

Study Says Global AIDS Response Fails to Meet Needs of Children
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A new report says the global response to HIV/AIDS has failed to meet the needs of millions of children and their families. It recommends new approaches to simultaneously address HIV/AIDS, poverty, food insecurity and social inequity.

The report is called Home Truths: Facing the Facts on Children, AIDS and Poverty. It's a two-year study done by an independent alliance of researchers, policymakers, activists and others called the Joint Learning Initiative on Children and HIV/AIDS.

A co-chair of the alliance is Jim Yong Kim, director of the FXB Center for Health and Human Rights at Harvard University.

"This is a global report. But we focused primarily on the countries of sub-Saharan Africa that are confronting a severe AIDS epidemic," he says.

The report finds that families provide the best care for children. Yet despite bearing up to 90 percent of the cost, they receive little or no financial assistance from governments.

It also finds that extreme poverty is a barrier to the increase of AIDS services. And while HIV infection rates are often highest among women and girls, not enough is being done to address the social conditions and norms that make them more vulnerable.

Kim says that while AIDS treatment and prevention have "revolutionized" the approach to health care in developing countries, a new direction is still needed.

"The re-direction of the AIDS response to serve families and communities, especially in those communities that are hardest hit, can be the motive for strengthening health services and social protection for the poorest and most vulnerable, especially the children and their families," he says.

The two-year study looked closely at HIV infection rates among children.

"So, what did we find when we looked at how children are faring in this epidemic? Statistics show that, one, over 90 percent of the more than two million children living with HIV are infected before or during birth. Yet, only one in three pregnant women with HIV in low and middle-income countries gets the treatment they need to help prevent infection of their babies. And still, only a very small proportion of children living with HIV receive the life-saving anti-retroviral treatments," he says.

What's more, fewer than 10 percent of children born to HIV-positive women are tested for the AIDS virus before they're two months old.

The report also finds that most children labeled AIDS orphans in sub-Saharan Africa actually have a surviving parent or other family member willing to care for them. But those potential caregivers often lack the basic resources to give the children what they need.

Kim says, "Resources, though, are currently not reaching the families that need them. And in the most severely affected region families and communities pay 90 percent of the financial cost of caring for children affected by the epidemic with little or no assistance from government."

Extreme poverty is blamed for blocking their access to AIDS-related programs, with over 60 percent of children in sub-Saharan Africa living in poverty.

Kim says, "In countries in which HIV is endemic, the disease impoverishes entire communities. When we make relief too narrowly AIDS specific, we miss a large portion of children impoverished by the epidemic. In fact, only providing benefits for people living with HIV or with family members, who are living with or die from HIV, is probably counterproductive. It can create stigmatization and abuse for those in need of help."

Kim says family care is always preferable to institutional care, such as orphanages.

The Joint Learning Initiative on Children and HIV/AIDS recommends greater financial support for children and their families; a greater focus on children's needs, not their HIV status; ensuring the physical safety of girls and women at school, on public transport and places of recreation; and addressing behavior and attitudes that encourage sexual abuse.

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