Households, public and private domains, kinship

Peter Winch

Health Behavior Change at the Individual, Household and Community Levels
224.689
The multi-level concept in behavior change interventions
The multi-level concept in behavior change interventions

- Starting with this lecture we will be talking more explicitly about the multi-level concept in behavior change interventions
  - Intervening simultaneously on several levels more effective than intervening on one level alone
  - Intervention at higher levels removes barriers to change, facilitates adoption of new behaviors
## Multi-level interventions: Adolescent smoking

<table>
<thead>
<tr>
<th>Level</th>
<th>Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>Increase perceived severity and personal risk of smoking related illness, increase self-efficacy to refuse cigarette offered by peer</td>
</tr>
</tbody>
</table>
| Household                    | Designate no-smoking areas in home \  
                                 | Encourage parents to not smoke in front of children and not offer cigarettes to children                                                |
| Community or county          | No-smoking by-laws for schools and restaurants, community norms re smoking                                                             |
| State/country                | Taxes on cigarettes, laws on sale of cigarettes to minors                                                                            |
## Multi-level interventions: Voluntary Counseling and Testing

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<tr>
<td>Individual</td>
<td>Increase perceived severity and personal risk of HIV, increase self-efficacy to get tested</td>
</tr>
<tr>
<td>Household</td>
<td>Couples counseling on VCT, education of men on benefits of VCT</td>
</tr>
<tr>
<td>Community or county</td>
<td>Community-level actions to lower stigma, provide support for women who may face violence as result of disclosure to partner</td>
</tr>
<tr>
<td>State/country</td>
<td>Open support by leaders for VCT, acceptance of people living with AIDS, role modeling of use of VCT services</td>
</tr>
</tbody>
</table>

See also Kranzer et al. 2008
Final assignment

- Q2: Describe 2-3 applicable models/concepts
- Q3: Describe the components in your plan of action/your intervention. Justify the components included in your plan of action.
- One option is to make table:
  - Levels at which you would intervene
  - Applicable models/concepts by level
  - Describe the actions you would take at each level
  - Justify your selection of these actions
Final assignment matrix for Scenario #2

**Scenario selected**: #2, Micronutrients – refugees

<table>
<thead>
<tr>
<th>Level</th>
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<tr>
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<tr>
<td>Organization (UNHCR, NGOs)</td>
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<tr>
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<td>• Behavior change models</td>
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</tr>
<tr>
<td></td>
<td>• Standards of efficacy</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Self-construals</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Risk psychology</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Etc.</td>
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Select 1-3 concepts or models, not all concepts & models
Final assignment matrix for Scenario #2

**Scenario selected**: #2, Micronutrients – refugees

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<td></td>
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<tr>
<td>Household</td>
<td>Choose from 7 concepts in this lecture</td>
<td></td>
</tr>
<tr>
<td>Refugee camp</td>
<td>Concepts of community</td>
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<tr>
<td>Household</td>
<td></td>
<td>Intervene at this level??</td>
</tr>
<tr>
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</table>
When does it make sense to intervene at the household level?

- Changes to the physical house are needed
  - House reconstruction to decrease Chagas’ Disease in Latin America

- Change relates to production or consumption at the household level
  - HH waste production, energy consumption

- Change relates to how household members interact with each other as a group
  - Family planning, child care

- Household is the all-encompassing institution e.g. Çatalhöyük (discussed later this lecture)
Seven concepts relevant to intervening at the household level
Seven concepts relevant to intervening at the household level

1. **Household as a ‘minimal institution’**
2. Household as site of disease transmission
3. Household versus compound
4. Physical and social organization of the household
5. Public versus private domains
6. Relationship intimacy
7. Household production of health
Concept #1: Household as ‘minimal institution’
Concept #1: Household as ‘minimal institution’

- The ‘minimal institution’, first level up from the individual (Berman et al. p 209)
- The household viewed as the unit of:
  - Production
  - Consumption
  - Waste generation
  - Biological reproduction
  - Social reproduction
  - Risk/disease transmission
Household role in production and consumption

- **Production:**
  - Outside the home locally or distant e.g. remittances from family member working in another country
  - Inside the home: Cottage industry, microenterprise

- **Consumption:**
  - Fossil fuels/greenhouse gases, wood/charcoal
  - Water, food, clothing, health care etc.

- **Waste generation:**
  - Wastewater
  - Solid waste: Organic and inorganic
Household role in reproduction

- Biological reproduction
- Social reproduction
  - Enculturation
  - Provision of education, financial support of education
  - Role models
  - Apprenticeship in occupations
Concept #2: Household as site of disease transmission
Household role in health and disease

- Water-related diseases: Diarrhea etc.
- Undernutrition and overnutrition
- Reproductive and sexual health
- Some disease vectors are primarily domestic, or transmit disease in the home
  - Aedes aegypti mosquito: Dengue fever
  - Reduviid bugs: Chagas’ disease
  - Bedbugs, cockroaches, lice etc.
  - Flies: Trachoma, diarrheal diseases
Bromelias

Key challenge: Perception that diseases do not originate within the home

- **STDs and HIV**
  - Lack of condom use in the home

- **Dengue, malaria**
  - Failure to control domestic sources of mosquitoes

- **Cholera, dysentery, diarrhea**
  - Washing hands after working outside, but not before food preparation etc. inside

- **Zoonotic/animal-related diseases**
  - Household animals not viewed as cause of disease, but suspicion of wild/outside animals
Seven concepts relevant to intervening at the household level

1. Household as a ‘minimal institution’
2. Household as site of disease transmission
3. **Household versus compound**
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Concept #3: Household versus compound
Concept #3: Household versus compound

- Common to make the distinction between house, household, compound
- Usual definition of household for surveys:
  - All those eating from a common pot or cooking from the same hearth
- One household may have several houses e.g. one for parents, one for grandparents, one for children
- One (housing) compound may have several households and many houses
- Surveys typically sample either compounds or households
Houses, households, compounds, lineage groups

Compound 1
HH1
HH2
HH3

Compound 2

Compound 3
Area of one clan/lineage group

HH1
HH2
HH3
### Household and compound

<table>
<thead>
<tr>
<th>English</th>
<th>Household</th>
<th>Compound</th>
</tr>
</thead>
<tbody>
<tr>
<td>French</td>
<td>Ménage</td>
<td>Concession</td>
</tr>
<tr>
<td>Spanish</td>
<td>Hogar</td>
<td>Caserío</td>
</tr>
<tr>
<td>Bambara</td>
<td>Ga/gwa or Du</td>
<td>Du or Ga/gwa</td>
</tr>
<tr>
<td>Kiswahili</td>
<td>Nyumba or Kaya</td>
<td>Kaya or Kitongoji</td>
</tr>
<tr>
<td>Bangla/Bengali</td>
<td>Ghor or Bari</td>
<td>Bari</td>
</tr>
</tbody>
</table>

- While terms exist, they are difficult to use
- Variation in definitions from one village to another, between rich and poor, urban and rural
Defining the household: Are these people HH members? (Berman et al. p 207)

- Adolescent who visits home on the weekends and is maintained economically by the family
- Husband working in another country who sends money home and is main support for the family
- A solitary relative who has her/his own home nearby but eats in the house
Seven concepts relevant to intervening at the household level

1. Household as a ‘minimal institution’
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3. Household versus compound
4. **Physical and social organization of the household**
5. Public versus private domains
6. Relationship intimacy
7. Household production of health
Concept #4: Physical and social organization of the household
Home as sacred space

- Often viewed as sacred, protected, safe
- Home may be organized into areas of greater and lesser intimacy
- Recognition of this is:
  - Removal of shoes, hat/headdress
  - Seeking permission to enter, or pass from one zone to another: May need to wait in limen or threshold
Household organization: Variations along a continuum

- Household of US nuclear family (Current)
  - Parent(s), biological children, pets
  - No one present during the day
  - May also function as workspace, but no production of goods for sale
- Roman *domus* / household (200 BC – 500 AD)
- Neolithic households in Çatalhöyük, Turkey (7400-5700 BC)
Roman household/ *Domus*

- Often taken as prototype of a household with complex, multi-layered structure
- Parents, relatives, slaves, freed slaves and their children
- *Paterfamilias/Dominus* is head of household for the entire group
- Important unit in political, legal and economic senses
- Many social scientists have taken it as model for thinking about households
Plan of a Roman *domus*

Atrium house, 4th century BC in Pompeii

A  Atrium
B  Bedrooms/cubicula
T  Office/Tablinum
D  Dining-room/triclinium
G  Garden
S  Shop
L  Threshold/Limen
Plan of a Roman 
*domus*

Atrium house, 4th century BC in Pompeii

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Photo by Brian J. Geiger.
http://www.flickr.com/photos/ninja-bear/498265676/in/photostream/
Creative Commons BY-NC-SA.
Articulation of public and private domains in Roman households

- **Amici** (Friends, fellow patrons)
- **Familiares** (family members)
- **Liberti** (ex-slaves)
- **Servi** (slaves)
- **Clientes** (Freemen dependent on *paterfamilias*)
- **Paterfamilias** (head of household)
Complexity of Roman and Greek households made household management a model for management of other complex institutions

- Ancient Greek οίκος (oikos)
  - Economics: ‘management of a household’
  - Ecology, eco logic: ‘study of the house’
  - Ecosystem: ‘house-like organization’
  - Diocese (< διοίκησις/dioikesis): ‘Housekeeping’, then by extension management, government, government of a Roman province or church administrative zone
Gendered space and sight lines in the Roman *domus*
Gendered space and sight lines

- Greek and Roman elite houses were built to hide the women of the family from contact with men outside the family.
- Sight lines were constructed so that no one could see the inner quarters of the house from the front door/front room.
Atrium House sight lines

Planning of sight lines in the Roman house protected restricted areas of the house from the gaze of outsiders
Organization of space in traditional houses in Kano, Nigeria


These diagrams were removed because JHSPH OpenCourseWare could not secure permission for their use.
What do we mean by ‘public and private domains’ in the Roman *domus*?

**Public domain**

**Private domain**
What do we mean by ‘public and private domains’ in the Roman *domus*?

- While public and private domains may correspond to actual physical spaces, these domains are better thought of as conceptual spaces:
  - Spaces where the power and authority of different actors are paramount: The Roman State versus the *paterfamilias*
  - Spaces where different systems of rules and laws hold sway
Seven concepts relevant to intervening at the household level

1. Household as a ‘minimal institution’
2. Household as site of disease transmission
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4. Physical and social organization of the household
5. **Public versus private domains**
6. Relationship intimacy
7. Household production of health
Concept #5
Public and private domains
Three very different public-private distinctions

1. **Public sector versus private sector**: Refers to who owns/controls business or company, who is the employer

2. **Public good versus private good**: Refers to who benefits from an economic good, individual only vs. larger society

3. **Public domain versus private domain**: Refers to spheres where different laws, moral sanctions and systems of authority apply
Concept #5: Public and private domains

- Refers to conceptual domains that differ by:
  - Roles of government and families
  - Legal systems/legal sanctions
  - Power and authority of men and women

- Private/domestic domain not the same as household or house
  - What is difference between private/domestic domain and household?
The domestic domain

- It is a sphere of life that ‘encompasses the household and the world where private, moral sanctions hold sway’, differing from the public domain which ‘refers to institutions of the state and society outside of the household, such as political and economic organization’.

### Legal/moral systems in the public and private/domestic domains

<table>
<thead>
<tr>
<th></th>
<th>Public domain</th>
<th>Private domain</th>
</tr>
</thead>
<tbody>
<tr>
<td>Origin of rules and laws</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monitoring adherence to rules</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Punishable transgressions</td>
<td></td>
<td></td>
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<tr>
<td>Punishment for transgressions</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Public domain</td>
<td>Private domain</td>
</tr>
<tr>
<td>------------------------</td>
<td>------------------------------------</td>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>Origin of rules and laws</td>
<td>Rulers, parliaments, courts</td>
<td>Culture/tradition, household head</td>
</tr>
<tr>
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<td>Police, civil servants, courts</td>
<td>Household head, elders</td>
</tr>
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<td>Punishable transgressions</td>
<td>Violence, harm to property</td>
<td>Disobedience, sexual transgressions</td>
</tr>
<tr>
<td>Punishment for transgressions</td>
<td>Fines, jail/prison, capital punishment, expulsion</td>
<td>Withhold money, food, resources; expulsion; domestic violence;</td>
</tr>
</tbody>
</table>
Areas of consistent sensitivity

- Sensitivity in relationship between public health authorities and families, clans, lineages, communities when any of the following occur:
  - Attempts to modify the boundaries between public and private domains
  - Movement of actors from the public domain into the private domain
  - Movement of actors from the private domain into the public domain
Tension between public and private domains

Reassertion of the private domain
- Home schooling
- Home births
- Resistance to regulation of guns, energy use, water use etc. in the home
- Resistance to family planning, vaccination

Intrusion of the public domain
- Entry of vector control or other personnel, application of insecticide, checking mosquito nets
- Promotion of reproduction rights, access to family planning
Careseeking means crossing a threshold

Domestic/private domain → Public domain
Careseeking and the public domain

- ...diarrhea is initially treated as a routine occurrence that is treated within the home and viewed as transitory. If the episode continues, however, a transition is made from an occurrence which exists within the domestic environment, controlled by parents and caretakers, to an episode which becomes public.... One reason parents postpone visits to clinics or healers may be that the visit is an admission of public concern for domestic matters..

– Kendall C. Public health and the domestic domain, 1990
Extending the reach of the private domain outside the house

- Monitoring of activities in the public domain by family/clan/community members
- Private automobiles, mobile homes: Inside the vehicle you are ‘home’, in the private domain
- Covering of women: One (of many) interpretations is that it is a way to keep women within private domain when they venture outside of the house
What is in the public versus private domains?
What is in the public versus private domains?

<table>
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<tr>
<th></th>
<th>USA</th>
<th>Rome</th>
<th>Çatalhöyük</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Cemeteries</td>
<td>Public</td>
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<tr>
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Location of Çatalhöyük archeological site
Seven concepts relevant to intervening at the household level

1. Household as a ‘minimal institution’
2. Household as site of disease transmission
3. Household versus compound
4. Physical and social organization of the household
5. Public versus private domains
6. Relationship intimacy
7. Household production of health
Concept #6: Relationship intimacy
Concept #6: Relationship intimacy

- Feelings of trust, safety, closeness, and transparency among partners in a relationship
- Ability and choice to be close, loving and vulnerable
- Often related to concept of public and private domains
  - Typically less intimacy with individuals in the public domain
Perceived relationship intimacy associated with lower condom use

“Not using condoms viewed as sign of security and closeness” (Sanders 2002)

Perceived risk of HIV/STI decreases as perceived intimacy increases

Use of condoms perceived to be in conflict with desire for connectedness
Relationship intimacy and public/private domains for CSWs in DR

- Qualitative and quantitative studies by Deanna Kerrigan, Laura Murray and collaborators in Dominican Republic
- One component was examining how commercial sex workers categorize and relate to different kinds of partners
- Concern was low level of condom use with regular partners/partners with whom they have greater intimacy
# Relationship intimacy and public/private domains for CSWs in DR

<table>
<thead>
<tr>
<th>Street (La calle): Public domain</th>
<th>Middle: Straddling domains</th>
<th>Home (La casa): Private domain</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex worker-Client</td>
<td>Regular sex worker/client</td>
<td>Wife-Husband (esposo)</td>
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<td></td>
<td>Girlfriend/boyfriend</td>
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<td>Lovers</td>
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<td></td>
<td>Steady partners</td>
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<tr>
<td></td>
<td>Husband (marido)</td>
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</tbody>
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## Relationship intimacy

- Usually lower
- Varied
- Usually higher

## Risk perceptions

- High risk perception
- Varied
- Low risk perception

## Condom use

- High condom use
- Varied
- Low condom use
Relationship intimacy in Dominican Republic (L Murray et al. 2007)

- Negative associations with condom use:
  - Relationship intimacy
  - Being > 27 yrs
  - Being in relationship > 5 months
- Positive associations with condom use:
  - 4 or more partners in last 2 months (Females)
Seven concepts relevant to intervening at the household level

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Concept #7:
Household Production of Health
Common focus is the health facility in analysis of health services

- Health workers
- Supplies and equipment
- Patterns of health care utilization
- Referral system
- But: Is this where health is produced?
Health facility focus in analysis of health services

Training, supervision, technical guidelines
Equipment, salaries, commodities

Health services
- Health workers
- Health facilities

Health
Putting households at the center

Households
- Members and their roles
- Structure

Health services
- Health workers
- Health facilities

Internal resources

External resources

Training, supervision, technical guidelines

Equipment, salaries, commodities

Health
Household Production of Health

“A dynamic behavioral process through which households combine their (internal) knowledge, resources and behavioral norms and patterns with (external) technologies, services, information, and skills to restore, maintain, and promote the health of their members.”

Households placed at the center of health production ➔ not first-level health facilities, district health services etc.
Putting households at the center

Behavioral and biomedical proximate determinants

Household health producing behaviors

Exposure susceptibility Resistance to infection

Health outcomes

Morbidity

Mortality

"Macro" socioeconomic system:
Income
Work
Wealth
Education

Health care system:
Access
Acceptability
Technology
Quality
Interventions implemented at the household level

- Home visits by community health workers
- Reorganization of space e.g. designation of smoke-free zones
- Changes in how food is prepared and shared
- Control of disease vectors e.g. larval habitats of Aedes aegypti
- Changes in water use, handwashing
- Changes in waste disposal, recycling, energy use
Challenges to intervening at the household level

- Defining ‘household’
  - Recognize diversity in households, even within one village
- Understanding its internal organization
  - Physical structure, gendered spaces
  - Members and their roles
  - Power and authority in public and private/domestic domains
- Finding effective ways to work with households
Challenges to intervening at the household level

- Recognize that intrusions into the private domain may not be welcome
- While asserting public interest in the private domain may help us improve health outcomes, this may also:
  - Weaken households
  - Lead to sanctions or physical violence against household members who follow outside recommendations
Kinship and kin terminology
Kinship and Kin Terminology

- Idiom for expressing ideas – “He’s like a brother”
- May be congruent with social hierarchy and relations of power
- Kinship systems are one means of adapting to different environments
Types of descent systems

- Cognatic (Bilateral) – 30%
- Unilineal – 70%
  - Patrilineal – 60% of unilineal
  - Matrilineal – 30% of unilineal
  - Dual – 10% of unilineal
- Morgan defined six types of kinship terminologies
Descent/kinship systems in practice

- In the field, the situation is always more complex than in books
- Patriarchal religion + matriarchal culture can produce many different combinations of residence pattern (patrilocal/matrilocal) and descent system (patrilineal/matrilineal)
- Good to look up description of ethnic group, but always need to verify
Lineage

- “A unilineal descent group whose members trace their descent from a common ancestor through an acknowledged sequence of known linking antecedents” U Manitoba kinship tutorial
Uganda: using patrilineal clans for implementation (Katabarwa 2000)
Houses, households, compounds, lineage groups

Area of one clan/lineage group
Ivermectin distribution for onchocerciasis control in Uganda (Katabarwa et al. 2000)

- Community-based distributors (CBD) initially passed out mass treatment
- Difficulties with remuneration and motivation of CBD
- CBD usually quit when external funding ends
- This led to switch to Community-Directed Treatment with Ivermectin (CDTI): community selects CDDs, organizes and oversees their work
Ivermectin distribution for onchocerciasis control in Uganda (Katabarwa et al. 2000)

- Key change was to define zones based on kinship/traditional support groups *engozi*, rather than government administrative boundaries (p 489)
- Land organized into areas where people are descended from a common male ancestor, land communally owned by the descent group (p 491)
Ivermectin distribution for onchocerciasis control in Uganda (Katabarwa et al. 2000)

- P 491: “Service to one’s own kinship group falls under the division-of-labour and distribution-of-wealth functions of the traditional system. If such service is decided by the traditional kinship institution, it is given happily without question, and without negotiating ‘incentives’, for it is the means of survival of the kinship members.”

- Refusal to support CBDs from other clans, lack of trust in medicines given by CBDs from other clans
P 491: “Avoidance of kinship duties, or refusal to recognize kinship-authority institutions, is a serious offence, with dire, even draconian, consequences. For example, if a member of the *engozi* social-support system does not respond when requested to carry a patient to hospital, he could face an equivalent to U.S. $5.00 or 20 litres of local beer.”
Katabarwa article: What is missing?
Katabarwa article: What is missing?

- Specific ethnic groups these observations apply to
- Variation in size of *engozi*
- Variation in how the *engozi* system functions
- Do some people prefer the modern administrative system over *engozi* system?
Orphans and HIV/AIDS
Orphans and HIV/AIDS

- Children are affected in many ways by HIV/AIDS
- While the needs are enormous, there has been a lot of controversy over terminology, search for the right terms
Orphans and HIV/AIDS: Search for the right term

- Definition of NGOs/government may not match local definitions of orphan
- Some current terms:
  - OVC: Orphans and other vulnerable children
  - Children affected by HIV/AIDS
  - Children without parental care (UNICEF)
Question: Definition in Uganda

- How might definition of orphan differ in parts of Uganda where land organized into areas where people are descended from a common male ancestor, and land communally owned by the descent group?
Question: Status of orphans

- How might status of orphans vary by:
  - Patrilocal vs. matrilocal residence?
  - Patrilineal vs. matrilineal descent systems
Applying these concepts in your work

- Identify the ethnic/linguistic group where you are working
  - See www.ethnologue.com
- Read about kinship system, patterns of residence, household structure
  - Keep in mind that variation between villages can be considerable, and many changes may have occurred recently
- Try to use local definitions for orphans etc.
- Households and descent groups as resource rather than barrier/problem
  - Example: www.grandmotherproject.org