The Challenge of Responding to Children Affected by AIDS

• Our concern is children and their needs – especially the stranglehold that HIV and AIDS exert on the survival and well-being of millions of children and their care-givers
• The AIDS crisis is sweeping through many societies like a gigantic, relentless tsunami
• The situation of children shows the enormity of the challenges we face in creating a world fit for children
• Progress is being made but for millions of children the progress is too slow
Why Focus on Children?

• Because the AIDS epidemic creates extraordinary high risks for them
• Because the crisis for children is occurring here and now
• Because the global commitment to protect and support AIDS-affected children remains tragically insufficient
The Magnitude of the Problem

• Globally, at the beginning of 2007
  – 2.3 million children below the age of 15 were infected with HIV
  – 15.2 million children under 18 had lost one or both parents to AIDS
  – millions more had been made vulnerable.

• Because of AIDS, children in Sub-Saharan Africa are becoming orphans at the rate of almost 2,500 each day or more than 100 each hour
Orphans and Children Living with HIV

<table>
<thead>
<tr>
<th>Country</th>
<th>Population</th>
<th>Orphans (0 – 17) all causes</th>
<th>Orphans (0 – 17) due to AIDS</th>
<th>Children (0 – 14) living with HIV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Botswana</td>
<td>1.8 million</td>
<td>150,000</td>
<td>120,000</td>
<td>14,000</td>
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<tr>
<td>Malawi</td>
<td>12.9 million</td>
<td>950,000</td>
<td>550,000</td>
<td>91,000</td>
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<tr>
<td>Zambia</td>
<td>11.7 million</td>
<td>1,200,000</td>
<td>710,000</td>
<td>130,000</td>
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Scope of the Problem

• Orphanhood is a state that is lasting for the child and for society
• It is not a one-off event like a death or an accident
• An orphaned child needs care and support for a decade or longer
• Hence we must be prepared to support orphan programmes for twenty years or more
• Orphans are like the eyes of the hippo peering over the water: underneath there is the hippo’s huge body, the millions of other children who are affected by HIV and AIDS
Children who are Vulnerable

- Children whose parents are alive but have HIV or AIDS
- Children in households where there is AIDS, but the parents are healthy
- Children in a household where there are no adults
- Children in a household where there are only elderly care-givers
- Children in households caring for other orphans
- Children in households no longer able to look to wealthier relatives for assistance in time of need
- Children who are exploited for their labour
HIV/AIDS Compromises the Basic Human Needs of Affected Children

- Much economic insecurity
- Difficulty in meeting basic human needs for food, health care, education
- Emotional concerns: much trauma, worry, sadness, fear, pervasive sense of helplessness, unhappiness and distress
- Parents’ reduced time and capacity to provide the routine attention, stimulation, nutrition, health care, love and nurturing needed for the development of their children
Other AIDS Consequences for Orphaned Children

• Stigma, discrimination, taunting
• Malnourished and underweight
• More likely not to be in school
• More likely to work more than 40 hours a week
• Some may end up as street children
• Exposed to risk of sexual abuse
• At higher risk of becoming HIV infected
Emotional Burdens Placed on Children whose Parents have AIDS

• Caring for a sick parent
• Silence and secrecy about the illness
• Deprived of time to grieve
• “Allocated” to relatives’ families without being consulted
• Separated from siblings and familiar surroundings
Children Look after Parents with AIDS

- Becoming an orphan is slow and painful
- Caring for a parent who requires food to be cooked or water to be brought is one thing
- Caring for a parent with severe diarrhoea or declining mental function is quite another

Photo: TASO
Are Families and Communities Coping?

- On the surface, yes. There is unprecedented heroism and generosity, especially on the part of women.
- But AIDS brings the problems of:
  - deepening poverty
  - making less go further
- Many households affected by HIV/AIDS do not cope.
- On the contrary, they break up and their members – orphans, widows and the elderly – join other households.
- *The poor help the destitute by sharing what they cannot afford* – clearly not a good model of coping.
- In reality many families are coping neither with the way HIV/AIDS increases poverty nor with orphans.
The Elderly

- Burden of caring for children and orphans is falling increasingly on the weaker members of society – the elderly, grandparents, the poor, those who themselves experience indifferent health.
- There are very few systems in place to help these elderly care-givers cope with the economic, caring and psychosocial demands that are being placed on them.
- Who will care for these elderly care-givers when they are no longer able to care for themselves or their dependants?
How can a lone elderly grandmother provide physically, socially and emotionally for many young children?
It may be even more difficult for a lone grandfather
But he has managed!
Impacts on Girls

• Taken from school to assist in range of household duties (child care; home management; accompanying person going to clinic; roadside selling; agricultural tasks)

• This leads to a double loss for girls:
  - School education that can reduce vulnerability to HIV infection
  - The better economic prospects that education can bring

• May have to contribute to household survival by being “married off” at early age, selling sex, working as house servant, other child labour
Listen to Children

• Their sadness and grief
• The pathetic maturity required of them in their immaturity
• The love that they miss
• The shock, denial, anger, anxiety, self-blame and bargaining they experience as they try to cope with grief and loss
Fridah Cubby was born in Kitwe in 1991.
Her mother died in 1999.
She wants to be a lawyer.
Fridah tells her own Story

• When my mother was sick, I looked after her.

• One day she was very ill and I found a taxi to take her to the hospital. She died in the taxi on the way to the hospital.

• Before she died, she said goodbye and kissed me. She said, “You should concentrate on going to school”.

• That was the last thing my mother said to me. … I really loved my mother. I still love her. I miss her very much.
George Munsanje was born in the eastern part of Zambia in 1991. His father died in 2001. George wants to be a pilot.
George’s Story

• My father was a bus driver. He was short and a bit fat. He was a happy man and did not beat me.

• When my father was dying, he told my mother to look after us. We were all in the house. I was very angry because I didn’t know why he was talking like this. Then my father said, “Take me outside, I want some fresh air.” After a little while, he said, “Take me back in the house, it’s finished”. We took him inside the house and then he died. I saw my father die. I was angry and I cried.

• When my father died, my father’s relatives took everything from the house. My mother couldn’t do anything to stop them.
Melody Sinkala was born in Lusaka in 1990.

Her father died in 2000.

Melody wants to be a nurse.
Melody’s Story

• My father died in 2000 after being sick for five years. I helped to look after him. When he needed water, I used to fetch it for him. I also went to the market to buy his medicines.

• My father often said that he was dying. He told me that when I grow up I should look after my relatives and not separate from them. I did not feel good when he told me this but I knew my father was trying to help me understand. It made me very sad and I would cry.

• I think if my father were still alive he would look after us well. He would buy us food, clothes and shoes, which we don’t have now.
What the Stories Tell Us

• Children are the same everywhere
• AIDS is depriving children of the irrereplaceable love, affection, emotional security that they get from their parents
• While it is important to respond to children’s physical needs, it is equally important to respond to their emotional and psychological needs
• The epidemic is imposing an intolerable burden on children
The Child’s Right to Happiness

- AIDS snatches their childhood from many children
- It transforms them into adults before their time – juvenile adults who must care for the sick, generate income (including by selling sex), head households, assume responsibilities beyond their years
- The epidemic is relentlessly depriving children of their right to rest, leisure, play – their right to happiness
How Would a World Free of AIDS Look?

• It would be a world filled with children who are healthy, happy and laughing – everywhere, in every country
• When the sound of healthy, happy, laughing children fills homes, townships, villages and schools, then we will have conquered AIDS
• We will have rolled back poverty and put an end to child abuse
• We will have established a society where every individual can live a life of dignity and fulfilment.
What We should be Trying to Do for Children

• Make it possible for people to provide for themselves, their families and their children, and to have access to health and education services
• Halt the preventable growth in orphan numbers
• Build a protective and stable family environment for every child
• Ensure a decent life for every child (whether the parents are alive or dead)
• Make sure that every girl can get into school, stay in school and learn in school
What is Ireland Doing for Children?

• An excellent job – through support coming from public and private sources, through government, civil society, missionary, and volunteer channels

• The Irish Government has made a formal commitment to increasing support for programmes that address the needs of orphans and vulnerable children, and that assist families and communities who care for children who have lost parents

• It has earmarked up to 20% of additional resources for HIV and other communicable diseases to support vulnerable children
What More Could We be Doing for Children?

• Learn about, support and demand accountability from the government in its efforts
• Keep children’s issues high on the agenda – state, church, civil society, media
• Give voluntary service for children – through government, the Irish Volunteering Service, civil society and mission-related bodies such as Sli Eile
• Support child-related efforts of Trocaire, Concern, Goal, Oxfam, UNICEF, Zambia Orphans of AIDS, HelpAge, VSO, missionary bodies
A Thought to Take Home

• “Our lives begin to end the day we stop talking about things that are important” (Martin Luther King)

• Every one of us needs to maintain an unflinching devotion to doing something about the havoc the AIDS epidemic is wreaking in the lives of children, so that we can help in creating a brighter future for millions of children

• Only in this way can we be true to the common humanity that binds us all together
Go raibh mile maith agaibh

Zikomo kwambili

Thank you