Anxiety in orphaned adolescents in a South African secondary school: Psycho-educational and social factors

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This qualitative research study explored the psycho-educational and social factors that contribute to anxiety in orphaned adolescent students in a secondary school in Welkom, Free State, South Africa. A multiple case-study design was used to collect data from eight adolescents (4 males and 4 females) aged between 11 and 14 years. The participants were purposefully selected from a mainstream secondary school in a suburban area in Welkom. Data collection through individual and semi-structured interviews was supplemented with collages and a focus group discussion with the participants. The psychological findings indicated that the orphaned adolescents experienced anxiety concerning their own death as well as that of their significant others. From an educational perspective, their anxiety was due to the negative attitudes of their teachers. Furthermore, the social factors that contributed to their anxiety included economic survival, grieving according to cultural beliefs, and the isolation they experienced. Adopting a social ontogenetic theoretical perspective, the authors provide guidelines for educational psychologists on what psycho-educational and social support interventions could be provided for orphaned adolescents.

Introduction

Orphanhood is a growing worldwide phenomenon and there are currently an estimated 153 million orphans globally. There are approximately 52 million orphans in Africa (Statistics South Africa [Stats SA], 2016). UNICEF (2017) recently released information reporting that sub-Saharan Africa has approximately 17.8 million orphans. South Africa is reported to have 3.7 million orphans, which constitutes 17% of all orphans globally. In the Free State province, where the secondary school referred to in this article is situated, 19% of South African orphans are found (Statistics South Africa, 2016). UNICEF works closely with the Department of Social Development in South Africa and provides statistics that form the basis for the design of policies that are aimed at supporting and caring for orphaned and vulnerable children (Department of Health, 2005). However, despite the prevention strategies implemented through the Human Immunodeficiency Virus (HIV/AIDS) and Sexually Transmitted Diseases (STD) Strategic Plan, the prevalence of HIV/AIDS continues to rise (Department of Health, 2003, p. 4). The HIV/AIDS pandemic is amongst the leading causes of death worldwide (UNICEF, 2017). The global estimate of people living with HIV/AIDS in 2017 stood at more than 36.9 million (UNAIDS, 2018). It is estimated that South Africa had 7.52 million people living with the virus (Stats SA, 2018). As the Free State is one of the nine South African provinces, it also has a high prevalence of HIV/AIDS (UNICEF, 2017).

Orphanhood can be more challenging for adolescents. The challenges they face include lack of parental support, no emotional support, anxiety and lack of financial resources to attend to their basic needs (Shulga, Savchenko & Filinkova, 2016). According to UNAIDS

(2018), half of the orphans worldwide are adolescents. Children are left orphaned either through the death of their parents or because of neglect by their parents. The absence of parental support often results in psychological (Kaur, Vinnakota, Panigrahi & Manawa, 2018), financial, socio-emotional, and educational challenges (Ishola, 2012). The psychological, educational, and social needs not met are likely to contribute to anxiety in orphaned adolescents. Previously, research focused on orphans or orphans and vulnerable children (Mwoma & Pillay, 2016) and not on the psychological, educational, and social factors that contribute to anxiety in orphaned adolescents, in particular. Because of a lack of research in this area, the current study sought to explore the psycho-educational and social factors that contribute to anxiety in orphaned adolescents. Therefore, the main research question in this study was the following: What psycho-educational and social factors contribute to anxiety in orphaned adolescent learners in secondary school?

This study specifically aimed to explore the psycho-educational and social factors that contribute to anxiety in orphaned adolescent learners in secondary school. In addition, the study aimed to provide guidelines for educational psychologists on how to design psycho-educational and social support interventions for orphaned adolescent learners experiencing anxiety in secondary school.

Literature review

Anxiety and anxiety-related challenges are common and reach a peak during adolescence due to the various transitions adolescents go through. Adolescent learners were chosen as participants because adolescence is a period where anxiety probably reaches its highest level due to the difficulty in dealing with hormonal mood swings, bodily changes, peer and social pressure, as well as constant brain development (Jaworska & MacQueen, 2015). The death of a parent or guardian further contributes to anxiety, and this study focused on the psycho-educational and social factors that are likely to increase anxiety in orphaned adolescents.

Psychological factors

Adolescents who have lost one or both of their parents experience negative psychological feelings such as grief, anger, stress, depression, anxiety, or a combination of these (Jacofsky, Santos, Khamlani-Patel & Neziroglu, 2013). Furthermore, genetics and brain chemistry can contribute to anxiety in anyone, but orphaned adolescents' experience of it is intense due to their developmental stage and the traumatic event of losing one or both parents (Jacofsky et al., 2013). Therefore, the loss of a parent could compound anxious emotions in an adolescent.

However, one needs to note that there are adolescent orphans who have the ability to cope with the parent's death, and display resilience despite the adversities they are exposed to. Asikhia and Mohangi (2015) argued that a conducive and supportive environment and the individual's sense of control tend to enhance resilience.

Educational factors

Educational factors include the school climate, teacher and peer attitudes, and the availability or lack of resources in schools (Taukeni, 2015). If the school climate is not conducive, it can contribute to the adolescent's anxiety. The teacher is regarded as one of the significant others in the child's life. His/her attitude has a profound impact on the child's development. If teachers have a negative attitude, especially towards learners facing challenges, such as losing a parent, it can negatively impact on their ability to support learners (Ross-Hill, 2009).

Furthermore, a teacher who appears unaccepting of and less interested in the child could induce feelings of anxiety. Such behaviour could be ascribed to various factors, such as ignorance of the child's background and challenges (Pillay, 2016). For example, orphaned adolescents might choose not to disclose being an orphan in order to avoid others feeling sorry for them. They might fear being isolated or rejected by others if the cause of death, such as HIV/AIDS, is known, which could result in stigmatisation (Pillay, 2011) and subsequently increase their anxiety. Unfortunately, in their attempt to keep their orphanhood a secret, orphaned adolescents often develop anxiety (van der Mark, 2015).

In contrast, a teacher's positive attitude towards an orphaned adolescent has a significant impact on whether or not the adolescent's peers accept him/her. The need for acceptance by peers is one of the developmental characteristics of adolescence and such acceptance can potentially enhance the learner's self-concept (Papalia, Olds & Feldman, 2008). Failure to be accepted leads to feelings of isolation and anxiety. Asikhia and Mohangi (2015) added that peers may bully, isolate or discriminate against the orphaned adolescent simply because of his/her status as an orphan, which is even more probable when the orphan is an HIV/AIDS orphan, as mentioned earlier (Tsegaye, 2013). Negative attitudes of teachers and peers can increase pessimism in the orphan, thus stunting his/her social development, and increasing the chances of anxiety, as well as suicidal tendencies (van der Mark, 2015).

Support is especially critical during the vulnerable stage of transition from childhood to adulthood and the sudden new status of being an orphan. O'Connor, Dearing and Collins (2011) believed that a nurturing and supportive relationship between the adolescent and the teacher enhances a positive outcome in the child's educational and social development. A positive and nurturing teacher's attitude could be a protective factor and reduce the impact of anxiety, especially since the orphaned adolescent may experience feelings of emptiness.

The school can also be regarded as a risk factor for anxiety in the orphaned adolescent, especially if the child lacks the means to acquire school necessities. Orphans are often left in the care of grandparents and/or older siblings, who may not have the financial means to provide educational resources for the child. With no one to provide, it can be difficult to access these supplies, which can cause anxiety (Mwoma & Pillay, 2016). On the other hand, a lack of resources at home can also negatively impact the child's education (Bronfenbrenner, 2005). The lack of financial resources, for example, may influence the

child's self-esteem and confidence, evidently increasing their chances of becoming anxious.

Social factors

Social factors refer to environmental factors that contribute to anxiety in learners. These include tragic events, such as the loss of a loved one, peer pressure, stress, relationships, finance, and the school or community (Jacofsky et al., 2013). According to Taukeni (2015), poverty, poor housing, shortage of basic necessities, prejudice, and discrimination are the main social factors that contribute to anxiety in adolescents.

Because they are orphaned at a young age, they experience a drastic turnaround as they are suddenly left to fend for themselves. This may include relocating to a place with a different standard of living than their original family setup, leading to anxiety regarding adjusting to their new way of living. In sub-Saharan Africa in general, friends, close relatives, and kind-hearted people may offer to take care of the orphaned children. However, if the child is taken into a low-income household, the child may be exposed to a lower standard of living. The family may be unable to provide for the child's needs, as previously mentioned in the discussion of educational factors, which may lead to anger, feeling like a burden, depression, and constant worrying by the child (Pillay, 2016).

Bronfenbrenner (2005) posited that death and ultimately orphanhood tend to destabilise the family, which is the ecological basis in the child's growth and development (Donald, Lazaru & Lolwana, 2012). The child is not only faced with the trauma of death but also with the possibility of having to take responsibility for himself or herself. Van der Mark (2015) asserted that if the burden is too high, it can contribute to increased distress. Orphans living alone will have no role model and no one to motivate and guide them, which can be another cause of anxiety (Asikhia & Mohangi, 2015). According to Bronfenbrenner (2005), the lack of interaction with family can be detrimental to the child's social development and self-esteem (Donald et al., 2012). Asikhia and Mohangi (2015) posited that low self-esteem in adolescence tends to increase chances of anxiety later in life.

Theoretical framework

In an attempt to fully understand the emotional effect of parental death on an orphaned adolescent, it is imperative to consider the contextual factors. Since this study is located in an African context, reference to Nsamenang's theory of social ontogenesis (Nsamenang, 2006) is suitable because it emphasises the African perspective on the support for an orphaned adolescent after the parents' death. According to Nsamenang (2006), in the social stage (adolescence) the child's development is influenced by the social factors around him/her, and in turn the social atmosphere influences how the child views death. In most African cultures, the reaction towards death and grieving is guided by certain cultural beliefs that have to be learnt from the elders in the community (Thwala, 2012).

If any stage, such as the social stage for example, is not successfully achieved, the movement to the next stage can be negatively affected and is likely to cause anxiety in the adolescent (Baloyi & Makobe-Rabothata, 2014). According to African culture, children are trained to appreciate collective engagement by familiarising themselves with cultural matters in the community (Nsamenang, 2004). Therefore, in the current study it implies that the participants can make meaning of their anxiety and the support that should be provided can be achieved in a collective manner and through learning and participating with the larger society.

Method

Qualitative research design

A generic qualitative research approach was utilised to collect data for this study. Qualitative research also assisted in better understanding the experiences and perceptions from the orphaned adolescent's perspective on psycho-educational and social factors that contribute to their anxiety. A multiple case-study research design was chosen to conduct the research. Eight cases were studied jointly within the school setting, each with its unique combination of experiences of anxiety.

Sampling

A purposeful sampling technique was employed in order to select the initial sample of 30 orphaned adolescent learners for this study. All the potential participants met the predetermined criteria, namely they had to be between the ages of 11 and 14 years, single (have one parent) or double orphans (no parent), enrolled in the secondary school involved in the study, and permanent residents of Thabong in Welkom, Free State, South Africa. Table 1 illustrates the profiles of the participants.

The research was conducted in a non-fee paying public secondary school in a suburban area in the Free State province, South Africa. The school is situated next to an infamous informal settlement characterised by high crime and unemployment rates. The high unemployment has been exacerbated by the closure of local gold mines. Participants were chosen from this site because, according to the School Based Support Team (SBST) records, this site faces diverse challenges regarding orphaned adolescents experiencing the phenomenon under study.

Data collection

Data collection was conducted in two phases. In the first phase, 30 orphaned adolescents were randomly selected from the school list consisting of 1245 learners that was generated from information recorded in the South African School's Admissions and Management Systems (SASAMS). The *Beck Anxiety Inventory* (BYI-II), an internationally established and well-researched test, was used to assess the anxiety levels of these participants (Beck, Beck, Jolly & Steer, 2005). The BYI-II comprises five self-report inventories that are used to assess symptoms of depression, anxiety, anger, disruptive behaviour, and self-concept

(Beck et al., 2005). The present study focuses on the assessment of only one of the five inventories, namely anxiety levels. The BYI-II is easy to administer and the results are relatively accurate about anxiety levels.

Table 1: Profile of participants

Partici-pants	Age	Grade	Gender	Home language	Stays with	Anxiety level
P1	14	9	Male	Sesotho	Unemployed, but caring uncle. The aunt is working in Gauteng and comes home every two months. Often struggles financially.	Moderat-ely high
P2	14	10	Female	isiZulu	Paternal aunt who is caring and always advises her on how to handle scary situations. They stay in a disadvantaged side of the township, riddled with crime and poverty.	Moderat-ely high
P3	14	9	Female	isiZulu	Maternal grandmother, who is caring. The granny later died. Sister fetched her to stay with her in Welkom. Her uncle is the provider; he works out of town. She misses her mother who always encouraged her to succeed.	Moderat-ely high
P4	14	9	Male	Sesotho	Stepmother and two half-brothers. His two biological siblings have passed on. Step-mother is a "mother", providing what she can.	Moderat-ely high
P5	13	8	Female	Sesotho	Maternal aunt (Mamogolo), her sibling and cousins. She stayed with loving and caring aunt before her parent's death.	Low
P6	14	8	Female	isiZulu	Sister, sister's partner and their one child; she sometimes wishes the man could go.	Low
P7	13	8	Female	Sesotho	Paternal aunt and her children - a caring family. Never knew her parents.	Low
P8	14	8	Male	Sesotho	Brother is only source of hope and he provides for him.	Low

In the second phase of the study four participants presenting with high and another four with low levels of anxiety were purposively selected to continue with qualitative data collection (*n*=8; 4 males and 4 females). It was anticipated that the four with high levels of anxiety would be able to share data on risk factors that contributed to their anxiety while those with low anxiety scores would be able to share data on resilience factors that lowered their anxiety levels. According to the BYI-II, a score that ranges between 0–7 reflects low levels of anxiety, while moderate anxiety levels are indicated by a score that ranges between 16–25 on the inventory. Individual interviews were conducted in English with all eight orphaned adolescents. Interview questions posed to elicit the level of anxiety in participants included: "How are you feeling lately?"; "What type of things do you worry about since being an orphan?"; "Do the worries interfere with your school work or relationships?".

These interviews allowed participants to elaborate extensively on psycho-educational and social factors that led them to score high or low on the inventory regarding anxiety levels.

It also enabled the uncovering of subtle, less overt personal insights during the interview process. The interviews were audio recorded in order to enhance the correct documentation of the participants' views on the phenomenon.

Furthermore, the same eight participants were requested to create collages reflecting the psycho-educational and social experiences that contributed to their anxiety levels. An example of a collage is depicted by Figure 1. Their individual collages assisted in obtaining non-verbal information in an artistic manner (by using pen, paper, pictures and drawings) on their experiences of anxiety and how they interpreted these experiences. They were further requested to write a short but detailed description at the back of their individual collages.

Figure 1: P3's collage on wishes for a happy family (printed with permission)

Following the creation of the collages, a focus group discussion was held to discuss the collages, their meanings and the subsequent interpretations.

Data analysis

Thematic analysis, as explained by Braun and Clarke (2013), was utilised in the current study to identify specific themes which emerged through the text. Data was obtained from

the reviewed literature, the recorded, verbatim transcriptions from the interviews, and the collages and group discussions. Pseudonyms were used to document data in order to ensure anonymity. Each of the eight participants received a code ranging between 1 and 8. The data was identified according to its source: interview: I, collage: C, and focus group discussion: FG. Quotes were presented with the name of the participant followed by the data collection method, for example, data from collage 1 is presented as (C1). Examples of the interview transcripts are quoted as (I1), and quotes from focus group discussions as (FG1). The aim was to increase the trustworthiness of the captured data and to expand on issues that might have been overlooked during the interviews.

Trustworthiness

Trustworthiness is important to ensure that the findings are accurate from both the researcher's and the participant's point of view (Creswell, 2013). In order to ensure the rigour of the study, elements of trustworthiness were adhered to. Credibility and dependability were achieved by using three data collection tools which enabled triangulation as well as accurate transcription of the data. We confirmed the correctness of transcriptions and interpretations of responses with participants during a focus group discussion. In order to achieve transferability, we used purposive sampling, which enabled us to obtain rich information from respondents.

Ethical considerations

Ethical guidelines were followed, which ensured that participants were treated with respect and dignity (Braun & Clarke, 2013). Permission was sought and acquired to conduct the research from the Ethics Committee of the Faculty of Education at the University of Johannesburg and the Free State Education Strategic Planning and Research Unit granted permission to conduct the research at the school in Welkom, Free State, South Africa. Permission was also sought from the legal guardians of participants younger than 18 years before the process of data collection began. The participants' permission to audio record the interviews was also requested before the onset of the interview process. Anonymity and confidentiality were ensured at all times. The aim of the study was explained to all participants as well as their rights to participate, not participate or withdraw from the process without penalty or prejudice. The prospective participants were given the opportunity to decide whether to participate in or withdraw from the study. Only learners with signed consent forms (either by themselves or by their guardians), were allowed to participate in the study.

Presentation and discussion of findings

The data collected were analysed according to the psychological, educational, and social factors that contributed to the anxiety levels of the adolescent orphans within the context of their homes, school, and society in general. A similar analysis process was followed with the resilience experiences of those adolescent orphans who scored low on the Beck Anxiety Inventory. The themes emerging from the data analyses are presented under each

of the factors relevant to the focus of this study and a discussion of the findings and integration with the literature and the theoretical framework follow thereafter.

Psychological factors

The results of the study indicate that due to the adversity adolescents face during and after their parents' death, the orphaned adolescents may be predisposed to psychological challenges that tend to increase their anxiety. The psychological findings indicated that the orphaned adolescents experience anxiety about their own death as well as that of their significant others. The anxiety is attributed to the fear of losing one's own life after witnessing the loss of a parent. This is evidenced by the participant who stated "I worry, I mustn't die" (I7). The anxiety was further emphasised: "I do not know the cause of their death ... what if I die too" (C5). The constant and never-ending worry was also evident in this concern: "I fear I am going to die, I can't stop thinking" (FG2).

Some researchers confirmed that fear and anxiety, which are evident in the participants' sentiments, are interrelated (Shekmnesh, Aregay & Berhe, 2013). Physiology and hormonal changes may be overwhelming to the adolescent, and the fear of death could compound the emotions and thus contribute to anxiety (Sue, Sue & Sue, 2010). The evidence of anxiety concerning their own death is an indication that lessons on aspects such as infectious diseases and hereditary diseases must be facilitated.

Furthermore, losing a loved one was found to be a contributing factor to anxiety, as expressed by I8 who said "I am scared my stepmother might die also, nothing good ever lasts". Participant I7 reiterated the sentiments: "Mamogolo (maternal aunt) ... (long silence), I worry even when she has a headache". On the other hand, participant C4 illustrated her anxiety through a picture of three coffins, she said "Grandmother passed on in 2016 from old age and being ill. My uncles passed on in 2009 from being ill ... shuu". The anxiety was confirmed during the focus group discussion by FG6 when he added "I worry that I do not lose my brother, he is all I have, my father cannot see me grow, he has left a hole, no one will fill it, *ijo, ke re* (I say) no one can! ..." The anxiety of losing parents or significant others emphasises the importance of family as a microsystem in the child's development and during the anxieties they face while they grieve (Bronfenbrenner, 2005). Awopegba, Oduolowu and Nsamenang (2013) asserted that the role of family and society in giving an empathetic ear to the grieving adolescent reduces anxiety in this time of need for emotional support.

Educational factors

A prominent factor that participants were anxious about is teachers' negative attitudes. This view was succinctly expressed by a respondent who said "I feel like teacher is always out to belittle us, as a result we are always on guard not to be picked on by the teacher … it is very sad, always worried, haai!" (I1). C4 also reiterated this in the collage write-up by pointing at the picture of a curled-up girl (squatting, the head resting on her knees**)** who seemed anxious, stating that she often felt bad and demeaned: "This is like me in class; teacher is not good to us". One participant concurred with the sentiments that were stated

by other participants: "bo tichere ba re sehlela (teachers call us in belittling names), she laughs shyly, at times ha ho monate hobane ke dula ke le (it is unsettling because I stay) worried when he calls us, rona dikhutsana bana ba Bathabile (at times it is not nice because I am always anxious and worried, guarding the time when he calls us Bathabile)" (FG6).

The participants perceived the ignorance of teachers as a lack of care and an indication of a negative attitude towards them, which caused them to have anxious feelings. However, Asikhia and Mohangi (2015) ascribed the teachers' behaviour to a lack of information about the learners' backgrounds and needs. A teacher's positive attitude can have a nurturing effect on an anxious orphaned adolescent. In their findings, Mwoma and Pillay (2016) stated that teachers confessed to not having the necessary skills to support the learners. Teachers are expected to be able to cater for different needs of diverse learners, including those orphaned (Landsberg, 2016). In this study, however, it is evident that teachers do not have the skills to identify challenges such as anxiety and the skills to intervene appropriately. It becomes imperative that teachers should be trained on policies such as the *Policy on Screening, Identification, Assessment and Support* (SIAS) in order to enhance their ability to provide psycho-educational and social support to orphaned adolescents experiencing anxiety. Nsamenang (2008) posited that participatory learning is more important than the idea of finishing individual school-based activities. According to him, education and training from family and significant others prepare the adolescent to understand values concerning, for example, how the family views death and the importance of shared responsibility in giving support to the bereaved adolescent. The emphasis is on a collective approach to any form of learning and the development of the child.

Social factors

According to the findings of this study, participants shared mutual social disadvantages that increased after their traumatic experience of the death of their parents. Social factors in this study refer to environmental factors that might contribute to anxiety in learners. These include tragic events such as the loss of a parent and the resultant worry and anxiety about an uncertain future (Jacofsky et al., 2013). The results of this study also found that social factors which contributed to their anxiety concerned economic survival, grieving according to cultural beliefs, and the isolation they experienced. A statement by I5 indicated anxiety regarding a lack of finances as she watched her sister: "She seems to be deep in thought mhh when we do not have food ... At times my sister does not seem good, then I feel like maybe I am too much for her because I do not even get a grant [long pause] … feels like a burden". Participant C6 reiterated a similar feeling in the collage write-up when she mentioned "suffering and not having things I wish for".

In his collage write-up, C1 also echoed the anxiety about a lack of school materials; he said "when I don't have school equipment like pencils … I get worried". According to a participant in FG3, "the school gives food; some people donate uniforms, but they short. My sister can buy some school things, but she has to pay for her child too".

The findings in this study concur with Nesengani's (2005) findings that orphaned adolescents are often faced with a lack of finances to satisfy their basic needs, such as food, clothing, and school requirements (Sitienei & Pillay, 2019). Sue et al. (2010) stated that poverty is one of the social factors that contribute to anxiety — a factor that is evident in this study's findings. Clearly it contributes to an orphaned adolescent's anxiety since he/she might be exposed to a lower standard of living. The result is the inability to provide for the child's needs. This in itself creates a constant concern that may lead to and compound anxiety. A feeding scheme by the Department of Education is already operational in the school. However, according to the findings, the amount of food supplied is not a sufficient (Mwoma & Pillay, 2016).

Furthermore, the orphaned adolescents stated that they are not allowed to talk about their deceased parents and this contributed to bottled-up grief that led to their anxiety. During the interview, I4 expressed anger and anxiety about the unknown and said "I get anxious at times because they get angry when I ask them to tell me about my mother …". Another participant further lamented: "I wish we can talk about my parents at times, but I am afraid" (I2). Participant I3 mentioned her anxiety when she said "we can talk about anything ... except when I talk about my mother ... only know she died in 2007 and we are left with rakgadi (paternal aunt)". FG2 elaborated on her anxiety and explained "[t]hen my sister fetched me from the Eastern Cape, e Makhaya (rural areas) and now I stay with her in Welkom after gogo's (grandmother's) death. I do not know why she fetched me; I feel scared".

The findings in this study indicated that according to cultural beliefs in some families, orphaned adolescents are not allowed to grieve and talk about the deceased (Thwala, 2012). Participants shared the devastation of silence around their parents' or guardian's death. By dismissing their true thoughts, goals, wishes, and emotions, orphaned adolescents can become anxious. Denying them the opportunity to show their true emotions can increase anxiety in orphans. Donald and Clacherty (2009) argue that if these emotions and feelings are not addressed the adolescent will grow up with unresolved negative emotions, often expressed as anger and anxiety. Culturally, the silence is aimed at protecting the child's feelings. However, the silence surrounding the parents' death and the avoidance of discussions about it also appeared to add to the participants' anxiety according to the *Encyclopaedia of death and dying* (Howarth & Leaman, 2001), the taboo and silence concerning the parents' deaths deny the child the chance to understand death and to learn to grieve according to acceptable cultural norms. Papalia et al. (2008) objected to the silence around death as they posited that a lack of social support for the grieving adolescent can increase anxiety levels in orphaned adolescents. It is advisable that the orphaned adolescents be provided with an empathetic ear and emotional support. Without unconditional positive regard and understanding, orphaned adolescents may be overly critical and have harsh self-standards in life, which might contribute to anxiety. If the loss/death of the parent(s) is not clearly explained to the orphans, they could deal with the bereavement process in an unacceptable manner.

Some participants indicated that anxiety made it difficult for them to be part of conversations with peers when they talked about their parents. They then resorted to

isolating themselves, which in turn causes anxiety. Participant C8 stated "I feel ahh ... not good when they talk about their parents, I feel like they brag ... now they do not know they hurt me. Ho bohloko haholo, ke qetella ke dula ke le mong hore ke se ke ka utlwa bohloko … (It is very painful; I resort to spending time alone to avoid being hurt)". Participant I1 lamented "I always feel sad and reminded that I do not have parents and I stay away". This is supported by Participant I5: "I feel sad when others tell about their mothers. I just feel like telling them—STOP [she yelled]".

Another form of isolation relates to relatives not visiting as often as they used to prior to the parents' death. Participant I6 expressed anxiety regarding being isolated by his relatives; he stated "because we are poor and relatives believe they cannot benefit anything from being close to me and my brother ... we last saw our uncles on the funeral of our parents, they have not come after their passing and are not regular visitors anymore".

Isolation by others contribute to orphaned adolescents' anxiety. The former—isolating oneself—is used as a defence mechanism to avoid pain when others talk about their parents. Schimmenti and Caretti (2016) posited that a child may be discriminated against by others or the child might be aloof from others because of feelings of inferiority. However, in this study, discrimination against orphaned adolescents by others was not evident or reported.

Resilience factors

The results of the study also indicated that the adversities adolescents faced assisted some of the participants with building resilience. The resilience and protective factors identified include the role of extended families, school support, relationships with peers, and their aspirations for the future.

The role of extended families
The findings of this study indicated that warm and caring support from extended family members enhanced healing and reduced anxiety in the affected children. The interview with I4 illustrated a positive experience: "I have no worry about the future because my family is caring". C7 supported the sentiment by stating "[w]e spend mother/ daughter time together". During this session, Participant I8 also shared a unique source for his resilience, namely his caring stepmother, when he clearly expressed his gratitude by saying "I live with my stepmother. She is good and takes care of me. She is unemployed but good. My maternal uncle is the only provider he helps me get things for school". Exercise and playing games, and relaxation techniques such as deep breathing, were also identified as the participants' coping mechanisms. One participant stated "I have a lot of energy; I can do a lot of things and I am good with athletics" (I6). During the interview, Participant I3 also stated "I love my voice, I like singing joyous celebration songs". Participant I1 added, "my wish is to be successful. I want to be a pilot—to be the first pilot in our family". The participant's relationship with his stepmother illustrated what African culture encourages, which is the joint responsibility of ensuring that no child is left uncared for (Nsamenang, 2008).

School support

The findings illustrated that a few teachers provided an empathetic ear to the children's needs and by acting as parents *in loco parentis* gave these orphaned learners hope. In the collage, Participant C1 expressed how he felt about a caring teacher: "got a bag from my caring teacher". In the focus group discussion, FG5 supported the statement: "My favourite teacher is Mr Mi. He understands my challenges; he takes me home when I am sick. I get sick often". The results of this current study concurred with Sitienei & Pillay's (2019) view that a caring and supportive school environment enhances the child's growth and resilience.

Relationships with peers

The participants reported that they have healthy relationships with their peers. It is evident that good peer relations allow for the sharing of ideas and enhance the shared coping mechanisms of the participants. One participant in the collage reiterated the character of her peers and stated "they are kind and supportive at school" (C4). According to Taukeni (2015), positive relationships enhance holistic growth, development, and stability in orphaned adolescents (Awopegba et al., 2013). In this case, the adolescent's need to belong with peers who might have had a similar experience of losing a parent and struggling with anxiety as a result is fulfilled.

Aspirations for the future

The determination to succeed was clearly stated in a collage write-up that read: "To be successful in life and to see myself finishing school. And to see my family in my graduation" (C5). Another participant also expressed her determination: "Following my passion is important and that's why I want to be a lawyer and do what I love and be the best lawyer in South Africa" (C7).

Participants indicated their determination to succeed despite the traumatic experience of losing a parent. The coping mechanisms were evident in the participants' deliberations. The coping mechanisms included determination to honour their late parents with the achievement of their set goals. According to Nsamenang (2006), support and interaction with more knowledgeable ones in the family are crucial in enhancing coping mechanisms as well as the cultural way of dealing with death and grieving.

Implications for an educational psychologist

The results of the study indicated that the orphaned adolescents who discovered their talents and skills tend to use these as their coping mechanisms. Their anxiety levels are low and support from significant others is evident. The support of warm extended family tends to decrease anxiety and the study found low levels of anxiety in participants who have support as compared to those with no support and guidance. Relaxation techniques, such as writing letters to the deceased, and photographs of the deceased, are recommended as an attempt to lessen anxiety. The educational psychologist can play an important role in teaching basic counselling to the entire family in order for family members to be able to deal with any sign of observable anxiety. Family and individual therapy can be used for orphaned adolescents to have an understanding of death and

stages of grieving. Metaphors such as the birth and death of a pet can be used to explain that there is a beginning and end to life in living creatures, including people (Pincus & Sheikh, 2011). These activities can further enhance resilience in orphaned adolescents. The educational psychologist can also facilitate group therapy or interventions. This can assist adolescents to deal with death and grieving within a group where the orphans are able to share similar experiences and also share coping skills while possibly reducing anxiety levels and increasing resilience.

The identified challenge in this study is teachers' attitudes and their lack of skills in identifying and intervening appropriately in orphaned adolescents' anxiety (Asikhia & Mohangi, 2015). The school can be an important factor that increases or decreases anxiety in orphaned adolescents; therefore educational psychologists' efforts must focus on enhancing ways to reduce the factors that predispose adolescents to anxiety within the home and the school. It is thus recommended that educational psychologists implement micro counselling training for teachers that focuses on anxiety in orphaned adolescents. Educational psychologists are encouraged to work collaboratively with the school based support team in providing support to learners with special needs such as orphaned adolescents who display signs of anxiety. The orphaned adolescents could benefit from home visits by teachers. According to Nsamenang's (2006) theory, environment/social factors (including school) greatly influence the child's development and how he or she handles adversity. Therefore, information found at home might inform the support the child needs. The harmonious relationship between all systems is vital, while good peer relations play an important role in reducing anxiety and enhancing resilience.

Makgahlela (2016) strongly believed that elders have an important role to play in the transmission of knowledge as well as a therapeutic role in dealing with death and grieving in a culturally acceptable manner (Nsamenang, 2006). Educational psychologists can facilitate information-sharing sessions where elders in the community can share their cultural beliefs regarding death. In this way, respect for diversity and shared responsibility by teachers and the guardians in supporting orphaned adolescents can be enhanced. One does not expect the educational psychologist to take on all the responsibility of supporting such adolescents, therefore it is vital for them to collaborate with all stakeholders in implementing psycho-educational and social intervention strategies that will reduce the anxiety levels of orphaned adolescents.

Conclusion

The age cohort of the participants (11 to 14 years) may have been a limiting factor because their level of reasoning may not have allowed them to express their anxiety as well as adults. The other limitation was the small study sample (only using one secondary school), as a result of which the research results cannot be generalised. However, the utilisation of three data collection tools counterbalanced the negative impact of the lack of sufficient and quality information from the participants. The study contributes to the body of knowledge on the prevalence of anxiety in orphaned adolescents, especially in identifying risk and resilience factors that contributed to their anxiety levels. The researchers are aware that orphaned adolescents could face other challenges, such as the

awakening of sexuality and risks of substance abuse, the difficulty in balancing academic work and household chores or even searching for employment; these challenges did not emerge in this study. While the study was conducted in South Africa, the researchers posit that there are orphaned adolescents globally who experience anxiety for various reasons. It is, therefore, implied that integrated and holistic psycho-educational and social intervention strategies present a global need of orphaned adolescents. This study provides information that could be used to enhance resilience by improving coping mechanisms identified by the orphaned learners themselves.

Acknowledgement

References

Asikhia, O. A. & Mohangi, K. (2015). A case study of school support and the psychological, emotional and behavioural consequences of HIV and AIDS on adolescents. *SAHARA-J: Journal of Social Aspects of HIV/AIDS*, 12 (1), 123-133. https://doi.org/10.1080/17290376.2015.1125305

Awopegba, P. O., Oduolowu, E. A. & Nsamenang, A. B. (2013). *Indigenous early childhood care and education (IECCE) curriculum framework for Africa: A focus on context and contents.* Addis Ababa: UNESCO. https://unesdoc.unesco.org/ark:/48223/pf0000229201

Baloyi, L. J. & Makobe-Rabothatha, M. K. (2014). The African conception of death: A cultural implication. In L. T. B. Jackson, D. Meiring, F. van de Vijver, E. S. Idemudia & W. K. Gabrenya Jr. (Eds.), *Toward sustainable development through nurturing diversity: Selected papers from the Twenty-First International Congress of the International Association for Cross-Cultural Psychology* (pp. 232-243). Melbourne, Florida: International Association for Cross-Cultural Psychology. http://www.iaccp.org/sites/default/files/stellenbosch_pdf/Baloyi.pdf

Beck, J. S., Beck, A. T., Jolly, J. B. & Steer, R. A. (2005). *Beck Youth Inventories for children and adolescents: Manual* (2nd ed., BYI-11). San Antonio, TX: PsychCorp.

Braun, V. & Clarke, V. (2013). *Successful qualitative research: A practical guide for beginners.* London, UK: SAGE. https://au.sagepub.com/en-gb/oce/successful-qualitative-research/book233059

Bronfenbrenner, U. (Ed.) (2005). *Making human beings human: Bioecological perspectives on human development.* Thousand Oaks, CA: SAGE. https://au.sagepub.com/en-gb/oce/making-human-beings-human/book225589

Creswell, J. W. (2013). *Qualitative inquiry and research design: Choosing among five approaches.* London: SAGE.

Department of Health (2003). *The national operational plan for comprehensive HIV and AIDS management, treatment, care and support.* Pretoria, SA: Department of Health.

Donald, D. & Clacherty, G. (2005). Developmental vulnerabilities and strengths of children living in child-headed households: A comparison with children in adult-headed households in equivalent impoverished communities. *African Journal of AIDS Research*, 4(1), 21-28. https://doi.org/10.2989/16085900509490338

Donald, D., Lazarus, S. & Lolwana, P. (2012). *Educational psychology in social context: Ecosystemic applications in Southern Africa.* Cape Town, SA: Oxford University Press South Africa. https://www.oxford.co.za/book/9780199054404-educational-psychology-in-social-context-5e-ecosystemic-applications-in-southern-africa#.XRKutS9L0xM

Howarth, G. & Leaman, O. (Eds.) (2001). *Encyclopedia of death and dying.* London: Routledge.

Ishola, A. S. (2012). *A study of the relationship between school dropout and AIDS orphans in Oshana region.* Master's dissertation, University of Stellenbosch, South Africa. http://scholar.sun.ac.za/handle/10019.1/19915

Jacofsky, M. D., Santos, M. T., Khamlani-Patel, S. & Neziroglu, F. (2013). The biopsychosocial model: Causes of pathological anxiety. *MentalHelp.net*, updated March 26, 2019. https://www.mentalhelp.net/articles/the-biopsychosocial-model-causes-of-pathological-anxiety/

Jaworska, N. & MacQueen, G. (2015). Adolescence as a unique developmental period. *Journal of Psychiatry and Neuroscience*, 40(5), 291-293. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4543091/

Kaur, R., Vinnakota, A., Panigrahi, S. & Manasa, R.V. (2018). A descriptive study on behavioral and emotional problems in orphans and other vulnerable children staying in institutional homes. *Indian Journal of Psychological Medicine*, 40(2), 161-168. http://www.ijpm.info/article.asp?issn=0253-7176;year=2018;volume=40;issue=2;spage=161;epage=168;aulast=Kaur;type=0

Landsberg, E., Krüger, D. & Swart, E. (Eds.) (2016). *Addressing barriers to learning: A South African perspective* (3rd ed). Pretoria, SA: Van Schaik.

Makgahlela, M. W. (2016). *The psychology of bereavement and mourning rituals in a Northern Sotho community.* Doctoral dissertation, University of Limpopo, South Africa. http://ulspace.ul.ac.za/bitstream/handle/10386/1586/Makgahlela_mw_2016.pdf

Mwoma, T. & Pillay, J. (2016). Educational support for orphans and vulnerable children in primary schools: Challenges and interventions. *Issues in Educational Research*, 26(1), 82-97. http://www.iier.org.au/iier26/mwoma.html

Nesengani, R. I. (2005). *The needs of rural parent-absent early adolescents.* Doctoral dissertation, University of Johannesburg, South Africa. http://hdl.handle.net/10210/1302

Nsamenang, A. B. (2004). *Cultures of human development and education: Challenge to growing up in Africa.* New York: Nova Science Publishers.

Nsamenang, A. B. (2006). Human ontogenesis: An indigenous African view on development and intelligence. *International Journal of Psychology*, 41(4), 293-298. https://doi.org/10.1080/00207590544000077

Nsamenang, A. B. (2008) Constructing cultural identity in families. In L. Brooker & M. Woodhead (Eds.), *Social inclusion and respect for diversity: Developing positive identities* (p. 18-20). Milton Keynes, UK: The Open University.

O'Connor, E. E., Dearing, E. & Collins, B. A. (2011). Teacher-child relationship and behavior problem trajectories in elementary school. *American Educational Research Journal*, 48(1), 120-162. https://doi.org/10.3102/0002831210365008

Papalia, D. E., Olds, S. W. & Feldman, R. D. (2008). *A child's world: Infancy through adolescence* (11th ed). Boston, MA: McGraw-Hill.

Pillay, J. (2011). Experiences of learners from child-headed households in a vulnerable school that makes a difference: Lessons for school psychologists. *School Psychology International,* 33(1), 3-21. https://doi.org/10.1177/0143034311409994

Pillay J. (2016). Factors leading to orphans and vulnerable children living in community-based homes. *Journal of Psychology in Africa*, 26(6), 558-561. https://doi.org/10.1080/14330237.2016.1250416

Pincus, D. & Sheikh, A. A. (2011). David Grove's metaphor therapy. *Imagination, Cognition and Personality*, 30(3), 259-287. https://doi.org/10.2190/IC.30.3.d [also at https://digitalcommons.chapman.edu/psychology_articles/48/]

Ross-Hill, R. (2009). Teacher attitudes towards inclusion practices and special needs students. *Journal of Research in Special Educational Needs,* 9(3), 188-198. https://doi.org/10.1111/j.1471-3802.2009.01135.x

Schimmenti, A. & Caretti, V. (2016). Linking the overwhelming with the unbearable: Developmental trauma, dissociation and the disconnected self. *Psychoanalytic Psychology*, 33(1), 106-128. https://doi.org/10.1037/a0038019

Shekmnesh, A., Aregay, A. & Berhe, H. (2013). Prevalence of psychological distress and associated factors among AIDS orphan adolescents in Mekelle City, Tigray, Northern Ethiopia: Cross sectional study. *Greener Journal of Medical Sciences*, 3(7), 260-269. https://doi.org/10.15580/GJMS.2013.7.080913776

Shulga, T. I., Savchenko, D. D. & Filinkova, E. B. (2016). Psychological characteristics of adolescent orphans with different experience of living in a family. *International Journal of Environment and Science Education*, 11(17), 10493-10504. https://eric.ed.gov/?id=EJ1120236

Sitienei, E. C. & Pillay, J. (2019). Psycho-educational and social interventions provided for orphans and vulnerable children at a community-based organisation in Soweto, South Africa. *African Journal of AIDS Research*, 18(1), 1-8. https://doi.org/10.2989/16085906.2018.1548359

Statistics South Africa (2016). General Household Survey, 2015. Pretoria: Stats SA. Analysis by Katherine Hall & Winnie Sambu. Children's Institute, UCT.

Statistics South Africa (2018). *Mid-year population estimates: 2018*. https://www.statssa.gov.za/publications/P0302/P03022018.pdf

Sue, D., Sue, D. W. & Sue, S. (2010). *Understanding abnormal behaviour* (9th ed.). Belmont, CA: Wadsworth.

Taukeni, S. G. (2015). Orphan adolescents' lifeworlds on school-based psychosocial support. *Health Psychology and Behavioral Medicine*, 3(1), 12-24. https://doi.org/10.1080/21642850.2014.987778

Thwala, S. K. (2012). The role of culture in psychosocial development of orphans and vulnerable children. *International Journal of Adolescence and Youth*, 18(2), 105-121. https://doi.org/10.1080/02673843.2012.665169

Tsegaye, A. (2013). *A comparative study of psychological wellbeing between orphan and non-orphan children in Addis Ababa: The case of three selected schools in Yeka Sub-city.* MA dissertation, Addis Ababa University, Ethiopia.
https://pdfs.semanticscholar.org/3eb3/e240041bbff151273bd5d72cb0028e0f2387.pdf

UNAIDS (2018). *Global HIV and AIDS statistics — 2018 fact sheet.*
https://www.unaids.org/en/resources/fact-sheet

UNICEF (2017). *The State of the World's Children 2017: Statistical tables.*
https://data.unicef.org/resources/state-worlds-children-2017-statistical-tables/

Van der Mark, H. A. (2015). *Lived experiences of youth living in sibling-headed households in facing challenges affecting education.* Masters dissertation, University of Johannesburg, South Africa.

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