

Economic Strengthening at the Core of Orphan Support

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The sheer quantity of children being affected by HIV/AIDS in Africa is staggering. An estimated 13 million have lost either one or both parents¹. As the overwhelming majority of orphans and other children affected by HIV/AIDS are living with immediate or extended family members, the safety and well-being of these children depends largely on the ability of these relatives to protect and care for the expanded household. Without economic strengthening, many households and communities are unable to access basic health care and appropriately care for orphans and vulnerable children.

Project HOPE, an international non-profit health education organization, is conducting a five-year program to provide sustainable economic strengthening for families caring for orphans and vulnerable children (OVC) in Mozambique and Namibia. Project HOPE's approach to expanding the coping strategies of households that are supporting and caring for OVC combines economic strengthening activities with targeted education and improved access to OVC services via community volunteers.

The intervention has three components. The first component provides micro-loans to caregivers to engage in small-scale business activities which will generate increased income and financial resources. The second component provides the caregivers with education and access to information and resources to help them support the needs of all children under their care, including orphans. This education encompasses a variety of domains including household nutrition, health, parenting skills, and bereavement guidance. The final component establishes a community-based network of volunteers that can give on-going support and assistance to caregivers and orphans by providing peer counseling and referrals to specialized services.

A baseline survey was conducted using a stratified random sampling methodology (Lot Quality Assurance Sampling) with 95 randomly selected households in targeted districts with high HIV prevalence. The survey focused on coping strategies of caregivers and needs of OVC. In Namibia², the majority (95%) of caregivers of orphans are in economically active households. Furthermore, much higher proportions of households are caring for orphans than official statistics suggest, with 76% of households surveyed in these targeted districts caring for orphans. Caretakers reported that 34% of the children in their households had lost one or both parents, as compared to the officially reported national rate of 11%. Households caring for orphans were caring for an average of 2.5 orphans.

^{1,4} USAID, "Sub-National Distribution and Situation of Orphans: Countries Targeted by the President's Emergency Plan for AIDS Relief", 2004

² Data from the Mozambique survey are not yet available.

The overwhelming response from families caring for OVC focused upon the economic demands of the expanded household and its impact on all aspects of their lives: inability to purchase the quantity of food they need, difficulties in paying for school fees and uniforms, inability to access needed health services because of high cost, and other related constraints. Fifty-six percent of households in Namibia reported their income was not sufficient to meet their needs for more than 3 months in the past year, with over 25% having to sell assets in order to have money. Over one third of households in Namibia could not seek medical services when they needed to, almost always due financial reasons (86%). Additionally, only 41% of teenagers in Namibia had 4 or more meals in the past two days.

Finding from Project HOPE's program have implications for employees and employers in areas heavily impacted by HIV/AIDS. A sizeable proportion of the workforce is likely responsible for the support and care of OVC. Employees may be directly caring for orphans within their household or providing economic support to the caregiver. Project HOPE found that 89% of orphan caregivers in Namibia are relying upon regular receipts of cash and goods. In either case, the income earner is critical to the quality of care through their contribution of resources. The obligations and needs of the extended household may affect workforce productivity. Recognizing and responding to these challenges through collaboration and linkages with organizations that can provide assistance and support to help individuals and households address the needs of OVC will likely yield a more productive workforce and help strengthen prospects for the next generation. Project HOPE and others are leading the way in helping AIDS orphans through economic development.

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Children in Namibia drawing how they see themselves now and in the future