivers support and involvement and inter-professional referral.

Conclusion These findings provide an insight into the types of psychosocial support interventions provided by Community-based organisations to orphans and vulnerable children. Conversely, the study also revealed that community-based organisations are experiencing challenges when delivering those services to orphans and vulnerable children.

Keywords Approaches, Psychosocial support, Orphans and vulnerable children, Community-based workers.qwass

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Study setting

This study was conducted within the four municipalities in the Vhembe district: Mlamela, Makhado, Collins Chabane and Musina municipality. Vhembe district was selected because it has a large number of community-based centres catering for OVC. There are one hundred and fifty-three (153) community-based organisations in the Vhembe District [

for audit trail purposes, promoting the consistency and reliability of the study's outcomes [21].

Results

“Behaviour changes through social behaviour, we organise programs on which we can identify children’s problems. We also make groups because sometimes the child suffers from peer pressure, so we group them and educate them about self-esteem and awareness.” (Female participant number 18, age 47).

“so they do all things being done here, every week we have a schedule which indicates dates of educational programs and hygiene as well for the kids to know themselves and also be self-confident because we are dealing with children who do not stay with their parents and do not have parents at all, so we tell them even if you are an orphan or vulnerable there is also the future with great advantages.” (Female participant number 25, age 44).

“We also do awareness among these children so that they can be aware of what they might experience, this includes including teenage pregnancy, abuse, and substance abuse. We tell them the disadvantages, and we also tell them where to go in case they are being abused are being abused; we also build the children’s self-confidence, and we teach them about the adolescence stage so that they should not be surprised when they see changes in their bodies.” (Participant number 26, age 39, female).

Psychological support

Findings from the focus group discussions show that the community-based organizations provide support to OVC by providing psychological support through home visits, counselling, creating a memory box and grief counselling. The following quotes from the focus group discussion supported the following findings:

“We also give psychosocial assistance to these children because some come with mental health issues depending on the home background they are coming from; these children get counselling regarding their home situations, and this also makes them feel that their home situation is not different from other children’s situations” (Female participant number 22, age 33).

We also give psychosocial assistance to these children because some come with mental health issues depending on the home background they are coming from; these children get counselling regarding their home situations, and this also makes them feel that their home situation is not different from other children’s situations” (Female participant number 22, age 33).

“To children who lost their parents, we do grief work where we guide them on how to accept the situation of losing their parents, we communicate with them, and we also do a memory box where they put pictures of their parents inside the box, they put things which their parents loved a lot when the child feels like they miss the parent they open the memory box and watch the parent and then heal.” (Female participant number 24, age 48).

“To contact with children suffering from depression, we do home visits, and we find that the background of the child is not favourable.” (Female participant number 5, age 41).

Activities and socialisation

The focus group discussions revealed that the community-based organisations are supporting OVC using different activities and socialisation, and the following quotes from the focus group discussions supported this:

“We also make sure that the kids do not grow up in the streets, where they will end up stealing or committing crimes. What we do is that we ensure that after school, there are many activities the children do, such as Tshigombela [Tshivenda dance for girls or females], shavhambevha [a game wherein someone acts as a cat and another one as a rat, then the other sings while the one who is a cat running after the one who is a rat, the song is run rat, the cat bite], sports and other activities. Hence, we take these children as our very own.” (Female participant number 9, age 30).

“Children, when they come, they get excited when playing and dancing traditional Venda dance such as Tshigombela [Tshivenda dance for girls or females]. It really [sic] excites them, and they feel at home.” (Female participant number 17, age 41).

“During holidays, we take them on trips so that they should not envy others with parents who can afford them.” (Female participant number 19, age 40).

“The activities include playing soccer with them to keep them busy from being in the streets where they can engage in substance abuse or dating; we do indigenous games and traditional dances such as gumboot, Tshigombela, Malende (Tshivenda traditional dance for girls and boys/female and males)” (Female participant number 27, age 33).

Caregiver support and involvement

Findings from the focus group revealed that community-based organisations provide support towards OVC through caregiver support and involvement. These findings were supported by the following quotes from the focus group discussions which indicated:

“Whenever we admit children at the beginning of the year, the form has information regarding the kiad<</Lan -12.8700ding

the guardian, telling them about the consequences and disadvantages of a child not getting support from home.” (Female participant number 26, age 39).

Inter-professional referral

Findings from the focus group revealed that community-based organisations provide support to OVC through inter-professional referral. The following quotes supported the focus group findings:

“If we find that the child has a problem which is beyond us, we normally refer them to social workers.” (Female participant number 9, age 30).

“When it comes to policies, we do not see any need for change because, for now, we are following well the one we are guided with. For instance, if a child has a situation beyond our control, we refer them to SASSA telli10 9.8 56.692901611/La133.255996704 517.700805664 T3-1956m t776SASSA is be

programs, further reinforcing the significance of inter-professional referral in OVC care.

Conclusion

This study sheds light on the multifaceted nature of psychosocial interventions extended to OVC by community-based organisations. The findings underscore the diversity and richness of support mechanisms encompassing various dimensions. These include physical assistance, including providing essential resources like school uniforms, cooked meals, clothing, and even financial contributions for educational needs. Educational support is crucial, as community-based organisations enhance OVC's academic journeys through homework assistance, career guidance, and improvement of read-

8. Sitienei EC, Pillay J. Psychosocial support for orphans and vulnerable children in a community-based organization in Kericho, Kenya. *J Children's Serv.* 2019;14(4):292–302.
9. Dekeza C. The responsiveness of rural primary schools to the needs of orphaned and vulnerable children in Zimbabwe. Doctoral dissertation, Unisa, 2018.
10. Pillay J. Factors leading to orphans and vulnerable children living in community-based homes. *J Psychol Afr.* 2016;26(6):558–61.
11. Penner F, Sharp C, Marais L, Shohet C, Givon D, Boivin M. Community-based caregiver and family interventions to support the Mental health of orphans and vulnerable children: review and future directions. *New Dir Child Adolesc Dev.* 2020;2020171:77–105.
12. Breckenridge TA, Black-Hughes C, Rautenbach J, McKinley M. HIV/AIDS orphans in South Africa: NGO interventions supporting transitions to alternative care. *Int Social Work.* 2019;62(2):502–17.
13. US President's Emergency Plan for AIDS Relief (PEPFAR). 2019 PEPFAR Latest Global Results. PEPFAR: 2019. Accessed June 6, 2020. <https://www.state.gov/wp-content/uploads/2019/11/PEPFAR-Latest-Results>