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### The Social Exclusion of Vulnerable Youth

*Country Report: Malawi*

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**SOS**  
**KINDERDORPEN**  
Elk kind een familie

# The Social Exclusion of Vulnerable Youth **Country Report: Malawi**

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AMSTERDAM INSTITUTE FOR  
SOCIAL SCIENCE RESEARCH



UNIVERSITEIT VAN AMSTERDAM

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The study has benefited from the input of all those mentioned above. Any errors and omissions are the responsibility of the authors of the report.

## List of Acronyms

CBO	Community Based Organisation
CPIMS	Child Protection Information Management System
FBC	Family Based Care
FGD	Focus Group Discussion
FSP	Family Strengthening Programme
HIV	Human Immunodeficiency Virus
HIV+	Human Immunodeficiency Virus positive status
ILO	International Labour Organisation
NGO	Non-Governmental Organisation
NSO	National Statistical Office
OVC	Orphans and Vulnerable Children
SOS CV	SOS Children's Village
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
STI	Sexually Transmitted Infection
TVET	Technical and Vocational Education and Training
UNICEF	United Nations International Children's Emergency Fund

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# 1. Introduction

## 1.1 Purpose & scope of the research

This report presents the results of a scientific research on the topic of ***Social Exclusion of Vulnerable Youth***, commissioned by SOS Children’s Villages Netherlands and conducted by researchers of the Amsterdam Institute of Social Science Research (AISSR) at the University of Amsterdam, in collaboration with local counterparts within the study countries. The purpose of the research is to identify and understand the multi-dimensional drivers of social exclusion of vulnerable youth, which concerns youth who have lost, or are at risk of losing parental care.

Specifically, the objective of this research is to answer the main question:

***How are vulnerable youth affected by social exclusion in terms of their human wellbeing, employability and social acceptance?***

The research aligns with the new Sustainable Development Goals (SDGs) objective to “leave no-one behind” [1; 2] and responds to policymakers and practitioners’ interests, whom have recognized the importance of including youth in their social and economic policies and strategic actions on the ground. The research contributes to the global debate on social exclusion of vulnerable youth and provides concrete input to adjust SOS Children’s Villages international’s existing programmes. The research was carried out in the period January 2016 until December 2017 in six countries: Côte d’Ivoire, Guatemala, Indonesia, Kenya, Malawi, and the Netherlands. The SOS Children’s Villages National Offices have supported this research, but did not play a role in the research to warrant scientific independence.

## 1.2 Contribution to knowledge gaps

This research focuses on vulnerable youth, specifically on young people who have lost or are at risk of losing parental care. The social exclusion of vulnerable youth is a context specific problem, but its’ driving mechanisms show similarities across different societies. Social exclusion of vulnerable youth can thus be a problem in poor and affluent societies alike. If youth are not faring well, this poses challenges and risks to their own and family wellbeing, and undermines societal resilience and stability. Based on a literature review [3], the following knowledge gaps were identified:

- (1) There is a general lack of empirical evidence on vulnerable youth (i) in and from an alternative/informal care settings and (ii) in vulnerable families at risk of losing parental care, being actually socially in-/excluded or marginalized
- (2) Lack of in-depth understanding of how, why and by whom social in- and exclusion of vulnerable youth takes place, and to what extent
- (3) Lack of knowledge on how vulnerable youth are faring later on in life after leaving care – in terms of their independence, human wellbeing, employment, family, and social acceptance.
- (4). How do (2) and (3) differ across (1.i) and (1.ii) and according to gender, ethnicity and religion.

### **1.3 Approach & methodology**

The UN Guidelines for the Alternative Care of Children (2010) follow a Human Rights-based approach [4], which remains key to the mission goal of SOS Children's Villages. At the same time, a more comprehensive approach to human wellbeing, sustainability and voice and empowerment is currently advocated under Inclusive Development [5; 6]. This research integrates the two approaches by taking a relational approach [7; 9].

The six country case studies have taken a bottom-up and participatory approach and used mixed methods for quantitative and qualitative data collection and analysis. The prime units of analysis were vulnerable youth themselves. In total more than 290 youth participated; their voices, experiences and inter-relationships stand at the core of this research. In addition, their caregivers, teachers, health workers, employers and other social peers were also part of the research. Country specific secondary sources, including scientific literature and policy reports also formed part of the contextual analysis.

### **1.4 Report outline**

The remainder of the report is organized as follows. Chapter 2 presents the theoretical framework and conceptual model guiding this research. Chapter 3 explains the research methodology in detail and lists the respondents' key characteristics. Chapter 4 presents the country context and summarises the SOS Children's Villages programme in Lilongwe, Malawi. Research findings, following the conceptual scheme in Figure 1, are presented in detail in Chapter 5. Finally, Chapter 6 provides recommendations for uptake and use of the research findings by the SOS Children's Villages organisation and a variety of stakeholders. The literature list is included at the back.

## 2. Theoretical Framework

### 2.1 Taking a relational approach

This research is framed within human rights [4] and inclusive development theory [5; 6] and takes a relational approach [9]. The research takes youth in interaction with their personal and structural environment as a key entry point [17; 24; 25; 28; 29; 36]. Although, this is a social economic research, it is partly inspired by psychological studies (on youth) [e.g. 9; 27; 30], which have emphasized how inter-personal relations can either foster or impede relational connectedness. We consider vulnerable youth in *dynamic* inter-connection to their care environment (people and structures); the nature of these interactions changes over time [9; 17]. To feel relationally connected to people and structures around oneself is an important determinant of human wellbeing [9; 11]. However, vulnerable youth transit in and out care relationships multiple times: upon entering care, moving through care, and leaving care [31; 32; 33] (see conceptual scheme in Figure 1 below).

### 2.2 Vulnerable youth & their multiple transitions

Youth is defined as a transition phase between childhood and adulthood [13; 14; 15; 34], also described as waithood [12]. “Waithood represents a period of suspension between childhood and adulthood, in which young people’s access to adulthood is delayed or denied” [12, p. 1] While their chronological age may define them as adults, they have not been able to attain the social markers of adulthood: earning a living in a training or job, independence, establishing a family, providing for offspring and other relatives, and becoming taxpayers. [10; 12]

In this research, vulnerable youth are defined as youth who have lost or are at risk of losing parental care. Vulnerable youth encounter barriers, disturbances and delays in forming their social identity, whilst making multiple transitions through care. When transiting out of care, they often lack financial, social and emotional guidance and fallback mechanisms. [13; 14, p. 4; 15, p. 3]. As a result, care leavers run more risk than their peers to *not* achieve in education and employment, and more quickly resort to street life, alcohol and drug abuse, crime, or being exploited [14, p. 16; 16].

### 2.3 Social exclusion & self-exclusion

Social exclusion is both a process and outcome leading to disempowerment. Beall and Piron (2005) define social exclusion as “... a process and a state that prevents individuals or groups from full participation in social, economic and political life and from asserting their rights. It derives from exclusionary relationships based on power.” [17, p. 9].

Social exclusion creates social inequalities that are inter-generational and embedded in societal structures, institutions and policies [19]. Cultural oppression and marginalisation lead to further isolation, shame and humiliation – and, in turn, to self-exclusion [23; 35]. Those who are socially excluded share similar social, economic and political barriers and constraints, and lack security, justice and economic opportunities in life in general [16; 27]. This means that there are two sides to the same story; social exclusion may lead to self-exclusion and *vice versa* [9; 20]. Where social exclusion affects individuals in their daily life and behaviours, studies prefer to speak of discrimination [e.g. 21, p. 3]. There is a growing awareness that social exclusion of vulnerable youth is an emergent problem arising out of problematic relationship between broad-based societal change, social inequality [22, p. 21; 23, p. 7] and ideology [24]. The myth of meritocracy leads to self-blame and self-exclusion [9; 25, p. 93; 26] of young people who are in an important identity



building phase of their life and on their way to independence. Early experiences in life of social exclusion affect later ones, making social acceptance more and more difficult [27].

## 2.4 Other key concepts & conceptual scheme

**Drivers of Social Exclusion** - Social, cultural, political and economic factors that cause and sustain the process of social exclusion and self-exclusion.

**Connectedness** - Being and feeling connected to others in a social-relational environment. [9]

**Relational images** - Individual expectations of how one will be treated (self-images), based on previous treatment, and images of others as to how they will act and who is to blame for one's exclusion [9].

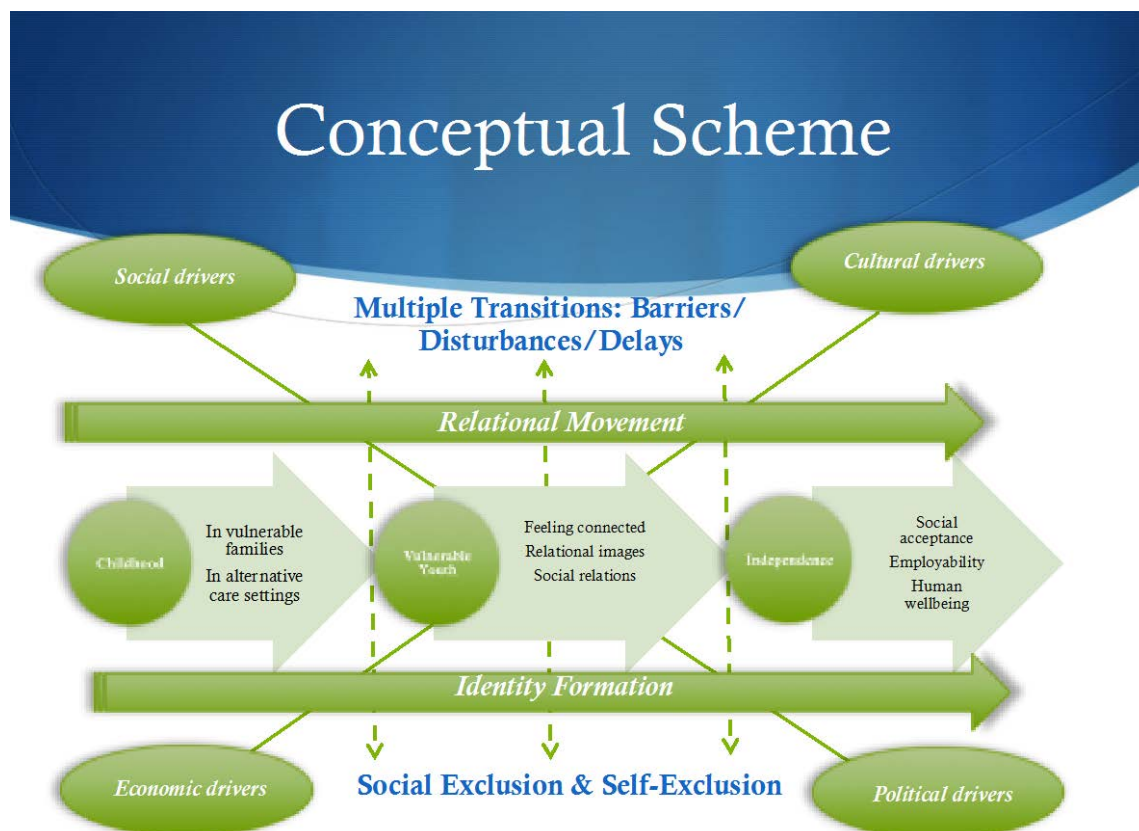
**Relational movement** - Relational movement is the process of moving through connections, disconnections and back into new connections; these can be positive or negative [9].

**Employability** - A set of achievements – skills, understandings and personal attributes – that make graduates more likely to gain employment and be successful in their chosen occupations, which benefits themselves, the workforce, community and economy [15, p. 3; 18].

**Social Acceptance** - The acceptance of a person (or group) into a group or society as a whole.

**Human Wellbeing** - Feeling satisfied with what one can have, be and achieve in life.

Figure 1 - Conceptual Scheme



## 3. Research Methodology & Study Populations

### 3.1 Introduction

This research uses a mixed methods approach to explore the social exclusion of vulnerable youth. This section will outline the research questions, the methodologies used and describe the study populations.

### 3.2 Research Questions

To guide the research, the following research question and sub-questions were used:

**How are vulnerable youth (youth in and from alternative care and families at risk of losing care) affected by social exclusion in terms of their human wellbeing, employability and social acceptance?**

*SQ1. In what ways are vulnerable youth socially excluded, by whom and to what extent?*

*SQ2. What are the drivers of social exclusion of vulnerable youth?*

*SQ3. How does social exclusion lead to self-exclusion and vice-versa?*

*SQ4. How do childhood experiences of exclusion effect relational movements and connectedness after care?*

*SQ5. How are vulnerable youth prepared for living independently?*

*SQ6. How do the above answers differ between different subgroups of youth?*

### 3.3 Research Methodology

In order to develop an understanding of the social, cultural, political and economic drivers of social exclusion, in-depth interviews were conducted with caregivers and mentors, teachers, and employers (17 in Malawi) of vulnerable youth, supplemented by insights from secondary literature. 66 vulnerable youth (i.e. young people in or from care, or at risk of losing parental care) were interviewed in Malawi using social relational mapping and vignettes as tools. With a sub-selection of 10 youth, life-histories were conducted to identify barriers, constraints and delays in their relational movement and social identity formation towards independence. 4 focus group discussions (FGDs) were organized with young men and young women separately to explore gender specific drivers of social in- and exclusion. The mixed methods design allowed for triangulation resulting into reliable data analysis.

### 3.4 Description of Study Populations

The primary group of respondents in this study were vulnerable youth. These young people came from SOS Children's Villages Family Based Care (FBC), SOS Children's Villages Family Strengthening Programme (FSP), and two other care organisations.

**Table 1 - Number of youth participants who participated in the surveys<sup>1</sup> (N=44)**

	SOS FBC (n=20)	SOS FSP (n=8)	Other care organisations (n=16)	Total (n=44)
Female	10	4	9	23
Male	10	4	7	21
Age range	17-27	14-18	13-24	13-27

21 male and 23 female youth were surveyed. The dominant ethnic group of the participants was Chewa (75%). Other ethnic groups that were represented in the care organisations were Ngoni, Nkhonde, Tonga, Tumbuka, Yao, and mixed. In the FSP area most people have the same (Chewa) ethnic background. All young people identified as Christian. The stakeholder participants consisted of 5 SOS mothers, 4 members of SOS CV staff, 2 member of staff from other care organisations, 1 teacher, 2 representatives from the local government, 2 employers and 1 health worker.

Beyond SOS, two other care organisations were involved in the study (who will remain anonymous). The first is a faith-based organisation that combines a family based care setting in which children up to 10 years old live with (foster) house parents (mother and father). After that, they move back to their relatives' houses or go to boarding school, where they continue to be supported by the care organisation. The second care organisation is a government institution that hosts children from a street background to reintegrate them successfully into society. In this setting, young people stay in dormitories and are largely responsible for taking care of themselves on daily basis. They receive material and financial support for their education by the institution.

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<sup>1</sup> 44 youth were surveyed, while the total number of youth respondents is 66. This means that 22 youth responded in different forms including life history interviews and focus group discussions.

## 4. Country Context & SOS Children's Villages Malawi Programme

### 4.1 Introduction

The research in Malawi took place in Lilongwe. In this section the human development context of Malawi is described, with a focus on (policies for) vulnerable youth. Next the focus is turned to a description of the SOS Children's Villages programmes running in Lilongwe. Finally an overview of youth issues and SOS Children's Villages activities is presented.

### 4.2 Country context & youth policies

Malawi is a low-income country with a growing population of about 17.2 million people in 2015 [37]. Children and young people are demographically dominant in Malawi with 23 percent between 10-19 years old [38]. Unemployment is high, and is a recognised problem for the country, though official numbers about unemployment vary. The National Statistical Office (NSO) of Malawi reports an average unemployment rate of 20.4% at country level, being highest for young people with 29.5% for young people between 15-19 years old and 25.6% between 20-24 years old [39]. Unemployment levels are twice as high for young women than young men, though labour market entry has started to increase over the past two years for young women [40]. 67.8% of young people are self-employed, in the main because young people could not find formal employment (31.7%), followed closely by a desire for greater independence (30.7%) [40]. The research took place in Lilongwe, the political capital of Malawi. Lilongwe is rapidly urbanising with 669,021 inhabitants in 2008 and an estimated 1+ million in 2015 [51]. Most people depend on subsistence farming for their livelihood.

Malawi became independent from British colonial rule in 1964. Until 1994, the country has been ruled by Hastings Banda, as a one-party state. As of 1994, Malawi has a multi-party democracy system with most recently a tripartite election for presidential, parliamentary and local elections in May 2014. While the country is relatively politically stable with absence of civil conflicts and wars, there have been protests and riots in recent years in relation to cash scandals and political reforms. Alongside the legal framework that the country exercises since colonial rule, practices and rights may vary under customary law, particularly in the area of family law. Malawi has a diverse history of structures, with patrilineal traditions still present in the North and the Centre of the country, and matrilineal traditions in the South. These traditions, on which customary law is partly based, in addition to the role of chieftaincy that have long been present in many regions of the country, shape decisions of many family matters.

When it comes to the custody of children, care for "orphans or other vulnerable children" typically takes place as much as possible within the extended family. If extended family members are not able to take care of "orphaned or vulnerable children", alternative options are sought by them, which could be living in care institutions or on the streets [42;43]. In Malawi, 17.5 per cent of children under fifteen are estimated to have lost one or both parents, about half of these to AIDS [44]. Several authors have raised concerns about increased stigmatisation of "orphan" children and children living in care institutions [20; 45], often linked to a (presumed) HIV+ status.

Approximately 1.2 million children are growing up with reduced parental care or in formal and informal care settings in Malawi, with 6000 children living in institutional care [41].

The Government of Malawi has several policies in place that address young and vulnerable people. The overall aim of the Malawi Growth and Development Strategy II [46] is to reduce poverty through sustainable growth, and identifies Child Development, Youth Development and Empowerment among its nine key priority areas. Malawi has a general National Youth Policy (2013) [47] and several sector-specific policies that explicitly and implicitly target youth, summarised in Table 2 below.

**Table 2 - Youth policies and legislation in Malawi**

Policy type	Source	Policy details
National development	Malawi Growth and Development Strategy II (2011)	Child development, Youth development and Empowerment a priority within nine overarching priorities
Definition of youth	National Youth Policy (2013)	Defines youth as between 10-35 years
Voting age	Constitution	18
Criminal responsibility	The African Child Policy Forum	Minimum age criminal responsibility: 12
Majority age	Constitution	18
National Youth Policy	National Youth Policy (2013)	Vision is educated, healthy, well trained, cultured, vibrant and productive youth
National Youth Representation	National Youth Council of Malawi (NYCoM)	Youth empowerment and development through promoting and coordinating youth organisation activities
Youth in care	Child Care, Protection and Justice Act (CCPJA) (2010) National Policy on OVC (2003)	CCPJA encourages reunification with biological family of children in care.
Minimum age for work	The Employment Act (2010)	No person under the age of 14 years may be employed, except for work in homes, TVET, or training institutions.
Youth employment	National Youth Policy (2013) National Employment and Labour Policy (NELP)	National Youth Policy aims to create more and decent employment for youth both in formal and informal sectors and urban and rural areas
Youth health	National Sexual and Reproductive Health and Rights (SRHR) policy (2009) National Youth Policy (2013)	Young People are one focus area of the National SRHR policy aiming to reduce HIV and other STI's, unplanned and unwanted pregnancies, their complications, drug and alcohol use among young people
Education	Article 13 of the Constitution Education Readmission Policy	Free and compulsory primary education Allows pregnant girls to continue education

Sources: [40; 47; 48; 49; 50].

### 4.3 SOS Children's Villages Malawi programme

In Malawi, SOS Children's Villages has been active since 1991 and currently works in four locations: Lilongwe, Blantyre, Ngabu, and Mzuzu. In Lilongwe, the programme runs Family Based Care (FBC), Family Strengthening Programme (FSP), a kindergarten, a primary school, secondary school and Vocational Training Centre. There used to be a medical centre, but this was closed one week before the fieldwork started. Currently 111 children in 12 family houses, and 43 youth are part of the FBC programme in SOS Children's Villages Lilongwe. The SOS Children's Village was in the process of

reunification of some children during the field visit, as encouraged by the Government's Child Care, Protection, and Justice Act (2010) and SOS international policy [48].

When young people who grew up in an SOS Children's Villages family are ready to move out of the family home, the SOS Children's Villages Malawi Youth Programme continues to support them as they make the transition into adulthood. There used to be two youth houses as part of the Youth programme, the first within the SOS Children's Villages compound, and the second in the community where young people live independently with occasional supervision. However, the SOS Children's Village is scaling down the youth houses because it was experienced as a form of re-abandonment by some youth. The second youth house was completely shut down and the first youth house was being gradually scaled down at the moment of research.

Young people who are part of SOS FSP live with their biological (extended) family and are supported by SOS through financial support to their family and education/training support. The FSP intervention area included in this study (Chazda) is a rural area at the outskirts of Lilongwe, around a 24km drive from the city. Almost all families are fully dependent on subsistence farming, while young people try to generate additional income by doing informal daily labour.

#### **4.4 Youth issues**

Main issues for young people identified from secondary literature were: unemployment, hunger (and displacement due to floods), lack of agricultural production, poor health outcomes, child labour, early marriage, low education attendance, stigma due to "orphan" or HIV+ status, material insecurity [42; 52; 45; 53]

## 5. Data Analysis

### 5.1 Introduction

Before discussing the social, cultural, economic, and political drivers of exclusion, first we discuss how youth themselves conceptualise what it means to be socially excluded and socially included. What comes forward most strongly from young people's reflections on in/exclusion is the importance they attach to moral and material support, access to social services, participation in decision making and having a say in social matters as well as their own future.

In terms of **conceptualising exclusion**, SOS FSP youth overwhelmingly refer to the lack of access to social services and government support to their community. One young person captures this as:

*"[Being] left out of social support programmes in their area (...) I feel unaccepted by leaders at national level because they have not constructed an all-weather road from the main road to this area which makes us to have difficulties to travel"* [S1, girl, SOS FSP]

SOS FBC and non-SOS youth on the other hand more strongly emphasised a lack of moral and material support at individual levels that leads to social exclusion, highlighting feelings of abandonment:

*"I feel unaccepted by my father as since the death of my mother, he remarried and forgot about us. He seems he doesn't care at all"* [S27, young man, care organisation1]

*"Being chased away from your community"* [S36, young man, care organisation2]

One young person highlights how there is no active social protection mechanism for young vulnerable people, which was considered social exclusion:

*"Mostly the society is passive with regard to care of orphaned children save for a few who recognize and help the needy"* [S28, young woman, SOS FBC]

Other notions of exclusion related to being sidelined, intimidated, stigmatised or abused verbally based on low income status, disability, sickness, or "orphan" status; being demeaned, isolated or ignored by others in society and being rejected or others not wanting to interact with you.

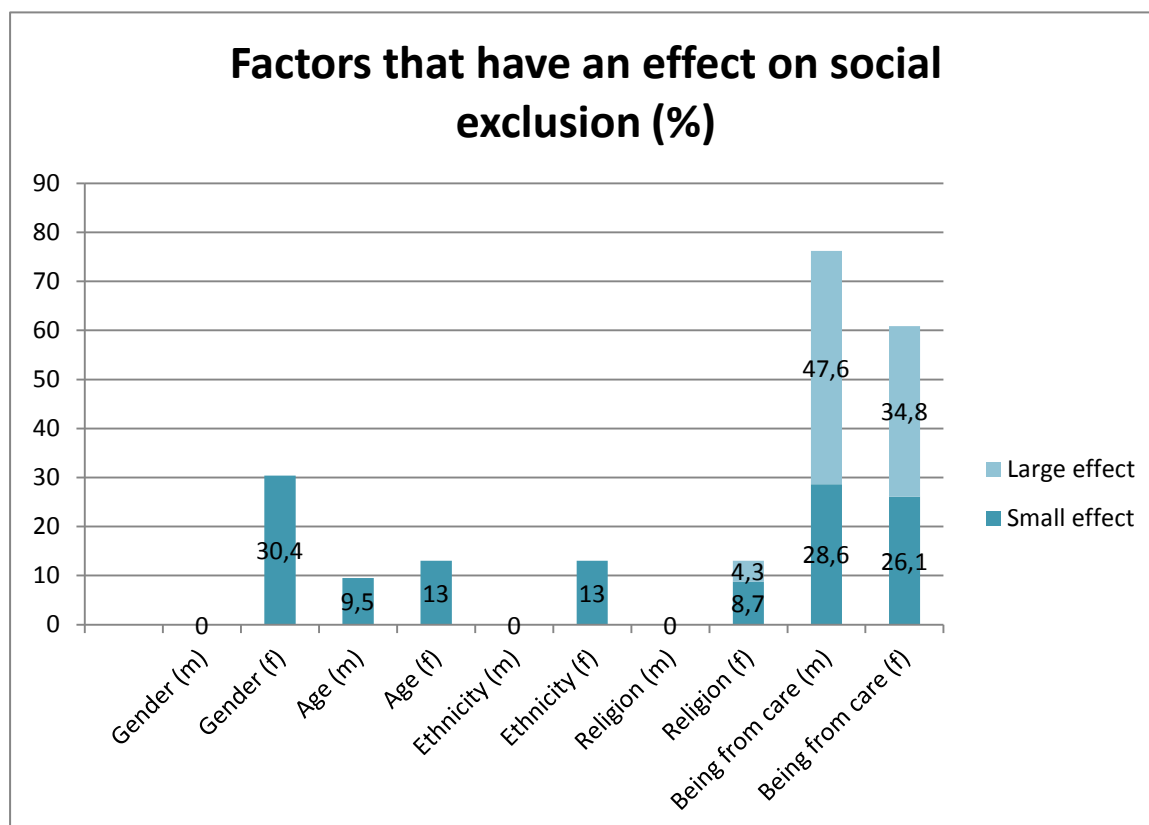
In turn, participation was core to **social inclusion**. This referred to participation in social activities in the community, as well as to being listened to and able to share worries and desires for future. Furthermore, inclusion was associated with being cared for and provided for, but also helping each other. This was expressed in having access to education and health provision, and for some, it also referred to being included in social support programmes (again, this was more strongly expressed among FSP than FBC and non-SOS youth). In interaction with others and the community, social inclusion meant to be able to make friends, be invited to homes, and being accepted and embraced regardless of background. Participation and receiving moral support and advice were considered to be an important part of feeling included:

*"If am able to speak freely with all people in my society. If they listen to my views and take them into consideration"* [S11, young man, SOS FBC]

## 5.2 Social drivers of exclusion

As can be seen from the Figure below, **the factor that had most impact on social exclusion was being from care**. Gender was considered to have a small effect on social exclusion by 7 respondents, notably all female. This was followed by age (2 male and 3 female), religion (considered by 1 female to have a large effect, and 2 females to have a small effect), and ethnicity (only 3 respondents thought this had a small effect). Other factors that had an impact on social exclusion was health and disability (see section 5.2).

**Figure 2 - Share of youth who think the following factors have a small or large effect on social exclusion (N=44)**



As the above data reveal, the strongest social drivers of exclusion for youth relate in the first place to being from care, followed by gender and sexuality as well as health status. Interestingly, in the qualitative data **being from care** was not unanimously agreed to be a driver of social exclusion. In fact, having the support from their care organisation helped them receive higher degrees, which would benefit them in the labour market (see section 5.7). At the same time however, several youth mention that they feel socially excluded due to their care background, mainly because their care background was immediately associated with being “an orphan”, having HIV+ status, or being poor and thus led to stigma, discrimination and exclusion (see also section 5.8). FSP youth raise that the community almost immediately associates “orphans” with having HIV+, and regards FSP youth as “poor”, “desperate”, and be stigmatised as “the poorest of the poor” due to being supported by SOS Malawi:

*“They think am a very poor and desperate girl by being assisted by SOS” [S1, young woman, SOS FSP]*



*“Some people here in the area, poke fun at us being assisted by SOS saying we are the poorest of the poorest here.” [S7, young man, SOS FSP]*

*“Here in the area, since SOS started its interventions, some people label those benefitting as HIV positive and this pains us.” [FGD67, SOS FSP young women, FGD]*

Likewise, SOS FBC and non-SOS youth also sometimes strongly feel the exclusion based on their care status. They share that they are taken as someone who is unruly, are excluded by people in their home village due to their “orphan” status, and are mocked and looked down upon in school (see also section 5.8).

**Gender and Sexuality** are recurring factors related to exclusion throughout the interviews and focus group discussions. In the SOS FSP intervention area, young men and young women observed that gender can be a factor leading to social exclusion, affecting young women in particular:

*“Girls are getting pregnant as they are involved in sexual relationships as they seek material support” [FGD66, SOS FSP young men, FGD]*

*“Sometimes as girls we want to go far with education, but because our parents force us to go into early marriages, otherwise they will stop supporting you [stop providing food and shelter], you end up giving into their demands.” [FGD67, SOS FSP young women, FGD]*

Not giving in to early marriage also risks being excluded by the whole community as it is considered to be disobedient and rude to elders.

Young women agreed that rights for women should be promoted, but young men held the view affirmative policies disadvantage men. They are frustrated by the public university selection process where a female with the same passing grade mark as a male is selected while the male is left out [FGD68, SOS FBC young men, FGD]. In the focus group discussion with young women from SOS FBC, a heated debate arose whether gender discrimination is the most prevailing form of discrimination. It was generally agreed it is common in homes and workplaces, but argued that people with disabilities or albinism are more segregated and less likely to be hired than women.

Finally, issues related to discrimination based on **health** were having HIV+, having albinism or disabilities, and prevailing stigma. According to one SOS FSP young male participant of a focus group discussion, if one has HIV+ status and the public becomes aware of this, some of the people exclude them in social activities and gatherings. Another young person pointed out that in his village they are included in almost activities but some groups of people tend to stigmatise them or mock them by giving them sarcastic names like *anthu ophwanyanya* (sick people, in this case referring to people who have HIV+ status) and *maliro woyenda* (walking corpses). These and other youth who were interviewed also observed that violence towards people with albinism is increasing and that people with disabilities are excluded from social activities, employment as well as influential positions and committees in communities, and that new government buildings constructed by the government are not accessible for people with disabilities.

**68.2% of youth said they felt treated differently as a result of being from care. 90% of youth who felt treated differently based on their care status, reported this difference is negative.**

### 5.3 Cultural drivers of exclusion

While there are some prejudices towards ethnic groups, and a couple of respondents highlighted that ethnicity may lead to social exclusion in cases of nepotism, most respondents feel ethnicity is not a driver of exclusion. Likewise, language was only brought up once by a young person who shared that integration into the SOS Children's Village was difficult because he did not speak Chichewa when he was taken up in the village from elsewhere in Malawi where Chichewa is not commonly spoken.

In terms of religion, three respondents bring up that religious affiliation is sometimes a condition to be employed in a certain company or admitted to a particular education institution., which they condemned as a discriminatory practice. Within the SOS Children's Village, children are accepted regardless of their religion, however there are cases where children are put into houses with a mother from a different religious denomination.

*SOS CV staff1: they are encouraged to continue going to their faith. If they are very young, they go to the mothers' denomination, but once they grow up, they are encouraged to go to their original faith (...).*

*SOS CV staff2: just to add; there are a number of children who were initially Catholics but then when they have grown up they have changed to the denomination of their choice [I56, SOS CV staff]*

Indeed, none of the youth brought up to struggle with religious affiliation. Religion is rather a way of finding meaning and strength in life and integrating into society through church-based activities.

**A small number of young people raise concerns about favouritism based on religion. Language and ethnicity do not seem to be drivers of exclusion to young people in care. Religious activities provide opportunities for connection with the community.**

### 5.4 Economic drivers of exclusion

As highlighted in the introduction, young people typically associate social exclusion with not having access to social services or development, as well as being excluded due to a poor socio-economic status. One stakeholder recognises that poverty is the main challenge among households in Malawi:

*"Most households are poor people so they don't afford basic things like education especially tertiary from which they can get employed or going into entrepreneurship. This is the area I feel is a big challenge on its own whereby there is a need of resources to support these families that is what I can say, not that people are discriminated against." [I64, SOS CV staff]*

Youth agree and recognize that poverty is a strong driver of exclusion, however for many of them it is a political issue as well. Young men and women highlighted how people are politically excluded based on their poor economic status, by for instance not being elected for influential positions in the community by which the views of poor people are not being heard. Young women agree in a focus group discussion that youth face a lot of discrimination based on socio-economic status in schools, homes and social gatherings where well to do people command a lot of respect while

*“poor people they are sidelined and don't have a voice. Even if they try to speak out, no one cares at all.”* [FGD69, SOS FBC young women, FGD]

Because of this, people from lower socio-economic backgrounds risk to be isolated even more. As a consequence, young people feel they are not in control of their future. Particularly for young people from care, financial difficulties upon leaving care are a main driver of exclusion (see also section 5.6).

Particularly in the SOS FSP intervention area, poverty was affecting the youth directly. Most of them have experienced a lack of food to eat, soap to wash themselves with, and other basic needs. Youth raise that wealthier people mostly tend to verbally abuse their workers and other people calling them names. Even in schools, one participant pointed out, it is the wealthier children who are mostly liked by pupils and have a number of friends because of their social status while the youths from poor backgrounds mostly socialise amongst themselves.

*“Sometimes it is difficult to make friends with fellow children from a well to do family as they also want you to come to school with money, if you don't, they stop being friends to you.”* [FGD67, SOS FSP young women, FGD]

*“For those that come from a well to do family, they easily make friendship with many people but once they know that you don't come with money to school, they usually expel you out of their friends group.”* [FGD66, SOS FSP young men, FGD]

Another problem singled out in the focus group discussion with SOS FSP young men is that high rates of separation and divorce increase vulnerability to poverty in the area. This intersects with gender issues as according to matrilineal tradition; children remain in custody of their mother in the case of separation but women are often not economically independent so less able to support their children's needs and education.

**Poverty and socio-economic status are the main economic drivers of social exclusion. Young people from poor backgrounds feel discriminated in schools and their communities, and care-leavers face financial difficulties leading to exclusion.**

## 5.5 Political drivers of exclusion

As much as high poverty rates are a driver of exclusion, youth and stakeholders felt the lack of redistribution of resources and representation of the voices of vulnerable youth and people of lower socio-economic status are an increasingly urgent political issues that needs addressing. As mentioned in section 5.1, young people associate social in/exclusion with the level of accessibility of social services and development work such as road constructions. In addition to this, respondents also point out the lack of political attention and organisation with regards to job opportunities for young people. As a result, most young people feel disconnected from local and national politics. Only one young person was positive about political leaders. Others were dissatisfied:

*“Politicians have money and accumulate so much wealth but they don't give back to community by assisting the needy.”* [S39, young man, SOS FBC]

*“Political leaders only want our votes”* [S43, young woman, SOS FBC]

Stakeholders likewise felt inattention to affordable healthcare and job creation for young people is a critical issue. They observed that current unaffordable and inaccessible health care discriminates the poor and the lack of affordable youth friendly health care services particularly affects young people. They furthermore see a responsibility for the government to set high standards for health care provision as well as for job creation:

*“In Malawi, as I have already said, we have not done much in terms of job creation. You find a lot of engineers have left for other countries or are teaching in colleges and universities, not much into practice. So the opportunities are there, and our country is abundant with resources more than any other continent, but the people who are in control are a problem. That is why most of our youths are going to South Africa to work but we have everything here, we just need to be organized” [157, employer]*

At the policy level, increasing efforts are made as to include youth in policy directives. National policies are decentralised to district levels. In Lilongwe district level specifically, the District Youth Office runs programmes geared towards economic empowerment, youth participation, and increasing literacy and numeracy. However, as much as there is increasing attention to youth and youth participation at the policy level, most of it is focused on increasing educational qualifications, particularly on technical and vocational skills as they are more likely to generate jobs, rather than on structurally addressing job creation and labour market inclusivity for (vulnerable/disadvantaged) youth. Furthermore, there is a lack of attention to youth from care, and particularly to monitor care organisations and care-leavers. there is little attention to and data about the welfare of young people transitioning from care to independence. Plans are being made under the National Plan of Action for Vulnerable Children (2015) [54, p.28] to establish and make operational the Child Protection Information Management System (CPIMS) as well as and linked to increased monitoring efforts of “OVC”, including those growing up in care institutions. However, these efforts concern children between 0-18 years of age, and would not capture the wellbeing of care leavers who are typically older than 18 years old. A Government representative likewise asserted:

*“[We have] very little information on what happens to the youth after they leave care. We don’t have statistics and data but for some who are doing well after completing their education, (...) because they usually come out to this office as a way of pride (...), but for those that have not made it, they are difficult to follow up. The problem is that after leaving care, some of [the care organisations] don’t report that they have left.” [160, government representative]*

This limits the representation and voice of youth from care, and makes them more vulnerable to exclusion. The lack of meaningful attention to these issues affecting young peoples’ future life opportunities reinforces the political disconnection youth feel.

**Limited political attention to infrastructure, social protection, and access to education and health services for vulnerable people caused political disconnection for most youth.**

## 5.6 Multiple transitions

### 5.6.1 Transition into care

As most youth who live in a residential facility were very young at the time they **transitioned into care** (particularly youth from SOS FBC and care organisation1), they do not recall the actual transition. They observe that most children transition into care well, and some take time to adjust to their new environment. Some youth felt that being taken into SOS Children's Villages means having a family, and being able to count on their SOS siblings and SOS mothers is a positive feeling for them. This is a contrast with youth who transition into care at a later age (mainly youth from care organisation2 and occasionally SOS), who feel it is a signifier of being abandoned by their family – which is experienced much more consciously due to their older age:

*"I have at times felt abandoned, disregarded and neglected by my family especially my dad who I was counting on a lot, but what else can I do? I have just accepted the fate and moved on with my life. However, here I was well received by the staff and fellow in care youths, so I feel like we are one family as we help each other morally and spiritually."* [LH50, young woman, care organisation2]

For the youth in SOS FSP, their transition into care typically means new hope as they are able to access social services and better provide in their basic needs as a result of the economic support. In addition to child-centred support, SOS Children's Villages collaborates with other CBOs in the SOS FSP intervention area to change structural issues aiming to contribute to general economic empowerment of the area over a 5-year period of time. Local communities and CBOs carry shared responsibility in identifying the youth to be selected for NGO assistance. However a local government representative addresses this is a time consuming procedure [I58, local government representative].

### 5.6.2 Transition into the youth house

The **transition to the youth house** that youth in the SOS Children's village make, is commonly associated with freedom, autonomy, responsibility and feeling mature, which are considered the positive sides of the transition. Interestingly, youth raise that the level of maturity they have developed in their transition to the youth house, helped them to feel more confident in developing relationships outside the SOS CV compound:

*"Now that I feel more grown up, I develop more friendships, unlike when I was still in the family house. Most of my friendships are with my peers in college."* [LH49, young woman, SOS FBC]

The youth house has also helped youth with learning to manage finances and reconnect with family:

*"I have learnt to be independent being careful with my spending of money. It has also helped to connect with my biological family in order to maintain the bond with relatives in my home village."* [LH51, young woman, SOS FBC]

It thus seems that the transition to the youth house triggered positive connectedness with friends and family members outside of the care setting (see also section 5.8).

However, youth also associate the transition with negative feelings such as missing parental guidance, arguments and disagreements with fellow youth house residents, and financial challenges which impact negatively on their diet. In addition, SOS CV staff raise that youth particularly miss the emotional guidance and counselling that they need in this period of adolescence, which is less available in the youth house (although they do receive guidance from co-workers in the SOS Children's Village, based on their stage of development). This especially applies to youth who have special needs:

*"...Some of [the children we have in our care] have mental slowed down development. A good number of them they struggle a lot in school so much that if we give them unlimited freedom, it would not be good for them. (...) So we really need to give them a lot of effort because if we just relax a bit, we lose the child. So going to the youth house where they are just by themselves, it is not the best option, they still need an adult who could be guiding them, check their assignments, reminding them and the like."* [I56, SOS CV staff]

Furthermore, SOS Children's Villages staff have observed that some youth have experienced the transition to the youth house as a form of "re-abandonment" [I56, SOS CV staff]. As a result of signalling this issue of re-abandonment and youth missing their SOS family, the SOS Children's Village has closed down the youth house 2 (the youth house in the community) five years ago, and is currently scaling down the youth house 1 (the youth house in the compound of the SOS Children's Village) despite the fact that some youth seem to find the transition to youth house 1 a positive one.

### 5.6.3 Preparations for independence

79.5% of the youth look forward to living independently (for SOS FBC, this is slightly lower, namely 65%, compared to 87.5% non-SOS youth and 8 out of 8 FSP youth who are looking forward to living independently). Most youth feel somewhat (38.6%) to very (27.3%) prepared for living independently.

All across the care organisations, youth generally look forward to living independently as it signifies being self-reliant and mature, and they look forward to integrating with and "giving back" to the community. While youth from the non-SOS care organisations have no dedicated transition to help them prepare for independence, SOS FBC youth receive most of their preparations during their time in the youth house, where they learn decision making and budget spending. SOS FBC youth who are positive about their preparations feel that SOS has helped them enough, and stress the emotional and psychological support they receive from the care staff, particularly SOS mothers. However some SOS FBC youth raise the psychological support they receive is too much focussed on instilling fear about the dangers of the outside world, and that they would have felt better prepared had they had more ownership over their educational and career path decisions (see also section 5.7). The most pressing issue for a satisfying preparation for FBC youth, as well as youth from other care organisations, was needing start-up capital and work equipment to start their own business while they are looking for formal employment, as well as continuing their education up to tertiary level and being linked to employment opportunities.

*"If I were to be provided with a start-up capital for small scale business venture"* [S19, young woman, care organisation2]

*“I would need working equipment and any other related materials so that am fully geared to stand on my own” [S20, young woman, SOS FBC]*

*“I wish I could have been allowed to go on with my tertiary studies to possibly reach graduate level” [S38, young man, SOS FBC]*

The above mentioned concerns on financial support, finding employment, and continuing education, derived from qualitative answers, seem to slightly differ from the quantitative answers in the surveys. As shown in Table 3 below, youth feel generally prepared for living independently, but unprepared for finding accommodation, engaging in politics, and finding employment or employment-related training, the latter in line with their qualitative answers. It is notable that youth outside of SOS feel considerably less prepared for independence than youth in SOS. The fact that issues related to finding accommodation or engagement in politics did not come up in the qualitative answers when asked what preparation young people need for living independently, could indicate that young people have not yet thought about being engaged in politics or finding accommodation.

**Table 3 - Share of young people who feel prepared for the following aspects of independent living (N=44)**

	SOS FBC (n=20) (%)	SOS FSP (n=8)	Non-SOS (n=16) (%)
Finding accommodation	50	5/8	50
Taking care of yourself	90	8/8	93.8
Finances	85	8/8	62.5
Continuing Education	90	6/8	93.8
Finding employment-related training (apprenticeship)	95	5/8	68.8
Finding employment	80	6/8	56.3
Health care	90	8/8	93.8
Engagement in politics	70	7/8	56.3

The majority of youth think they should be told less than a year in advance when they will be leaving care, with 52.8% stating they should be told between 6 months and a year. 5.6% does not know when they will leave care. From the below Table 4, it is evident that most young people in Malawi are being told shorter than a year in advance when they will leave care, which is when they think they should be told.

**Table 4 - Average time youth being & think should being told that they are leaving care (N=44)**

	Is being told shorter than 1 year (%)	Is being told longer than a year (%)	Think should being told shorter than a year (%)	Would like being told longer than a year (%)
Average	75	19.4	77.8	19.4

#### 5.6.4 Transition to independence

Most of the youth spoken to reported to feel happy to start living independently. Having completed education and being confident to find employment were the main reasons for positive feelings about transitioning to independence:

*“I felt happy because I had completed my education and ready for the market so I was looking forward to it. I was prepared psychologically but financially I was anxious of what the next life will be like.”* [LH47, young man, SOS FBC]

*“I was ready for independent life because I had completed my tertiary education. However, my only fear was the fact that I had not managed to find a job.”* [S35, young man, SOS FBC]

Other reasons for looking forward to independence were wanting to be free in terms of diet and movement. One young person from SOS FBC wanted to move out of care to be able to support siblings by generating income and offering them accommodation. Similar notions were reflected by SOS FSP youth who despite fearing missing their family members, are looking forward to independence mainly as to support their family:

*“Because I want to lift the burden off my parents and help them to raise my siblings”* [S4, young woman, SOS FSP]

*“I simply want to be independent because I hope by that time I would have completed my education and being employed to sustain myself and the whole family.”* [S7, young man, SOS FSP]

Notably, youth from non-SOS care organisations who were preparing to move to independence, emphasised that they wanted to live a “normal life” in the community, wanted a change from “institution life” and avoid stigma and negative treatment as reasons for looking forward to independence, rather than the feeling of being able to stand on their own:

*“Yes, I am looking forward to leaving care and living independently because I don’t like this place. There are lots of challenges here so I look forward to a day I will leave.”* [S10, young woman, care organisation2]

*“I want to be excused from the verbal abuse and taunts I suffer from the public here because of my homelessness.”* [S22, young woman, care organisation2]

*“I wanted to integrate into the society and live a normal life than of the in care one.”* [S40, young man, care organisation1]

While young people appreciated the care they received, the lack of basic facilities in one of the care organisations, and the stigma attached to being an in-care youth, particularly had an effect on non-SOS youth (see also section 5.8).

Youth who had negative perceptions of independent living raised this was due to not feeling ready in terms of financial independence or not yet having graduated from school, and fearing to have less money to spend on leisure activities. Indeed, 4 out of 8 care-leavers (all SOS Children’s Villages) indicated that after care they had less money to spend than during their time in care .



**Stable employment** is one of the crucial factors for a successful transition to independence for young people, as it contributes to young people's self-reliance and sense of dignity (see also [40]). While SOS CV has no formal arrangements with future employers, staff do informally reach out to future employers to link SOS youth to them. At the same time, SOS CV staff claim that youth in care are not good at networking with the community, which is why they do not get employment opportunities. However, as was a recurring issue in the data, youth from care do not have a large network of family relations that would link them to job opportunities, which is often crucial to find employment. Their space for networking is thus limited, and without the help of their (SOS) siblings and staff they have very little space to find their way into the labour market. As a result, youth are pushed into setting up their own small-scale businesses to get by, forcing them into a period of wait-hood. In the same vein, while young people from SOS FBC are mostly satisfied with the support they receive or have received, some would have liked to receive the financial support in cash rather than for instance directly to a landlord, so they can start up a small business.<sup>2</sup> Interestingly, SOS mothers observe that young women seem to be doing better once independent than young men in terms of finding employment and being self-reliant. Young men, according to them, more often than young women end up on the streets, though it is rare. The same findings were also confirmed by other SOS CV staff who observe that young women are also generally performing and integrating better in school. Youth from the other care organisations did not report to have received help in finding employment.

81.8% of the youth reported their engagement with the local community changed for the better after they had left care.

**Integration into community** life was crucial to care leavers to feel successful at independent life. Where most young people (81.8%) felt their engagement with the local community changed for the better when they had left care, one of the SOS CV staff members has observed differences between integration levels for SOS FSP compared to SOS FBC youth. This staff member raised that SOS FSP youth will more easily "give back" and build capacity<sup>3</sup> of their home communities than SOS FBC youth can, due to the different levels of connectedness (see also section 5.8):

*"The good thing about the [SOS] FSP is that unlike the [SOS] FBC the child is always in touch with their roots such that when they are doing well in life they are able to plough back what they have earned to their own home of origin unlike in the [SOS] FBC whereby most youths don't have that strong bond to their roots."* [I61, SOS CV staff]

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<sup>2</sup> SOS FBC youth receive financial support tailored to their needs once they have left care and are transitioning to independence. Generally, youth receive financial support for six months, and for some youth it goes beyond six months depending on the level of independence the young person has reached. This means that some youth will receive continued financial (as well as moral) support, and some who have already found employment will receive a start-up package and financial support for three months.

<sup>3</sup> FSP programme phases out after 5 years. Capacity building is core of the programme, by for instance creating a Villages Savings and Loans group, "champions" (Village Change Agents) at the village level who are training the community on the Savings and Loans concept, vocational skill training to increase chances to a sustainable income. Training CBOs in proposal development to access funding. Through these ways, the community will hopefully have developed the capacity to sustain themselves after phasing out.

From these findings it thus seems that care organisations and the several relevant local government bodies should further intensify their collaboration to better monitor young care leavers with reliable data and integrated programmes to smoothen their transition to independence.

## 5.7 Education

Education, as well as access to health care and the provision of basic needs (e.g. having three meals a day) were among the main benefits listed from being in care, as young people would not have had these provisions if they lived in their home communities.

*“Coming to SOS affected me positively. I got good health care and also good educational opportunities.”* [LH49, young woman, SOS FBC]

*“Education will help me shape my future and perhaps help me do away with the ill treatment I have gone through and I am glad to see that my teachers are trying their best to help me and other students when approached.”* [LH50, young woman, care organisation2]

Education and having a good qualification is regarded as a crucial factor for a successful transition to independence and self-reliant life. Youth see the ideal of completing education as an achievement that contributes to high self-esteem, helps reaching ambitions, and ensures a better future. Furthermore, youth and other stakeholder including caregivers and employers are convinced that having a good qualification is the most important determiner of inclusion in the labour market; they repeatedly mention that employers do not discriminate based on gender or care background, but that the qualifications that matter. In the same vein, some youth feel that being from care is an advantage in finding employment, because the good educational qualifications supported by their care organisation increases their opportunities in the labour market. Access to education also gives young people from care the opportunity to interact with others in the community, which most young people evaluate as a positive interaction or exposure. Perceptions on the importance of education do not vary much between young women and young men. However, young women from FSP discuss that they are faced more strongly with risks that would keep them out of school such as early marriage or household chores. Staff from SOS FBC observe that young women more easily integrated with non-SOS children in school than young men.

Within education, young women and young men do not report to experience much discrimination based on gender or ethnicity, but rather based on being from care, particularly by their peers. While some youth share that some teachers made them feel excluded, recalling that *“[Some teachers would tell] me that if I don’t work hard, I would not achieve much apart from being a SOS child”* [LH51, young woman, SOS FBC], most youth are highly positive about their teachers. They particularly appreciate their encouraging moral support and advice, and their *“fatherly love and guidance that made me feel accepted”* [S31, young man, SOS FBC]. In the community of the FSP youth, teachers have played a crucial role in ensuring children are given equal opportunities to and within education. Likewise, young people who are in tertiary level education are positive the inclusionary practices of their teachers. They expect that it is due to the increased anonymity (teachers not knowing where their students come from) at this level of education that discrimination based on being from care decreased:

*“My relationships with my teacher is good. My teacher also owns a shop and she sometimes gives me the opportunity to visit her shop. That gives me inspiration.”* [LH49, young woman, SOS FBC]

*“I am so happy that I have a very considerate and listening lecturer who helps me to get skills I need in my trade. She is really so helpful to me as a student.”* [LH51, young woman, SOS FBC]

*“My lecturers help me a lot since in the university there is not really any discrimination based on one’s background as opposed to other levels of education like secondary or primary school where some teachers speak some harsh words at us.”* [LH53, young woman, SOS FBC]

The importance young people attach to their teachers having a positive and encouraging impact, and the negative influence of discouraging and discriminating behaviour by teachers, should also be seen in light of the importance young people attach to their education as a means to a bright future without poverty or mistreatment and working towards an important position in society.

Choice of their educational career is an important element for young people to feel a sense of ownership over their life choices. It is essential for young people to feel passionate and personally motivated to their topic of study (especially at tertiary level), as can be seen in the above quotes as well. SOS CV mothers however observe that the SOS Vocational Centre is underused by SOS CV youth, as young people prefer to experience community life [155, SOS CV mothers]. Other SOS CV staff also observed that young people from SOS FBC prefer to go to colleges outside of the village, to explore community life and integrate. To young people, being able to choose, or at least have a say in, their future professional field and education institution encourages them to work hard and look forward to achieving their future ambitions as highlighted by the following quotes:

*“If I were given opportunity to choose what I wanted to pursue. I was pushed to study an area I was not really interested in but I had no choice.”* [S36, young man, care organisation2]

*“I feel sidelined in decision making on my university degree, something that is directly concerning me. I wish I were listened to and respected for my academic choice.”* [FGD68, SOS FBC young men, FGD]

It is therefore important to include young people on decision making about their education and career path, and the money spent on institutions outside of the care organisation structures may return in the form of higher levels of wellbeing and ambitions for young people.

## 5.8 Relational movement

### 5.8.1 Connectedness

Connectedness during their time in care for young people relates mostly to the connectedness with peers, care staff and family. These are also the people most youth would turn

#### **Text Box 1 Peer pressure**

*Peer pressure and negative friendships were an issue brought up by several young people, and some seem vulnerable to peers convincing them to take up smoking and drinking, or gossip about others. The desire to ‘fit in’ and interact with the community seem to be part of the reason why young people feel vulnerable to these pressures. On the other hand, some young people intentionally withdraw from these friendship groups, because they want to avoid “wasting opportunities for a good future”.*

to when seeking financial support or moral/emotional advice (see Table 5 below). Furthermore, integrating into the community was considered as an important goal towards independence, and youth are eager to integrate with the community.

As described in the previous section, school is one important means for young people to be exposed to the outside society, and particularly their interactions with peers from school and the community are important connections for youth from care. While some youth do have friends from outside the care organisation, most youth tend to form friendships with people from within the children’s village and their numbers of friendships outside their care organisations are limited , especially the SOS FBC youth. The social-relational mapping exercises revealed a small network of relations for these young people, as well as the following quotes:

*“I had friends from SOS mostly due to the fact that they were the ones I was interacting with regularly and we SOS children like to care for each other. However, I also had friends from outside but they were very few.”* [LH51, young woman, SOS FBC]

*“I had friends both outside and inside SOS but I was more close to my SOS friends because they were the ones I was interacting with on daily basis so I think because of the proximity factor, I was very close to them.”* [LH54, young woman, SOS FBC]

Youth from care organisation1 seemed to have more friends from outside the organisation. The young people and the staff shared that due to the fact that these young people went to a public school in the community, they found it easy to form friendships and relationships with their peers from outside the care organisation. SOS FBC youth go to SOS school in the same compound, and due to the compound restrictions they face more challenges in following up on their school friendships with youth who go to SOS school from the community.

**Table 5 - Share of young people who would turn to (former) care staff, biological family, or friends for advice after leaving care (N=44)**

Person youth would turn to for advice	SOS FBC (n=20) (%)	SOS FSP (n=8)	Non-SOS (n=16) (%)
(Former) care staff	40	0/8	62.5
Biological Family	40	7/8	37.5
Friends	15	1/8	0

Connectedness with care staff is an important determiner for (future) wellbeing, and young people attach great value to a good relationship with their care staff. One young person from care organisation1 for instance shares how the care staff, director as well as house parents, have always been supportive and are still open to be approached for advice and support. For SOS FBC however, young peoples’ views on the staff relationship with young people tend to differ. While some young people highlight a good relationship with their SOS mother and other staff members, the descriptions of this relationship seem distant and unaffectionate described as “cordial” or “being in good terms”. Moreover, several youth bring up a negative relationship with their SOS mother or management (see also Text Box on relationships with care staff). Particularly issues of verbal abuse by SOS mothers, as well as inaction and not involving youth in decision making by the management

who were seen as “passive”, “not passionate about young people”, and “not caring to come and interact with youth”, had a negative impact on several young people within the children’s village, making them feel excluded and not taken care of, leading to self-exclusion (see section 5.10). Young women from the youth house expressed fear for early disengagement if they would misbehave, causing a sense of disconnection from caregivers (see Text Box below). Youth particularly expressed to wish to have more voice in decision-making issues directly affecting them, such as activities organised in the village, education and career paths, and their preparation for and timing of disengagement.

A related issue that mainly SOS CV staff raise is that young people miss a father figure in the house. SOS mothers call it a “culture shock” for young people when they arrive in the village and find there is no father figure in the house. Other staff similarly observe that young people wish to have a father in the house because they observe that in other families, and share that especially young men confide in SOS Children’s Villages male health centre workers for guidance and advice.

Across all care organisations, young people who have and know their biological family members, tend to also stay in touch with them. SOS FBC youth typically visit them once a year (though SOS CV staff mentions they are allowed to visit more often), and youth who have their biological family members living close by in Lilongwe visit more often. What is particularly important to young people, is that their family members take the effort to seek contact, and visit them:

*“Yes am still in constant touch with [one relative] who took care of me and my siblings in the first place, but we don’t care for the other relatives because I feel they did not support us when it mattered most when we lost our parents.” [LH45, young man, SOS FBC]*

*“Yes I stay in contact with my father and he used to come and visit me once in a while especially towards the final year I stayed here because previously he was not coming to visit me.” [LH48, young man, care organisation1]*

*“Well, with that background I have explained, at first I was not in touch with any of my relations, but as time passed on, they started coming to visit me, a thing which excited me and made me feel remembered and socially included by them.” [LH54, young woman, SOS FBC]*

SOS FSP and non-SOS youth raise how stigma can reinforce a sense of disconnection from family members and community. One young person from SOS FSP raises how extended family members sometimes remind them of their “orphan status” and give them a hard time in the household because they are a (financial) burden. This reveals that stigma and a lower social status as an “orphan” also affects young people in their own households (see also [42; 20; 45]). For non-SOS youth, stigma likewise affects them. They all report a positive relationship with care staff, teachers, friends, and family members if they are in touch, yet are highly affected by the exclusion by community members due to stigma and prejudice, as highlighted in previous sections.

The transition to the youth house and later on to independence seem to benefit young people’s sense of connectedness with the society and their ability to form friendships with non-care youth. The youth house taught them to “live well with others [who have] different behaviours and attitudes, which needs some tolerance and understanding” [LH54, young woman, SOS FBC]. Likewise, the

transition to college and the work place means increased exposure to age-mates from the community. Nevertheless, the vignettes in the focus group discussions reveal that it remains important to young people in their close and intimate relationships that their friends and partners have an understanding of what it means to be from a care background, and would prefer turning to someone with a care background for advice:

*“I can't get an advice in this case from someone who has grown up in the affluent suburbs with both parents, but rather someone with care background but has soldiered on to live independently and happily so I can approach such people.” [FGD69, SOS FBC young women, FGD]*

Generally, once independent youth would go to their (former) care worker, biological relatives or friends for financial support or advice.

After care, when youth are living independently, most SOS FBC youth stay in touch with their friends and siblings from SOS Children's Villages, and some with their house mother. Again, “having a future” and being self-reliant are important factors that influence the extent to which young people are keen to stay in touch with their care organisation. SOS CV staff observe:

*“Some are shy and ashamed that their fellow youth will laugh at them for their predicament of not breaking through after leaving SOS because they had an opportunity to do education while they were here but they did not utilize such chance which made them to find life hard once leaving the village. [I56, Staff]*

Most young people, however, come back to introduce their future spouses, and SOS CV staff follow up on the young people who are now living independently.. Young people from care organisation1 likewise stay in touch with the staff – who regularly visit them in (boarding) school – when living independently. SOS FSP youth are mostly supported through families and show a less close relationship with the care staff due to the nature of the support, which is also revealed by the fact none of the SOS FSP youth consider going to SOS FSP care staff for financial support or advice.

#### **Text Box 2 Relationships with care staff**

*Negative relationships with SOS mothers were highlighted in both and individual interviews and focus group discussions with FBC youth. Young men and young women complain about the lack of passion for work and use of bad language by some of current caregivers as compared to the previous ones:*

*“I am in good terms with almost everyone except the immediate past house mother who I deem to be harsh in her treatment towards me. This mother is not caring unlike the previous house mother we had.” [LH45, young woman, SOS FBC]*

*“I did not like the house mother because of her attitude. At times whenever I had done something wrong, she would utter insults to me which I did not feel comfortable with. Additionally, she was biased against me while favouring others in the house. I think she had a natural hatred for me.” [LH53, young woman, SOS FBC]*

*For some youth this means that their transition to the youth house comes as a relief. They also mention to feel more comfortable with the youth leader to turn to for advice. Nevertheless, some young women have raised concerns over fearing to be told to be disengaged early if they misbehave.*

### 5.8.2 Relational images

Young people did not reflect to a great extent on their **self-images**. What comes forward mostly from the data is that young people tend to isolate themselves or want to be alone when they feel excluded (self-exclusion, see also section 5.10). Especially negative relationships with friends and stigma from the community makes young people want to be alone, though it does not necessarily impact on their self-image:

*“Sometimes I feel like living alone because I feel like no one cares for me.”* [S30, young woman, care organisation2]

*“Despite the stigma that we SOS children/youths get from the members of the general community, we still interact with everyone very well”.* [S16, young man, SOS FBC]

*“I don’t have problems with the society as regards to its perception on me as someone from care.”* [S26, young woman, care organisation1]

However, for some youth the fact that they need and depend on support and were reminded of that by their communities, in turn influenced their self-images as not feeling empowered or unable to influence their own future:

*“I can’t manage to pay school fees on my own. I don’t feel empowered to shape my own future. What if SOS stops helping me?”* [S8, young man, SOS FSP]

This notion of being helped and not being economically self-reliant, impacts young people’s perceptions on abilities to form future relationships, which are also influenced by **relational images held by others**. Young men for instance share that they have experienced girlfriends leaving them due to their care-status and (perceived) inability to provide financial security, feeling personally rejected:

*“People from care are looked down upon. No one likes us.”* [S30, care organisation2]

*“I still think about my girlfriend. I want her to come back and apologise. I think she didn’t want me despite the way I loved her.”* [S39, young man, SOS FBC]

*“It is even becoming difficult to get a woman to be in a relationship with if one don’t have a good job or motor vehicle.”* [LH68, SOS FBC young men, FGD]

Young women likewise raise how their care status impacts on how they are perceived as females. Young women in the focus group discussion did view their care status as a background that needs to be accepted by an open-minded person. Young women were furthermore influenced by relational images by the community on their status as a young female from care, where their care status is particularly associated with promiscuity:

*“Some people think that just because I live at this care centre, I am promiscuous. They think that I make sexual relationship with men so that I meet my personal needs, which is not the case”* [S21, young woman, care organisation2]

*"I can't say we are perfect, and there were some isolated cases of some SOS girls being indulged in prostitution but we all can't be judged based on isolated cases." [FGD69, SOS FBC young women, FGD]*

*"It depends on [a male partner's] mentality on whether he can accept someone from a care background because people are different in manners and perceptions. So for him he will make a personal choice whether he still loves her despite the care background" [FGD69, SOS FBC young women, FGD]*

The influence of self-images and relational-images, seems to be closely interlinked and influence the social exclusion and self-exclusion of young people (see also Section 5.10). As SOS CV Staff observe:

*"When they are [in university] they don't want to be associated with anything to do with SOS because some are ashamed or embarrassed that once their fellow students realise that they are helped by SOS, they [fear they] will mock them so they kind of discriminate themselves. [It is] not the community but themselves." [I56, SOS CV Staff]*

Being "helped" or being from care thus influences the relational images of young people, of themselves as well as how others see them. Care-status is something that young people rather hide, to avoid exclusion or stigma. It furthermore influences how they enter their intimate relationships: with caution not to be viewed as promiscuous (in the case of young women) or dependent (in the case of young men).

## **5.9 Identity formation**

Most of the young people who participated in this study recalled experiences of social exclusion, discrimination, and/or stigma (see also section 5.8). These experiences had a large impact on young people; consequences mentioned due to this were limited social interactions, withdrawal, suicidal feelings and low self-esteem. At the same time, young people's reflections on identity should be interpreted in light of the notion that they are helped and being given opportunities for a bright future thanks to the support by their care organisation, which is why they generally feel content with who they are and where they are, and are eager to integrate in and "give back" to society. Nevertheless, young people from care remain vulnerable to negative influences that impact on their identity formation.

Apart from already mentioned issues related to stigma and discrimination by peers and community (see section 5.8), some young people from SOS FBC reflected on the impact of not having biological relatives. Young people who did not have any biological relatives sometimes felt this impacted on them strongly when other young people or university class mates visit their relatives in the weekend or during holidays, when they were staying by themselves as they did not have anyone to go to. However, young people said they were able to accept their situation as it is:

*"I am not bothered that I don't know any of my biological relatives as I just accepted what is of me. (...) I did not have much problems really because this is where I grew up from being a toddler so I was used to this place and surroundings. However, at times I could feel some sense of being an abandoned child because at times during the holidays, my fellow in care children could go and visit their biological relations as a way of strengthening their family*



*link but in my case I didn't have that link so I was usually the only one staying behind because I had no known biological relations.” [LH53, young woman, SOS FBC]*

Nevertheless, thanks to the fact that SOS FBC youth had a place to call home, and people to call their family, their care situation had a positive effect and helped them overcome these feelings.

SOS CV staff bring forward that they perceive a different issues between SOS FBC youth and young people living with their biological family (including in the FSP programme). SOS mothers claim that because of the “artificial” family life in the children’s village, FBC youth become lazy:

*“Most of the SOS youth are lazy and dependent on us for everything, unlike the youth from a normal family setting who are very organized and are able to do most things on their own. The FSP children are more less like any other child since they are brought up in their homes with relations to care and guide them so they are used to do things on their own while the FBC ones are used to being almost everything being done for them and the food they eat is all menu set, so I can say they lead an artificial kind of life where as the FSP youth lead a normal Malawian life with awareness and experience of life challenges. And the FBC youths when they go for holidays to their relatives when they comeback they complain of alleged bad food and also too much work since they are used to just sit down and everything being done for them.” [I55, SOS mothers]*

This quote is in striking contrast with the experiences of young people of helping their SOS mothers in the household, eagerness to integrate into the society, and ambition to achieve high grades in school to secure a good future. Youth did not reflect on being perceived as “lazy” and did not perceive themselves as lazy. This begs the question to what extent young people’s identity formation is guided by their caregivers, and reinforces the notion that young people are independently finding their way into adult life while in the youth house.

### **5.10 Social exclusion & self-exclusion**

Most of the young people who participated in this study recalled experiences of social exclusion, discrimination, and/or stigma. The social exclusion and stigma young people felt, also impacted on their self-exclusion. As some youth highlight, they deliberately refrained from social interaction in some cases, for their own peace of mind:

*“I sometimes tend to be selective when interacting with friends because I don't want people who takes fun at my status as an in care youth.” [S10, young woman, care organisation2]*

*“The social exclusion that I experienced made me to withdraw and live a very secluded life.” [S17, young woman, care organisation2]*

*“Well, living in the youth house brought some sense of independence and also peace of mind to me because there were some things that kept me away from others by choice” [LH53, young woman, SOS FBC]*

*“I had several friends both inside and outside SOS but later on, I became so individualistic so I didn't interact that much with others.” [LH52, young man, SOS FBC]*

Stakeholders likewise observed the interaction between social exclusion and self-exclusion for young people. However, some were less sure about the level of social exclusion and stigma that is present in the communities, and social exclusion something to be “inside of them” or related to being “materially better off”:

*“Sometimes it is self-discrimination whereby they don’t want to interact with others from the community. It is because of the support they get from the care centres: youth from [rural] villages are envious on them since they are usually better off in terms of materials since they are well supported in the care centres resulting in envy from people in the [rural] villages.”*  
[I60, government representative]

*“Well, it must be something inside them, not the society. We are all human beings so I don’t think there is any reason to sideline each other.”* [I64, SOS CV staff]

The observations of the staff compared to those of young people themselves reveal a discrepancy between the social and self-exclusion young people are faced with. For young people their self-exclusion sometimes seems agentic behaviour to avoid further stigma and discrimination. However, for caregivers social and self-exclusion rather seem to be due to either their privileged material status or a default of the youth themselves, than a structural societal issue.

## **5.11 Outcomes:**

### **5.11.1 Human wellbeing**

As much as young people experience social exclusion based on being from care, they seem to be generally satisfied with what they have, and what they can be and achieve in life. Young people appreciate the social services (health care, education) and fulfilment of basic needs in their care organisations. Almost all of the young people who participated in the study mentioned to have future ambitions in terms of career, yet only 50% saw possibilities to achieve their ambitions. Their ambitions were in part inspired by their interest to “give back” to society and/or their family members for the care that has been provided to them. The greatest barriers to achieving their ambitions were financial issues, health problems, needing further support for education, and lack of job opportunities. In addition, also death and laziness were mentioned. “Death” was mentioned by young people who expressed a strong sense of determination to achieve their set goals despite all challenges they were or are likely to go through – only (their own) “death” could hinder them. Laziness refers to the importance attached to education qualification and the fear/danger of not working hard enough to make the most out of it. Some young people referred to the lack of social acceptance they have experienced leading to insecurities or coping mechanisms that would hinder achieving their ambitions (see also section 5.11.3).

What comes forward from the aspirations and strong determination young people possess to achieve their future ambitions, is the focus on their future roles in society, as was also revealed by the importance attached to education (see section 5.7) and positive perceptions of living independently (see section 5.5). Many of their reflections contain notions of building up a future (for instance through education) and becoming an important person in their own community. Their time in care is seen as a stepping stone towards that ambition. When asked about whether they are happy with what they are doing at the moment, one young person summarizes this as:

*“Yes, I am happy and determined because I know am in the process of shaping my own future.” [LH46, young woman, care organisation2]*

Likewise, young people from care seem to view their transition to independence as the period when “real life” starts, can achieve their ambitions and identify differently than as a young person from care. This is strengthened by the finding that young people look forward to independence because it frees them from stigma as a care child, and in some cases relieves them from their negative relations with caregivers (see section 5.8). Their time in care thus seems as a period of “waithood” to be relieved from the care-child stigma, while working hard in education to prepare for achieving future ambitions, dignity through work, and taking up an identity within society.

### 5.11.2 Employability

52.3% of youth said they thought there are no adequate opportunities for young people to obtain decent/meaningful employment. 65.9% of the young people felt it makes no difference if youth come from care in finding employment, and 29.5% though it is an advantage.

As much as young people look forward to their independent futures, are keen to achieve their career ambitions, and feel they have an advantageous position in the labour market thanks to the educational support of their care organisations, youth express being fearful about finding suitable employment. This is mainly due to general high unemployment rates in the country, which are particularly affecting youth because of recent discussions on increasing retirement age and nepotism. SOS FSP youth feel that thanks to being supported by SOS Children’s Villages, their educational opportunities increase, and they expect to be linked to the labour market by SOS Children’s Villages.

While unemployment levels are higher for young women than young men [40], and 30.4% female youth felt gender has an impact on their social exclusion (see section 5.1), future employers seemed to link it to the mindset of women themselves:

*“Women themselves should stop looking at this trade as men’s only career” [157, employer]*

*“Women prefer office work. [They don’t like] hard work, sweating, (...) ladies are the kind of people who don’t want dirty things while men are eager to do any work because they have responsibilities at home so all they are looking for is employment so that they are to provide for their families. Basically the difference between men and women is that women don’t want simply to do it because they have that mentality that somebody else will do it, while men feel that they are responsible to their families so they have to do any work as long as it gives them money.” [163, employer]*

These perceptions however seem to indicate that the problem is with women who are “slow” or “uninterested” in hard work.

In the same vein, employers and some care staff view it to be the wrong mindset of youth to be wanting and expecting “white collar jobs”. Providing technical and skills training, as well as entrepreneurship opportunities, should according to various care staff fill in the gap of high unemployment rates, which would also require a change in mindset of young people:

*“We just need to change their mindset of wanting white collar jobs only, and take advantage of SOS support in vocational training because it is better to know the skills and employ yourself and others, than waiting to be employed by somebody else” [I61, SOS CV staff]*

This does not recognise and address the structural exclusion that young people, and particularly young women, face in the formal labour market and places the onus of responsibility onto youth and not broader structures or political leaders. Indeed, youth in the FSP area express serious concerns of the physical danger they are exposed to while doing their daily jobs in the informal sector. A lack of job creation efforts thus further reinforces political exclusion as already experienced by young people, that further marginalise youth in remote areas such as that of the SOS FSP intervention.

SOS CV staff do also recognise the challenges in the labour market youth face, and staff members follow up on the young people who are now living independently, sometimes engaging them in entrepreneurship or skills training programmes, which SOS CV staff states needs to be intensified observing that some youth are not able to find their way in the labour market. SOS CV staff furthermore try to link young people to apprenticeship placements, though this is not a formal arrangements. Likewise, an interview with a teacher also pointed out the important role educators play in connecting young people to the labour market – being an important contact point to link young people to employment opportunities through their connections.

### 5.11.3 Social acceptance

When asked whether certain people made them feel accepted or socially excluded, young people are most positive about the inclusion by caregivers, family, and teachers. Young people from SOS FBC are also positive about the acceptance felt by friends and other young people, though it should be noted that most of their relationships are within the SOS Children’s Village. Young people feel less accepted by employers, local leaders and national politicians (see Table 6). The quantitative data presented in Table 6 below highlight a substantial difference between non-SOS youth and SOS FBC youth in feelings of acceptance. This may be explained by the higher levels of stigma and discrimination that youth from the non-SOS organisations and SOS FSP report.

**Table 6 - Share of youth feeling accepted by the following parts of society (N=44)**

Feeling accepted by	SOS FBC (n=20) (%)	SOS FSP (n=8)	Non-SOS (n=16) (%)
Caregivers	90	8/8	81.3
Family	85	8/8	81.3
Teachers	95	8/8	93.8
Employers	40	0/8	18.2
Friends	80	3/8	25
Other young people	70	2/8	25
Local leaders	65	3/8	25
National politicians	50	4/8	25

The qualitative data are mostly in line with the above statistics – young people raise to feel excluded by local and national **politicians** who they feel do not listen to their views, and **employers** who hire people based on nepotism, which negatively impacts young people from care because of their

limited (family) connections. Qualitative data also nuance the findings on family acceptance, highlighting that young people feel excluded by *family* when they do not adequately take care of them, do not visit them in the care organisation even if they are able to, or do not listen to them and make decisions about their future without consulting them (particularly for SOS FSP youth). They furthermore experience exclusion from peers and community, where stigma again comes up as a cross-cutting issue that affected their sense of exclusion:

*“I did not have many friends outside SOS because we SOS children felt excluded by the surrounding community because they had some negative perceptions for us as children from a care centre, as a result some of us felt it was proper for us not to have friends from outside”* [LH53, young woman, SOS FBC]

*“Because I come from the street background, am often seen as a spoiled youth so this causes me to not have interactions with others more often.”* [S19, young woman, care organisation2]

As highlighted in the previous section (5.10), these experiences influence young peoples' self-exclusion, and resulted into limited social connections and sometimes low self-esteem. The transition to independence seems to soften some of these effects when young people are able to form more relationships outside of the care organisation in tertiary education, or when they are able to find employment.

## 6. Main Findings & Recommendations

### 6.1 Answering the main research question

This section will provide a brief summary in answer to the main research question: How are vulnerable youth (youth in and from alternative care and families at risk of losing care) in Malawi affected by social exclusion in terms of their human wellbeing, employability and social acceptance?

Importantly, being from care is the most important driver of social exclusion according to young people. Across the different forms of care and care organisations, young people experience stigma and discrimination based on their care-status. Young people reflect on relational images of others (community, peers, and teachers) revealing that people associate youth from care with dependency, poverty, promiscuity, and having HIV+. Being viewed as dependent had an impact on young men who generally are (seen as) not able to provide, creating tensions in romantic relationships and resulting in low self-esteem. Young women face exclusion by being seen as promiscuous, sometimes because of supposed lack of basic needs. Other factors that young people list as contributing to exclusion are disability, sexuality, gender, and health-status (particularly having HIV+).

A striking finding of this study is that many young people from care strongly look forward to their future independent life. This is because of the stigma young people experience based on their care-status, and also their eagerness to provide for their relatives and community. In line with this, young people articulate notions of “real life” starting when they are independent. However, even though most youth feel somewhat to very prepared for living independently, and are keen to be ready, they feel unprepared for finding accommodation, engaging in politics, and finding employment or employment-related training. SOS FSP youth are particularly concerned about their abilities to continue their education as well. With regards to their preparation for independence, young people highlight the need for practical and financial support in continuing education, start-up capital for small businesses, or links to future employers in their sector.

Throughout their care trajectories, young people in SOS FBC feel especially connected to their SOS siblings. They highlight that a change of caregiver has often been a negative transition – which should be seen in the light of several young people and care-leavers observing that “new” SOS CV staff seem to lack sensitivity, passion and a proactive approach to care-children. Some young people highlight that the stigma and discrimination they faced from the community is also reflected in their relationships with direct caregivers, teachers, and other care staff. This has a negative impact on connectedness and their relational self-images. In all care organisations, stigma leads to self-exclusion where young people are merely “sitting out” their time in care, preparing themselves for independence. Nevertheless, after leaving care young people see their caregivers as the primary person they can turn to for advice – making it the more important this relationship is positive.

Currently, SOS Children’s Villages Malawi is working towards better integration with the communities by revising their models of SOS FBC. Malawian care organisations in general, in line with new legislation, are in the process of re-unifying children with their original families when possible, which facilitates a better connection with their roots and backgrounds. While this strategy is promising for the integration of youth into community life, young people are worried about children being reunified too early without preparation, or going to face more hardships, distraction,

and less educational opportunities due to the poverty of their family members. This, in combination with a current lack of data on children and youth in care, and the welfare of care-leavers, points towards the importance of increased efforts and capacity to monitor vulnerable children, youth, and care-leavers at local government level as well as the need for tailor-made strategies specific to the needs of each individual child.

To conclude, even though young people from care face stigma and discrimination from their surrounding communities, they seem more positive about their time in care when it comes to their human wellbeing, finding employment and social acceptance. This can be explained by the fact that youth generally see their time in care as an investment in future life; they are positive about their opportunities, and because of their good education qualifications feel they have equal or sometimes even better chances to meaningful employment compared to young people who are not from care. At the same time, youth from care are pessimistic about the high youth unemployment rates in the country and report to feel very little social acceptance from employers, partly due to the exclusion of youth in the labour market. On the political level, young people feel they are not a priority, and are losing faith in political solutions.

## **6.2 Reflections & study limitations**

There are a number of reflections and study limitations that should be considered in this research:

- While researchers clearly stated that the research was independent from SOS Children's Villages/other care organisations, young people were to a large extent selected and approached by care staff. This may have led to a bias with some young people being more negative about their experience with their care organisation because they see an opportunity to change certain issues, and some more positive because they did not want to disregard the care they have received.
- It was difficult to reach and plan appointments with SOS FSP youth, due to the traveling distance as well as the schedules and availability of the youth. This meant that fewer SOS FSP youth were included in the study as planned, and young people from SOS FBC are an overrepresented group in this study. The same challenge also meant that, in some cases, youth from the same community but not from SOS FSP were asked to join a focus group discussion without prior knowledge of the researchers. The views in these focus group discussions are thus not merely youth from SOS FSP, but from the wider youth in the community as well. While initially not planned for, this dynamic seemed to bring out additional insights that benefitted the study.
- This research has engaged with vulnerable young people who were sometimes under the age of 18. Because of this, great care and consideration was given to possible ethical issues arising. Young people were always made aware of their rights to stop or discontinue an activity or to refrain from answering certain questions if they felt uncomfortable. Their anonymity was guaranteed and the details of a trust person in case of concerns was communicated to most young people who participated in the research. However, some young people were difficult to reach to communicate these contact details.
- Finally, the research was conducted in a specific part of Malawi, and thus the findings cannot be considered representative of the country as a whole.

### 6.3 Recommendations for care organisations programming and practice in Malawi

- Care organisations and staff should be aware of the stigma and negative prejudices that youth experience, and avoid reinforcing these whilst proactively encouraging for positive identity formation, self-confidence and social connections outside the care organisation.
- Young people should be more actively involved in decisions that affect their lives and futures, particularly on their educational career paths.
- Young women have highlighted there are isolated cases of young women from care being involved in prostitution. While these cases are isolated, future research and efforts should understand under what circumstances this happens and how this can be best addressed.
- Young people seem to see their time in care as a period before “real life” starts, and tend to isolate themselves before making social connections with people from outside the care organisation to avoid stigma and discrimination. Care organisations should therefore cater for positive interactions between youth from care and the community avoiding stigmatisation, breaking down preconceptions and relational images society hold on young people from care, thus reducing the discrimination and exclusion of youth from care.
- Young people look to the future as a period when they will be able to be someone who can “give back” to their community. Care organisation can explore ways to already nurture that desire of reciprocity while creating positive social connections with the communities. This may likely contribute to positive self-image and relational images by others from the community.
- Young people need to be better prepared emotionally and practically for life after care, this should include:
  - Practical advice on issues such as finding accommodation, education, employment, and engaging in politics.
  - Care organisations communicating sensitively with young people to understand what practical and emotional preparations youth feel they need, and delivering on these in a youth-centred tailor-made way.
- Young people should be positively encouraged and assisted with regards to finding stable employment suitable to their interests and qualifications, for instance through apprenticeships, with a focus on their future aspirations and ways to reach there.
- Young people need continuing support when they leave care, by proactive follow up from their SOS mother, caregiver, and local government, and need (to know there is) someone they can turn to during difficult periods.



#### 6.4 National level policy and advocacy on vulnerable youth in and from care

- More data are needed about the wellbeing of children and youth in care and care-leavers.
- Increase efforts and capacity to monitor vulnerable children, youth, and care-leavers at local government level as well as the need for tailor-made strategies specific to the needs of each individual child.
- Young people from care face stigma and discrimination, which affects their self-esteem and may lead to self-exclusion and negative effects on their wellbeing. National and local advocacy efforts need to address common preconceptions of care children as dependent, promiscuous or HIV+, and value young people from care in their own rights recognising their talents and ambitions. Policies also need to address the high levels of stigmatisation based on “orphan” status, care background, or HIV+ status.
- National and local policies and advocacy efforts need to encourage employers to include young people in the formal labour market, regardless of their gender, religion, health status or other social categories.
- Government needs to recognise and prioritise strategies to include vulnerable youth, including youth from care, in policies addressing youth employment, social protection, and (political) participation initiatives.
- Local governments should protect, monitor, and support vulnerable youth. Support mechanisms should be developed for young people transitioning to independence, particularly in accessing meaningful employment or follow-up support after disengagement when young people face challenges.
- Equal opportunities for (vulnerable) young people to stable and meaningful employment need to be created and protected. Current policy attention to encouraging entrepreneurship places the onus of responsibility to succeed at young people themselves, which disregards their rights to stable and meaningful employment.
- Young people are keen to positively contribute to their communities, and opportunities should be created for them to do so. This includes developing efforts on including vulnerable young people in social/community development projects. This should also be geared towards reducing stigmatisation of street children, “orphans”/“OVC”, care youth, and other vulnerable categories of youth.

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