AIDS orphans: facing Africa’s ‘silent crisis’

Families devastated, schools and health clinics overwhelmed

By Michael Fleshman

To the tragedy of the 17 million people who have lost their lives to AIDS in Africa, add the 12 million orphaned children left behind. Traumatized by the death of parents, stigmatized through association with the disease and often thrown into desperate poverty by the loss of bread-winners, this growing army of orphans — defined as children who have lost one or both parents — is straining the traditional extended family and overwhelming national health and education systems in the most severely affected countries. The problem is particularly severe in Zambia, where, according to the US Agency for International Development (USAID), the number of orphans topped 1.2 million in 2000 — 1 in every 4 Zambian children. Of these an estimated 930,000 have lost at least one parent to AIDS.

Housing, feeding, educating and nurturing these children is both a moral imperative and essential to Africa’s development prospects, Mr. Stephen Lewis, UN special envoy for HIV/AIDS in Africa, told Africa Recovery. “There has to be an Herculean effort made for these kids so we don’t lose them.” Otherwise, he cautioned, “you reap the whirlwind.... You have a society where kids haven’t been to school and therefore can’t fulfill even basic jobs ... a society where a large proportion can have anti-social instincts because their lives will have been so hard. You have a generation of children who will be more vulnerable to exploitation and to disease because they won’t have the same sense of self-worth.”

The needs of AIDS orphans are as immediate as their next meal and as extended as access to education, guidance and care until the end of their adolescent years. Speaking to leaders of industrialized countries at the July 2001 Group of Eight meeting in Genoa, UN Secretary-General Kofi Annan appealed for the resources “to care for all whose lives have been devastated by AIDS, particularly the orphans.” The number of AIDS orphans exceeded 13 million globally, he noted, “and their numbers are growing.”

Strengthening the family

In Zambia and other countries hit hardest by the pandemic, however, the traditional mechanism for the care of vulnerable children, the extended family, has started to break down under the twin pressures of poverty and disease.

Reinforcing the family, UN Children’s Fund (UNICEF) Executive Director Carol Bellamy told Africa Recovery, is the only practical response to the crisis. “There are not enough orphanages in this world to take care of these kids,” she noted. “We’ve got to strengthen the extended family.” But a comprehensive 1999 study of what one researcher termed Zambia’s “silent crisis” of orphans revealed just how difficult that can be in practice.

Part of the problem is financial. The pandemic has been both a cause and an effect of the country’s deepening poverty and rising external debt, problems that have pushed many families to the very edge of survival and limited the government’s ability to respond to the orphan crisis. Per capita income, just $490 in 1990, slumped to $330 by the end of the decade, while debt service payments consumed a larger share of the national budget last year than did health and education spending combined.

For many children, the loss of parents brings destitution, an end to schooling and stigmatization by family and neighbours. Despite the mounting death toll, nearly half of Zambia’s orphans live in a household with one surviving parent, usually their mother. The high incidence of HIV infection within marriage, however, means that many children soon lose both parents, and become the responsibility of the extended family. About 40 per cent of these children are raised by grandparents, while about 30 per cent are reared by aunts and uncles.

The consequences for the family, however, can be devastating. One 70-year-old woman raising her 4 grandchildren told researchers that “ever since these children were brought to me I have been suffering. I am too old to look after them properly. I cannot cultivate ... and the food does not last the whole year.”

“It is an unbelievable act of self-sacrifice on the part of the families because frequently it pushes them over the edge,” acknowledged Mr. Lewis. “They have just enough for themselves...
and suddenly they take [in] two kids.... I don’t think anybody imagined the unprecedented assault on the extended family system which has occurred in grievously affected countries. This is just a huge challenge.”

Child-headed households, once a rarity in Zambia, are now increasingly common, but formal and traditional inheritance, land ownership, and health and education policies have not kept pace with their needs. “Our parents both died in 1995,” one young Zambian woman told UNICEF researchers. “When this happened, our relatives ran away from us. This surprised us because, being our relatives, we thought they would care for us.... Our parents had a big farm, but it was taken from us so we had nowhere to grow food. My young brothers and sisters became beggars; they would walk from house to house asking for food.”

Other children are taken in by neighbours, or find a bed in one of Zambia’s very few orphanages or residential facilities. For the rest, there are only the streets of Zambia’s cities, where children, lacking adult supervision and a stable home, survive by begging and petty crime.

Orphans or vulnerable children?
In Zambia, supporting the family’s ability to raise orphans and other vulnerable children has been primarily a community effort. Over the nearly 20 years that the HIV/AIDS pandemic has spread through the country, hundreds of religious and community-based children’s committees and homecare projects have been established to care for the sick and provide counseling and support for orphans and their families. The programmes are as diverse as the communities they serve. But in their various ways, virtually all attempt to help families meet two fundamental needs — food and education.

One of the first challenges communities face is determining what constitutes an orphan and which children should receive extra help. The 1999 study, supported by UNICEF and other donor groups, found that many Zambians consider children orphaned only if they do not live with an adult relative. In some communities children who have lost both parents but are under the care of some other relative may not be presumed to require special assistance unless they also are very poor. Many Zambians prefer the term “vulnerable children” to “orphan” because children with parents are often better off in material terms than those whose parents have died, and are considered equally deserving of aid. The study found that while 75 per cent of orphaned children lived below the poverty line, so did 73 per cent of children with parents.

In one community, an external donor provided school fees and new uniforms for the children. The other students, however, could not afford new clothes. The resulting resentment isolated the orphans from their peers and raised tensions within the community. The same can occur within the extended family itself, where orphans under the care of an uncle may have access to benefits not available to the guardian’s own children.

“When it comes to practical interventions,” the study noted, “there is no useful purpose served by separating orphans from other vulnerable children. In fact, there are significant risks in so doing.”

Part of the challenge facing donors, researchers note, is that many programmes earmark benefits exclusively for orphans — entrenching these “significant risks” in the eligibility requirements.

Land and food
In rural areas, the government, religious and community organizations have worked with traditional leaders to keep vulnerable families on their land, and, where families are no longer able to provide for themselves, create sustainable nutrition programmes with local resources. In rural eastern Zambia, the Kanyanga Orphan Project (KOP) — originally established as an AIDS homecare programme — recognized an urgent need to improve the farming skills and nutrition of families with vulnerable children.

Traditional inheritance customs in the area usually allowed households headed by women and children to remain on their land, and the project initially supplied seeds, fertilizer and tools. When it became clear that families lacked the skills necessary to increase food production, the project hired a trained agronomist to improve agricultural techniques and yields. Originally conceived as a nutrition programme, KOP’s farm project also became an important source of family income, allowing children to pay school fees, thereby reducing the financial burden on the community.

Nutrition projects in other parts of the country, however, have not fared as well. In Kitwe, the local Children in Distress committee (CINDI) established communally tended “orphan gardens” to generate income for vulnerable families and improve nutrition. But the gardens routinely produced less than gardens worked for personal benefit and failed to reduce dependence on donated food rations and other external relief programmes. In the view of UNICEF and other researchers, the community’s inability to hire professional staff, coupled with awareness that relief supplies would make up for low yields in the gardens, contributed to the problem.

The experiences of the Kanyanga and Kitwe nutrition projects reflect strengths and weaknesses in locally based responses to the needs of orphaned and vulnerable children. In both cases, communities identified a need and moved quickly to improvise a solution, drawing on local skills and available resources. But the differences in the outcomes in the two communities point to the need for greater access to outside skills and financial and technical support, and highlight the difficulty of replicating local successes on a wider scale.

Orphans and education
The Zambian government and civil society groups are finding similar challenges in trying to meet the educational needs of orphans and other vulnerable children. Although communities, parents and children themselves identify education as critical, the study noted in 1999, “It is perhaps in the area of education that government, donors and the development community have failed...
the Zambian child the most.” Zambia’s financial difficulties do not allow the government to provide free education. The government pays teachers’ salaries, but local school management committees must cover operating costs by charging enrolment fees and setting requirements for uniforms. As a result, an end to education is often an early consequence of orphanhood and the loss of family income.

Children from poor families are most vulnerable. “Our records show most of the orphan children stopping school are those coming from poor families,” noted a school headmaster in Katongo, Isoka.

In an effort to keep children in school, communities have developed three types of responses. The first is to lobby local school management committees to waive fees for the most vulnerable children. These efforts are often successful, but inevitably undermine the financial base of the school. At the Chimwenwwe school in Kitwe, for example, fees were waived for 400 of the school’s 1,500 students, reducing the operating budget by nearly a third.

A second community strategy is to raise money for orphans’ school fees. Bursaries have the advantage of keeping schools solvent, but usually compel local committees to design and manage successful income-generating projects. With notable exceptions, however, communities often find they lack the management skills, start-up capital and marketing opportunities to run projects profitably. In many cases, community-initiated income projects lose money and drain volunteer committees of limited time and energy. Zambian government, donor and NGO advocates agree that improving communities’ ability to generate operating revenue is vital, but it remains a long-term goal.

A third approach is the Open Community Schools programme — community-run schools without fees or dress codes created for vulnerable children using volunteer teachers, donated space and a curriculum that compresses the first six years into just three. Initially launched as an innovative government-community partnership to provide education to orphans and other vulnerable children, the schools were intended as adjuncts to the public school system rather than alternatives. Students were expected to return to the state system at year seven.

The success of the open schools triggered a rapid increase in their numbers, but often at the cost of educational quality. The reliance on volunteer staff meant that teachers were often absent, and left the school entirely when paid employment became available. As important as such stopgap measures are, educators argue, only a national system of free and compulsory public education can equip the next generation with the skills needed for development.

**Institutionalizing responses, not kids**

The Kaoma Cheshire Home serves an area with the largest number of orphans in the country and is among the few programmes to provide institutional care for infants orphaned by AIDS. Yet it too aims to return the children to their communities as soon as circumstances permit, usually between the ages of two and three.

If there is consensus among advocates and service providers about the dangers of institutionalizing orphans and other vulnerable children, there is equally broad recognition of the need to systematize and coordinate international, national and local responses. This role is increasingly being assumed by the Zambian government, with support from UNICEF and UNAIDS. At the national level, the Department of Public Welfare coordinates a steering committee of NGOs, civil society organizations and community-based providers to identify needs, direct technical and material resources where they are most needed and develop a policy framework that responds to the complex needs of orphans and vulnerable children.

There are also efforts under way to better use the resources of Zambian civil society groups, which have long grappled with the orphan crisis and accumulated valuable experience in mobilizing people throughout the country to become involved. But unless a major increase in financial, technical and human resources occurs, said Mr. Lewis, the future of Africa’s orphaned children is bleak.

“So many of the kids have gone through the desperate, traumatic ordeal of looking after a mother who literally dies in the child’s arms,” he observed.

“They feel so abandoned. The little ones, the 4 and 5 and 6-year-olds, with these great big eyes, their little voices engaging you in this quiet whispered conversation — and you’re trying to figure out what can be done for this seemingly endless roll-call of children. Communities try to make arrangements where kids can spend some time together, to have one meal if they can manage. But it’s all very fragile.... Communities are so [besieged] by the dying and the death and the poverty,” he noted, “that there just isn’t enough time and concern focused on orphans, and there must be.” Sometimes, he concluded, “it can be emotionally overwhelming.”