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## A CULTURAL UNDERSTANDING OF THE GENDERED ROLES OF FAMILIES IN CARING FOR CHILDREN WITH DISABILITY IN BINGA

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### ABSTRACT

*This paper sought to understand why the disability and gender sensitive programmes implemented in communities are exclusive of men with an attention on the roles played by men in caring for children with disabilities (CWDs). The findings from the study indicate gendered roles of men and women. Disability has a feminine face and the fathers pay little attention in caring for children with disabilities. Men have little reproductive roles in caring for children with disabilities due to cultural tendencies that regard women as the sole child minders at home. Income security marks the epitome of development organisations interventions- and these targets mainly women. The income expenditure in a household is determined by men; adversely this implies that the exclusion of men from these programmes negatively impact on the household expenditures targeting children with disabilities. They fail to get their basic needs. Premised on the gender dynamics, the findings from the study shows that the roles of either a family or the community is to promote an inclusive society, love a child with disability and ensure that they develop fully to realise their potential. This research has established that culturally, the care of a child amongst the baTonga people is matrimonial and the mothers have a greater duty of upbringing the child.*

**KEY TERMS:** child care, gender, disability, women, men, children with disability, vulnerability

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## INTRODUCTION

The promotion of the rights of children with disabilities is greatly appreciated and frontiered by non-governmental organisations in geographically and economically marginalised Binga district, northern Zimbabwe, due to their financial and resource capacity, contrary to their government counterpart. The latter is the major stakeholder, especially in child protection policy implementation. The programmes which intends to protect children with disabilities, precludes man's participation. Females dominate the arena of caring for a child with disabilities and they spend more time with the children compared to man. There is a limited participation of man in raising and upbringing a child with disabilities generally. Communities usually shun disability and regard it to be a result of witchcraft and bad luck mainly brought by women within the families with such children. In addition to this, the cultural tendencies still find ways in promoting femininity in the fight against abuse of children with disabilities. This paper will explore on why men are not actively involved in child care, especially those with disability, where it is apparent that labour required has peaked. All over the world, children typically live with and are cared for primarily by their parents but also receive care from extended family members, neighbours, friends, and paid care providers. In less advanced nations, there is conspicuous reliance of the nucleus family with little focus on the gendered roles.

## THE CONCEPT OF CARING FOR CHILDREN WITH DISABILITIES

Sammon and Mbe's (2018) description which says that disability is the complex relationship between the mind, the body and the environment in which a child lives' suits the practical definition of disability adopted in this paper. This description shows that lack of proper care of vulnerable and differently able-bodied children increases their vulnerability within their environment. According to Felfe and Lalive (2012), child care is the responsibility of each family and mother's care is best compared to men. The quality of child care is strongly related to the course of child development and this has been found to benefit children in Social skills such as having a greater social competence with peers, language and communication skills, cognitive skills and long-term effects such as income levels (Jacobson and Barrat, 2000).

Children and adolescents with disabilities are at most vulnerable to violence, abuse, exploitation and neglect by community members. The frequent 'institutionalization' of children with disabilities, denying them the right to grow up in a family environment impacts their ability to grow to their full potential and this perpetuates their vulnerability (UNICEF, 2018). Sammon and Mbe (2018) connotes that there are at least 90 million children with disabilities in the world, and that numbers may be much higher as per World Disability Report which projects figures of up to 150 million (2011). In Africa 6.4% of children under the age of 14 are disabled, and less than 10% are in school (World Bank, WB, 2018). Children with disabilities have the right to live full and decent lives with dignity, be independent to play an active part in the community, for child care has an impact in child's cognitive and development capacities - it has to be good quality. On the other hand, the state where they are from must do all it can to support these children with disabilities and their families (Sammon and Mbe, 2018).

### The implications of poor male participation

The absence of men in the child protection programmes has contributed to the unsustainability of the measures put in place to fight for the rights of children with disabilities to be recognised. Such observations have been adequately seen in schools where man predominantly occupy the decision-making posts like school development committee chairmanship and the woman are either the treasury or secretariat with less influence. This has further aggravated the rights of children with disabilities in schools due to the absence inclusive educational policies and infrastructures in schools.

Despite efforts to curb violence, exploitation and abuse of children with disability, the cases remain high as man are said to be the greatest perpetrators of these cases. One woman with a CWD iterated that "my husband denied having our child registered and said that we are only waiting for her death, this is not a human being". This also affirms WB (2018) assertions that more than half of the CWDs are not in school as families feel sending these children to school is a luxury and worse still a burden. Men are seen as direct threat to CWDs when they become repulsive and violent.

Since man determine income expenditure in a family and how the income generated is used, the exclusion of man in child care and protection programmes lead to ignorance about the child's potential, or a lack of services available, or both. However, engaging the whole community including man, can help to break down the barriers which contribute to children's exclusion in the society due to their disabilities.

Women spend most of the time caring for children, having a CWDs means extended period of care. This will not reduce attention to other women's domestic roles. This becomes an added role and reduces women roles and participation in other community activities. Mothers whose children with disabilities are in dire need of care, work limited hours in a week – a fact that translate to reduced contribution to family income per month.

## METHODOLOGY

This research was more exploratory in nature. This research was conducted to have a better understanding of the cultural gendered roles of families in caring for children with disability in Binga. The researchers used an observation methodology in collecting data during the field work as they were implementing the program activities in the communities. The collected data was recorded, analysed and judged by the researchers using the content analysis mechanisms. The collected data was qualitative in nature and the researcher used the qualitative approach basing on the fact that the study involved a cultural aspect of communities which were involved in the study. An exploratory research design was preferred in this study as gathering information in an informal and unstructured manner was involved due to limited time to collect data from the participants and the research design is not limited to one specific paradigm as it used either qualitative or quantitative approaches as argued by Burns and Bush (2006).

## PRESENTATION AND DISCUSSION OF FINDINGS

### Male participation in caring for children with disabilities

Culturally, the care of a child amongst the *baTonga* people is matrimonial. The mother has a greater duty to upbringing the child. This entails feeding the children, giving guidance and counselling and mentoring the child. The responsibility of the father is mainly to work for the family, providing for the needs of the children. This has limited the amount of time spent by fathers on their children, hence inhibiting them from participating in the care and protection of children with disabilities.

*Table 1: Gender roles in child upbringing among baTonga*

Child Care Aspects	Men's Roles (espoused roles)	Women's Roles
Feeding and reproductive support and roles bathing	Mainly abstract roles (fending, working, earning and hunting)	Processing food, bathing children and specific care duties
Educating and mentoring roles	Pay school fees, stationery and school wear	Teach children manners and teach children communication skills
Counselling, therapy, treatments and nursing		Help children in hygiene practices
Developmental needs		Assess the developmental dimensions such as the language skills of children

*Source: Field observations by the researchers*

As the Table 1 shows, men play abstract roles in child upbringing. Men do perceive “tough” and menial jobs leaving the “lighter” and conspicuous child care roles to women. This leads to man having a dearth in skills for child upbringing.

Disability therefore has a feminine face due to the disproportionate ratio of man to woman who take care for children with disabilities (ref). CWDs are a woman's burden in Binga's rural communities in Zimbabwe. CA baseline; 2019 showed that women spend almost 95% of their time caring for children with disabilities whereas their male partners rarely know about the social welfare of these children. In some instances, woman stated they were divorced for giving birth to a child with disability or man left the family in negligence to avoid caring for such children. This has ultimately increased the vulnerability of children with disabilities to various forms of violence, abuse and maltreatment in the communities. The Convention on the Rights of Persons with Disabilities clearly states that disability should never justify deprivation of liberty (art. 14). Instead, it recognizes the right of children with disabilities to live in the community, backed up with the necessary support and services to make that possible (UNICEF, 2018).

Programming mainly targets women for disability care because of the gender roles as much as the woman being approachable. There is inherent linking programming objective to gender roles. Where the words “care, gender” are stated they are stereotyped to be female.

Men seem to shun NGO programmes because they do not speak to their gendered roles that of being family bread winners. The NGO programmes in the communities are rendered to be repetitive and with mucky results to the benefiting communities. Child protection programs are by design software in nature which further reduces the level of participation of men. Apart from this, man prefer taking leading roles in programmes implementation with woman playing the submissive roles only reduced to staying at home with children. This scenario has created a natural selection where men prefer participating in livelihood programmes and those which are masculine in design so that they can satisfy their ego. Egoistically, men prefer programmes that uplifts their status in society whereas disability related programmes are rendered as being for woman since they stay with children.

### **The different roles of men and women in families with disability**

During the study, it has been revealed that the major role that must be played by the family in caring for a child with disabilities is the provision of basic needs and making the entire community aware of disability and the love for such children. Resource constraints are limiting the parents of the children with disabilities to access education as disability resources such as learning aids, assistive devices which are electronic and more technically advanced are so expensive.

The families for children with disabilities have a responsibility for registering a child's disability with responsible government ministries so that the child may be able to access certain services, benefits or rights. Some CWDs fail to access certain services because they miss in the government database and sometimes are not even registered with Department of Registration as their parents shun them and hide them from the public. This has been supported by Sammon and Mbe (2018) who said that, when they are not included in data collection and reporting, children and adults with disabilities are often left out of government planning.

In addition to the above, it is the duty of every family to take care of the child with disability so that s/he can be accepted in the society. For example, one mother of a child with disability who could not access education due to distance from the school and the terrain which limits the movement of wheelchairs has engaged the sibling to assist her with literacy and numeracy skills in Lubanda ward. This is a great indication on how a child can develop fully their emotional, social and psychological capacities within a family.

### **Meaningful male participation in caring for children with disabilities**

A meaningful participation of males in caring for children with disabilities is achievable through the strengthening child protection systems in the communities. Identifying and addressing social norms and traditions which harmful in nature has to be given preference by the communities and the stakeholders interested in protecting the child with disabilities. During the study, it was observed that child protection systems, and those working in the communities where these children reside are capable of preventing, detecting and responding to the specific needs of children with disabilities. However, in the case of violence, abuse, exploitation or neglect, including those children whose disability prevents them from reporting, the protection systems loosen their ropes in fear of witchcraft and destroying the social bond within the communities. Such a cause is failing to reduce stigmatization and discrimination of children with disabilities as shown from the databases both at ward and district level.

In addition to this, most communities of Binga are in the remote areas where a social service such as registration of children is not accessible. Because of this, there is need to incorporate attention to disability in efforts to increase birth registration programs to enable their visibility in the communities. It is disheartening to note that children with disabilities are disproportionately affected by non-registration at birth compared to those who are said to be abled children by communities. It is this condition that will have serious consequences on the lives of the children with disabilities in the future as they strive to access rights and entitlements.

### **CONCLUSION AND IMPLICATIONS TO SOCIAL WORK**

The issue of caring for children with disabilities in families with disabilities still remain a feminine matter. Women are at the forefront of fighting against the stigmas and building a society that fully embraces a child with disability. Men are profoundly ignorant on disability and leave the duty of caring for these children to women. In order for a child with disabilities to develop and realise his or her potential, there is need of the engagement of the whole family in the system of protecting children. Indications are that the exclusion of man in disability programmes increases the rate at which these children are subjected to abuse.

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