

NERCHA'S intervention on Orphaned and Vulnerable Children

Ensuring food security for orphans and vulnerable children in Swaziland

1. BACKGROUND

The HIV prevalence rate in Swaziland is amongst the highest in the world, having reached 38.6% of the adult population (MOHSW, 2003). With 66% of households in Swaziland already living below the poverty line, the impoverishing impacts of HIV/AIDS will result in many falling deeper in to poverty. UNICEF has estimated that there are approximately 60,000 orphans in Swaziland, with approximately four children per household and an average age of 11 years old. As many as 15,000 households are headed by children, with no resources or skills to provide for their basic needs. The growing number of child headed households in Swaziland indicates that the extended family is finding it increasingly difficult to take on the additional financial burden of feeding and caring for orphans. It is these most vulnerable children that NERCHA is targeting through its orphan care programme.

With the number of orphans projected to reach 120,000 by 2010 there is an urgent need to find a rapid, cost effective and sustainable way of providing OVCs with access to food as well as adequate care and support services. The NERCHA Directorate has divided the response to the epidemic in to three core areas; these being prevention, impact mitigation, and care and support. The care of orphans and vulnerable children (OVCs) falls under impact mitigation and has been divided in to four components, these being food security, socialisation, psycho-social support and economic empowerment. This paper will discuss how each of aspect of the response is being addressed in Swaziland, with a focus on the mechanisms through which such services are delivered to OVCs at the community level.

2. INDLUNKHULU PROJECT

NERCHA strives to utilise existing structures to deliver HIV/AIDS services wherever possible. In the provision of orphan care at the community level, NERCHA has chosen to deliver services through the Chieftaincy system. The Kingdom of Swaziland is divided in to 368 Imphakatsi or Chiefdoms. This is the most basic level of societal organization in the Kingdom and the structure that rural households will first turn to when in need of assistance. To address the urgent need to provide OVCs and in particular child

headed households with access to food, the traditional concept of Indlunkhulu is being revived.

Indlunkhulu is a Siswati term that refers to the provision of food from the Chief's fields for members of the community that are unable to support themselves. In Swazi law and custom, Chiefs are responsible for the welfare of orphans within their area. Although this responsibility had fallen away in many Chiefdoms, the concept provides an existing basis on which to build a sustainable mechanism for the delivery of food to orphans and vulnerable children.

Over 150 Chiefdoms responded to NERCHAs initial request, made in 2002, for Chiefs to re-establish Indlunkhulu fields. After being sensitized to the needs of OVCs within their community, each Chieftaincy appointed a committee to be responsible for coordinating the Indlunkhulu project. In addition to a Chief's representative, the Chieftaincy committee includes a representative from the church, male and female youth, women's traditional regiments, schools, community police, rural health motivators, the agricultural extension service and local NGO community. These groups were selected for their existing involvement in the welfare of children. The first task of the committee, once appointed, is to compile a register of all OVCs eligible for feeding in the Chiefdom. A principle of HIV/AIDS care and support in Swaziland is that all citizens have an equal right to access HIV/AIDS services. The committee identifies all orphans and vulnerable children that require assistance with feeding, not only those whose parents are known to have died of HIV/AIDS related illnesses.

The NERCHA Directorate is responsible for coordinating and facilitating the national response to the HIV/AIDS epidemic, this includes identifying gaps in the response and proposing interventions to implementing agencies where necessary. In the case of the Indlunkhulu project, the implementing agency is the Ministry of Agriculture. The Ministry provides the initial agricultural inputs (funded by NERCHA) for the Indlunkhulu fields which are then established with the assistance of labour from the local community. OVCs also assist in tilling the Indlunkhulu fields to enable them to obtain practical experience in subsistence farming. Once the commitment of a Chiefdom is evident, a supply of grain and pulses is placed by the Ministry in each Chieftaincy to feed the OVCs up until the first harvest. It is intended that over time, the harvest will replenish the orphan food supply, whilst the excess will be used to purchase future agricultural inputs.

The Indlunkhulu fields are intended to provide a sustainable source of food for OVCs. By the end of the 2002 planting season, 198 Chiefdoms had planted Indlunkhulu fields, with the 150 remaining areas expected to be participating in the project by the end of 2003. There has already been considerable output in some Indlunkhulu, with one female Chief harvesting

40 tonnes of maize. However, due to the current drought experienced in the Kingdom, many Chiefdoms will not have a harvest that is adequate to restock the orphan food stores until 2004 and so in the short term will require continued assistance from the Government.

3. SOCIALISATION

In addition to access to food, orphans require social and psychological support to ensure that they develop to be productive members of society. NERCHA is utilising the structures put in place for the Indlunkhulu project to provide care and support services for OVCs within the community.

Children that are orphaned at a young age often lack basic life skills and moral guidance. In the absence of a parental figure to impart such knowledge, orphans may grow up to be socially maladjusted. To address this issue, each orphan family will be placed under the supervision of a trained Lutsango care mother. Lutsango is a traditional regiment comprised of all married women in the Kingdom, local women suitable to care for OVCs are identified by the Chieftaincy committee. As well as accessing food for OVCs from the Indlunkhulu stores, the Lutsango mothers will be responsible for their health, development and emotional wellbeing. Training is presently being developed for the care mothers and will be delivered through the national and regional Lutsango offices established with NERCHA assistance. Issues that will be covered in the training include how to care for HIV positive children, HIV education and prevention strategies for children, as well as basic life skills such as hygiene and nutrition

One objective of this system of support is to enable orphans to remain within their own communities. Assigning local women to care for OVCs will enable them to stay on their parental land, cared for by community members known to them before their parents died. In the case of vulnerable children with parents that are sick, a relationship can be formed with the care mother before the child is orphaned. The presence of an individual carer for each child will also assist in the protection of vulnerable children against the worst forms of abuse and exploitation.

NERCHA believes that the Lutsango initiative will be a cost effective and sustainable means of providing OVC care within the community. It will be managed at the local level by the Chieftaincy committees, with technical and financial support provided by central government. The overall vision and national coordination of the programme will remain with NERCHA.

4. PSYCHO SOCIAL SUPPORT

The provision of psycho-social support for HIV/AIDS orphans is a crucial component of orphan care. At the same time as being bereaved orphans are traumatized and may be marginalized and excluded from their communities. They may suffer from stress, depression and hopelessness as they struggle to maintain their families and property. After caring for sick parents, children may feel responsible for their death. How to provide psycho social support for these children, given the great number of orphans and the limited human resources available, is a question that is presently being considered by NERCHA.

In order to ensure that the child is given emotional support and to assist in the integration of orphans within the community, it is proposed that a social centre be established in each Chieftancy at which out of school orphans can regularly meet and play. This will enable the Lutsango care mothers to observe children who are experiencing psychological problems. It is NERCHA's vision that local and regional supervisors for psycho social support would be trained to work in partnership with Lutsango mothers to identify psychological disturbances in children and provide knowledge of appropriate interventions where necessary. This initiative would be supported by regional and national training institutes for the psycho social support of orphans.

5. ECONOMIC EMPOWERMENT PROGRAMME

Caring for an HIV positive person can seriously deplete family resources. By the time an HIV positive parent dies the reduced economic status of the family may force children to leave school and as a result fail to gain the education and skills needed to support themselves in the future. Orphans that lack financial resources and are too young to work must be cared for by their communities. However, given the increasing loss of productive members of society and rising death rates amongst the extended family, many communities are unable to provide the level of care necessary.

The Economic Empowerment Programme is proposed as a means to help communities to financially support OVCs. Income generating programmes will be established to transfer resources and skills to members of the local community. This will enhance the quality of life for local residents as well as the ability of the community to care for OVCs. An initial needs assessment will be carried out in each participating Chiefdom to assess existing levels of infrastructure, natural and human resources and to identify potential income generating activities. NERCHA will then provide the equipment and relevant training required to support economically viable activities. The income from successful projects will be shared between participants and a Fund created to support local orphans and vulnerable children.

Economic empowerment begins with education and so the first priority of NERCHA will be to ensure that OVCs have access to educational bursaries to enable them to remain in school. It is envisaged that local OVCs will also have the opportunity to participate in income generating projects and so learn skills that will assist them to sustain themselves and their families once fully grown, as well as contribute to the development of the communities they belong to.

CONCLUSION

The number of HIV/AIDS related deaths has risen dramatically in recent years, resulting in an increasing number of OVCs and child headed households. Many of these children urgently need to be provided with food and access to support services. Those that are dying of AIDS are skilled workers and care givers, adults that were contributing to the social and economic development of their communities. This loss of economic and human resources has left many communities struggling to provide OVCs with the assistance needed to survive. NERCHA aims to establish a comprehensive orphan care programme that will enable communities to fulfill this responsibility and provide OVCs with access to food and aswell as care and support services. The orphan care response is presently divided in to four areas; ensuring food security, socialisation of orphans, provision of psycho social support and the economic empowerment of communities.

Implementation of the food security and socialization components of the response commenced in 2002. Chiefs were requested to lead the local response to HIV/AIDS and take responsibility for the provision of food for orphans within their Chiefdoms. Chieftaincy committees have already been established most Chiefdoms, Indlunkhulu fields planted and Lutsango care mothers assigned to each OVC. The establishment of a Chieftaincy committee to coordinate local OVC related interventions is intended to assist in the integration of local OVC care and support initiatives. The committee will also provide a structure through which NERCHA and implementing agencies can liaise with the community in the delivery of OVC care and support services.

It is hoped that the Indlunkhulu fields will provide a sustainable source of food for orphans and vulnerable children. The project places responsibility for the production of food and its delivery to OVCs with the community and so the success of the project is dependent on the community's continued support. In addition to accessing food from the Indlunkhulu stores, the Lutsango mother will act as primary care giver, accessing OVC support services on behalf of her assigned children and providing for their developmental and emotional needs. In time, the Lutsango care mother will be trained to recognise and refer children experiencing psychological problems to a national system of psycho-social support services.

The Economic Empowerment Programme, the fourth component of the response, aims to enable communities to support their orphan population to be educated, as well as to provide orphans with the opportunity to gain productive skills. The establishment of income generating projects will provide an incentive for community members to participate in OVC care programmes, as it will strengthen skills and generate economic opportunities of benefit to the local population. Such projects will also contribute towards replacing the skills lost to the community as a result of HIV/AIDS related deaths.

The design and implementation of a comprehensive orphan care programme in Swaziland is still in the initial stages. NERCHA's approach to date has been to build upon existing systems and structures to deliver HIV/AIDS services wherever possible, promoting the participation of local community members to ensure that services reach OVCs at the community level. It is hoped that these initiatives will prove successful and minimise the potentially devastating impacts of the HIV/AIDS epidemic on the next generation.