

HOW CHILDREN'S CLUBS CAN HELP ORPHANS



OVCs playing with their teacher during a systemic child counseling session in Mt. Elgon

Children's Clubs are organized by community health volunteers with special training in counselling and provide the space for children affected by HIV and AIDS to learn about the disease, ask questions and discuss problems. They offer individual as well as group counselling sessions. The clubs help children understand how the HIV virus and its progression to AIDS affects their families. Through participation in 'role play', children act out scenarios to develop a better understanding of their own situation. The clubs help children to accept, care and support infected family members.

In Western Kenya, APHIA II supports over 70 clubs. Each club has approximately 70 children supported by 7 Community Health Volunteers. Since the clubs started, they have observed many changes in the children. Children are now able to support infected family members to take their medication on

time and to attend medical appointments on a regular basis, and the kids talk about HIV prevention, advocate for testing and challenge stigma associated with HIV and AIDS.

Systemic child counselling is an approach used in the Children's Clubs. It explores the systems which affect a child's growth and development. Counsellors focus on a child's parents and siblings, their extended family member and peers, their school, church and community. By discussing what is happening around them, the children are better able to cope with trauma and rebuild their lives. Psychosocial support is essential to their recovery and through counselling children can:

- Grieve and cope with trauma
- Solve problems
- Talk and share problems with their peers
- Avoid life threatening situations.
- Adopt positive attitudes towards life

The Children's Clubs are very popular and make a difference in children's lives. Here are experiences from some of the members of children's clubs.



"My name is Collins. I am HIV positive and on anti-retroviral drugs, which I must take three times a day. I live with my grandmother and my uncle, who are both very supportive. During the holidays, they send me to Butula, where REEP, a CBO runs a residential club for HIV positive children. I've learned about HIV and AIDS and understand the importance of taking my ARVs regularly for the rest of my life. Without the medication, I would get sick and eventually die from AIDS. When I'm back at school, I share what I've learned at Butula with my friends. I've been open about my HIV status with all the students and teachers at school, and they've accepted me and treated me well."

Collins Wahu, Class 2, Mauko Primary School



"I am now twelve years old, the first born in my family. Since my father died in 2001 followed a few months later by my mother, I have lived with my younger brother and sister at my aunt's house.

When my parents passed away, I felt sad but also angry. I really missed my mother – no one would ever mean the same to me as she did. My aunt, a Community Health Volunteer in Bungoma, has helped me come to terms with the death of my parents. She enrolled me in a Children's Club linked with the Bungoma Home Based Care Community Organization, where I meet once a month with other orphaned children.

Counsellors talk with us about how we are feeling and help us to understand health issues. I have learned about the disease that killed my parents and know how to protect myself from HIV infection. We have fun singing, reciting poems, sharing stories, drawing and colouring, playing games and making new friends. Through the club, I have realized that there are many children who have lost parents and that I am not alone."

Mercy Sitati, Class 7, Kanduyi Primary School

WHERE YOU CAN GET HELP...

Here are some of the organizations in Western Province that are working with OVCs. Many work across divisions and districts, so contact the nearest one for more information on their support services.

DISTRICT	DIV/ AREA	CBO/FBO	CONTACT PERSON	TELEPHONE
Busia	Butula	Rural Education and Economic Enhancement Program REEP	Mary Makhoha	0734643846, 0733243077
	Butula	Busianda Tusonge Mbele CBO	Patrick Obuya	0721895218
		Matayos health centre	Patricia Ogutu	0722420288
Bunyara	Budalangi	Amatsi CBO	Martin Musitwa Kinnaho	0725-727439
	Budalangi	Budalangi Theatre CBO	Paul Juma	0736957440
			David Wangi	0721101339, 0724339649
Teso	Angurai	Akudep CBO	George Orapa	0733546738, 0723415446
	Chakol	Akukuranut Development Trust	Consolata Etyang	0733633374, 0720702321
		Alupe sub- district hospital	Christine Murunga	0712552419
Bungoma South	Kanduyi	Bungoma HBC and Support Program	Martin Lukhale	0720109597, 0734904813
Bungoma East	Webuye	Agape Project CBO	Joel Mburu	0727482298, 024363308
Bungoma West	Sirisia	Milimo Community Based Health Care CBO	Jephneah Wakhulumu	0735852249
	Malakisi	Malakisi Community implementing CBO	Wicli Wanyonyi	0735558994
Bungoma North	Tongareni	SOTENI Village of hope Mbakalo	Wyclife Mutaki	0729819170, 0725833401
		Kimillili hospital	Bibiana Kisiangani	0733463238
Kakamega South/ East	Shinyalu	Shibuye Community Health Workers	Violet Shivutse	0724233930
Kakamega North	Kabras	Kabras Jua Kali Association	Joseph Muyisi	0723454021, 0721556336

DISTRICT	DIV/ AREA	CBO/FBO	CONTACT PERSON	TELEPHONE
Kakamega Central	Kakamega Municipality	Shirere Home based care and counselling group	Kanute Shyashya	0726840274
		Bukura Health Centre	Melisa Eshiboko	0715702649
Butere	Khwisero East	ALPHA Organisation	Charles Okwemba	0720385596, 0724670781
	Khwisero West	Khwisero Dorcas SDA FBO	Ruth Sungu	0726449602
	Shiatsala	Bushe Women Group	Grace Oranja	0710952950
	Butere District hospital		Alice Bakhuya	0734450105
Mumias	Mumias	CAMP FBO	Getrude Lwanga	0722444283
Lugari		St.Mary's hospital	Consolata Khalibwa	0728508912
	Likuyani	Matunda Jua Kazi	Alice Mayende	0721223104
	Matete	Urafiki Initiative Development Org	Geoffrey Bakuli	0722365652, 0734184418
		Mabusli Health Centre	Irene Murunga	0727517705
Vihiga	Sabatia	Empowerment and Participatory Development Agency EPADA	Michael Ndeda	0721230630, 0720333727
	Hamisi	Serem Health Centre	Janet	0714889601
Emuhaya	Luanda	Kima Integrated Community Initiative Programipali Health centre	Elimina	0733849062
		Ipali Health Centre	Dorcas Kweya	0724227524
Mt Elgon	Cheptais	Bukonoi Sama CBO	Jackson Muge	0735027705, 0729073315
	Kapsokwonyi	Socially Organised Educative Team SOET	Godwin Ndege	0721662968, 07274811

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JUA AFYA YAKO



Community Health Newsletter - Ways of caring and bringing up OVCs: Issue 2 - 2010

LOVING AND CARING FOR ORPHANED AND VULNERABLE CHILDREN

All children have the right to grow up in a loving home, where their basic needs in life - food, shelter, clothing, healthcare, education and protection - can be met. Parents, with the support of their communities, are responsible for ensuring the protection and care of their children. Increasing numbers of children have been orphaned and left in the care of relatives or to look after themselves as a result of civil unrest, violence, accidents and HIV and AIDS.

When a child loses a mother, a father or both parents, she or he faces huge challenges in recovering from the trauma. Children may have witnessed the health of their parents decline and undergo slow, painful deaths. Sad, distressed and often angry, orphaned children are in need of affection and practical support.

Orphaned children are usually taken in by grandparents or other close relatives. However, these extended families are often struggling to survive themselves and are not always able to give proper care to additional household members. For example, some people believe HIV infection is a curse, so they may be afraid of the children whose relatives died of AIDS. In these cases families may refuse to provide orphaned children a home, neglect them or



When orphaned and vulnerable children are well taken care of they are able to build their lives and make a positive contribution to the society

even mistreat or abuse them. In the absence of relatives, some orphaned children take on the responsibilities of caring and providing for their younger siblings. These hard circumstances may force them into work where they are sometimes exploited and sexually abused.

Without love and care, orphaned children are at risk of falling into difficult circumstances.

Children suffer and fail to achieve their potential. Some develop behavioural problems and may turn to alcohol, drugs or crime. However, if all community members pull together and help protect and care for orphans and other vulnerable children (OVCs), they can be given the chance to rebuild their lives, live healthily, go to school and participate successfully in their communities.

MAKE A DIFFERENCE: WHAT YOU CAN DO

As individuals and communities, we can ensure children are supported and do not live in extreme poverty. Help rebuild their lives by offering them friendship and extending a helping hand by doing any of the following:

PSYCHO-SOCIAL SUPPORT

Visit homes with orphans regularly to discuss how things are going and encourage them to be positive about their future. Support children and their guardians to meet their emotional, social and spiritual needs. Listen to children when they talk about issues they are facing. If children are experiencing emotional difficulties, seek help from a counsellor at the health facility or from support groups or children's clubs.

STIGMA

When people talk negatively about orphans and vulnerable children, challenge them! Explain how their harsh words or deeds damage children's development into responsible adults. Encourage them to treat these children as they would their own.

HEALTHY EATING

Support households with orphans to eat well. Children need to eat a variety of foods to meet their nutritional needs. You can help them to keep poultry and establish vegetable gardens to grow pumpkin leaves, seveve, murenda, spinach, cabbage, avocado, passion, pawpaws, mangoes, guavas, and oranges. You can also

provide households in greatest need with food or invite the children and their guardians to share a meal with your family.

HOUSEHOLD TASKS

Support children to do their household tasks. Help them collect clean water, do house repairs and their household chores.

SCHOOL

Help identify children in most need of support. If possible, pay for their school fees, school uniforms and books or advocate for assistance from other community members.

HYGIENE

Encourage children to keep clean by providing soap and water for bathing and washing clothes. Dig pit latrines to improve household hygiene. Teach children and their guardians how to prevent or reduce the risk of illnesses, such as diarrhoea, malaria and pneumonia.

HEALTH

Take children, particularly infants, to the nearest health facility to monitor their growth and development. Make sure children of all ages in the household are tested for HIV so that if needed, they can begin treatment as soon as possible.

INHERITANCE

Protect the rights of children to inherit property

from their parents and remain in their homes. Locate and safeguard important documents, such as birth certificates and national identity cards.

MEMORY BOOKS

Parents often die when children are too young to remember them. Help children make a memory book with information on their relatives, places and events of importance in their lives.

RECREATIONAL ACTIVITIES

Organise fun activities for all local children. Use sports, games, singing, dancing and drawing to promote free and healthy interaction between orphaned children and others. Play helps children overcome stigma and social isolation.

It is your duty to help ensure orphaned children and all those living in difficult circumstances in your neighbourhood access basic care. Everybody is affected by the growing numbers of orphans and vulnerable children - improvements in their lives will benefit everyone. Use existing local support services and bring local people together to increase support for orphans and vulnerable children, including local chiefs, guardians of orphans and vulnerable children, school teachers, health workers, members of faith based organizations, community based organizations and other opinion leaders.

Children and HIV and AIDS

HIV (human immunodeficiency virus) is a virus that is too small to see and it is passed between people through blood and other body fluids. HIV weakens the immune system, making it easier for people to fall sick. When an HIV-positive person becomes sick with many illnesses that do not go away, then he or she is said to have AIDS (Acquired Immune Deficiency Syndrome). AIDS is used to describe the most serious stage of HIV infection, when the body is unable to fight illness and infections and the infected person becomes sicker.

A child can get HIV in the following ways:

- A woman who is HIV infected can pass the virus to her child during pregnancy, at the time of birth or through breastfeeding. Most children born to HIV-infected women will not get HIV.
- Through other blood-to-blood contact like blood transfusions, and through sharing of sharp objects or other skin-piercing instruments like razor blades, needles and circumcision knives.
- If the child is raped or sexually abused by someone who is HIV infected.

You CANNOT get HIV from every day contact like touching, hugging, talking to, or sharing a home with a person who is HIV infected or has AIDS. There is no risk of HIV transmission when sharing plates, utensils, glasses or towels with an infected person. HIV cannot survive in air, water, or on things people touch.

HIV infection in babies and children is different than adults. HIV can progress much faster compared to adults and HIV-infected children are at risk for many opportunistic infections that can lead to death. About half of all HIV-infected babies will die by the age of 2 years if they are not on treatment. Untreated HIV infection in children also may result in growth delays, later sexual maturity and mental retardation. It is critical to diagnose HIV-exposed infants and children as early as possible in order to prevent death, illness and growth and developmental delays.

Although HIV and AIDS can not be cured, there are drugs and treatment that can help someone who is HIV positive to live a long, healthy productive life. Treatment is available and free for babies and children who are HIV positive. Many children who receive proper treatment survive into adulthood. But in order for this to happen it is important to know the child's HIV status so proper measures are taken to help the child live healthy.

CHANGING THE LIVES OF CHILDREN AND FAMILIES LIVING WITH HIV

In Evulonga village, Zelpher, a standard six pupil rushes home for lunch. Approaching the house, she hears voices and peeps inside to find a community health volunteer talking with her mother. It's relief to find her mother in a jovial mood since she has been unwell recently. Looking at Zelpher, an enthusiastic girl, the third born in a family of five it is hard to appreciate just how tough her childhood has been. Here she shares her story.

"When my father died in 1999, our lives changed. Nobody knew what killed him. I was very young, but I remember how his health slowly got worse. Lots of people came to his burial. My older sister and brother cried and cried.

After my father's death, my mother became the family breadwinner. She found work on nearby farms, but she was unable to earn enough money for our upkeep. I asked my mother if I could look for a job as a house girl. I tried to convince her that I should quit school to help her because we didn't have enough money and sometimes she became sick and was unable to work. But my mother refused my offer.

My mother started to get sick more often. Finally, she took an HIV test, which was positive. Even with her HIV positive status, she worked very hard. Sometimes when my mother was very sick, I had to miss school and take care of her.

Our house was in a bad condition. During the rainy season, the nights were very cold. We only had rags to cover us. It was impossible to sleep when it rained. I didn't have the school uniform and the



Zelpher (far left) with her mother and siblings

other basic requirements to keep me in school.

Our situation was desperate before Avene Care and Support Group, a local community organisation, came to our rescue. The Avene group supports over six hundred orphans and vulnerable children or OVCs with the help of Esikomoli Salvation Church. I have been given a school uniform, a bag, books, pens and pencils. I want to make the most of this chance to continue my schooling, so I'm studying as hard as I can. I do well and get average grades. Some day, I want to be a teacher in my own village. I also try to encourage my younger brother and sister to enjoy and value school. They are only in class five and nursery at the moment, but I'd like them to finish secondary school.

I am really thankful for the kindness and compassion of the Avene group and the Esikomoli Salvation Church. They have helped us construct a

semi permanent house with corrugated iron sheets. Without their support, we would not have shelter. The new house is rain-proof and I no longer need to worry about leaks during rainy season. The Avene group has also given our family some seedlings. We've planted a kitchen garden, where we grow vegetables for our own consumption and for sale at a nearby market. They have also provided us with poultry to rear as well as bedding and household utensils.

A community health volunteer in my village encouraged me to go to the health facility and take a HIV test. One day I asked my mother to escort me to the voluntary counselling and testing centre at Kima hospital. I was tested for HIV. I was negative, but the nurse talked to me and gave me advice about how to stay healthy and prevent HIV infection in the future. Sometimes, community members visit my family and help us with household chores. I also visit the Avene Children's

Club, where I meet other children who have been orphaned. During these days I join other children in learning more about my health, review my memory book, tell stories, make comedy skits and participate in ball games. Since joining the club, I am more confident and get along very well with everyone in the community.

I think we need to do everything possible to prevent the spread of HIV and avoid needless suffering of infected people and their children.

I feel sad that my mother is living with AIDS. I wish there was a cure, but the drugs she takes help her fight the virus and stay healthy most of the time. I always remind my mother to take her drugs and eat well. I hope she will be with us until long after we have all grown up.

The Avene group and support from community members has made a big difference to our lives. They have restored our hopes and dreams. Nevertheless, I think we need to do everything possible to prevent the spread of HIV and avoid needless suffering of infected people and their children. It's hard being an orphan and coping emotionally as well as economically. We need to stop blaming people for getting infected and to support each other to overcome the challenges of living as families and communities with HIV. It's time to care for others as we might want others to care for us."

MAKING MEMORY BOOKS:

A Good Activity for Parents & Caregivers to Learn About

Memory books are a way of capturing information about the lives and histories of people before they die. Sometimes, they are also compiled for children after their parents have died, using information from surviving relatives. In APHIA II Western, Community Health Workers and people living with AIDS have been trained to support families to write memory books. They encourage people to tell their life stories and to talk about their HIV

infection with their children. Memory books can also be used to get parents and guardians to plan how their children will be cared for after they die.

Each child receives a book of the memories shared by their parent or guardian to remind them of their family roots, their birth and family events. This memories could be in the form of photographs, drawings, quotes, writing or cut-outs from newspapers/magazines or small keepsakes that can be pasted in the book. Often the advice received and recorded during the process of producing memory books helps motivate children to be positive about their future and make the best of their situation.

HOW TO WRITE A MEMORY BOOK

Step 1: Introduce the idea of a memory book to the person living with HIV and AIDS or the caregiver of the child whose parent has passed, if that is the case. Explain how the process could be used to share the family's history and how important such family recollections will be to their children.

Step 2: If the parent or guardian has not told their children about his/her illness,



Immaculate holding a copy of holding a copy of her memory book

encourage them to use the memory book as an opportunity to talk about the HIV infection. It is always best for children to hear firsthand from their parent or guardian about their status.

Step 3: Find a time when the children can sit undisturbed with their parent or guardian to begin the process of telling their life story. The children may be able to assist in writing up information or

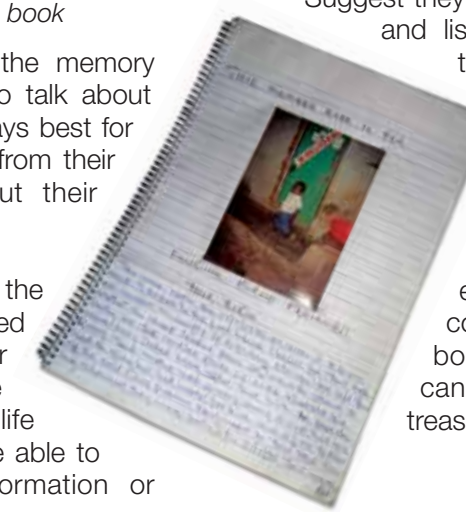
drawing pictures for the memory book.

Step 4: Encourage the children to ask questions and prompt the parent or guardian to talk, if need be. The book should include information about where their family is from, their ethnic group and their lives as well as the birth and lives of their children. Insert photographs, hand-drawn pictures, maps, certificates and any other family mementos, if they are available. The book need does not have to be made at once. The family can continue to work on the book over time.

Step 5: Visit the family and find out whether they finished writing the memory book or need more help. Ask the parent or guardian whether they have discussed what should happen to their children after their death.

Suggest they record their plans and list who will inherit their possessions in a will. If possible seek the help of a paralegal.

Step 6: Ensure each child has a copy of the memory book, which they can keep and treasure.



SPOTLIGHT

Advice from Community Health Volunteers about OVCs



I work with orphaned and vulnerable children in my community. I help locate them, support and monitor how they are getting on. If there are problems, I report them to the Children's Department and to paralegals which are able to take action if children are mistreated or abused. We all need to support people affected and infected by HIV, especially orphans. Love and care is what they need.

Isabella Nabwire,
Community Health Volunteer
Sirobo, Butula

Support groups for caregivers teach them how to treat orphans and vulnerable children just as they would any other child. As a result of our work, these children are better cared for, allowed to go to school and given the opportunity to develop as other children do. Look for support groups in your community or start your own.

Roselida Oyamo,
Community Health Volunteer
Chengo, Mumias



We run a therapy group for HIV positive children in Butula District. The main purpose of the group is to promote positive living. Divided into small groups by age, we support the children to discuss their feelings and issues they face. We also counsel the guardians on how to take care of their children, to avoid discriminating against them and to tackle stigma. The health of HIV positive children depends on a healthy diet and we share ideas on how best to meet their nutritional needs. We also help guardians access appropriate care and treatment services and get children on ARV drugs as needed.

Stella Esther Makhoha
Community Health Volunteer
Butula village, Butula

THE DOCTOR SAYS:

The Importance of Counselling & Testing for the Whole Family

Many children suffer a lot when they lose their parents. The pain is often worse when the cause of death is due to HIV and AIDS. Many children end up living with their relatives. Sometimes, the relatives may assume that the child is HIV positive and fear they will be infected by the child. This fear and general lack of knowledge about HIV, knowing your HIV status and how HIV is transmitted can lead to the child being neglected, stigmatized or discriminated against. As a result the child, who has already lost his/her parent, can feel isolated and suffer additional emotional trauma which could lead to poor school performance and hurt the child's development.

This scenario can be avoided if caregivers test the orphaned child, themselves and their children for HIV and AIDS. Undertaking counselling and testing as a family creates an open environment for the entire family and encourages family communication, love and trust. It's important for all family members to know their HIV status. If there is a member of the family who is HIV positive, then the family can be assisted with education to understand the situation and provide support as a group. Testing the orphaned child alone will only bring about more stigma and distrust. The child may feel isolated and a target of blame or anger.

When counselling and testing is done collectively, every family member will feel involved in the process and have the opportunity to openly support any member who turns out to be HIV positive. If no one turns HIV positive, then all the members will be responsible to ensure that they support each other to maintain their negative status. Counselling and testing for HIV as a family is a good opportunity for everyone in the family to learn the facts about HIV and how to have a healthy, productive life, as well as establishing an open environment of support for each other. Knowing your own HIV status and that of your children is important. All families should go for counselling and testing.



QUESTIONS OF THE DAY

Here are some common questions people ask about orphans and vulnerable children:

Q: When and how should a parent explain to his/her child that he/she is HIV positive?

Children need to know that they are HIV positive as early in their lives as possible. Their situation needs to be explained by someone they trust in very simple language, so that they understand why they need special care and take medication. It is not helpful for them to know their HIV status, before they are old enough to learn about the virus and its affect on their health. However, as children grow older and before they reach 12 years, they need to begin to learn about the HIV and AIDS and know their status. Specially trained counsellors can help and advise parents and guardians on how to best to tell children about their HIV status.

Q: When and how should a parent explain to his/her child the risks of HIV exposure due to rape?

If a child has been raped or experienced sexual abuse, she or he will need ongoing support from a trained counsellor to recover from the trauma of their ordeal. Parents or guardians will themselves need to be guided on how to help the child deal with their emotions and ensure he/she feels loved and valued. Within the process of counselling, the risk of the child's

potential exposure to HIV should be addressed and the availability of treatment explained. The parent or guardian then needs to be encouraged to test the child for HIV.

Q: How can OVCs best protect themselves from HIV infection?

Orphans and vulnerable children need to understand the various ways in which HIV is transmitted and how to protect themselves by abstaining from sex or using condoms. Without the protection of their parents, OVCs are at greater risk of sexual abuse or exploitation than other children. They also need to be encouraged to report incidents to organisations working with OVCs, so that action to stop the abuse can be taken.

Q: When someone is HIV infected is he/she dangerous to the family and community?

HIV positive people are never a danger to their family or community. The HIV virus is very fragile and once out of the body only survives in wet blood. HIV is not present in vomit, urine or faeces, unless it contains blood. People caring for HIV infected relatives do, however, need to follow good hygiene practices and safety precautions. Use plastic gloves, plastic bags or perhaps even leaves as protection against coming into contact with wet blood. Someone who is HIV infected can only transmit the virus through unprotected sex, blood-to-blood

contact with another person or a woman who is HIV infected can pass the virus to her child during pregnancy, at the time of birth or through breastfeeding.

Q: If I share eating utensils or bedding with an HIV positive person will I also get infected?

No, you can safely share eating utensils or bedding with an HIV positive person. The HIV virus can only survive in wet blood outside of the body.

JUA AFYA YAKO

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