



Chapter 28

Mitigation

1. Introduction

As previously indicated, this chapter serves as a bookmark.

2. Why mitigation is important?

Although this chapter utilizes the issue of orphans and vulnerable children as an example of critical mitigation needs, it should be noted that mitigation analyses and efforts should be expanded to all sectors (with respect to human resources and planning issues), gender issues, legal frameworks (property rights, etc), and expanded to elderly populations caring for grandchildren, among others.

- **The huge scale of the problem.** More children have been orphaned by AIDS in Africa- about ten million by the end of 2001- then anywhere else. The deep rooted relationship systems that exist in Africa, extended-family networks of aunts and uncles, cousins and grandparents, are an age-old social safety net for children that has long proved itself resilient even to major social changes. This is now unraveling rapidly under the strain of AIDS and the soaring numbers of orphans in the most affected countries.
- **An AIDS-weakened infrastructure.** The impact of the epidemic is felt through out communities and societies, as teachers and farmers, trained health care personnel and workers from all parts of the economy have died and continue to die in enormous numbers. As those dying are usually in their most productive years, many schools, hospitals, private industries and civil services are short staffed. The drain on virtually all segments of communities and nations means that insufficient orphan resources or services remain and fewer can be produced or provided to those in the front line of orphan care.
- **The vulnerability of orphans.** Children who are orphaned by AIDS are often the first to be denied education when their extended families cannot afford to educate them. Children who are orphaned by AIDS may also not receive the health care they need, and sometimes this is because it is assumed they are infected with HIV and their illness is untreatable. Orphans of AIDS are at far greater risk than their peers of eventually becoming infected with HIV. Often emotionally vulnerable and financially desperate, orphaned children are more likely to be sexually abused and forced into abusive situations, such as prostitution, as a means of survival.
- **Grief before death and the tragedy of losing both parents.** A child whose mother or father has HIV begins to experience loss, sorrow and suffering long before the parent's death. Children who live through their parent's pain and illness frequently suffer from depression, stress and anxiety. Many children lose everything that once offered them comfort, security and hope for the future.
- **The AIDS stigma.** the distress and social isolation experienced by children both before and after the death of their parents are strongly exacerbated by the shame, fear and rejection that often surrounds people affected by HIV/AIDS. Because of this stigma and the often irrational fear surrounding AIDS, children may be denied access to schooling and health care.

2. What can individual countries do to protect their children?

- **Mobilize political will and reallocate national resources.** Visible and influential leadership is essential to help societies overcome fear and stigma associated with HIV/AIDS infection.
- **Stimulate and strengthen community-based responses to orphan care.** NGOs and community based partners should be supported with technical assistance, policy and planning guidance, training and resources. Community-based care and support are varied; substitute and foster care families, since they are the ones who care for children when family members are not available on an informal or formal basis, child-headed households consisting of children 'parented' by an elder sibling and orphanages - all play an important role in the way to respond.
- **Capacity building of families and communities to care for and support orphans.** Families provide the best environment for bringing up children and, if adequately supported, they will be best able to provide the care that children orphaned by AIDS require. This support should encompass improved access to basic services, including health care, safe water and sanitation and education, as well as assistance with childcare. Policies must be designed to prevent families with orphans from sinking into deep poverty. This may be in the form of income generating activities, small business cooperatives, vocational training and micro-credit schemes. Keeping orphans in school is especially crucial in breaking the poverty cycle.
- **Ensure the government protects the most vulnerable children.** Government commitment to AIDS education and prevention efforts for young people is crucial. Governments also should review and reform laws and policies dealing with children and women, especially the most vulnerable because the deaths in the family commonly leave orphans and widows at risk of losing their inheritance and property rights- often their major sources of income and food. Government monitoring of the impact of HIV/AIDS on children and families is also very important in planning the interventions and determining their effectiveness. Accurate information on the numbers of children orphaned, where they are, the circumstances of their lives and the nature of their needs is vital as an advocacy tool; this information can also help raise awareness about the social impact of AIDS and promote realization of children's rights.
- **Build the capacity for children to realize their rights and fulfill their needs.** It is essential to address the emotional needs of children devastated by their parent's deaths from AIDS. Where possible, emotional support through individual and family counseling should be given to children as well as to their families before the parent's death. Parents with HIV/AIDS must also be helped to come to terms with their approaching death and to plan for their children's welfare.

3. Lessons learned and recommendations

- Comprehensive and long-term efforts are needed to mitigate the impact of HIV/AIDS on vulnerable populations
- Efforts to strengthen social safety nets that support orphans and other vulnerable children require a range of interventions that vary both between and within countries
- Programs, particularly with respect to orphans and other vulnerable children, are commonly initiated late in the course of the epidemic, on too small a scale, and have largely been fragmented and short-sighted in their response

- Programs should not single out AIDS orphans in the provision of services but deal with all orphans and vulnerable children
- Institutionalized care for the majority of orphans and other vulnerable children is neither a developmentally ideal nor a financially viable option

Community members should play a key role in determining individuals at greatest risk and in validating what constitutes an appropriate responses and form(s) of assistance

- **Interventions need to be carefully chosen** to address the specific risks faced by orphans in a given country environment and strengthening the existing community coping strategies, rather than supplanting them.
- **There is no single “best practice” option applicable to all countries in all circumstances.** The program choice and the targeting method depend on the country circumstances and the nature and intensity of the problem. For example, in countries like Benin, Gabon, Nigeria, and Togo, many vulnerable children are reportedly being bought and sold for their labor in neighboring countries. Providing care for these children requires a different approach than caring for orphaned children in regions where community structures are still strong.
- **“Fostering” of orphans by relatives is more common in the African socio-cultural setting than most other options.** This is an option that is most prevalent across much of Africa. Orphans are being looked after by the extended family or friends and relatives to the orphans. However, care needs to be taken that fostering does not lead to child abuse.
- **To promote “fostering” in countries in normal or post-conflict country conditions, both direct subsidies and indirect subsidies (such as education fee waivers and food supplements) have a role to play.** Indirect subsidies such as education waivers are preferable because they can be easily monitored to ensure that they benefit the orphan. This minimizes leakage and can be backed by community policing and oversight by NGOs or religious groups. A community driven approach to targeting orphans make sense for identifying orphans and delivering such assistance.
- **Since the families fostering orphans are themselves likely to be poor and vulnerable, efforts to provide income-generating schemes have found success in some countries such as Uganda and Eritrea.** They are unlikely to be effective, however, unless supported by charismatic leadership and followed up with training and marketing support.
- **In countries where orphans are in large numbers and community and household fostering has reached its limits, the case for wider institutional innovations such as children villages appears strong.** There are examples in Eritrea, Uganda, Zambia and the challenge is to keep costs down.
- **Orphanages are very expensive and assessment results show that the children feel stigma.** However, orphanages cannot be ruled out in urban settings. Even for rural settings, the concept of orphanages could be converted to African rural setting by locating “children’s homes” in villages with significant community oversight . Group homes for children such as in Eritrea have been found to be successfully raising orphans towards normal life in villages.

4. HIV/AIDS Mitigation bookmark questions

Social capital

- What are the major elements of social capital?
- What examples of good practice are there in building social capital?
- What resources materials exist for social capital programs?
- What organizations in different countries offer training in social capital analysis and strengthening?
- What are the major costs and sources of support for social capital building programs?
- What are the major lessons of implementation experience in social capital programs?

Community psychosocial support

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Food security

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Household income

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