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Lack of quality healthcare causes rise in orphans

KRISTIN PALITZA | CAPE TOWN, SOUTH AFRICA - May 31 2010 14:21

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Two small boys play quietly on a jungle gym, some distance away from other children. The six-year-old twins, who live at the Masigcine children's centre in Mfuleni township, 35km out of Cape Town, are severely traumatised from being orphaned at the age of one and have difficulty relating to their peers.

"We have been trying to get counselling and psychological support for these two boys, but accessing public health services for children with special needs in poor communities is extremely difficult," explained Masigcine manager Juliane Petersen.

This shortfall in the country's public health system has a negative impact on a large number of South Africa's children. Three million girls and boys up to the age of 18 years are orphaned, according to *The Health of our Children in South Africa*, a study released in mid-May by national research institute the Human Sciences Research Council (HSRC).

The number of orphans has risen by 4.9% since 2005. "This is a significant increase, which will reduce the quality of life of these children," said HSRC research specialist Nompumelelo Zungu.

Out of South Africa's three million orphans, 1.9-million had lost their fathers, while 713 000 had lost their mothers. An additional 419 000 children lost both parents, the HSRC found.

Because of the trauma of orphanhood, the emotional and physical health of children who do not have mothers or fathers is compromised from the start. "We see a lot of children with a diminished health status and weakened immune system," said Petersen. "Apart from the emotional trauma, many orphans suffer from post-natal syndromes caused by alcohol or drug abuse and also HIV."

Psycho-social care

The twin boys, for example, show autistic symptoms, are speech impaired, aggressive and have difficulty concentrating. "Orphans don't only need homes. They also need psycho-social care," Petersen pointed out. Up until now, the children home's management has not been able to access such services for the children in their care.

South Africa's rural, informal areas carry the highest burden of orphanhood: One in five children live with only one or no parent.

One of the key reasons for the high number of orphans is the country's poor maternal health. At 29% in 2008, South Africa has a very high level of HIV prevalence among pregnant women.

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The HSRC study found that 97% of pregnant women had accessed antenatal care during pregnancy and that nearly three-quarters had received antenatal services five times during their pregnancy. But despite these high access rates, maternal mortality remains high, at about 2 500 women per year.

"This suggests that challenges lie with the quality, rather than the quantity, of healthcare provided," Zungu explained.

The major cause of maternal deaths in South Africa is HIV/Aids, while other common causes include hypertension, obstetric haemorrhage, pregnancy-related sepsis and pre-existing maternal diseases. "HIV is having a devastating impact on children," warned Aida Girma, South Africa representative of the United Nations Children's Fund.

After reading the outcomes of the HSRC study, South African Health Minister Aaron Motsoaledi said his department is committed to "prioritising maternal and child care, including monitoring systems that focus on addressing maternal mortality and perinatal deaths".

Failure in healthcare system

In 2008, when the survey was conducted, one in five children under the age of two were hospitalised for an average of 6,8 days a year. Less than 70% of children were immunised against any of the childhood communicable diseases, with the exception of the Bacillus Calmette Guérin immunisation against tuberculosis.

"This demonstrates both the failure of the primary healthcare system to prevent and adequately manage diseases and the low quality of care provided in these facilities," Zungu said.

What is particularly worrisome is that the study data shows that South Africa is not on track to achieve the Millennium Development Goals that target health, such as reducing child mortality by two-thirds by 2015, noted Girma.

"South Africa's serious backlog with immunisation indicates that the country's primary healthcare system is collapsing," she added. "The vaccines are available. It's the management and planning of widespread immunisation and other services that is weak."

Motsoaledi acknowledged that healthcare for children needs to be improved throughout the country. "It is important to take stock of areas where we still need to make progress for the health of our children, especially immunisation and infant feeding practices that are so important in the survival of babies," he noted.

As a first step towards achieving this, the department of health (DoH) has launched an eight-week-long national measles and polio vaccination campaign in April, which aims to vaccinate 15-million children between the ages of six months and 15 years against measles, and five million children under the age of five against polio.

But much more needs to be done. The HSRC recommends that the DoH expand the number of community health workers, which can reach large numbers of children in the areas where they live as well as in schools and crèches, through low-cost child health and nutrition programmes.

Moreover, public and private health sectors should routinely offer HIV testing for sick children. - Inter Press Service

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