

Improving the quality of life for orphans and vulnerable children through Psychosocial Support

FACT SHEET

Here's the problem...

HIV and AIDS is a medical condition, but it affects much more than just the physical body. Since HIV is epidemic among men and women in their middle, reproductive years, many people living with HIV have children, and as the parent's body weakens, the minds and spirits of their children are indelibly marked with the suffering they witness.

The grief and trauma that children experience from the death of parent(s) may manifest internally through depression and anxiety and/or externally through behavioral problems. Orphaned children throughout Africa have reported anxiety, fear, depression, limited social support, and stigmatization related to HIV, orphan status or poverty. In a study using standardized psychological measurement, 73.3% of orphaned children fulfilled the criteria for suffering from post-traumatic stress disorder.ⁱ OVC are thus likely to require more emotional support from the adults caring for them, yet these adults may be overwhelmed themselves by multiple losses and increased demands on their households.



Photo by Dorothy Brewster-Lee

Here is how CRS is responding...

Catholic Relief Services (CRS) implements the orphans and vulnerable children component of the President's Emergency Plan for AIDS Relief (PEPFAR) in six countries: Botswana, Haiti, Kenya, Rwanda, Tanzania and Zambia.

Through the OVC PEPFAR project, children and guardians are assisted in the areas of education, agriculture, economic strengthening, health, shelter, and protection. Meeting these physical needs indirectly improves the child's emotional wellbeing; however, because of CRS' commitment to the whole person, psychosocial support and spiritual support are a core component of all six country programs.

Each country program is unique in how it implements psychosocial programs.

Home visits

- A cornerstone to CRS OVC programs is training volunteers or community health workers (CHWs) who visit the OVC at home. An impact evaluation in Kenya, conducted by MEASURE, found that home visits by CHWs resulted in statistically significantly ($p < .05$) reduced feelings of social isolation (2.10 vs. 2.33) and a reduction in the OVC perception of negative community attitudes (2.08 vs. 2.22).ⁱⁱ
- CHWs are trained how to provide psychosocial support to OVC either through counseling, therapeutic play or through recognizing symptoms that require referral to special services. In Kenya, 813 OVC were referred to counseling services in 2009.
- Memory books are promoted by CHWs in Kenya, Tanzania and Zambia as a way to connect parents, guardians and OVC and to assist with the grieving process.

Support groups

- In Botswana, 120 youth peer support clubs have been organized and include active participation from almost 3000 OVC.

- Kenya has reported positive results from encouraging guardian participation in support groups. The MEASURE evaluation found that guardian involvement in support groups was positively associated with lower marginalization and with lowered negative attitudes about OVC in their care. Guardian participation in support groups also impacted OVC behavior: children had increased prosocial behavior (7.53 vs. 8.32) and overall increased family functioning ($p < .05$).

Community events

- Family days are an innovative approach implemented in Kenya that promote family communication through a special event.
- Sports events have been added to the activities scheduled in Zambia. The project found that the support clubs wanted a way to connect on the weekends so they began intra-club sports that draw in community participation.
- In Rwanda, the project promotes participation in youth clubs through home visits and community outreach events. As a result, the majority of OVC in the Rwanda project have joined either a church choir, anti-AIDS club or some other youth association.

Life Skills training

- Youth are also organized into peer groups specifically for life skills training. In Tanzania, 11,238 youth participated in *In Charge!: Action Learning on HIV and AIDS for Youth*. CRS conducted operations research which found that *In Charge!* was successful in increasing the youth's knowledge base while simultaneously helping them to personalize risk and to increase their confidence to make good decisions.
- In Zambia, the project is empowering youth with life skills through the use of Adventures Unlimited's Behavior Change Program. Over 16,000 youth participated in the program in 2009.

OVC Wellbeing tool

- The OVC Wellbeing Tool (OWT) has been developed by Catholic Relief Services as a means to monitor the impact of the program on the child's overall wellbeing. The OWT is unique in that it is a self-reported assessment which captures wellbeing from a child's perspective. Download the OVC Wellbeing Tool and related materials at www.crs.org/publications/ovc-wellbeing-tool.

Those who have been helped...

A total of **173,743** children and their families who are vulnerable due to HIV and AIDS have been served through the OVC PEPFAR program from 2004 through 2009. **60,787** OVC and guardians received psychosocial support in 2009 through the OVC PEPFAR program.

Here is someone who has been helped...

At age 10, Sophia's father died; at age 16, her mother also died. Sophia was enrolled in the OVC program in Tanzania and after receiving assistance from the program, Sophia, now 20 years old, is in a position of giving back. Sophia works as an administrator for the program and though she admits to going through a long period of grief and loneliness, the help that she received has strengthened her to want to give back. "I'm generally much happier now. Although occasionally the grief over my parents' loss comes, my mind is at peace and I feel psychologically more stable. Most importantly, with the help of my community I feel that I have certainly started my journey to become a better person and be able to reach out to others," Sophia says.

¹Cluver, L., Gardner, F. (2006). The psychological wellbeing of children orphaned by AIDS in Cape Town, South Africa. *Annals of General Psychiatry*, 5.

²MEASURE Evaluation. (2009). *The difference interventions for guardians can make: Evaluation of the Kilifi orphans and vulnerable children project in Kenya*.

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