



**MMS Bulletin #67**

*HIV/Aids: keine globale Antwort in Sicht*

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***Institutions are not a viable option for dealing with the orphan crisis***

**Mobilise Communities for AIDS Orphans**

Von Stefan E. Germann

*It is a sad fact that people who get sick and die from AIDS are mostly young adults of reproductive age. They are the providers, carers, teachers, and the parents. Through the death of parents, the children are deprived of their rights to love, care and the means to emotional maturity. Children living in a world with AIDS have been neglected by policy-developmakers over the past years.*

The Health Departments of Zimbabwe's two major cities, Harare and Bulawayo, admit that HIV related deaths are now the leading cause of death in the 15 to 50 age group. These data must be regarded as alarming, considering their impact on the number of orphans over the next 20 years. According to the information presently at hand one must conclude that over the next five years, Zimbabwe alone will have to expect around 600'000 children orphaned by AIDS. By the year 2000, the number of orphans estimated in the Southern African region is 3.2 million, the total population in these countries being at 115 million.

Reliable data on the situation of AIDS orphans in Zimbabwe are rare. The first research on orphans in an urban setting in Zimbabwe was only conducted in October 97 and no result is yet available. The mass orphanhood will place an additional burden on society as the traditional extended family system becomes overstrained. And in a time of structural adjustment policies there is no government capacity for service expansion. Probably the most visible effect of mass orphanhood upon society will be the increasing numbers of children with no place to go street children.

**Community-based Orphan Care**

Orphanages are expensive to maintain, culturally inappropriate and unable to provide a stable family environment. Besides being inappropriate, expanding institutional facilities would be very costly and never match up the increasing demand. In Zimbabwe, institutions are not a viable option for dealing with the orphan crisis. Existing alternatives based on community capacity are a better way to challenge the crisis.

The extended family continues its traditional care-giving role. But the family is under increased stress due to poverty and a sense of despair resulting from the HIV epidemic.

Despite these constraints, communities, clans and the extended family system are the traditional key solution in coping with the problem of mass orphanhood. Children growing up in their own extended family environment are culturally rooted and better equipped for their future lives. However, extended families need to be strengthened, in order to fulfil their role of caregiving in a situation of economic difficulty and poverty. If the extended family is unable to cope, there should be support by the community. This does not seem easy to realise.

Community based monitoring mechanisms must be set in place to ensure sufficient community mobilisation and to facilitate the adequate support for families headed by children or by elderly and destitute people.

Churches with their extensive networks have been taking a leading role in the promotion of community orphan support programmes in two provinces. One of these programmes is operating from Bulawayo. It is an interdenominational group working in association with Social Welfare and UNICEF with the objective of promoting community based orphan support programmes among communities in the southern part of Zimbabwe. Volunteers from the various communities are trained to monitor the situation of orphans in their communities and to mobilise local support for them.

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