

**ASSESSING THE EFFECTS OF SINGLE PARENTING ON CHILD'S  
HEALTH IN TEMEKE MUNICIPALITY OF DAR ES SALAAM  
TANZANIA**

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**A DISSERTATION SUBMITTED IN PARTIAL FULFILLMENT OF THE  
REQUIREMENTS FOR THE DEGREE OF MASTER OF SOCIAL WORK  
OF THE OPEN UNIVERSITY OF TANZANIA**

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## CERTIFICATION

The undersigned certifies that she has read and hereby recommends for acceptance by Open University of Tanzania, a dissertation titled “**Assessing the Effects of Single Parenting on Child’s Health in Temeke Municipality of Dar es Salaam Tanzania**” in partial fulfillment of the requirements for the Degree of Master of Social Work (MSW) of The Open University of Tanzania.

.....

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(Supervisor)

.....

Date

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## DECLARATION

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.....

Signature

.....

Date

## **DEDICATION**

This study is dedicated to my parents, the late Mr. Masoud Masilamba and Ms. Hawa (Eva) Yohana Sonje as main source of my academic progress and achievement, for that may their souls rest in eternal peace. I also dedicate this work to my lovely husband Dr. Felix Kanza for his love, care, patience, material support and encouragement during my studies, for that I thank him. Memorably, I dedicate this study to my beloved kids Faraja and Furaha, really I am grateful to have you as God's gift, be blessed always.

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## **ABSTRACT**

The study was intended to assess the effects of single parenting on child's health. The study was done in Temeke Municipal Council in two Government schools namely Wailes Primary School and Miburani Secondary School, at GCD office of Police Post Chang'ombe and Kilwa Road, Municipal Social Welfare Unit, Zakhiem and Temeke Hospitals. This study had three objectives with linked tasks and questions; the study identified the effects of single parenting on child's health, explored the causes of single parenting and examined the ways of controlling situation of single parent families. Both qualitative and quantitative approaches were used in the study. Interview and structured questionnaires with guided questions were used as data collection methods. The study sample included a total of 50 participants who were Single parents, Single parented children, and 20 professionals. Data were analyzed thematically and presented in narrative, tabulation, and by using various forms of charts. Therefore the findings discovered that effects that single parented children face both in school and at home are not only several but also multifaceted. This is because no single effects that stand on its own and exist without linking to the other in the sense that they relate with one another that include physical, social, psychological and mental effects of single parenting on child's health. The study findings recommended that the single parents should set the time to spend with their children, talk and care for them in order to make these children understand that they are not contributors of their parents' problems.



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**LIST OF ABBREVIATIONS**

DC	District Commissioner
DRC	Democratic Republic of Congo
GCD	Gender and Children's Desk
LCA	Law of the Child Act
MD	Managing Director
OUT	Open University of Tanzania
PGDS	Postgraduate Studies
RAS	Regional Administrative Secretary
RC	Regional Commissioner
SPSS	Statistic Package for Social Science
SW	Social Welfare
SWOs	Social Welfare Officers
U.S	United States
UN	United Nations

## **CHAPTER ONE**

### **INTRODUCTION**

#### **1.1 Background of the Study**

Although progress has been made toward reducing child morbidity and mortality globally, many children under five years in developing countries are still vulnerable to preventable illnesses and die of causes related to malnutrition (Amsalu & Tigabu, 2008). Specifically, child malnutrition and survival have remained a major public health challenge in sub-Saharan Africa. In 2011, the region had the highest under-5 mortality in the world (109 per 1000 live births), the highest prevalence of stunting (40%) and the second highest rate of wasting (9%) after South East Asia (UNICEF, 2013). The second largest number of stunted children in the world after India is in Nigeria where over 11 million children under five years are stunted. Out of 6.6 million under-5 deaths in 2012, about half died in India, Nigeria, DRC and China; and Nigeria accounts for 13% of these deaths (UN, 2013). Poor child health and survival outcomes in developing countries remain because many of the children and mothers who need public health interventions are not reached (Bryce et al., 2003).

Single-parent families have become even more common than the so-called "nuclear family" consisting of a mother or father and children. Today we see all sorts of single parent families: headed by mothers, headed by fathers, headed by a grandparent raising their grandchildren. There are different reasons why a person becomes a single parent. They may choose this lifestyle or they may have been in a relationship which they left, or perhaps their partners have died or left them (Bryce et al., 2003).

Single-parent families are different from families with two parents living under the same roof. They differ in many ways; but the most common difference is the way in which the parent interacts with the child. In dual-parenting families, the mother and father usually decide together how to run the household, while in single-parent households, issues such may be more likely to be decided with the children. In a single parent household members may unrealistically expect that the family can function like a two-parent family, and may feel that something is wrong when it cannot (Amsalu & Tigabu, 2008).

The single parent may feel overwhelmed by the responsibility of juggling between caring for the children, maintaining a job and keeping up with the bills and household chores. Typically, the family's finances and resources are drastically reduced following the parents' breakup. In fact single parent families deal with many other pressures and potential problem areas that the nuclear family does not have to face (Amsalu & Tigabu, 2008).

The source of the problems is not necessarily single-parenthood itself, but a combination of economic pressures, family instability and conflict between parents. For example, a single parent with adequate resources may provide a stable, nurturing home in which children thrive just as well as those who have two parents. On the other hand, a single parent who is just scraping by and has little time, energy or skill for parental duties might have children who are at risk for a variety of problems (UNICEF, 2013).

The general trend of single parenting today is that, more parents continue to neglect their children, with fathers being the worst offenders. In Tanzania, maternal

responsibility is that of childcare and home making while the paternal roles are the provision of economic responsibilities and discipline of children. Normally, it is the duty of the family, to guide and bring up the child in the norms and values of the community (Mrinde, 2014). They are to be responsible for the psychological and emotional welfare of the child. The parents are mainly answerable to the instructive and career development of their children. On the other hand, divorce or separation and death of one spouse may leave the roles in the hands of a single parent.

The family composition, supremely, offers a good judgment of security and steadiness that is indispensable for children. When there is a breakdown in the family composition, it may have a remarkable effect on children and their capacities to function usually including good health. In most times, the children no longer have the biological father and mother to rely their up bring on. For that reason, children have to depend on the mother or the father to meet mainly, if not all their requirements in life. With inadequate finances, time and parents' accessibility, parents are less probable to offer the sufficient support that children require in all their undertakings including good health (Amoakohene, 2013).

## **1.2 Statement of the Problem**

The problem of this research therefore is to assess the effects of single parenting on child's health physically, mentally, socially and psychologically. A common explanation for the problems found among the children of single parents has been the absence of a male adult in the family (Clark & Hamplova, 2013). The loss of a father in the family can have implications beyond childhood. The children are also more likely to experience health-related problems physically, mentally, socially and

psychologically as a result of the decline in their living standard, including the lack of health insurance (Kaimen, 2011). However, the lack of a male presence may not be as critical as the lack of a male income to the family. The economic deprivation of single-parent family life, in combination with other sources of strain and stress, is a major source of the problems experienced by both parents and children.

Mothers and fathers are important resources for children. They provide emotional support and practical assistance as well as serve as role models for their children. The skills that parents have in dealing with children have a profound influence on children's well-being. The psychological adjustment of parents is a significant factor in children's well-being. Of the 15 studies that have examined this relationship 13 found that there was a positive relationship between the mental health of parents and children's mental health (Kaimen, 2011).

Over the twentieth century, Americans placed increasing value on individual freedom over social obligations (Kowalczyk, 2015). This was reflected in growing acceptance of divorce by couples with children and non-marital child bearing after 1960. Between the early 1980s and the mid 1990s for example, the proportion of high school seniors who said that bearing a child outside marriage violated moral principles or was destructive to society declined from 50 percent among women and 40 percent among men to about 35 percent for both women and men (Kaimen, 2011).

Magazine authors and commentators are a specialized group whose views may have differed from those of general population, but generally are likely to have had some influence on magazine speakers, too. While the lack of consistent survey data prior to

the 1960s makes it impossible to ascertain the trend in American attitudes toward single- parent families over the twentieth century (Kaimen, 2011).

Although studies in Sub-Saharan Africa have examined the influence of family structure and characteristics on child nutritional status and survival (Clark & Hamplova, 2013), few paid specific attention to single mother households. Hence, little is known in the region about the influence of single mother households on child nutritional status and survival, and the particular factors that account for differences between single mother families and two-parent households.

According to Ghana statistical Data vol. 1 (2005), about 34% of Ghanaian children live in divorced homes. It showed that about 35% of Ghanaian children are living in single parenting homes. Relying on the data above, single parenting has increased dramatically of late and this trend has the possibility of depriving many school children the opportunity to make academic excellence now and in the future.

Single parenting is very common in Tanzania and it could be as a result of a broken marriage, the death of a partner or individuals choosing to be single parents without getting into the bond of marriage. It is generally acknowledged that regardless of how single parenting is viewed, the increase in single parenting and incidence of families headed by one parent has a main influence on the social, economic, and political context of family life (Mrinde, 2014).

Also it seems that the majority of research about single parent families has been conducted on white, middleclass families and other ethnic minority populations almost completely ignored (Amoakohene, 2013). This study, therefore contributes to

the literature on whether single parenting has an effect on child's health in the Temeke Municipality.

However, children who grow up with only one of their biological parents (nearly always the mother) are disadvantaged across a broad array of outcomes but it depends on various factors including good health. In spite of the limited research on single parenting, consensus seems to build around the main ways in which a woman may become a single mother (Mrinde, 2014).

Most research has concentrated on the increasing causes of single parenting and the general impact of single parenting particularly on the mothers and children and not the effects of single parenting on child's health. Therefore, there is the need to research if single parenting has effect on child's health physically, mentally, socially and psychologically (Amoakohene, 2013).

When you look back 500 years, the parenting style was very different. The phrase 'it takes a village to raise a child' is an accurate way to sum it up; the child would be cared for by the entire community around him including parents, the grandparents, aunts and uncles, and close family friends. However, as time passed and the Industrial Revolution and modernization occurred, the 'village' shrank, and continues to shrink. Human brains evolved to be raised by the 'village' or community members and when it is absent then dysfunction could potentially arise (Kowalczyk, 2015).

### **1.3 Objectives of the study**

The study was guided by the following objectives.

### **1.3.1 Main objective**

The main objective of the study was to assess the effects of single parenting on child's health; physically, mentally, socially and psychologically and recommending the ways which can be used to control single parent families' situation in Temeke Municipality.

### **1.3.2 Specific Objectives**

The study was guided by the following specific objectives.

- (i) To identify the effects of single parenting on child's health in Temeke Municipality.
- (ii) To explore the causes of single parenting in Temeke Municipality.
- (iii) To examine the ways of controlling single parent families situation in Temeke Municipality.

### **1.4 Research Questions**

To address the stated specific objectives, the study was guided by the following research questions:

- (i) What are the effects of single parenting on child's health in Temeke Municipality?
- (ii) What are the causes of single parenting in Temeke Municipality?
- (iii) What are the ways which can be used to control the single parent families' situation in Temeke Municipality?

### **1.5 Significance of the Study**

The study was chosen to be conducted because it would provide skillful parenting practices and result to be critical in buffering youngsters' families, such as children



grow up knowing how to value life, take good care, respect rules and regulations and be given enough protection and preventive health education

The study would contribute to policy initiatives on issues relating to controlling single parenting such as teenage pregnancy, divorce and children born to unmarried parents. Also, the study will create awareness for policy makers to think about the required measures to help get involved/maintain children to single parent families towards the challenges that they encounter and improve the situation.

The study would also form a basis for researchers who desire to carry out further studies on single parenting and child health basing on the physical, mental, social and psychological effects of single parenting. Also, this study can be used to improve the single parenting situation in Temeke Municipality and in other places in order to improve the health of children physically, mentally, socially and psychologically.

### **1.6 Scope of the Study**

The study was limited to the Temeke Municipality of Tanzania and focuses on how single parenting affects the health status of children; physically, mentally, socially and psychologically. It was only health outcomes for which there was a sound and robust body of research that would be considered. Moreover, other kinds or sources of parenting, including grandparents, other forms of kinship care, or parent surrogates, such as daycare providers and teachers would not be considered. The research could be used as a base for doctoral research work.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Introduction**

This study was about the effects of single parenting on child's health in terms of physical, mental, social and psychological in Temeke Municipality. Literature reviewed in preparation for this study found limited literature on assessing the effects of single parenting on child's health; physically, mentally, socially and psychologically using review of literature only through the empirical literature review.

This section would attempt to present a critical review of the available literature on the subject matter of research using the empirical literature review that included the evidence of what had been done by other researchers. According to Kombo and Tromp (2006) literature review is an account of what has been published on a topic of accredited scholars and researchers. It involves exploratory documents, such as books, magazines, journals, and dissertations that have a bearing on the study being conducted.

#### **2.2 Definition of Terms and Concepts**

##### **2.2.1 Single Parenting**

A half of all marriages seemed to begin in the mid-1970s projected to end in divorce (Kibel and Wagtaff, 2006). Recent statistics indicates that the future divorce rates may be even higher. The remarriage of a divorced custodial parent results in a third family configuration that is experienced by an increasing number of children

predicted that 35% of all children born in the early 1980s will live with a stepparent during part of their childhood (Kibel and Wagtaff, 2006).

Single parenting refers to a situation where mothers or fathers raise their children without the presence of a spouse (Ferrel, 2009). Two major demographic trends underlying the causes of the rise of single parenting over the past several decades are big increase in birth to unmarried women and increased rate of death. One-third of all births occur to unmarried women and children become part of single parent families through the death of a parent but widowhood has been a relatively minor factor for the past fifty (50) years (US Census Bureau –Population Survey 1990-2000).

Parenthood is difficult and demanding under the most excellent of circumstances. With one parent, the difficulties are multiplied. Coping with childrearing for single parents becomes more intricate because of task burden, when one parent makes and takes all the responsibilities and provides for all of the family requirements; chore over-load, when the demands for work, housework, and parenting can be devastating for one individual; and emotional overload, when the single parent must for all time be accessible to meet both their own and their children's emotional needs. Single-handedly or in combination these result in problems for the single parent, including loneliness, anxiety, and depression ( Kowalczyk, 2015).

Single parenting in this study refers to families where a parent lives with dependent children, either alone or in a larger household, without a spouse or partner. Single parenting is referred as the taking of family's task which includes caring for children devoid of the father's or mother's involvement. Single-parenting can be defined as a

situation in which one of the two individuals involved in the conception of the child is being responsible for the upbringing of the child (Marsigilo and Amato, 2001).

Hence, there is a terrific growth in the number of children of single parents. Single parenting is a major social problem on the rise among all communities. Single parenting is therefore viewed as the practice of raising children and building a family with either the biological mother or father (Materu, 2009).

Single parenting to the researcher simply means a person who has a child or children but no husband, wife or partner who lives with them. Also it can be referred to as one or more children dependent on one parent. In other words single parenting is the circumstance where by the family is leaded by only one parent due to various factors.

### **2.2.2 Health**

Health, refers to “the condition of being sound in body, mind, or spirit; especially: freedom from physical disease or pain” (Kresser, 2015). “Health” as defined by World Health Organization (WHO), is a "State of complete physical, mental, and social wellbeing, and not merely the absence of disease or infirmity." Health is a dynamic condition resulting from a body's constant adjustment and adaptation in response to stresses and changes in the environment for maintaining an inner equilibrium called homeostasis (Kresser, 2015).

In this study health is referred as the condition of having wellbeing or free from disease or illness or injury (Kresser, 2015). It means the overall condition of someone's body or mind, the mental or physical condition of the *body* and the *degree*

to which it is *free* from *illness*, or the *state* of being well. In this study the concept of health was regarded in social work context and not scientifically.

### **2.3 Empirical Literature Review**

#### **2.4 Effects of Single Parenting on Child's Health; Physically, Mentally, Socially, and Psychologically**

Single parenting is faced with many trials. Along are the problems on financial, emotional, and social aspects but even though it is hard to be a single parent. The elements such as financial, emotional and social aspect has be discussed in more details; where possible each of them should be given enough attention it deserve It also has a good result when it comes to the relationship between the parent and child the parent's problems have effects to the children (Kaimen, 2011), as it has been discussed below.

##### **2.4.1 Physical effects**

Children in single-mother homes are also more likely to experience health-related problems as a result of the decline in their living standard, including the lack of health insurance (Marsigilo and Amato, 2001). Later, as children from single-parent families become adults, are more likely to marry early, have children early, and divorce. Girls are at greater risk of becoming single mothers as a result of non-marital childbearing or divorce (Domina, 2005). Although the research findings are mixed on long-term effects, the majorities of children adjusts and recover and do not experience severe problems over time (Eamon, 2005).

When a human who is calm, affectionate and mentally healthy raises a child, that child will be the same way. When someone who is anxious, disorganized, distant,

and mentally unstable raises a child, then most likely that child will be the same way. This is not 100% and is not absolute, but it is a pattern since a human brain develops based on how was parented during childhood (Kowalczyk, 2015).

A regular clarification for the troubles found among the children of single parents has been the absence of a male adult in the family (Marsigilo and Amato, 2001). The relationship between children and non-custodial fathers can be difficult and strained. Fathers often become disinterested and detached from their children; in one study more than 60% of fathers either did not visit their children or had no contact with them for over a year. The loss of a father in the family can have implications beyond childhood (Kowalczyk, 2015).

However, lack of a male presence may not be as critical as the lack of a male income to the family. The economic deprivation of single-parent family life, in combination with other sources of strain and stress, is a major source of the problems experienced by both parents and children (Marsigilo and Amato, 2001).

In sub-Saharan Africa, few studies paid attention to mother's marital status in their examination of children's nutritional status (Amoakohene, 2013). Others focused on female headed households (Materu, 2009). Few studies on under-5 mortality in sub-Saharan Africa examined family structure as key independent variable, with specific attention to single motherhood.

Omariba and Boyle, (2007) examined variations in the relationship between under-5 mortality and family structure across 22 Sub-Saharan African countries and the

effects over time, with specific emphasis on polygyny. Children in single mother households were 16.3% more likely to die than those in monogamous union, and the relationship was found constant over time. In Clark & Hamplova, (2013), relative to continuously married mothers in 11 Sub-Saharan African countries, children of single mothers (premarital and divorced) were found to be more likely to die before age 5 years.

#### **2.4.2 Mental Effects**

According to 2012 U.S. Census Bureau information, the number of children reared in single-parent households continues to rise. Children with two parents in the home earning two incomes tend to have better financial and educational advantages. The effects of a single-parent home on a child's behavior can be far-reaching and impact several areas of life, including academic achievement and social behaviors (Marsigilo and Amato, 2001).

Sub-Saharan Africa is experiencing steady growth in out-of-wedlock motherhood, marital instability, and widowhood exacerbated by wars and HIV/AIDS pandemic, which has resulted in a large number of single mother families in the region (Clark & Hamplova, 2013). For instance, in Cameroon, the population of married women who were separated, divorced or had absent spouses increased from 78,060 in 1976 to 129,000 in 2005 (65%) and widows increased from 299,690 to 475,930 (58%) within the same period (Minnesota Population Center, 2013).

In Nigeria, close to one million women aged 10–85 years old were either divorced or separated women in 2006, and 1.7 million were widowed (Nigeria National

Population Commission, 2006:2009). In DRC, divorce and separation increased by more than 50% in all age groups of women aged 15–49 years, between 1984 and 2007; for instance, divorced and separated women aged 20–24 years increased from 3.4% in 1984 to 7.5% in 2007 (UNESA, 2013).

The proliferation of single mother families indicates that many children in sub-Saharan Africa are born and reared in single mother families. Studies in other regions, particularly in the West, associated single motherhood with many adverse effects on children's well-being, including poor nutritional status and lower chances for survival between ages 0–59 months (Bramlett & Blumberg, 2007).

### **2.4.3 Social Effects**

Most single-parent households are run by mothers, and the absence of a father coupled with lower household income can increase the risk of children performing poorly in school. The lack of financial support from a father often results in single mothers working more, which can in turn affect children because they receive less attention and guidance with their homework (Ferrell, 2009).

Virginia (2011) concluded from data from the National Longitudinal Survey of Youth, that for every \$100 of child support mothers receive, their children's standardized test scores increase by 1/8 to 7/10 of a point. In addition, Abudu, Fuseini and Moses, (2013) found that children with single mothers who have contact and emotional support from their fathers tend to do better in school than children who have no contact with their fathers.



Single parenting can also be in the same way tormenting for the children as they depend on bonding and response to their needs in order to develop cognitively and socially. In a two-parent family, it is easier for one parent to respond to the child's needs in the absence of the other, but in a single-parent home, it can make bonding more hard. Without a lot of interaction elsewhere, this could hinder a child's social development (Martin, Emery, and Peris, 2004).

Under-5 mortality is a pivotal indicator of child wellbeing and human development of a country (Thomson & McLanahan, 2012), and height-for-age is the best predictor of human capital (Domina, 2005). Health in childhood affects productivity in adult life and reduces overall economic productivity in a country (World Bank, 2006). Child health and survival are, thus, consequential for human and economic development in sub-Saharan African countries (Oppong, 2004).

Relative to children raised in two-parent households, many studies, particularly in Western countries, associated single motherhood with poorer physical and mental health, and higher risk of mortality for children (Afifi et al, 2006). On the other hand, a few studies have also found that in spite of lower earnings, children in female-headed households experience better or equal advantage in nutrition compared to those in male-headed or two-parent households (Martin, Emery, and Peris, 2004).

This association is explained by mother's higher likelihood to invest in child welfare. The relative advantage of children in two-parent families in well-being is associated more with stable unions, especially of two biological parents (Amato, 2010; McLanahan, 2004). Conflictual marriages lead to as much disadvantage in child

welfare as disrupted unions. In some cases, single parenting by a mother after separation is more advantageous for children, particularly if the father engages in high anti-social behavior (Jaffee & Moffitt, 2003).

#### **2.4.4 Psychological Effects**

There is research proof concluding that the effects on children's psychological well-being are massive when their parents' divorce or separate. Amsalu and Wagtaff (2006) offered several hypotheses as to which aspects of divorce had the greatest impact on children's sense of well-being. Notably, the amount of time children spent with the non-custodial parent and the emotional environment provided by the custodial parent were hypothesized as being contributory factors.

Having only one income earner in the home puts single parent households at risk for poverty (Afifi et al, 2006). Living in poverty is stressful and can have many emotional effects on children, including low self-esteem, increased anger and frustration and an increased risk for violent behavior. Besides financial constraints, other emotional effects of growing up in a single parent household may include feelings of abandonment, sadness, loneliness and difficulty socializing and connecting with others. Effects vary from child to child, however, and the individual parenting style of the single parent is also a big influence on the child's development (Ferrell, 2009).

In mother-only families, children have a tendency to experience short-and long-term economic and psychological disadvantages; higher absentee rates at school, lower levels of education, and higher dropout rates (with boys more negatively affected

than girls); and more antisocial activity, including alcohol and drug addiction. Adolescents, on the other hand, are more negatively affected by parental disagreement prior to divorce than by living in single-parent families and actually gain in responsibility as a result of altered family routines ((Marsigilo and Amato, 2001).

Children with single parents showed increased risks of psychiatric disease, suicide or suicide attempt, injury, and addiction. After adjustment for confounding factors, such as socioeconomic status and parents' compulsion or mental disease, children in single-parent households had increased risks compared with those in two-parent households for psychiatric disease in childhood (relative risk for girls 2.1 [95% CI 1.9–2.3] and boys 2.5 [2.3–2.8]), suicide attempt (girls 2.0 [1.9–2.2], boys 2.3 [2.1–2.6]), alcohol-related disease (girls 2.4 [2.2–2.7], boys 2.2 [2.0–2.4]), and narcotics-related disease (girls 3.2 [2.7–3.7], boys 4.0 [3.5–4.5]). Boys in single-parent families were more likely to develop psychiatric disease and narcotics-related disease than were girls, and they also had a raised risk of all-cause mortality (Ringbackweitof, 2003).

Studies that explain the relative disadvantage of children in single mother families from the perspective of parental resource or socialization argue that the absence of one parent in a family reduces time resource available for monitoring and supervision of children. Combining work and parenting not only affects the time a single mother has for child care, but it also introduces stress that negatively affects her psychological well-being and parenting effectiveness. However, when close kin, such as grandmothers, are available to help in child care, the stress reduces, parenting

becomes more effective, and child health and survival outcome is better (Gibson & Mace, 2005)

## **2.5 Causes of Single Parenting**

Single parenting may crop up as a result of the following factors:

When a couple separates after cohabitation or a marriage and one of the ex-spouses has physical custody of the children. Again single parenting occurs when a woman gives birth to a child and does not live with the child's father or any other partner, male or female (McGadney-Douglass et al., 2005). Thus single parenting resulting from non-conjugal births.

Single parenting may also occur when a father or a mother is widowed. In this case the parent assumes sole responsibility of nurturing a child. Further, it may happen when a single (divorced, never-married, or widowed) man or woman adopts a child. Single-parenthood may arise when either the male or the female decides to produce and rear a child or children outside wedlock (Materu, 2009).

Single parenting also occurs due to adoption which is a possible option for single people who feel deficient in life. Studies also show that Single parenting has become very common due to donor insemination which is the most contentious preference for building a family in the present day. Donor insemination is the process of accomplishing pregnancy through injection of semen into the reproductive tract of a female (Sear et al., 2002).

Single mothers who choose to conceive children through this option are becoming common particularly among the educated women. Teenage pregnancy also leads to

single parenting and raising a child alone during teenage period is harsh. Teen single parents undergo stresses because of young age and inability to prepare for the future (Eamon, 2005).

According to Sear et al., (2002) divorce being an unwed mother, having a surrogate, adoption by only one person, being widowed, artificial insemination and abandonment are all potential causes of being a single parent. The number of widowed parents falls far behind the other reasons as the cause of single parenting. This is in sharp contrast to the past, as this was once the most-prevalent cause behind single parenting.

The census from 2000 shows that nearly 28 percent of children in the United States lived in single-parent households. As the growing body of research evidence indicates, there is no single cause for the declining well-being of children in single parent families, but rather many. No single explanation accounts for the differences, and some scientific support exists for each of the five perspectives: economic hardship, loss of parental support and supervision, lack of community resources, parental conflict, and life stress and instability (Ferrel, 2009).

Thus, programs and policies are most applicable ways to be effective if they are comprehensive and multi-faceted, addressing multiple risk factors relating to single parenting and its effects to children (Ferrel, 2009). Smith (2008) said that of all single parent families, the most common are those headed by divorced or separate mothers who constitute 58% of cases of single parents studied. Never married mothers constitute 24%. Other family heads include 7% widows, 8.4% constitute

divorced and separated fathers, never-married fathers constitute 1.5% and widowers constitute 0.9%.

## **2.6 Theoretical Literature Review**

### **2.6.1 Ecological Systems Theory**

Ecological systems theory, also called development in context or human ecology theory, it is a theory that was developed by famous Psychologist *Urie Bronfenbrenner* (1917-2005). It identifies five environmental systems with which an individual interacts that include; the micro system, the mesosystem, the exosystem, the macro system, and the chrono-system (Afifi et al., 2006).

Human ecology theory is a way of looking at the interactions of humans with their environments and considering this relationship as a system. In this theoretical framework, biological, social, and physical aspects of the organism are considered within the context of their environments. This theory provides the framework from which community psychologists and sociologists study the relationships with individuals' contexts within communities and the wider society (Bramlett & Blumberg, 2007).

This theory looks at a child's development within the context of the system of relationships that form his or her environment. Bronfenbrenner's theory defines complex "layers" of environment, each having an effect on a child's development. This theory has recently been renamed "bioecological systems theory" to emphasize that a child's own biology is a primary environment fueling her development (Afifi et al., 2006).

The interaction between factors in the child's maturing biology, his immediate family/community environment, and the societal landscape fuels and steers his development. Changes or conflict in any one layer will ripple throughout other layers (Clarks&Hamplova, 2013).

To study a child's development then, we must look not only at the child and her immediate environment, but also at the interaction of the larger environment as well. Bronfenbrenner's ecological systems theory focuses on the quality and context of the child's environment. He states that as a child develops, the interaction within these environments becomes more complex. This complexity can arise as the child's physical and cognitive structures grow and mature (Sear et al., 2002).

## **2.7 Conclusion**

In conclusion to the researcher the Human Ecological Theory was the relevant theory to analyze this study as far as nature and nurture are concerned in children parental care. In this study, it was the relevant theory to analyze the study since it saw the instability and unpredictability of family life we have let our economy create as the most destructive force to a child's development (Marsigilo and Amato, 2001).

It states that as a child develops, the interaction within these environments becomes more complex. This complexity can arise as the child's physical and cognitive structures grow and mature. Family is the best thing that a child could ever wish for. It is difficult for a child specifically teenagers to live without a family especially without his or her parents. Our father and mother cannot be replaced by anyone (Eamon, 2005).

Family has a great influence in our life in the sense that our personality reflects on what is the status of our family and on what has been the teaching of our parents to us. It also has a good result when it comes to the relationship between the parent and child. Due to Ecological Systems Theory that emphasizes that a child's own biology is a primary environment fueling her development the researcher can say it is true that the child's environment contributes a lot to the child's behavior change (Kibel and Wagtaff, 2006).

Therefore in order to maintain these single parent children, the parents have to make sure that their consequences and quarrels and whatever they suffer make the children free from stress and any harm physically, mentally, socially and psychologically. There are several characteristics of the body that can influence development in different ways. The first and broadest is the general health of the body. A person's health is determined by how effectively the various subsystems in the body function and the influences of environmental factors (Domina, 2005).

## **2.8 Research Gaps**

From the literature review findings towards this study, it has been discovered that many researchers who conducted studies on effects of single parenting desired to investigate its effects versus child's academic performance or achievement, such as Mrinde (2014), Amoakohene (2013), Abudu and Fuseini (2013), they did not specifically research on the effects of single parenting on child's health in terms of physical, social, psychological and mental.

Also those who wrote about single parenting effects have tried to look at these effects educationally, economically and psychologically in some other places



(Mrinde ,2014).None of these studies have been able to highlight the effects of single parenting on child's health in Temeke Municipality. Therefore this study targets to bridge the gap by assessing the effects of single parenting on child's health in Temeke Municipality.

Although many researchers concentrated on the negative effects only, Single parenting can have positive effects on children as well, depending on other factors such as personality types and parenting techniques. According to Amoakohene (2013), positive single parenting did not show any negative impact on the social and educational development of the 12- and 13-year-olds participating in the study.

In addition, children in single-parent families may exhibit strong responsibility skills, as they are often called upon to help out more with family chores and tasks. Children in single-parent families often form close bonds with their parent, as they are closely dependent on each other throughout the child's life. Children from single-parent families may also form closer bonds with extended family members or family friends, as these people often help raise them (Abudu and Fuseini, 2013).

Therefore, this study would also be much concerned with looking at the negative effects of single parenting on child's health though there are other children who get single parent care (especially the mother only care) and still they are well organized as they perform well in their studies and have moral behaviors than those with both parents care.

## **CHAPTER THREE**

### **METHODOLOGY**

#### **3.1 Introduction**

This chapter presents the research methodology and designs used to carry out the study. Research methodology helps to explain how the study has been carried out, how the research problem has been defined, and what data have been collected with what methods and techniques (Kombo and Tromp, 2006). Methods of analyzing data are also explained. Kothari, (2004) suggested the contents of research methodology to include the research design, area of study (coverage), sample and sampling techniques, methods for data collection and techniques for data analysis.

#### **3.2 Research Design**

A research design refers to an arrangement of conditions for collection and analysis of data of the study in a manner that aims to combine relevance to research purpose with economy in procedure. Also the research design can be defined as the conceptual structure within which research is conducted (Kothari, 2004).

Research design constituted the plan for the collection, measurement and data analysis. It is further well-known that a research design outfitted an order by arranging steps of activities to find answers to the research questions of the study. Mainly, there was no worldwide or correct design in conducting a research rather a design of the research was largely dictated by the nature of the study (Kombo and Tromp, 2006).

There are three basic types of research design: exploratory, descriptive, and causal or experimental (Kothari, 2004). This study adopted a descriptive cross-sectional research design. This design was adopted because it allowed data to be collected from the target population at a single point in time and hence it was less cost full and less time consuming. Also the study used both qualitative and quantitative methods. The advantage of quantitative research is that a lot of people's reactions can be measured with a limited amount of questions and comparisons as well as statistical aggregation of the data are possible. It is also possible to generalize findings (Kothari, 2004).

The study could be described as a survey research. The study would investigate the communities in Temeke Municipality through selecting samples of single parents to find out single parenting and the health challenges confronting the children physically, mentally, socially and psychologically. This envisaged cross-sectional survey strategy would help to generalize for the population, and allow inferences to be made about the whole population at one point in time. In this study, the research design could be of both qualitative and quantitative (Kombo and Tromp, 2006). Moreover, Kothari, (2004) observed that qualitative studies aim at understanding and conveying respondents' life experience in a given social setting which is the case in this study because it focuses on assessing the effects of single parenting on child's health physically, mentally, socially and psychologically.

### **3.3 Study Area**

Kombo and Troompt (2006) defined study population as an entire group that can be persons or elements that have at least one thing in common. Msabila and Nalaila

(2013) defined target population as the population for whom the findings will be generalized or for which information is desired or relevant. The study was intended to be conducted in Temeke Municipality, Dar-es-Salaam city.

The area had many single parents based on the data of the Temeke Social Welfare office for the 5 financial years from 2011/2012 to 2015/2016 there were about 2100 marriage conflicts that reconciled and that means every year there were 420 marriages that were in conflict per year, hence ended up with single parent families production that led 1863 children with single parenting care. According to these reports, there were 900 single parents, of whom 150 were male and 750 female with an estimated growth rate of 40% per year.

Temeke District is the southernmost of three districts in Dar es Salaam, Tanzania, with Kinondoni to the far north of the city, and Ilala in the downtown of Dar es Salaam. To the east is the Indian Ocean and to the south and west is the coastal region of Tanzania. Its coordinates are 6°55'0" S and 39°25'0" E in DMS (Degrees Minutes Seconds) or -6.91667 and 39.4167 (in decimal degrees). According to 2012 census, there were 1,368,881 inhabitants, of whom 669,056 were male and 699,825 female with an estimated growth rate of 6.6% per year. The area is 786.5 km<sup>2</sup> and administratively divided into three divisions with 32 Ward sand 209 streets.

### **3.4 Population**

Kothari, (2004) defined population as an arrangement of people or things that a researcher has in mind from which one can obtain information and draw conclusion. The study was limited to single parents with children residing in the various

communities in Temeke Municipality of Tanzania. The population sample for this study came from the following groups of respondents who used to interact with the child as the stakeholder of the child. The population sample size for the study had total of 50 respondents with gender balance.

The 50 respondents selected for the study included 15 single parents (both the employed and unemployed, literate and illiterate) 15 children or students (aged from 10 – 17 years) from single parent families living in Temeke Municipality for at least two years, 9 Social welfare Officers from Temeke Municipal level, 4 Teachers (of both Primary and Secondary schools) and 4 medical personnel's from Temeke and Zakheim Hospital and 3 GCD Police officers from Chang'ombe and Kilwa Road Police Post.

**Table 3.1: Profile of Respondents of the Study by Gender and Category N=50**

<b>Category of Respondents</b>	<b>Male</b>	<b>Female</b>	<b>Total</b>	<b>Percent %</b>
Single parented children	7	8	15	30
Single parents	7	8	15	30
Social Welfare Officers	4	5	9	18
GCD Police officers	1	2	3	6
Medical Personnel	2	2	4	8
Teachers	2	2	4	8
<b>Total</b>	<b>23</b>	<b>27</b>	<b>50</b>	<b>100</b>

Source: Researcher's own configuration (2016)

### **3.5 Sample Size**

Sample size refers to the number of items to be selected from the universe to constitute the sample (Kombo and Troompt, 2006). The size of the sample should neither be excessively large, nor too small. It should be optimum. An Optimum

sample is one which fulfils the requirements of efficiency, representativeness, reliability and flexibility (Kothari, 2004).

A sample in research study refers to any group on which information is obtained (Kombo and Troompt, 2006). Whenever possible, a researcher would prefer to study the entire population in which he or she is interested. However, this is difficult to do because most populations of interest are large, diverse, and scattered over a large geographic area moreover, doing so would be time consuming and expensive.

Sampling, is normally used because it reduces time and labour. The sample size of the research is obtained from a special formular for calculating the sample size (Kothari, 2004). Therefore the researcher used the formular for calculating the sample size by Kothari (2004) as shown below.

### 3.5.1 Formular for Calculating Sample Size

$$n = \frac{z^2 \sigma^2}{e^2}$$

where  $n$  = Sample size

$z$  = Standard variate at a given confidence level (it is 1.96 for a 95% )

$\sigma$  = Standard deviation of the population (being estimated from past experience)

$e$  = Acceptable error (the precision)

If the acceptable error is to be kept with  $\pm 0.8$  of the sample mean with 95% confidence and 2.88 as standard deviation of the population estimated from past experience, then sample size can be expressed as equal to

$$n = \left( \frac{1.96 \times 2.88}{0.8} \right)^2 = 49.787 \approx 50$$

### **3.5.2 Sampling Procedure**

This study employed purposive and snowball sampling in selecting respondents for interview and responding to the questionnaire. In this study, respondents were chosen based on their willingness and capacity to answer to the questionnaire especially for the single parents and single parented children.

SWOs from Municipal level, Medical personnel's from Temeke and Zakhem Hospital were selected randomly from their offices by using the registration books which they sign when they inter in the work except for the GCD Police Officers from Kilwa Road and Chang'ombe Police Post.

Teachers from Wailes Primary School and Miburani Secondary School who were selected purposely to be included in the study due to their skills and experiences that they have towards children affairs that was helpful to the researcher. Also the respondents were selected according to the criteria of targeted population intended to be included in the study.

### **3.6 Data Collection Procedures**

Data collection is a systemic way of gathering information, which is relevant to the research purpose or questions (Kothari, 2004). This study used two methods of data collection. These methods include structured questionnaire as well as the interview. The researcher decided to use these two methods of data collection due to these

reasons; firstly, both the two methods were less expensive.

Then, the interview was most appropriate approach for studying complex and sensitive areas as the interviewer had the opportunity to prepare a respondent before asking sensitive questions and to explain complex ones to respondents in person. Lastly, by using the questionnaire there was no face-to-face interaction between respondents and interviewer (Kothari, 2004).

This provided greater anonymity and made them more comfortable. Also in some situations when the sensitive questions were asked it helped to increase the likelihood of obtaining accurate information. Further details about these tools were given below (Kombo and Troompt, 2006).

### **3.7 Primary Data**

#### **3.7.1 Structured Questionnaires**

Questionnaires are set of questions, which are usually sent to selected respondents to answer at their own convenience and return the filled questions to researcher (Kothari, 2004). It was the best method that guaranteed privacy and confidentiality. It saved time and cost of the research. In this study, questionnaires were administered to the respondents who were able to read, understand and write.

These questionnaires were written in English and translated in to Kiswahili. *Semi – Structured Interview:* Semi- structured interview were used as the main means of collecting primary data from the single parented children (pupils from Wailes Primary School and Miburani Secondary School). Respondents were given a different set of guiding questions which were administered by the researcher in the



form of one to one interview as well as group interview (Kombo and Troompt, 2006).

Social Welfare Officers from Municipal level, Medical personnel's from Temeke and Zakhem Hospital were selected randomly from their offices by using the registration books which they sign when they enter in the work except for the GCD Police Officers from Kilwa Road and Chang'ombe Police Post and Teachers from Wailes Primary School and Miburani Secondary School who were selected purposely to be included in the study (Kothari, 2004).

### **3.7.2 Interview**

Interviewing is a commonly used method of collecting information from people. In many walks of life individuals collect information through different forms of interaction with others. Any person-to-person interaction between two or more individuals with a specific purpose in mind is called an interview (Kumar, 2005). The interview method of collecting data involves presentation of oral- verbal stimuli and reply in terms of oral- verbal responses. This method can be used through personal interviews and if possible, through telephone interviews (Kothari, 2004).

## **3.8 Secondary Data**

### **3.8.1 Documentary Review**

The study was also informed by secondary data using documentary review. Therefore, the researchers gathered information from different documents like journals, thesis, newspapers, articles, dissertations, books, case registers from Police and SW office and internet sources. A document, unlike a speech, can have an

independent existence beyond the writer and beyond the context of its production (Kombo and Tromp, 2006).

This method contains data which have already being collected by different researchers and passed through the statistical process (Kothari, 2004). According to Kombo and Tromp, (2006) documentations involves delivering information by studying written documents, which act as an important source of data in many areas of investigation.

The use of documentary methods refers to the analysis of documents that contain information about the phenomenon studied. Payne and Payne (2004) describes documentary method as the technique used to categorize, investigate, interpret and identify the limitations of physical sources, most commonly written documents whether in the private or public domain.

Kothari, (2004) defines documentary analysis as a process of reading various extracts found in the offices or places dealing with or associated with the issues related to what the researcher is investigating. Different journals, thesis, newspapers, articles, dissertations, books, case registers from Police and Social Welfare office and internet sources were reviewed in order to have a deeper understanding of the previous work and to find the knowledge gap that needed to be filled by this study.

### **3.9 Ethical Consideration**

The study followed the ethical procedures practiced by researchers in conducting research as per Open University of Tanzania prospectus 2015/ 2016. Informed consent; means voluntary agreement to participate in research. It is essential before

enrolling a participant and ongoing once enrolled (Kothari, 2004). In order not to go against the principles of informed consent in the social research, the permission for the study was obtained from the Open University of Tanzania to head of the study area.

Also letters of introduction were sent to the District Commissioner for Temeke which was the study area to ask for permission before the conduct. In this letter the purpose of the study was clearly stated to the Temeke District Commissioner and the respondents were asked to give consent before interview.

Assured confidentiality is a process of protecting the information of participant included in the research (Kombo and Tromp, 2006). The respondents were assured that their identities would be concealed. They were informed before about the aim of the study and were assured of confidentiality of their data. They were told that the gathered information was held in reserve used for the affirmed purpose not otherwise.

In achieving this principle, respondents were told not to include their names during interview and in their questionnaire sheets which made difficult for people to identify them. Also individual respondents were assured of voluntary supplement from the study.

### **3.10 Validity and Reliability**

Validity understood within the context of judging the quality or merit of a study is often referred to as research validity (Kothari, 2004). Validity gives a research design the ability to rule out alternative explanations of results (Kumar, 2005).

Reliability addresses the overall consistency of a research study's measure (Marczyk, 2005). Validity is all about accuracy and reliability is concerned with consistency.

### **3.10.1 Validity**

Validity can be referred as the credibility or believability of the research. It involves the experimental concept and establishes whether results achieved meet all the requirements of scientific research method (Kumar, 2005). In this study collected data were cross checked to see their validity and immediately after data collection all questionnaires were checked for competence. All questionnaires were compiled for analysis and stored in a good environment at a researcher's office.

### **3.10.2 Reliability**

Kothari, (2004) took reliability as the extent to which an assessment tool produces stable and consistence results in which a study consistently is measured. The study was given permission from the Regional level specifically in Temeke Municipal level and at the respective units and to all departments that data were gathered. Questionnaires were disseminated to all respondents who were required and selected to participate in the study and then all filled questionnaires were collected by the researcher and kept safe.

## **3.11 Data Analysis**

There are many methods of data analysis for both qualitative and quantitative data (Kothari, 2004). In this study, the researcher analyzed data both qualitatively and quantitatively using Microsoft excels and SPSS (version16). The researcher applied quantitative analysis where the frequencies and percentage were used to decide the mass opinions. The main steps used to manage data incorporated were organizing

and preparing the data for analysis, reading the data, coding, generating categories and finally data interpretation (Kumar, 2005).

### **3.12 Research Instruments**

The researcher used both structured questionnaire and unstructured interview to conduct the study. The researcher's self-designed questionnaire consisting of open-ended and close-ended questions was used to collect information to the respondents. To the researcher the reason for using the questionnaire was that, it was a quick way of collecting data and also known to be quite valid and reliable if well-constructed (Kothari, 2004). Also the researcher used unstructured interview since it was helpful in obtaining an in-depth response from the respondents (Kombo and Tromp, 2006).

### **3.13 Research Expenses**

The greater part of financial support was provided by the Sponsor of the Researcher (Director of Temeke Municipal Council).

## **CHAPTER FOUR**

### **DATA PRESENTATION, ANALYSIS AND DISCUSSION OF FINDINGS**

#### **4.1 Introduction**

This chapter presents the data, analysis and findings of the study on assessing the effects of single parenting on child's health that affect them physically, socially, psychologically and mentally in Temeke Municipality. The research was guided by three specific objectives; to identify the effects of single parenting on child's health (physically, mentally, socially and psychologically) in Temeke Municipality. To explore the causes of single parenting in Temeke Municipality. To examine the ways of controlling single parent families' situation in Temeke Municipality.

The findings are presented and analyzed according to research objectives (Kombo and Tromp, 2006). This presentation provides participants' life experiences as children (primary and secondary school students), Teachers (of both Primary and Secondary schools), Social Welfare officers, single parents, Medical personnel's as and Gender and Children's Desk Police officers.

The children (students) were interviewed for a half to one hour to tell their experiences and own perspectives concerning the effects they get in single parenting. The other group of adults used questionnaires to express their experiences and own perspectives and both they provided their own views on how to improve the situation of single parenting in Temeke Municipality.

These experiences are presented both in charts and tabulation forms in order to make a person who reads to get clear picture on what has been said by the respondents

(Kothari, 2004). Data management was selective since it was not achievable to present all stories therefore the researcher has to make a choice. So for that selection was completed and decision was made on how little to tell others due to the purpose of the study.

The analysis was based on self-reported findings by respondents (N=50), respondents were analyzed with descriptive statistics (that was frequency, tables, pie chart and bar charts). This chapter includes four sub-sections that contain introduction, demographic characteristics of respondents, discussion of findings and summary.

#### **4.2 Demographic Characteristics of Respondents**

The participants' title were used instead of mentioning their names, single parented children and single parents participated were also not mentioned in order to ensure confidentiality as the study was inquiring to personal feelings of single parenting families and other participants. The essential edge was children living with single parents aged from 10 to 17 years, from primary school and secondary school.

Others participants were also included to state their views in order to see how the situation of single parenting families can be improved. During interview sessions the researcher created lovely and friendly relationship which enabled single parented children to be open and explain what they meet without any fear.

The profile of respondents of this study included a total of 50 respondents, out of them 23 (46%) were male, 27 (54%) female. Among the 50 participants 15 (30%) were single parented children, 15 (30%) single parents, 9 (18%) were SWO, 3 (6%) were GCD Police officers, 4 (8%) were teachers and 4 (8%) were medical personnel.

#### 4.2.1 Gender distribution of Respondents

This study included 23 male that is equivalent to 46% and 27 female that is equivalent to 54%. The findings shown that females are many than males since many single parenting challenges are more facing females than males this is due to biological nature since males can do any job to improve standard of living but females are limited to that. The distribution of respondents by gender as shown in the Table 4.1.

**Table 4. 1 Frequency Gender Distribution of Respondents (N=50)**

<b>Gender</b>	<b>Frequency N=50</b>	<b>Percent %</b>
Male	23	46
Female	27	54
<b>Total</b>	<b>50</b>	<b>100</b>

Source: Field Data (2016)

#### 4.2.2 Age Distribution of Respondents

This study included participants of age ranging from 10-17 who were 15 (30%) single parented children, 18-36 who were 11 (22%), 37-45 were 11 (22%), 46-55 were 9 (18%) and 55+ were 4 (8%). The study findings revealed that among the total of the 50 participants included in the study, 35 participants which is equivalent to 70% were adults and only 15 participants equivalent to 20% were children.

**Table 4.2 Frequency Age Distribution of Respondents (N=50)**

<b>Age</b>	<b>Frequency N=50</b>	<b>Percent %</b>
10-17	15	30
18-36	11	22
37-45	11	22
46-55	9	18
55+	4	8
<b>Total</b>	<b>50</b>	<b>100</b>

Source: Field Data (2016)



The age group between 10-17 years seemed to be of high percent since it was a targeted edge for expressing the challenges that they encounter in single parenting and to understand the effects of single parenting to their health.

#### 4.2.3 Respondents by Education

The table 4.3 shows the number of respondents according to their level of education. The study findings revealed that the greater part of these respondents are literate that is about 49 (98%) are educated, among them, those who have degree level were 15 (30%), followed by those who reached Secondary school who were 11 (22%), Those who have primary level were 10 (20%), then 7 (14%) respondents had Diploma, 4(8%) respondents had certificate, 2(4%) respondents had Master's degree and only 1(2%) participant was illiterate (who had no formal education).

The number of those who have degree level is higher because the researcher included the professionals who have higher education level like SWOs teachers, Police Officers and Medical personnel's, the total of 20 professionals were included in the study that forming 40% of all respondents that is why the greater part of respondents seemed to have higher level of education, as shown in the Table 4.3.

**Table 4.3 Frequency Table showing the Respondents by Education (N= 50)**

<b>Education</b>	<b>Frequency N=50</b>	<b>Percent %</b>
Illiterate	1	2
Primary	10	20
Secondary	11	22
Certificate	4	8
Diploma	7	14
Degree	15	30
Masters	2	4
<b>Total</b>	<b>50</b>	<b>100</b>

Source: Field Data (2016)

### **4.3 To Identify the Effects of Single Parenting on Child's Health Physically, Mentally, Socially and Psychologically in Temeke Municipality**

The study findings are presented and discussed as follows:

#### **4.4 Effects of Single Parenting?**

Is there any effect for a child to have single parenting?

##### **Responses from Single Parents**

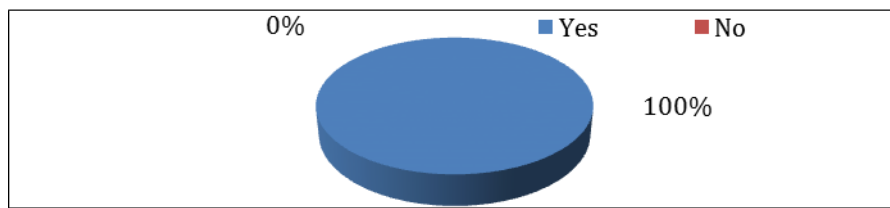
According to 15 (30%) single parents who were asked about this question, 14 (93.3%) single parents replied "Yes" and only one single (6.7%) parent replied "No". Therefore according to the study findings it has shown that there is effect for a child to be raised by only one parent.

The answers of these participants from analyzed data revealed that there was a big effect of single parenting on child's health since these single parents are the ones who encounter the problems in raising children alone and they are observing the real situation to their children. The responses of single parents are as shown below in the Table 4.4.

**Table 4.4: Responses from Single Parents (N=15)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	14	93.3	93.3	93.3
No	1	6.7	6.7	100.0
<b>Total</b>	<b>15</b>	<b>100.0</b>	<b>100.0</b>	

Source: Field Data (2016)



**Figure 4.1: Responses from Single Parented Children (N= 15)**

Source: Field Data (2016)

Figure 4.1 shown the other category of the total of 15 (30%) single parented children who were questioned about the same question during interview if there was any effect for a child to have single parenting, all of them 15 (100%) replied “Yes” there is an effect for the child to be raised by a single parents. Therefore according to these study findings, it is revealed that there is big effect for a child to be raised by one parent.

In a summary form among the 30 (60%) participants (these were 15 single parents and 15 single parented children) who were questioned about the same question 29 (97%) participants agreed with it by saying “Yes” and only 1(0.03%) participant replied by saying “No”. This is because these single parents and single parented children are the group that experiences the effects of single parenting and encounter many problems in their day to day life. During interview one of the single parented children narrated her words by saying that;

*“.....there are effects that I get by living with my mother only and I think my fellow children living with single parents also get effects because we children living with single parents have full of freedom and most of us use badly that freedom due to lack of guidance and supervision that result us to engage in bad behavior.....”*(Student A from school B on 3<sup>rd</sup> November 2016)

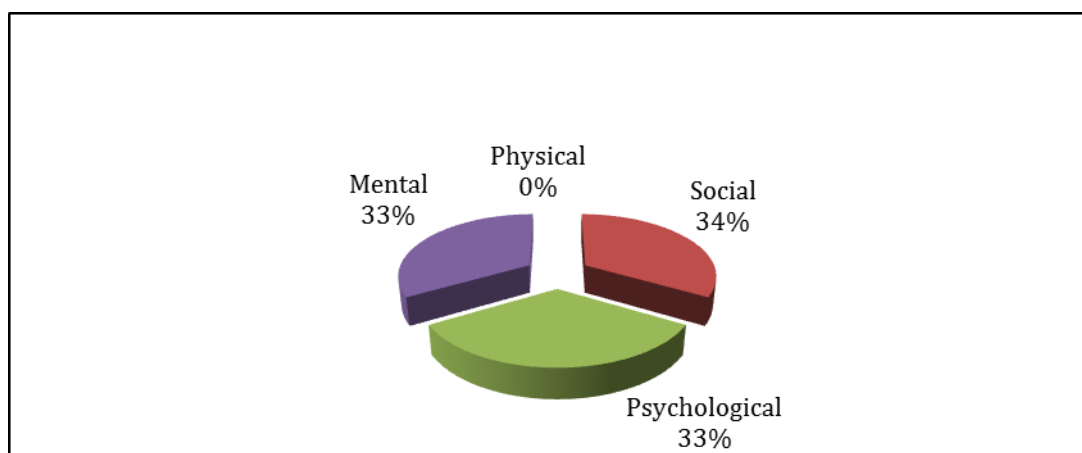
### **What are the effects of single parenting; physically, socially, psychologically and mentally?**

In spotting the effects of single parenting on child's health; physically, socially, psychologically and mentally throughout interview and questionnaires the analysis of the study came out with several responses and from the researcher's choice the responses were categorized into four groups inquired as follow; Physical effects, Social effects, Psychological, Mental effects.

When questioned about the physical effects of single parenting on child's health or wellbeing , the respondents answered by mentioning poor health, improper diet and being unhappy as the effects of single parenting on child's health that affect him or her physically. Then they mentioned the situation of self-isolation, being ant-social, having the truancy behavior and feeling loneliness as social effects of single parenting on child's health. Also the respondents in their responses they mentioned the psychological effects of single parenting on child's health as psychological drawbacks, emotional problems, being aggressive, having low self- esteem and low self-confidence. There after the respondents mentioned the mental effects of single parenting on child's health as having more anger, poor academic performance and engaging in drug abuse, smoking behavior as well as imitating bad behavior. The responses of the participants of the study are shown in the figure 4.2.

According to smith (2008), some children are flexible and adapt well to change largely due to implementing effective coping strategies, while other children may react in the opposite way. Children may lose confidence, blame themselves for the break-up, and see their parent's separation or divorce in a complicated way. The

range of feelings that a child may encounter include; disbelief and denial, sadness, loss, loneliness, depression, anger, anxiety, fear, relief and hope.



**Figure 4.2: Showing the Effects of Single Parenting on Child's Health  
According to GCD Police officers (N= 3)**

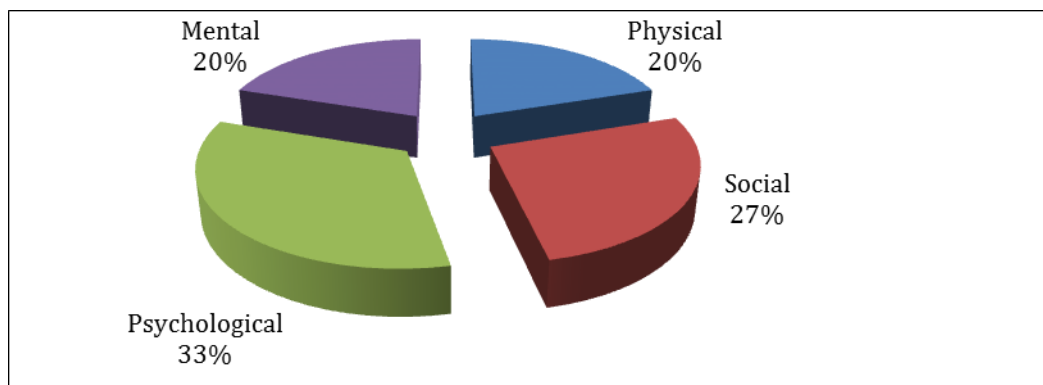
Source: Field Data (2016)

The analysis in Figure 4.5 shown that among the 3(6%) Police Officers who participated in the study, 1of them (33%) mentioned the mental effects of single parenting on child's health as having more anger, poor academic performance and engaging in drug abuse, smoking behavior as well as imitating bad behavior. The 1(33%) participant mentioned social effects as the situation of self-isolation, being ant-social, having the truancy behavior and feeling loneliness, and 1(34%) mentioned the psychological effects as psychological drawbacks, emotional problems, being aggressive, having low self- esteem and low self-confidence.

Therefore according to these GCD Police Officers the effects of single parenting on the child's health is more Psychological, mental and social this is because their percentage of their answers are likely the same to some extent. These GCD Police Officers said that there is no physical effect of single parenting to children's health

this is since in their firm people have to adhere the laws force so it is not much easier to observe something physical like the physical effects of single parenting on child's health, as shown in the Figure 4.2.

This is seen in Ferrell (2009) who conducted a quantitative study on the effect of single parent households versus two parent on academic success, attendance and suspension in United states of America and found that there were the relationship between the number of times a student was absent and the type of households whereby by absent was order of the day of students from single parent households.



**Figure 4.3: Showing the Effects of Single Parenting on Child's Health According to Single Parents (N= 15)**

Source: Field data (2016)

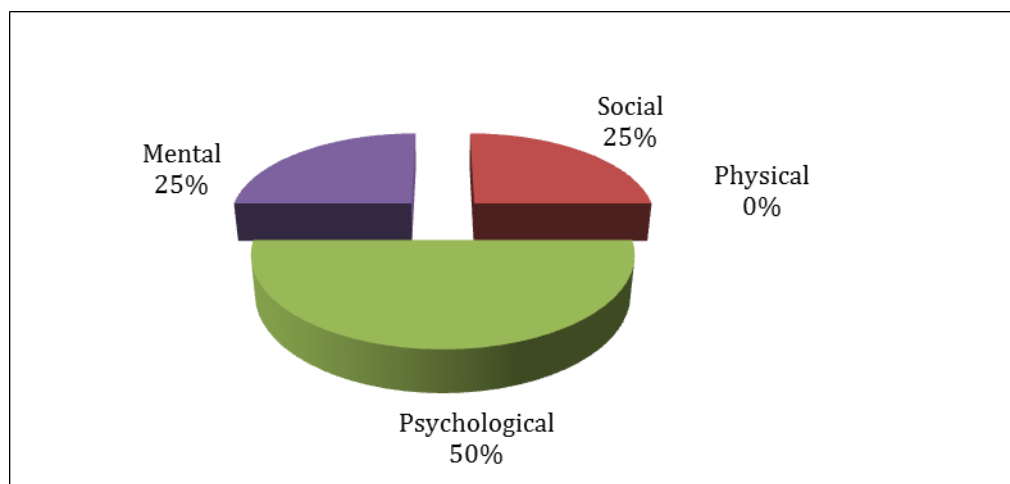
The study findings shown that, among 15(30%) single parents who were asked about effects of single parenting, 3 (20%) mentioned physical effects which were poor health, improper diet and being unhappy, 4(27%) mentioned social effects as the situation of self-isolation, being ant-social, having the truancy behavior and feeling loneliness.

The 3 respondents that forming (20%) mentioned mental effects as having more anger, poor academic performance and engaging in drug abuse, smoking behavior as

well as imitating bad behavior and 5 (33%) mentioned the psychological effects as psychological drawbacks, emotional problems, being aggressive, having low self-esteem and low self-confidence.

Therefore due to the findings according to single parents the major effects of single parenting on child's health is more psychological about 33% followed by social effects that forming 27% and according to them social and mental effects are conflicting for about 20% each. So due to study findings and according to these single parents, children are more affected by single parenting psychologically. This collaborates with Domina, (2005) said that the effect of parent attachment in their children has been linked to both negative and positive influence. Parental attachment prevents behavior problems.

Therefore whenever parents are less attached with their children, generally children will engage themselves in the use of alcohol, smoking cigarettes as well as marijuana in order to relieve anxiety and forget their problems (Domina, 2005).

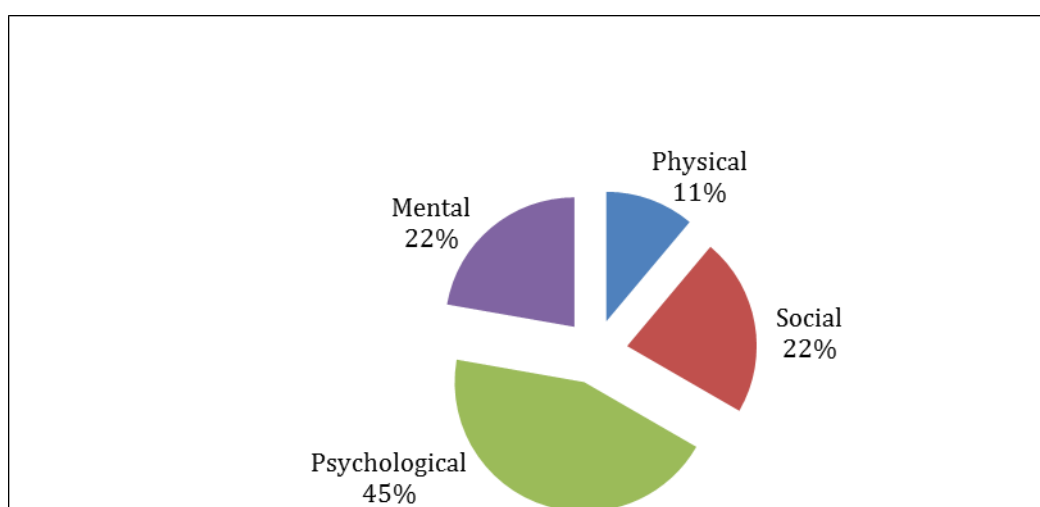


**Figure 4.4: Showing the Effects of Single Parenting on Child's Health According to Teachers (N= 4)**

Source: Field Data (2016)

According to this study findings, out of 4 (8%) Teachers who participated in the study, 1(25%) said that there is social effect of single parenting on child's health as having the truancy behavior and feeling loneliness, 1(25%) said there is mental effect of single parenting as having more anger, poor academic performance and engaging in drug abuse and 2(50%) said there is psychological effect of single parenting on child's health as having low self- esteem and low self-confidence.

According to teachers and their responses, single parenting has more effects psychologically for about 50%, followed by social and mental that conflicted for 25% rather than physically that is moral less for 0%. So for that, according to teachers, there were no physical effects of single parenting on child's health. Also according to Centre for Marriage and Families (2005), children growing up without their own married parents are linked with higher rates of stress, depression, anxiety and low self-esteem during the teenage years, problems that can significantly reduce their ability to focus on classroom work and to achieve in school.



**Figure 4.5: Showing the Effects of Single Parenting on Child's Health According to SWOs (N= 9)**

Source: Field Data (2016)



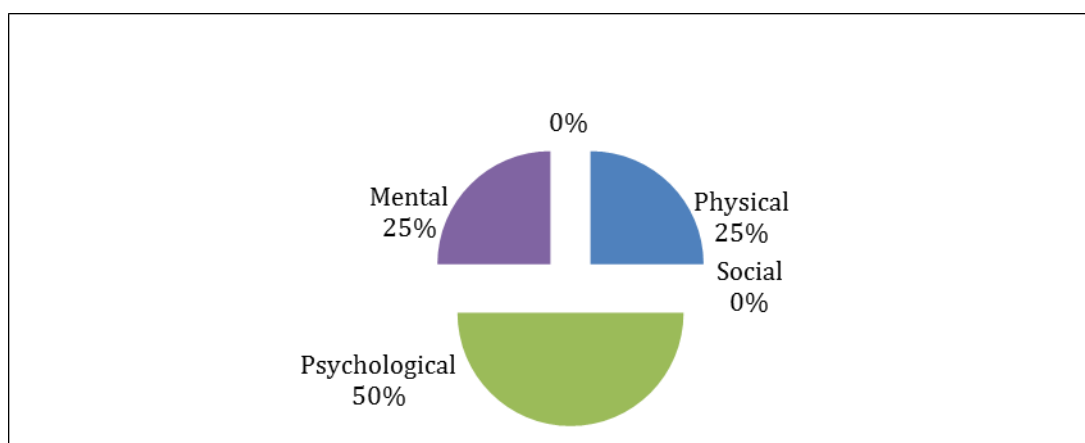
The study findings in the Figure 4.5 revealed that, of all the 9 (18%) SWOs who questioned about this only 1 of them equivalent to 11% mentioned the physical effect of single parenting on child's health as being unhappy, 2(22%) mentioned mental effects as engaging in drug abuse, 2 (22%) mentioned social effects as having the truancy behavior and feeling loneliness and 4(45%) of them mentioned psychological effects as having low self- esteem and low self-confidence.

Therefore according to the SWOs single parenting affect the children's health more psychologically, followed by social and mental effects. Therefore, the total number of 4 (45%) SWOs out of 9 (18%) agreed that there were more psychological effects of single parenting, followed by mental and social that were conflicting for being mentioned by 2 participants that constituted 22% each and to them physical effect was about 11% that said by only 1 participant.

This relates with Mrinde (2014) who also shows that when one-parent is missing, not only does the remaining one "fight a personal monster" but also the children do battle as well. In single-parent families 30-50 percent of children suffer depression as compared with only 5-10 percent in two-parent homes. Poor school performance, disturbance in social adjustment and eating and sleeping disorders alert the parents that something is wrong. Aggressive behavior and illness, which are real or imagined, seem to emerge and multiply.

According to the study findings, the research revealed that out of 4(8%) medical personnel participated in this study, when asked about these effects of single parenting on child's health, 1 (25%) of them mentioned the physical effects as

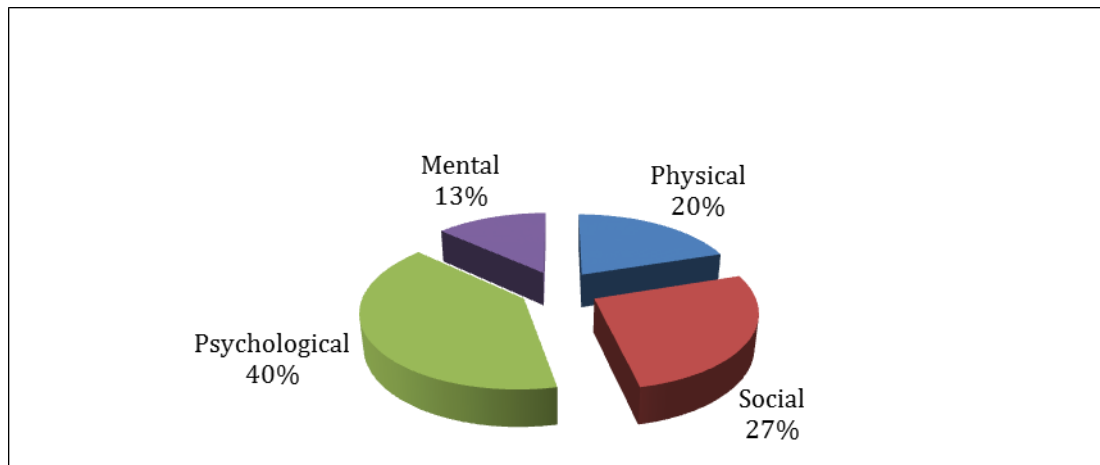
having poor health and being unhappy, 1 (25%) mentioned mental effects as engaging in drug abuse, only 2 (50%) of them mentioned the psychological effects as having low self- esteem, low self-confidence and having the psychological drawbacks.



**Figure 4.6: Showing the Effects of Single Parenting on Child's Health According To Medical Personnel (N= 4)**

Source: Field Data (2016)

The study findings revealed that, of all the 4 medical personnel's 2 (50%) said that there were big psychological effects of single parenting followed by mental and physical that were conflicting for about 25% each mentioned by 1 participant. This study collaborates with Lee and Kushner, (2008) whereby in their studies they revealed that fathers being breadwinners spent a lot of time away from home in search for money which makes them at times unable to provide adequately much needed moral, scholarly and emotional support to their children at home. Therefore according medical personnel's the children are affected more psychologically and less physically and mentally, to them single parenting had no social effects on child's health as shown in the Figure 4.6.



**Figure 4.7: Showing the Effects of Single Parenting on Child's Health According to Single Parented Children (N= 15)**

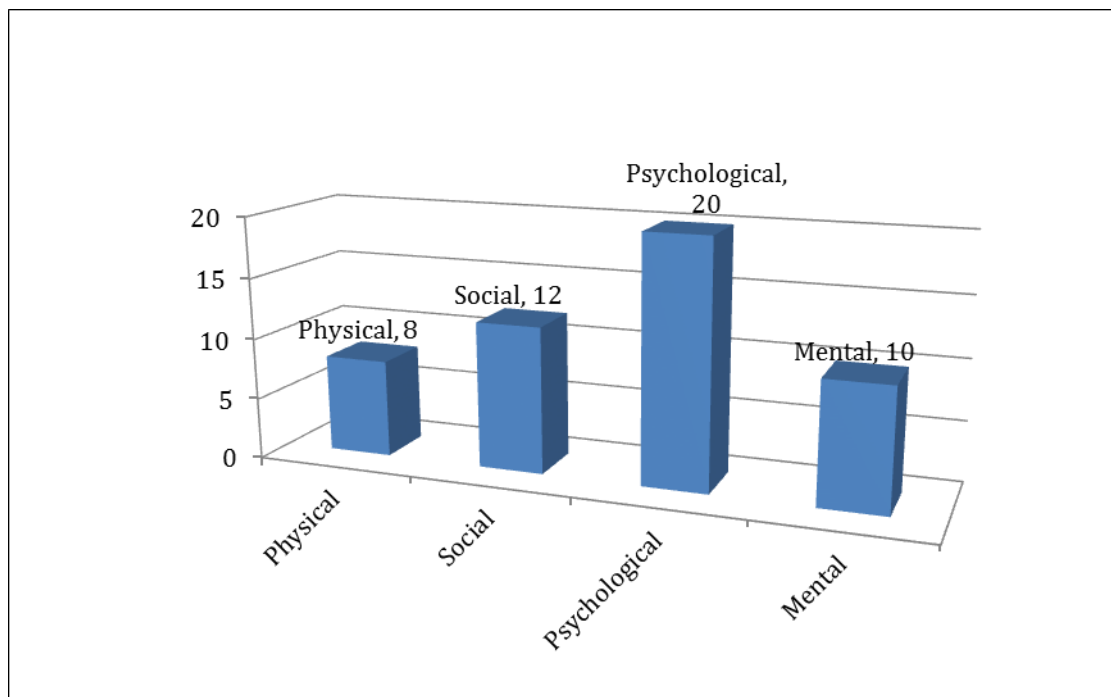
Source: Field Data (2016)

According to research findings and analysis, among 15 (30%) single parented students who interviewed in the research field area, 2(13%) mentioned mental effects as having more anger, poor academic performance and engaging in drug abuse, 3 (20%) mentioned physical effects as poor health, improper diet and being unhappy, 4 (27%) mentioned social effects like having the truancy behavior and feeling loneliness, and 6 (40%) of them mentioned psychological effects like having low self- esteem, low self-confidence.

So for that, according to the single parented children, single parenting affects children more psychologically for 40%, followed by social effects that forming 27% and physical effects that forming 20%. Therefore, according to the research findings and analysis of the study, effect of single parenting on child's health is more psychological than others. The study findings revealed that psychological effects is higher than all, this is because of all 50 respondents, 20 (40%) mentioned the psychological effect, followed by social effect that was mentioned by 12(24%) and

mental effect that was mentioned by 10 (20%). The physical effect seemed to be moral less to the participants since it was mentioned by only 8 participants out of 50 participants which are forming 16% as shown in the figure 4.8 below.

There is research evidence concluding that the effects on children's psychological well-being are massive when their parents' divorce or separate. Abudu and Fuseini, (2013) offered several hypotheses as to which aspects of divorce had the greatest impact on children's sense of well-being. Notably, the time which children spent with the non-custodial parent and the emotional environment provided by the custodial parent were hypothesized as being contributory factors.



**Figure 4.8: Showing Responses of Participants on the Effects of Single Parenting in General According to All 50 Respondents Participated in The Study (N= 50)**

Source: Field data (2016)

#### **4.4.1 Physical Effects of Single Parenting on Child's Health**

Is there any relation between single parenting and child's health or wellbeing?

### **Responses from GCD Police Officers**

Data gathered from 3 GCD Police Officers that constituted 6% shown that all the respondents who were asked if there was relationship between single parenting and child's health or wellbeing they all replied by "Yes" that constituted 100%. Therefore according GCD Police Officers there is a big relationship between single parenting and child's health or wellbeing.

This is because of the cases that they received in their Gender and Children's Desk like children maintenance cases, claiming for divorce or separation that they reflected the effects that the children would encountered after these spouses divorced, separated, or lack maintenance that why these GCD Police Officers agreed for 100% that there was the relationship between single parenting and children's health or wellbeing as shown in the Table 4.5.

This relates with the author Mrinde (2014) who found that children from single-parent families face health problems due to lack of proper care as a result of financial constraints. For example, their parents cannot afford to get balanced diets for their children and thus they are easily attacked by diseases later.

**Table 4.5: Responses from GCD Police Officers (N= 3)**

	<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid Yes	3	100.0	100.0	100.0

Source: Field data (2016)

### **Responses from Medical personnel's**

Table 4.6 shown the responses of the total 4 (8%) participants who responded that there was a big relationship between single parenting and child's health or wellbeing,

they all 4 agreed this by “Yes” that forming 100%. This is because these participants are Medical Personnel’s and they dealt with many children clients and patients who are victims of single parenting, therefore they had to say that there was a big relationship between single parenting and child’s health or wellbeing.

**Table 4.6: Showing Responses from Medical Personnel’s (N= 4)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	4	100.0	100.0	100.0

Source: Field data (2016)

### **Responses from Teachers**

Table 4.7 shown the responses of the total 4 (8%) participants who were asked the same question and responded that there was a big relationship between single parenting and child’s health or wellbeing, they all replied by “Yes” that forming 100%. This is because these participants are Teachers and they work with many children who are sufferers of single parenting, therefore they had to say that there was a big relationship between single parenting and child’s health or wellbeing.

They also work shoulder to shoulder by the single parents and understand the challenges that they face in raising children alone that is why they agreed that there is relationship between single parenting and child’s health or wellbeing since they observed the health or wellbeing of these single parented students in their schools and confirm that they are not the same like other children who lived with both parents.

Also academically these single parented children are not well in the sense that they do not perform well in the class and many of them have poor academic performance.

This findings join forces with Wendy and Kathleen (2003) and Ferrell (2009) who observed that children from single parent families tend to have poorer academic achievement; are likely to have higher absenteeism rate at school; to drop out of school; to marry early and to have children at tender age; to commit delinquent act such as drug and alcohol usage. The responses of these participants are shown in the Table 4.7.

**Table 4.7: Responses from Teachers (N=4)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	4	100.0	100.0	100.0

Source: Field Data (2016)

#### **Responses from Single parents**

Data gathered from respondents indicated that there is a big relationship between single parenting and child's health or wellbeing in Temeke Municipality since among 15 (30%) participants, only 1(6.7%) participant replied by "No" and the remained 14 participants that constituted 93.3% replied by "Yes". This is because these single parents are the ones who face many problems in raising children alone so they understand well the relationship available between single parenting and child's wellbeing or health, as shown in the Table 4.8.

**Table 4.8: Responses from Single Parents (N= 15)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	14	93.3	93.3	100.0
No	1	6.7	6.7	
<b>Total</b>	<b>15</b>	<b>100.0</b>	<b>100.0</b>	

Source: Field Data (2016)

#### **4.4.2 Social Effects of Single Parenting on Child's Health**

Is the wellbeing of the child from single parenting and that with both parents differs?

##### **Responses from Single Parents**

In the Table 4.9 shown that of all the 15 (30%) respondents who were interviewed and questioned about the difference available between single parented children and those with both parents, only 2 (13.3%) replied “No” while 13 (86.7%) replied “Yes”. This collaborates with Mrinde (2014) in his study that said single parent student could not perform well academically due to lack of guidance and follow-up from her parent the girl is affected psychologically, she cannot concentrates in class; she is un happy, sometimes she is absent due to lack of monitoring at home therefore instead of concentrating in studies she is concentrating on what is happening at home.

Smith (2008) insists that parents are responsible in providing psychological and emotional support, education and career development for their children so whenever one of those things misses a child is much affected.

Therefore according to the study findings and due to these single parents who have enough experience of the problems they encountered and challenges that they face in raising children alone the wellbeing of these two children will differ since the one with both parents to the greater extent has supervision both at home and in school, he eat balanced diet, he has emotional support from his parents therefore he attained wellbeing (Amoakohene, 2013).



On contrary the single parented child lack supervision both at home and in school, he lacks balanced diet, he has no emotional support from his parents therefore he had not attain wellbeing (Amoakohene, 2013). So for that the study findings revealed that 86.7% agreed that the wellbeing of the single parented children and that with both parents differ in wellbeing they would not be the same since their style of life differ, this is shown in Table 4.9.

**Table 4.9: Showing Responses from Single Parents (N= 15)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	13	86.7	86.7	86.7
	No	2	13.3	13.3	100.0
	<b>Total</b>	<b>15</b>	<b>100.0</b>	<b>100.0</b>	

Source: Field Data (2016)

### **Responses from Teachers**

In the Table 4.10 shown that among the 4 (8%) of the total number of 50 respondents they all replied “Yes” that there is difference in behavior between the children who grew up with two parents and those single parented children which constituted 100%. This is because these Teachers interact with these children for 8 to 12 hours so they know very well the behaviors of these two kinds of children (Abudu and Fuseini, 2013).

Also these Teachers have enough knowledge on the children psychology therefore to them it is much easier to understand the behaviors of children since they are the ones

who stay with these children from morning to evening and they help them to control their behavior by discipline them unless they are wrong or go to the wrong direction (Marsigilo and Amato, 2001). Then this category is essential for behavior shaping of children at school that is why they agreed that for a high percentage of 100%.

**Table 4.10: Showing Responses from Teachers (N=4)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	4	100.0	100.0	100.0

Source: Field data (2016)

Do children from single parent families express their challenges freely to their teachers to get a help?

### **Responses from Teachers**

The Table 4.11 below shown that of all 4 (8%) respondents who were asked about that question, only 1 (25%) replied “Yes” while 3 (75%) replied “No”. Therefore due to the study findings and analysis, to Teachers single parented children cannot express their challenges freely to their Teachers since they have low self- esteem and low self-confidence, so for that they do not trust anybody that is why they cannot express freely even to their Teachers (Ferrel, 2009).

**Table 4.11: Showing the Responses from Teachers (N= 4)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	1	25.0	25.0	25.0
No	3	75.0	75.0	100.0
<b>Total</b>	<b>4</b>	<b>100.0</b>	<b>100.0</b>	

Source: Field Data (2016)

### Responses from the SWOs

Table 4.12 below shown the responses of 9 respondents that constituted 18% of all study participants, among the 9 participants who were asked about this question only 3 (33.3%) replied “No” while those who said “Yes” were 6 (66.7%). According to these findings and analysis those who said “Yes” leaded because these Social Welfare Officers have an experience in dealing with children and they understand the problems and effects of single parenting on children (Mrinde, 2014).

**Table 4.12: Showing Responses from the SWOs (N= 9)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	6	66.7	66.7	66.7
No	3	33.3	33.3	100.0
<b>Total</b>	<b>9</b>	<b>100.0</b>	<b>100.0</b>	

Source: Field Data (2016)

### Responses from Medical Personnel's

From the Table 4.13 the data gathered shown that, among the 4 (8%) of all respondents of the study who were asked whether children from single parenting have the problem of expressing themselves or not, only 1(25%) participant replied by “No” while 3 (75%) participants replied by “Yes”. Therefore according to these Medical personnel's, the greater part revealed that single parented children have the problem of expressing themselves.

They believe that when the children lack confidence and have low self-esteem they lose the guts of expressing themselves to anybody and they cannot even ask question in the class to the teacher if they do not understand the topic in the class (Ferrel,

2009). This is because the single parented children experience the social effects of single parenting that made them lack the ability of expressing themselves to their teachers or to anybody else.

**Table 4.13: Showing Responses from Medical Personnel's (N= 4)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	3	75.0	75.0	75.0
No	1	25.0	25.0	100.0
Total	4	100.0	100.0	

Source: Field Data (2016)

#### **4.4.3 Psychological Effects of Single Parenting on Child's Health**

Do children from single parenting get psychological problems by having single parenting care?

##### **Responses from Teachers**

According to Table 4.14 of all the 4 (8%) participants interviewed and asked about this question, all 4 replied by "Yes" that forming 100%, which means that it is true when a child live with a single parent she or he gets psychological effects since she or he may desire to call daddy like his fellow children in school while there is no daddy at his home this contributes a lot to stress him and give psychological effects.

Also when a single parented child hear his fellow saying my mother bought me this bag or shoes he will wish he could be him since he misses love and care from his mother, this also contribute to the psychological problems to children. This study matches with Mrinde (2014) whose study found that in single-parent families 30-50 percent of children suffer depression as compared with only 5-10 percent in two-parent homes.

Also they have Poor school performance, disturbance in social adjustment and eating and sleeping disorders alert the parent that something is wrong. Aggressive behavior and illness, which are real or imagined, seem to emerge and multiply (Mrinde, 2014).

**Table 4.14: Showing Responses from Teachers (N= 4)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	4	100.0	100.0	100.0

Source: Field data (2016)

Do children from single parent families have low self- esteem?

#### **Responses from Teachers**

From the Table 4.15 below the research findings shown that among the 4 respondents that constituted 8% of total respondents were asked this question during interview and among them only 1 (25%) respondent replied by “No”, while the other 3 (75%) respondents replied by “Yes”. Therefore to these findings, to teachers children from single parenting have low self- esteem that is from lack of role model at home.

This is because many single parents are busy looking for the daily bread since she raise children alone therefore she has no enough time to spend with her children and socialize them in order to build capacity to them (Amoakohene, 2013). Therefore when these children lack proper socialization from their parents, their self-esteem tend to be low since they lack the important person in their life who will empower them to believe in themselves that is parent.

According to smith (2008), some children are flexible and adapt well to change largely due to implementing effective coping strategies, while other children may react in the opposite way. Children may lose confidence, blame themselves for the break-up, and see their parent’s separation or divorce in a complicated way. The range of feelings that a child may encounter include; disbelief and denial, sadness, loss, loneliness, depression, anger, anxiety, fear, relief and hope.

**Table 4.15: Showing Responses from Teachers (N= 4)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	3	75.0	75.0	75.0
No	1	25.0	25.0	100.0
Total	4	100.0	100.0	

Source: Field Data (2016)

Do children from single parent families have more psychological problems than those with two parents?

### **Responses from SWOs**

Table 4.16 shown the responses from the data gathered from 9 (18%) SWOs responded to this question. Only 3 SWOs that forming 33.3% replied by “No” and 6 SWOs that forming 66.7% replied by “Yes” which means that it is true that children from single parent families have psychological problems since they are raised by only one parent, they miss parental love, care and protection of the other parent who is important in their life (Mrinde, 2014).

Therefore the respondents who replied “Yes” dominated according to these SWOs since they believe that if the child is raised by only one parent, he will live with

many wishes and desire the life of other fellow children who are living with their two parents and that when the child misses parental love, care and protection he will face psychological problems (Domina, 2005).

This is because the parents are the first friends of the child whom he should trust and share happiness and sadness that he has. In these single parents families there is a gap between the child and the parent that made him to have psychological problems for failure to share happiness and sadness that he has due to lack of first friend at home (Ferrel, 2009). This is shown in the Table 4.16.

This study works together with the work of Marsigilo and Amato (2001), who observed that children in single-parent homes are more likely to experience health-related problems as a result of the decline in their living standard, including unbalanced meals, poor shelter and lack of health insurance for medication. So this may cause psychological problems to single parented children (Ferrel, 2009).

**Table 4.16: Showing responses from SWOs (N= 9)**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Yes	6	66.7	66.7	66.7
	No	3	33.3	33.3	100.0
	<b>Total</b>	<b>9</b>	<b>100.0</b>	<b>100.0</b>	

Source: Field Data (2016)

### **Responses from Medical Personnel's**

From the Table 4.17 the research findings shown that 4 (8%) of total population was asked same question whether the single parented children have psychological

problems, all of them agreed by “Yes” that forming 100% since these single parented families are full of stress due to the burden of raising children alone (Mrinde, 2014). The stress of single parents tends to affect their children physically, socially, psychologically and mentally.

**Table 4.17: Showing Responses from Medical Personnel’s (N= 4)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	4	100.0	100.0	100.0

Source: Field Data (2016)

Do you think these two children will differ in thinking capacity?

### **Responses from SWOs**

Table 4.18 shown the responses from the data gathered from 9 (18%) SWOs towards that question. All the 9 SWOs that forming 100% replied by “Yes” which means that it is true that children from single parent families will differ in thinking capacity from those with both parents. This is because the single parented children lack brain stimulation from learning by observing through both parents instead they will learn through observing the only one parent whom he or she doesn’t have enough time to spend with him for socialization.

This collaborates with the Study conducted by Ferrel (2009) about the single parent households and two parents households on academic success of adolescents in secondary schools, where the findings showed that single parenting children has poorer academic achievement, high rate of absentees, lower self-esteem, lower tolerance which lead them to be indisciplined.



These findings also collaborates the findings of other researchers such as Amoakohene, 2013; Abudu and Fuseini, 2013; and Mrinde, 2014. Therefore these two children will not be the same in thinking capacity. That is why these SWOs agreed by 100% that these two children will differ in thinking capacity since their mind were set differently by their socialization, as shown in the Table 4.18.

**Table 4.18: Showing Responses from SWOs (N=9)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	9	100.0	100.0	100.0

Source: Field Data (2016)

#### **Responses from Medical Personnel's**

According to the data gathered and analyzed as shown in the Table 4.19 below, among 4 Medical Personnel's equivalent to 8% of all participants, when interviewed and asked whether these two children will differ in thinking capacity or not, all 4 respondents that is equivalent to 100% replied by "Yes" which means it is true single parented children and those with both parents are not the same in thinking capacity since most of the single parented children have psychological problems therefore their thinking capacity will be low while of those with two parents will be high since their mind are relaxed as is shown in the Table 4.19.

Also according to Centre for Marriage and Families in United States, (2005), children growing up without their own married parents are linked with higher rates of stress, depression, anxiety and low self-esteem during the teenage years, problems that can significantly reduce their ability to focus on classroom work and to achieve in school.

**Table 4.19: Showing Responses from Medical Personnel's (N= 4)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	4	100.0	100.0	100.0

Source: Field Data (2016)

#### **4.4.4 Mental Effects of Single Parenting on Child's Health**

Is it true that children from single parent families face academic problems?

##### **Responses from Teachers**

Table 4.20 the findings of the study shown that of all the 4 teachers that is equivalent to 8% of the total population were asked that question on whether it is true that single parented children face academic problems, all 4 respondents replied by "Yes" that forming 100%. This is because these teachers have experience in teaching children of all kinds therefore they have the reasons of agreeing that single parented children face academic problems.

Therefore from these findings and analysis it has shown that it is true that single parented children face academic problems due to low or lack of supervision and support of parents both at home and in school. Also lack of parental love and care can cause single parented children to have low academic performance. Also teachers said that when children live with single parents, mentally they miss parental love, care and support therefore they will be not be mentally fit due to psychological problems and stress that lead to academic problems.

This made all teachers to respond by Yes for 100% as shown in the Table 4.20 below. These findings collaborates with Mrinde (2014) in his study who found that

Single-parents have little time to make follow up of their children's academic progress.

**Table 4.20: Showing Responses from Teachers (N= 4)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	4	100.0	100.0	100.0

Source: Field Data (2016)

Do children from single parent families have mental problems from getting single parenting?

### **Responses from SWOs**

The study findings in Table 4.21 below shown that among 9 (18%) SWOs were interviewed and asked about whether single parented children have mental problems from getting single parenting or not, of all 9 respondents only 3 (33.3%) said "No" and 6 (66.7%) said "Yes". Those who said "Yes" dominated since the study findings revealed that it is true that single parented children have mental problems due to stress and psychological problems that they have because of lack of parental love, care, support and supervision both at home and in school. This is shown in the Table 4.21.

According to Centre for Marriage and Families in United States, (2005), children growing up without their own married parents are linked with higher rates of stress, depression, anxiety and low self-esteem during the teenage years, problems that can significantly reduce their ability to focus on classroom work and to achieve in school. This collaborates with the study for example by Marsigilo and Amato, (2001)

concluded that divorce women complain about the prevalence of the stereotype that their children are likely to experience most of which take place in the school environment which affects their academic outcomes.

**Table 4.21: Showing Responses from SWOs (N= 9)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	6	66.7	66.7	66.7
	No	3	33.3	33.3	100.0
	<b>Total</b>	<b>9</b>	<b>100.0</b>	<b>100.0</b>	

Source: Field Data (2016)

Do you think these two children will be the same in performance at school?

#### **Responses from Medical Personnel's**

Among 4 respondents that forming 8% who were interviewed and asked about this question, all of them that forming 100% replied by “No”, that means to medical personnel's these single parented children cannot be the same in performance at school especially academically. This is because the single parented children always have stress that twist their minds that make their brain full of feelings and lead them to lose concentration in the class hence they get poor academic performance, unlike those children with both parents who study with no stress or feelings their mind are relaxed and easy to grasp what is taught by the teachers in the class.

According to Centre for Marriage and Families in United States, (2005), children growing up without their own married parents are linked with higher rates of stress, depression, anxiety and low self-esteem during the teenage years, problems that can

significantly reduce their ability to focus on classroom work and to achieve in school. So for that these children from both parents will have good academic performance and that they will not be the same with those children from single parenting as shown in the **Table 4.22.**

Abudu and Fuseini (2013) submit that, poor academic achievement is related to low motivational orientation, low self-esteem, emotional problems, poor study habits and poor interpersonal relationships. According to them divorce practice has great contribution to the development of children performance in school. Children from divorce parents have greater chance to perform poorly than the child whose parent's is in intact.

Regardless of these findings that shown single parented children cannot perform well in the class. They indicate that, some children perform better in school as an attempt to shut out problems at home (Clarks and Hamplova, 2013).

**Table 4.22: Showing Responses from Medical Personnel's (N= 4)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid No	4	100.0	100.0	100.0

Source: Field Data (2016)

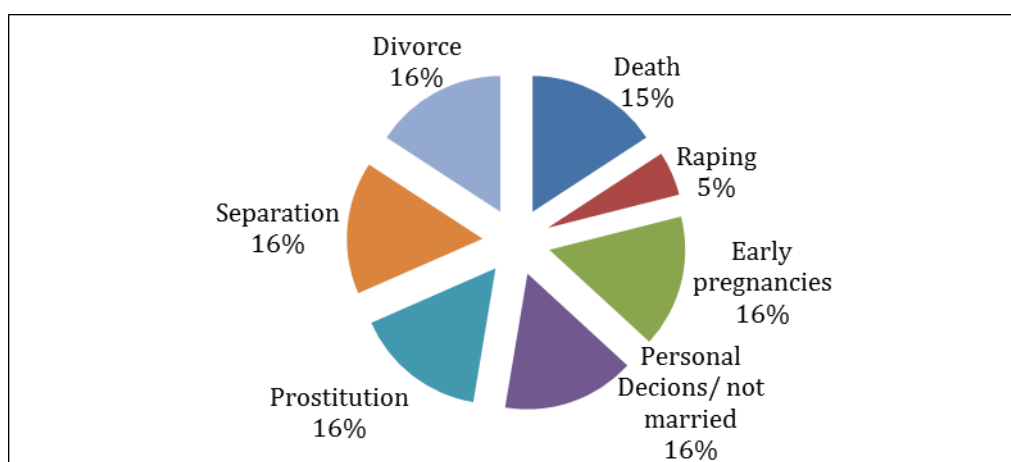
#### **4.5 To Explore the Causes of Single Parenting in Temeke Municipality**

In this second objective of the study, the researcher explored the major causes of single parenting in Temeke Municipality by interviewed the 15 single parented children and 15 single parents as well as 20 professionals through guided questionnaires provided.

Among the total of 50 respondents who were asked about the causes of single parenting, the respondents answered in various manner according to their day to day life experiences and by looking to the role of others. Generally, the total of 50 respondents included in the study were mentioned the following as major causes of single parenting; Death (20.8%), divorce (20.8%), Raping (3.8%), Early pregnancies (14%), Personal decisions/ not to be married (10.7%), Prostitution (8.8%), and Separation (21%).

The distribution of these answers according to the responses of the participants based on their categories is seen from the Figures 4.9 to 4.14. Also this relates with the researcher Mrinde (2014) who found that the causes of single parent families are premarital sex, generation gap, divorce, separation, choice, and death. Therefore, the study by Mrinde (2014) collaborates with this study and found that Separation, divorce, death, early marriages and decision not to be married can cause single parent families to the greater part.

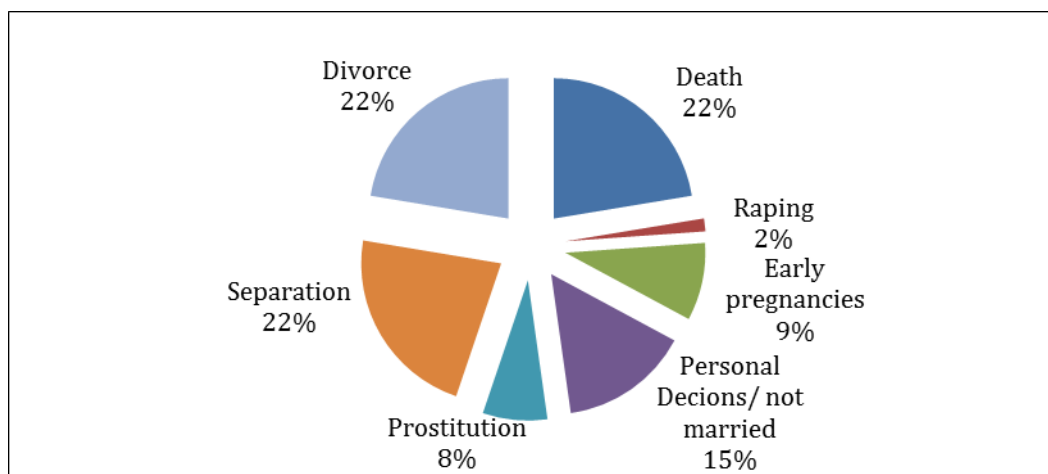
#### 4.6 Causes of Single Parenting



**Figure 4.9: Causes of Single Parenting According to the GCD Police Officers (N= 3)**

Source: Field data (2016)

According to Figure 4.9 it has shown that to 4(8%) GCD Police Officers who were interviewed and asked about this question, they mentioned divorce (16%), death (15%), and separation (16%), personal decisions not to be married (16%), early pregnancies (16%), prostitution (16%), and raping (5%). Due to these GCD Police Officers the major causes of single parenting which dominate include divorce (16%), early pregnancy(16%), personal decisions (16%), and prostitution(16%), followed by death which is about 15% and to them raping is moral less cause of about 5% only. This research has relevance since Hughes (2009) insists that divorce creates a crisis in the family life-cycle, with a state of equilibrium experienced by all members throughout the nuclear and extended family system.

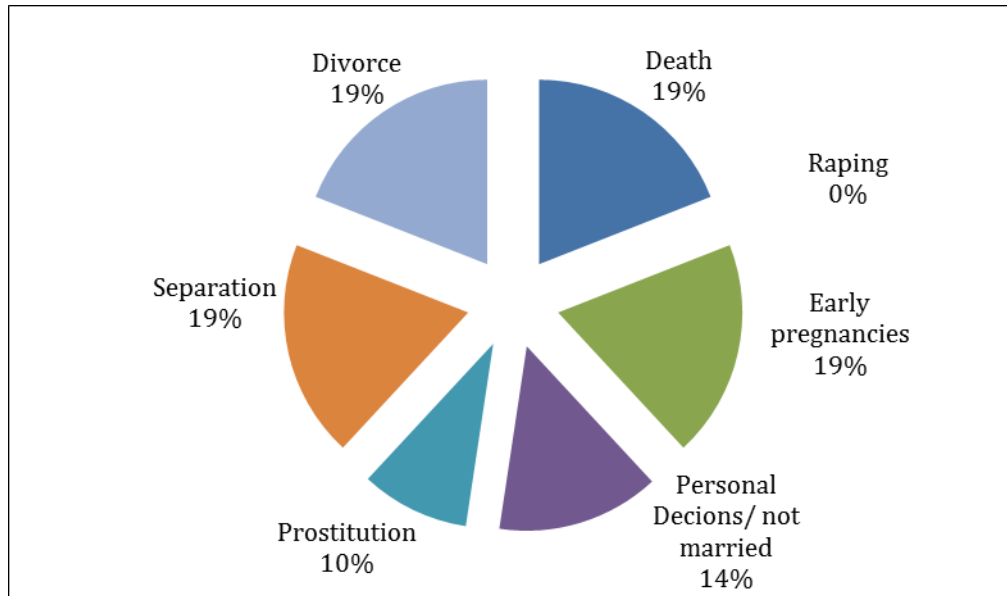


**Figure 4.10: Causes of Single Parenting According to Single Parents (N= 15)**

Source: Field Data (2016)

Figure 4.10 shown the responses from 15 (30%) single parents who were interviewed and asked about same question about the causes of single parenting. Among 15 single parents , only 2% mentioned Raping, 8% prostitution, 9% early pregnancies, 15% personal decisions/ not to be married. The causes which dominated were separation for 22%, death 22% and divorce 22%. Therefore according to the study

findings and analysis to the single parents the major common causes of single parenting that dominate were death, divorce and separation.



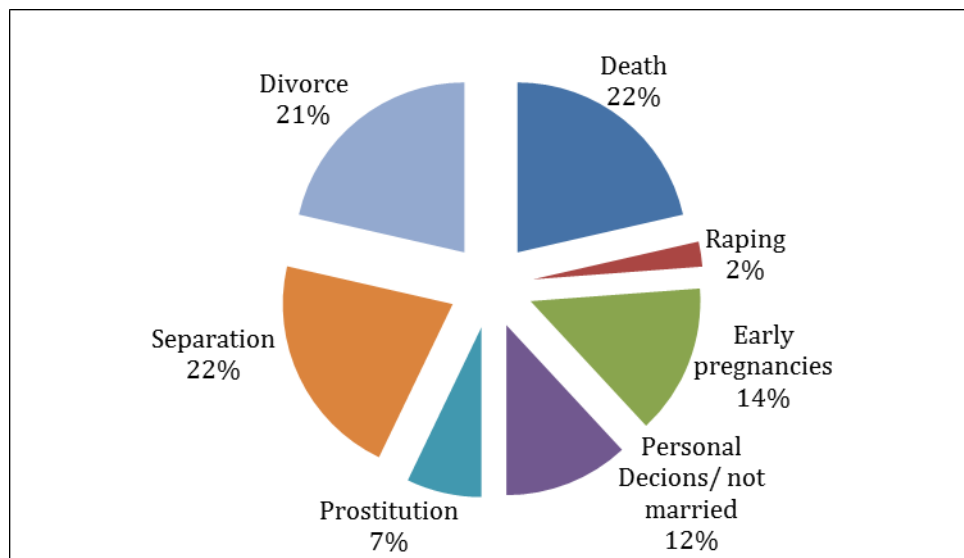
**Figure 4.11: Causes of Single Parenting According to the Teachers (N= 4)**

Source: Field Data (2016)

In Figure 4.11 it has shown among the 4 (8%) respondents who were asked about the causes of single parenting, they mentioned separation (19%), divorce (19%), death (19%), personal decisions not to be married (14%), early pregnancies (19%), prostitution (10%) and to them raping does not contribute to single family situation. According to these findings, Teachers believe that the major causes of single parenting families that dominated were separation (19%), early pregnancies (19%), death (19%), divorce (19%), followed by personal decisions not to be married (14%) and prostitution (10%).

They do not believe that raping can be one of the causes of single parenting family that is why there was nobody who mentioned raping that forming 0% as shown in the Figure 4.11 which means raping is the minor cause of single parenting.



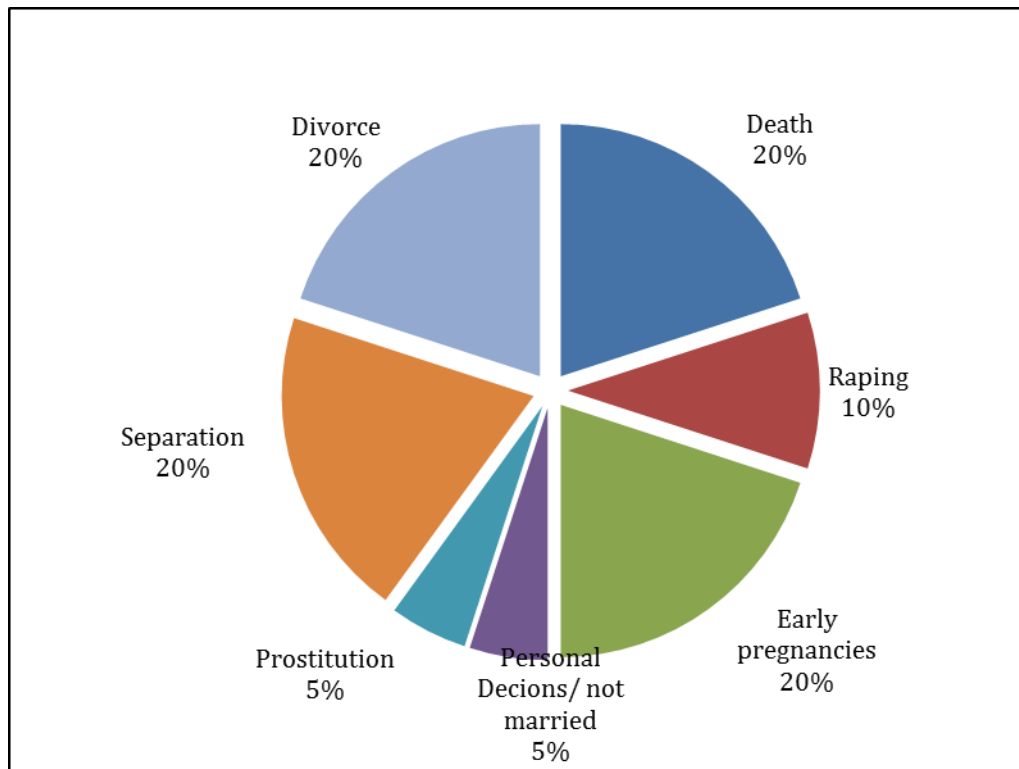


**Figure 4.12: Causes of Single Parenting According to SWOs (N= 9)**

Source: Field Data (2016)

Figure 4.12 presented the findings among the 9 SWOs that forming 18% of the total population sample, among them 22% mentioned death, 2% raping, 14% early pregnancies, 12% personal decisions not to be married, 7% prostitution, 22% separation, and 21% divorce. According to these SWOs the major causes that dominate were death (22%), separation (22%), followed by divorce (21%), early pregnancies (14%), Personal decisions not to be married (12%) and those who mentioned raping were only 2%.

This means that raping is the minor cause of single parenting families since when a girl or woman is raped the SWOs have the responsibility to refer her to the Hospital or health center and ensure she is examined and get the medication to stop pregnancy and other STI disease like HIV infection that is why raping was not included as cause of single parenting family since it is controlled scientifically (Marsigilo and Amato, 2001).



**Figure 4.13: Causes of Single Parenting According to Medical Personnel's (N=4)**

Source: Field Data (2016)

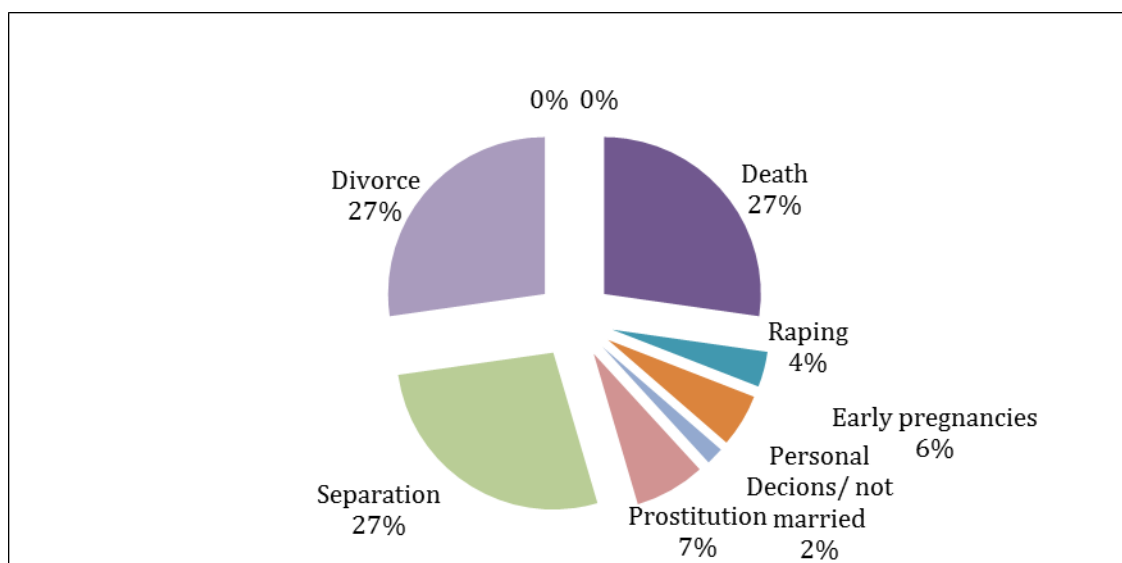
Figure 4.13 also presented the study findings and responses of 4(8%) of the total sample who were asked about the causes of single parenting, among them they mentioned causes as divorce 20%, death 20%, separation 20%, early pregnancies 20%, raping 10%, personal decisions not to be married 5% and prostitution 5%. Therefore due to these findings, according to Medical personnel's the major causes of single parenting families were divorce (20%), early pregnancies (20%), separation (20%), and death (20%) followed by raping (10%).

The minor causes mentioned were personal decisions not to be married (5%) and prostitution (5%), this is because it has been shown that even those who opted not to get married majority of them decide to have children with the husbands of other

women in order their children to be taken care and provided maintenance like they live with both two parents.

Also for the case of prostitution it does not contribute the single parenting families at large since these prostitutions most of them are condom users so they control fertility in their businesses provided the condoms are given freely from the Hospitals to the youths, guest houses and lodges, and these prostitutes prefer using condoms in order to protect themselves from HIV/ AIDS and unwanted pregnancies (Marsigilo and Amato, 2001).

So this made prostitution to be the moral less cause of single parenting of about 5% as shown in Figure 4.13. This study related to different authors from Ghana as they indicated that parental divorce was a major cause of single parenting within the Afigya- Sekyere East District, followed by separation, then death and other (Amoakohene, 2013).



**Figure 4.14: Causes of Single Parenting According to Single Parents (N= 15)**

Source: Field Data (2016)

Figure 4.14 shown the responses of 15 single parented Children that forming 30% of total sample of the study, among 15 single parented children who were questioned on the causes of single parenting 27% mentioned divorce, 27% death, 27% separation, 7% prostitution, 6% early pregnancies, 4% raping and only 2% mentioned personal decisions not to be married.

According to Smith (2008) he insists that parents are responsible in providing psychological and emotional support, education and career development for their children so whenever one of those things misses a child is much affected. In general the study findings and analysis of the study shown that according to all 50 participants included in the study, among the causes mentioned separation is dominated for about 21%, followed by divorce 20.8%, then death for about 20.8%, personal decisions not to be married about 10.7%, prostitution for about 8.8%.

To them raping is moral less cause of single parenting for about 3.8 only as shown in the Figure 4.14, this is because in any circumstances when girls or women are raped they are given measures to control the unwanted pregnancies as well as HIV/AIDS infection that is why raping was mentioned for about less percentage that is 3.8% (Marsigilo and Amato, 2001).

This collaborates with other studies done by other authors for instances data gathered from different authors indicated that parental divorce was a major cause of single parenting within the Afigya- Sekyere East District, followed by separation, then death and other (Amoakohene, 2013).

#### **4.7 To examine the Ways of Controlling Single Parenting Situation in Temeke Municipality**

In this third objective of the study it was required to examine the ways which can be used to control single parenting in Temeke Municipality. Firstly the researcher investigated the challenges faced by both single parents and single parented children in order to identify the problems that they encounter in their life as single parenting family members so as to find possible solution or ways to improve the life situation of these single parent families.

In investigating these challenges the children interviewed and expressed their feelings freely since the researcher created a friendly environment to the single parented children who interviewed at their schools by the permission of the Head of the schools. The single parents and other respondents were questioned about challenges they encounter in single parenting care together with other respondents who participated in answering the concern through questionnaires.

#### **Are you facing any problems or challenges in single parenting?**

Responses from single parents

In the Table 4.23 it has shown the study findings were by 15 single parents that forming 30% of the total sample, who were asked about the question on whether they face challenges or not they all 15 replied by Yes that forming 100%. This is because these are the ones who live with the reality of raising children alone, so they understand the challenges that they encounter in their daily life that is why they all replied by Yes for 100%.

Therefore, according to these findings single parents are facing many problems and challenges in their day-to-day life experience. Also same question was asked to 15 (30%) single parented children and all of them that forming 100% agreed by Yes that they face challenges and different problems in single parenting and mentioned the challenges that they face to the researcher as shown in the Table 4.24.

**Table 4.23: Showing Responses of Single Parents N= 15**

	<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid Yes	15	100.0	100.0	100.0

Source: Field data (2016)

**Table 4.24: Showing Responses of Single Parented Children N= 15**

	<b>Frequency</b>	<b>%</b>
Yes	15	100
No	0	0
<b>Total</b>	<b>15</b>	<b>100</b>

Source: Field Data (2016)

#### **4.7.1 Challenges Faced by Single Parents**

According to the study done by the researcher the challenges faced by single parents that were mentioned the most by the participants were repeated therefore the researcher's choice was to categorize them into three groups as Economic, social and psychological challenges (Martin, Emery and Peris, 2004).

The findings of the study has shown that firstly; the Economic challenges include failure to provide basic necessities to children, lack of economic support to buy educational tools for the children, failure to pay school fees on time, failure to pay house rent on time and failure to provide proper diet to children.

Further, the Social challenges of single parenting include failure to provide parental love and care to children, poor socialization of children, failure to supervise children both at home and in school, raising children alone without support of the other parent, his or her relatives' cooperation.

In addition, the psychological challenges mentioned by the participants include being stressed, lack of companionship or companionate, having psychological effects and health problems.

#### **4.7.2 Challenges Faced by Single Parented Children**

According to the study done by the researcher, there were challenges facing single parented children that were mentioned the most by the participants and because these challenges were also repeated therefore the researcher's choice was to group them into three groups as Economic, social and psychological challenges (Amoakohene, 2013). According to the findings of the study, the Economic challenges include; economic hardship like failure to be paid school fees on time, failure to buy educational materials and lack of bus fare for going to school.

Social challenges include; Lack of parental love and care that means they lack parental guidance and support, lack of family socialization, Poor body health, lack of role model. Psychological challenges include; Lack of emotional support, having psychological and health problems like being stressed. This is seen in Mrinde (2014) study that found that Single-parent students face economic hardship in their homes, leading to inability to get necessary school materials such as school uniforms, school fees, exercise books, bus fare, text books and other school needs.

Economic hardship results into other problems like poor nutrition and health problems, leading to failure to attend school. Student X in her words narrated that;

*“.....in a little while after my parents separated, the life distorted totally at our home, As I remained with my mother who did not have enough income to provide everything for me and my two young brothers as earlier when they were together with my father because my mother was a petty trader in the street selling groundnuts and water. Things were very difficult at home this made me feel ashamed in front of my friends at school and home around people. Life at home was bad and tough compared to earlier since it was hard to access food, some days we ate only one meal and other days we were ate nothing because my mother did not have money to buy food and some days we failed to go to school due to lack of bus fair or shoes .”(Student X from school Y on 31<sup>st</sup> October 2016)*

#### **4.7.3 What should be Done in Order to Improve the Situation of Single Parenting in Temeke Municipality?**

Among the ways of overcoming challenges of single parenting mentioned by participants include the following; firstly, raising awareness to parents on the importance of raising children together in order to improve the health and welfare of the children. Further, divorced parents should be educated on the importance of supporting their children and the effects of not supporting them. In addition, Spouses should be given education on the effects of divorce and separation on child's health or wellbeing. Also, the Government should plan to support the widows' families and empower them economically in order to improve their life.



Lastly, Parents should be educated on the importance of visiting their children even if they have divorced or separated. These recommendations as ways to improve the situation of single parenting in Temeke Municipality were given out by the respondents themselves during interview at the end of the session as their self-opinions or own views as they desired to improve the life of single parent families.

#### **4.8 Integration between Theory and Findings (Integration of the Finding into the Theory)**

The Ecological Systems theory states that human development is influenced by the different types of environmental systems. Formulated by famous psychologist Urie Bronfenbrenner (1917- 2005), this theory helps to understand why society may behave differently when it compares to our behavior in the presence of family and behavior when the children are in school or at work. Human ecological theory is a way of looking at the interactions of humans with their environments and considering this relationship as a system. In this theory biological, social, and physical aspects of the organism are considered within the context of their environments.

The ecological systems theory believes that society encounter different environments throughout its life span that may influence our behavior in varying degrees. It identifies five environmental systems with which an individual interacts; these systems include the micro system, the mesosystem, the exosystem, the macro system, and the chronosystem (Urie Bronfenbrenner , 1917- 2005). The micro system's setting is the direct environment in lives. The micro system is the setting in which individual have direct social interactions with the social agents like family, friends,

classmates, teachers, neighbours and other people surrounding him. The theory states that individuals are not mere recipients of the experiences, they are socializing with other people in the micro system environment, and hence contributing to the construction of such environment (Urie Bronfenbrenner, 1917- 2005).

The mesosystem involves the relationships between the microsystems in one's life. This means that your family experience may be related to your school experience. For example, if a child is neglected by his parents, he may have a low chance of developing positive attitude towards his teachers. Also, this child may feel awkward in the presence of peers and may resort to withdrawal from a group of classmates (Urie Bronfenbrenner, 1917- 2005).

The exosystem is the setting in which there is a link between the context where in the person does not have any active role, and the context where in is actively participating. Suppose a child is more attached to his father than his mother. When the father goes abroad to work for several months, there may be a conflict between the mother and the child's social relationship, or on the other hand, this event may result to a tighter bond between the mother and the child (Wallerstein, 2005).

The macrosystem setting is the actual culture of an individual. The cultural contexts involve the socioeconomic status of the person and/or his family, his ethnicity or race and living in a still developing or a third world country. For example, being born to a poor family makes a person work harder every day (Urie Bronfenbrenner, 1917- 2005). The chronosystem includes the transitions and shifts in one's lifespan. This may also involve the socio-historical contexts that may influence a person. One

classic example of this is how divorce, as a major life transition, may affect not only the couple's relationship but also their children's behavior. Children are negatively affected on the first year after the divorce. The next years after it would reveal that the interaction within the family becomes more stable and agreeable (Wallerstein, 2005).

This theory is relevant to the study since it states that human development is influenced by the different types of environmental systems. For example, for the single parent children, their development, behaviors, attitudes, are influenced by the type of their family. Also, the single parent children's academic performance is influenced by their relationship between their single parents living with them in the sense that if the parent is supportive academically, materially and supervised properly the child's performance will also be good and vice versa is true.

In addition to that the theory asserts that different environments throughout individual life span that may influence its behavior in varying degrees, this is related to the study since in the study findings it has revealed that single parent children are aggressive and may have truancy behavior due to low or lack of supervision (Marsigilo and Amato, 2001).

Also the study shown that single parent children may imitate any bad behavior like stealing or loitering due to lack of role model because of poor or lack of proper socialization from their single parents living with them who are always busy looking for the daily bread since they are the only family bread winners (Wallerstein, 2005).

As it identifies five environmental systems with which an individual interacts, by looking at the environmental systems with which an individual interacts starting with microsystem, the ecological system theory assumes that individual is not more recipient of the experiences we have when socializing with their social agents like your family, friends, classmates, teachers, neighbors and other people who have a direct contact. It assumes that we are contributing to the construction of such environment. This means that for the case of single parenting effects on child's health and challenges they encountered the spouses were contributes to such environment without knowing that it impacts the child's health, physically, socially, psychologically and mentally (Wallerstein, 2005).

In mesosystem; the theory asserts that family experience may be related to school experience since the single parented children have low self-confidence and low self-esteem to interact to their fellows group of classmates and from the study findings the study shown that the single parented children when affected socially and psychologically they tend to isolate themselves and dislike peer groups and friends (Marsigilo and Amato, 2001).

In exosystem the theory asserts that suppose the child is more attached to his father than his mother it may result to a tighter bond between the mother and the child, this is relevant to the study since it has shown that most of single parented children do not have communication with their other second parent whom they don't live with. Also most of them prefer to tell story about only single parent who are living with (Wallerstein, 2005).

In microsystem; the theory believes that the situation is the actual culture of an individual in the sense that if the children will understand the situation they are facing in their style of living they should agree it. This is shown in the study especially to the single parented children who withstand their challenges that individual encounter in their single parenting families and try to work hard in the school in order to pass and become stones in their lives. Also the study has shown that single parented children understand well their situation and context and find the coping mechanisms in order to reach their goal (Urie Bronfenbrenner, 1917- 2005). In the chronosystem; it involves the socio-historical context that may influence a person.

For example one can see how divorce as a major life transition may affect not only the couple's relationships but also their children's behaviors. This has the truth according to the study done, since the findings have shown how the behavior of single parented children have been affected by single parenting physically, socially, psychologically, and mentally. This is due to lack or poor socialization, lack of role model in the family, lack of parental love, care and protection (Urie Bronfenbrenner, 1917- 2005).

Therefore, this theory is relevant to the study since it asserts that biological, social and physical aspects of the organism are considered within the context of their environment, and here to the researcher's view biological, social and physical aspects of the organisms cannot be separated from the health or wellbeing of an individual (Wallerstein, 2005).

#### **4.7 Summary**

This chapter offered data depending on the three research questions that were formed in Chapter one that included; What are the effects of single parenting on child's health; physically, mentally, socially and psychologically in Temeke Municipality?, What are the causes of single parenting in Temeke Municipality?, and How can we control the single parent families situation in Temeke Municipality?.

The findings indicate that according to 50 participants included in the study, according the causes mentioned separation is dominated in the sense that it is the highest major cause of single parenting, followed by divorce, death, personal decisions not to be married, and prostitution. To them raping is minor cause of single parenting according to the study conducted by the researcher.

In general these findings and analysis of the study shown that respondents viewed that it is true that single parenting has effects on child's health physically, socially, psychologically and mentally. According to them single parented children are more affected psychologically, in the sense that psychological effect is dominated followed by social effect, then mental effect. To them physical effect is moral less to affect the health and welfare of the child.

On the other hand the findings show that the greater part of the total population of the study suggested that single parents should set time to spend with their children so that they can understand their feelings as one way of showing parental love, care and protection.

## **CHAPTER FIVE**

### **SUMMARY OF FINDINGS, CONCLUSION AND RECOMMENDATIONS**

#### **5.1 Introduction**

This chapter includes five subsections; introduction, summary of findings, conclusion and recommendations based on the research findings, and recommendations for further research. This study required to assess the effects of single parenting on child's health; physically, socially, psychologically and mentally. Purposely the study required to; to identify the effects of single parenting on child's health, to explore the causes of single parenting, and to examine the ways of controlling single parent families' situation in Temeke Municipality.

Chapter one concentrated on the looking at of the concept of single parenting and its effect on child's health. Chapter two concentrated more on the literature and studies on the effects of single parenting on child's health. It also reviewed the literature on the causes and challenges of single parenting families. Chapter three presented research methodology which include research design for the study. The assorted design method was used where the qualitative and quantitative data were collected and analyzed. Chapter four was restricted in data analysis and discussion of findings.

#### **5.2 Summary of Findings**

The study conducted together with the literature reviewed show that single parenting has effects on child's health physically, socially, psychologically and mentally. Though those effects are more psychological, Social and mental. The study found that physical effects are moral less to affect the child's health.

The study findings show that the major causes of single parenting are separation, divorce, death, personal decisions not to be marriage, prostitution and that raping was seen as the minor cause of single parenting according to the study conducted by the researcher.

In addition to that it was recommended that single parents should set a routine to talk to their children in order to understand their problems and challenges that they encounter so as to make them feel and enjoy the parental care, love as well as protection since these single parented children require the same love, care and protection of their parents being separated, divorced or not married.

### **5.3 Conclusion**

A single parent is one living without a spouse and on whose shoulders lay the higher responsibility of looking after a child. The single parent is the primary caregiver with whom the children have most residencies with. In most situations, it happens after separation or divorce and the mother becomes the main caregiver as the custodial parent, and the father becomes a minor giver as the noncustodial parent. In some instances though, such roles may exchange between the parents (Abudu and Fuseini, 2013).

Single parenthood is a growing trend in today's world; this can be endorsed to increased rates of divorce, separation, mortality amongst parents and individual decisions to be single parents. This has truth according to the LCA No.21 (2009) (1) (a) that asserts that, Subject to the provisions of the Law of Marriage Act, where parents of a child are separated or divorced, a child shall have a right to maintenance



and education of the quality he enjoyed immediately before his parents were separated or divorced.

#### **5.4 Recommendations**

Basing on the research done the following are recommended;

Single parents should set up a routine to spend with their children at home by talking to them in order to understand their feelings and challenges that they encounter in order to overcome them and make them happy. Then these Single parents must support their children emotionally so that they can express their problems and challenges freely to them.

This will help them to reduce stress and enjoy parental love, care and feel like they are protected. The separated or divorced parents should love their children with the same love and concern they use to get before because these single parented children also need same protection, routine, encouragement to learn and support from a loving and trusting parent. Those divorced and separated parents should be educated on the importance of supporting their children and the effects of not supporting them academically, materially and emotionally.

For the spouses, they should be educated on how divorce and separation can affect child's health or well-being. In addition, the Government should set plans to support widows' families and empower them economically in order to improve their life so as to reduce the hardship of life. Also the Government should ensure Policies, laws, rules are followed and implemented properly in order to make sure divorced or separated parents are taking their responsibilities so as to overcome the challenges of

economic hardship to these single parents' families. The more important is that single parents should remain positive as they suffer the pain of death, separation or divorce of their spouses but they should let their children understand that they are not the causes of their parents' difficulties.

### **5.5 Recommendations for Further Research**

The study is better to other researchers on the helpful ways of overcoming the Problems and challenges facing single parent families so as to improve their life situation.

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## APPENDICES

### **Appendix 1: Interview Guide Questions for Children From Single Parent**

#### **Families**

DATE:.....

SEX:.....

AGE: .....

DISTRICT:.....

NAME OF

SCHOOL:.....

CLASS:.....

Whom are you living with?

1.           Where is your father/mother?
2.           Who gives you money for school?
3.    Why are you living with a single parent?
4.    Do you get time to communicate with your parent whom you are living with?
5.    Does the child from single parent family lack happiness?
6.    Do children from single parent families mentally differ from those living with  
both two parents? give reasons
7.    How does single parenting affect wellbeing of a child?
8.    How regular do you communicate with your absent parent/his or her  
relatives/relatives?

9. How does single parenting affect your life?
10. Are the children from single parent families experience the problem of truancy to school?
11. What are the challenges that you are facing as the child from single parent families?
12. What are the causes of single parenting in your understanding?
13. How do children with single parents cope with their home problems?
14. Is there any effect when the child is staying with his or her single parent? mention
15. How do you assess your life before and after being single parent family?
16. Do you get any support from the parent whom you are not living with?
17. What should be done to overcome the challenges facing the children from single parent families?



## Appendix 2: Mwongozo wa Maswali ya Usaili kwa Watoto (Kiswahili Edition)

TAREHE:.....

JINSI:.....

UMRI: .....

WILAYA:.....

JINA LA

SHULE:.....

DARASA:.....

1. Je unaishi na nani?(Kama mzazi mmoja ameshafariki ruka swali la pili)
2. Je baba /mama yako anaishi wapi?
3. Je ni nani huwa anakupatia hela ya shule?
4. Ni sababu zipi zilizofanya ulelewe na mzazi mmoja?
5. Je huwa unapata muda wa kuzungumza na mzazi wako unayeishinae?
6. Je huwa unakosa furaha kwa sababu ya kulelewa na mzazi mmoja?
7. Je ni kweli watoto wanaolelewa na mzazi mmoja kiakili hawakosa wana watoto wanaolelewa na wazazi wote? Toa sababu
8. Kwa jinsi gani malezi ya mzazi mmoja yanaathiri maendeleo ya mtoto?
9. Je ni mara ngapi huwa unawasiliana na mzazi wako ambaye huishinae au ndugu zake?

10. Je ni kwakiasi gani malezi ya mzazi mmoja yanaathiri maisha yako?
11. Je watoto wanaolelewa na mzazi mmoja huwa na tabia ya utoro wa shule?
12. Changamoto zipi unazokutananazo kwa kulelewa na mzazi mmoja?
13. Je sababu gani huwa zinachangia kuwepo na familia ya mzazi mmoja?
14. Je watoto wanaolelewa na familia moja wanatatua vipi matatizo yao wanayokutananayo majumbani?
15. Je kuna madhara yoyote ambayo motto anapata kwa kulelewa na mzazi mmoja tu? Taja
16. Je unayatathimini vipi maisha yenu kabla na baada ya kuwa familia ya mzazi mmoja?
17. Je unapata msaada wowote kutoka kwa mzazi wako ambaye huishinae?
18. Je nini kifanyike ili kukabiliana na matatizo yanayowakabili familia zenye mzazi mmoja?

**Appendix 3: Questionnaire Guide for Single Parents****SECTION I: Demographic Details**

1. Gender: 1. Male

2. Female

☐

2. Age (Years from) : 1. 10-17

2.18-36

3.37-45

4.46-55

5.56+

☐

3. Marital Status: 1. Widow

2. Divorced

3. Spinster

4. Bachelor

☐

4. Education Level: 1. Illiterate

2. Primary

3. Secondary

4. Certificate

☐

5. Diploma

6. Degree

7. Master's

5. Are you employed?      1. Yes   2. No   3. Self-  
employed

☐

## SECTION II: Perception and general questions

6. What do you understand by the term single  
parenting?.....

.....

7. What are the causes of single parenting ?

.....

8. How do you assess your daily life? 1.Excellent

☐

2. Good

3. Poor

4. Normal

9. What are the effects of single parenting?

.....

.....

10. Do you like better your child's attitude or behavior? 1.

Yes 2. No

☐

11. Do you pay a visit to your child's school? 1. Yes

2. No

☐

12. Do you assist your child with school work? 1. Yes

2. No

☐

13. Do you get a help from your ex-husband/ wife/ any other relative?

1. Yes

2. No

☐

14. Who assists you in paying school fees for your child/  
children?

1. Ex-husband/ wife
2. Relative
3. Different people
4. Own

15. Is there any effect for a child to have single parenting?

1. Yes
2. No

16. Is there any difference in behavior between the child  
from single parenting and that with both two parents?

1. Yes
2. No

17. Is there any communication between ex-husband/ wife or relatives and your  
child?

1. Yes
2. No

18. Is the wellbeing of the child from single parenting and  
that with both parents differs?

1. Yes
2. No

19. Are you facing any problems or challenges in single parenting?

1. Yes                      2. No

20. How do you see your child's behavior?

1. Good  
2. Bad  
3. Normal

21. Is there any relationship between single parenting and child's health or wellbeing?

1. Yes                      2. No

### **SECTION III: Recommendation**

22. What do you think should be done to overcome the problems/ challenges of single parenting in Temeke Municipality?

.....

.....

## 2. Msingi



3. Sekondari

4. Cheti

5. Stashada

6. Shahada

7. Shahada ya uzamili

5. Je umeajiriwa?

1. Ndio

2. Hapana

3. Nimejiajiri

☐

## **SEHEMU YA II: Uelewa na maswali ya jumla**

6. Unaelewa nini kuhusu malezi ya mzazi mmoja?.....

.....

7. Je ni sababu zipi kuu ambayo huchangia ongezeko la kuwepo kw amalezi ya mzazi mmoja?

.....

.....

8. Je unayatathimini vipi maisha yako ya kilasiku?

1. Mazuri sana

☐

2. mazuri

3. ya dhiki

## 4. ya kawaida

9. Je ni athari gani anaweza pata motto kutokana na kulelewa na mzazi mmoja?

.....

.....

10. Je unaipenda tabia ya motto wako? 1. Ndiyo 2. Hapana

☐

11. Je huwa unatembelea shuleni kwa motto wako? 1. Ndiyo 2.

Hapana

☐

12. Je huwa unamsaidia motto wako kufanya mazoezi ya shule? 1.

1. Ndiyo

☐

2. Hapana

13. Je unapata msaada wowote kutoka kwa aliyekua mumeo/mkeo/mzazimwenzio au ndugu yeyote ?

1. Ndiyo 2. Hapana

☐

14. Unapata wapi usaidizi wa kifedha kwa ajili ya kulipia karo za shule za watoto ?

1. Aliyekuwa mume/ mke

☐

- 2. Ndugu
- 3. Watu tofauti
- 4. Juhudi binafsi

15. Je kuna athari kwa motto akilelewa na mzazi mmoja?

- 1. Ndiyo
- 2. Hapana

☐

16. Je kunatofauti ya kitabia kati ya watoto wanaolelewa na mzazi mmoja na wale wanaokua na wazazi wote wawili?

- 1. Ndiyo
- 2. Hapana

☐

17. Je una mawasiliano na aliyekua mumeo/mkeo/mzazi mwenzio au ndugu yake yeyote ?

- 1. Ndiyo

☐

- 2. Hapana

18. Je maendeleo ya motto anayelelewa na mzazi mmoja na Yule anayelelewa na wazazi wote hutofautiana?

- 1. Ndiyo
- 2. Hapana

☐

19. Je nimatatizoau changamoto gani unazokabiliana nazo kama mlezi mmoja wa familia?

.....

20. Je unaionaje tabia ya motto wako? 1. Nzuri

2. Mbaya

3. Kawaida

21. Je kuna mahusiano yoyote kati ya malezi ya mzazi moja na afya (maendeleo) ya mtoto?

1. Ndiyo    2. Hapana

### **SHE EMU YA III: Mapendekezo**

22. Nini kifanyike ili kukabiliana na changamoto zinazowakabili walezi wa moja wa familia katika Manispaa ya Temeke?

.....

.....

.....

**AHSANTE KWA USHIRIKIANO WAKO**

## Appendix 5: Questionnaire Guide for SWOs

### SECTION I: Demographic Details

1. Gender: 1. Male

2. Female

☐

2. Age (Years from) : 1.18-36

2.37-45

3.46-55

4.56+

☐

3. Marital Status: 1. Widow

2. Divorced

3. Spinster

4. Bachelor

5. Married

☐

4. Education Level: 1. Certificate

2. Diploma

3. Degree

☐

## 4. Master's

**SECTION II: Perception and general questions**

5. What do you understand by the term single parenting?

.....

6. What are the major causes of single parenting?

.....

.....

7. What are the effects of single parenting?

.....

8. Do you think these two children will be the same in school performance?

1. Yes

2. No

☐

9. Is the child from single parent family mental development differ from that with both two Parents.

1.

Yes

2. No

☐

10. Do children from single parent families have psychological problems than those with

both parents ?

1. Yes

2. No

☐

11. Do children from single parent have mental problems from single parenting?

getting

1. Yes

2. No

☐

12. Do these two children differ in thinking capacity?

1. Yes

2. No

☐

13. Do children from single parenting have the problem of expressing themselves?

1. Yes

2. No

☐

14. Is there any relationship between single parenting and child's health or wellbeing?

1. Yes

2. No

☐

### SECTION III: Recommendation

15. What do you think should be done to overcome problems or challenges of single parenting in Temeke Municipality?.....

**THANKS FOR YOUR PARTICIPATION**

## Appendix 6: Questionnaire Guide for Medical Personnel's

### SECTION I: Demographic Details

1. Gender: 1. Male

☐

2. Female

2. Age (Years from) : 1.18-36

2.37-45

3.46-55

4.56+

☐

3. Marital Status: 1. Widow

2. Divorced

3. Spinster

4. Bachelor

5. Married

☐

4. Education Level: 1. Certificate

2. Diploma

3. Degree

4. Master's

☐



**SECTION II: Perception and general questions**

5. What do you understand by the term single parenting?

.....

6. What are the major causes of single parenting?

.....

.....

7. What are the effects of single parenting?

.....

8. Do you think these children will be the same in performance at school?

1. Yes

2. No

☐

9. Is the child from single parent family's mental development differ from those with two parents?

1. Yes

2. No

☐

10. Do children from single parenting families have psychological problems than those with two

parents?      1. Yes      2. No

☐

11. Do children from single parent families have mental problems from getting single parenting?

1. Yes      2. No

☐

12. Do you think these two children will differ in thinking capacity?

1. Yes      2. No

☐

13. Do children from single parenting have the problem of expressing ?

1. Yes      2. No

☐

14. Is there any relationship between single parenting and child's health or wellbeing?

1. Yes      2. No

☐

**SECTION III: Recommendation**

15.What do you think should be done to overcome problems or challenges of single parenting in Temeke Municipality?.....

.....

THANKS FOR YOUR PARTICIPATION

## Appendix 7: Questionnaire Guide for GCD Police Officers

### SECTION I: Demographic Details

1. Gender: 1. Male

☐

2. Female

2. Age (Years from) : 1. 18-36

2. 37-45

3. 46-55

4. 56+

☐

3. Marital Status: 1. Widow

2. Divorced

3. Spinster

4. Bachelor

5. Married

☐

4. Education Level: 1. Primary

2. Secondary

3. Certificate

4. Diploma

5. Degree

☐

## 6. Master's

**SECTION II: Perception and general questions**

5. What do you understand by the term single parenting?

.....

6. What are the major causes of single parenting?

.....

.....

7. What are the effects of single parenting?

.....

8. Is it true that children who offend and reoffend came from single parenting?

1. Yes

2. No

☐

9. Do you think the parents who are not living with their children provide support to their

children?

1. Yes

2. No

☐

10. Is there any relationship between single parenting and child's health or wellbeing.

1. Yes

2. No

☐

**SECTION III: Recommendation**

11. What should be done to overcome the problems or challenges of single parenting  
inTemeke Municipality?

.....

.....

**THANKS FOR YOUR PARTICIPATION**



**Appendix 8: Questionnaire Guide for Teachers****SECTION I: Demographic Details**

1. Gender: 1. Male

2. Female

☐

2. Age (Years from) : 1. 18-36

2. 37-45

3. 46-55

4. 56+

☐

3. Marital Status: 1. Widow

2. Divorced

3. Spinster

4. Bachelor

5. Married

☐

4. Education Level: 1. Secondary

2. Certificate

3. Diploma

4. Degree

☐



## 5. Master's

**SECTION II: Perception and general questions**

5. What do you understand by the term single parenting?

.....

6. What are the major causes of single parenting?

.....

.....

7. What are the effects of single parenting?

.....

8. Is it true that children from single parenting face academic problems?

1. Yes                      2. No

☐

9. Who are affected the most between girls and boys?

1. Boys    2. Girls

☐

10. Do children from single parenting families differ from other children in academic performance?

1. Yes                      2. No

☐

11. Is there any difference in behavior between children who grew up with both parents and

those from single parenting ?      1. Yes      2. ☐ No

12. Do children from single parenting families express their challenges  
freely to their Teachers to

get a help?      1. Yes      2. No

☐

13. Does single parenting contributes to psychological problems to children?

1. Yes      2. No

☐

14. Do children from single parenting have low self-esteem?

1. Yes      2. No

☐

15. Is there any relationship between single parenting and child's health or wellbeing.

1. Yes      2. No

☐

### **SECTION III: Recommendation**

16. What should be done to overcome the problems or challenges of single parenting  
in Temeke Municipality?

.....

**THANKS FOR YOUR PARTICIPATION**

