A Zambian Village Reaches Out to Its Own

IT’S MID-MORNING IN THE Zambian village of Mwenda, and the scene could be lifted straight out of a storybook. Barefooted children play around huts with thatched roofs, chickens run helter-skelter, and residents go busily about their work, farming and fishing to sustain a simple but rich way of life. But take a closer look and a different village emerges: one struggling to take care of its own as AIDS cuts a swath through the countryside.

Mwenda’s neighborhood health committee, a group of volunteers who work with a nearby clinic to improve both village health care and villagers’ knowledge of health practices, acknowledges that HIV/AIDS is its greatest challenge, and has taken steps to educate the community. But the village’s most pressing need may be to provide for the children orphaned or otherwise affected by the epidemic. An estimated 572,000 Zambian children currently under age 15 have been orphaned by HIV/AIDS, and their ranks are projected to grow to 836,000 by decade’s end.

Many of these children are faced with the responsibility of caring for younger siblings and earning income for the household, as their parents succumb to HIV/AIDS and are no longer able to work. When illness hits, the children are no longer able to attend school and spend their days toiling in the fields, often without assistance from extended family members or neighbors who fear contact with AIDS-affected families.

Mwenda is fighting for its children with assistance from the Zambia Integrated Health Program, a joint effort between the U.S. Agency for International Development (USAID) and the Zambian Central Board of Health to strengthen health care for people in rural and remote areas. The program helps the village by providing HIV/AIDS education materials and training neighborhood volunteer educators.

“In the last two years I have been involved, we have seen an improvement in people responding to HIV/AIDS education, and we have helped many orphans,” says David Numu, chairman of his neighborhood health committee. “Our village farmers donate proceeds from the sale of beans to help the orphans, and we work to find them a home with family or neighbors.”

With the assistance of village chiefs and religious leaders, neighborhood health committees hold classes on ways to prevent HIV/AIDS and the importance of supporting orphaned children. One committee has even started a drama club that puts on weekly anti-AIDS performances.

Numu says the community’s efforts are starting to pay off: “We have seen an increase in the number of people coming to the clinic asking for condoms and information on HIV/AIDS prevention.” He hopes to be as successful with HIV/AIDS education as the village was with malaria outreach. “We held classes on how to clear away high grass and stagnant pools, and so many people are buying mosquito nets there is still a shortage, ” he explains. “Changing someone’s behavior takes time. But we know we can do it.”