

BEING A CHILD IN THE CONTEXT OF HIV/AIDS

Book review

Gow, J & Desmond, C, (eds) (2002) **Impacts and interventions: The HIV/AIDS epidemic and the children of South Africa**. Pietermaritzburg. UNICEF / University of Natal Press. ISBN 1 86914 019 2 pbk. Pages xvi + 211.

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In a 2001 review on levels of commitment and care around HIV/AIDS Jones (2001:6) described HIV/AIDS as a scandal that “situates us on the frontier between hope and despair, between action and inertia, between those with the means to do something, and those who have little ‘to do’ but suffer”. This book places the reader on the same frontier. The book is a collection of articles on the impact of HIV/AIDS on children living in South Africa. While extremely informative and well written, the reader is more often than not pushed to the boundaries of despair and frustration with the indolence of those who should be responding more radically to the threat of the HIV/AIDS epidemic on the well-being of South Africa’s children.

Part 1 provides a comprehensive analysis of the impact of HIV/AIDS on a number of sectors of South African society that ultimately have dire consequences for the majority of South African children, in particular those directly affected (and/or infected) by the HI virus. Part 1 opens with a chapter on the social epidemiology of the epidemic in South Africa, providing an informative overview of the contextual factors that have contributed to the explosive rise in HIV prevalence in this country. The chapter ends with an analysis of the demographic variations of the spread of HIV to date. Anybody interested in the epidemiological and demographic profile of the HIV/AIDS epidemic in South Africa will find this an interesting and valuable read. In a desperate attempt to make sense of and explain a disease of this magnitude, people continue to engage in the process of “othering”, a form of the “just-world hypotheses” that allows them to believe that HIV/AIDS only affects those who deserve it, like male homosexuals or prostitutes. In this way stigma and discrimination are the symptoms of a society too afraid of recognising and acknowledging the real factors that drive this epidemic. This first chapter serves to highlight that HIV/AIDS is a disease that is located within a complex social, political, historical and economic matrix, with no one group of persons responsible for its rapid spread. The high prevalence of sexually transmitted diseases linked to inaccessible and often ineffective treatment, the highest per capita rate of reported rape in the world, the aftermath of apartheid added to increasing

unemployment rates are a few of the factors discussed that makes South Africa a particularly high risk country.

The rest of part 1 provides a sustained critical analysis of the impact of the epidemic on three main areas of child development identified as areas on which the government has some direct bearing. Each chapter paints a realistic picture of the way in which the HIV/AIDS epidemic is negatively impacting on health, welfare, education and the household.

In chapter 3 ("Health") Giese describes poor health and stunting among children who live in HIV infected households and/or who are orphaned by AIDS. Although the orphan epidemic is still in its infancy Giese argues that there are approximately 300 000 maternal orphans of AIDS in South Africa. With caregivers largely absent many of these children are unlikely to receive the medical attention they need. A recurring concern/theme in chapters 3 to 6 is with the way in which the government has chosen to respond to the orphan dilemma. Giese argues that while foster and residential care is being downscaled, traditional support structures like the extended family are being saturated. She questions the effectiveness of relying on family and community support mechanisms while stigma and discrimination are so rife. The reality is that many children orphaned by AIDS are at risk of being turned away by extended families because of the stigma associated with the disease as well as the financial strain this will place on their own families. As a result, with caregivers being largely absent, these children's own health (physical and mental), whether HIV infected or not, is often seriously compromised.

In chapter 4 ("Welfare") Ewing is concerned with the impact of HIV/AIDS on child welfare. In her evaluation Ewing also expresses concern with the governments "community response" to the problem of orphans of AIDS. She states that on an individual (or family) level the costs of HIV/AIDS outstrips the available recourses, and unless this is better documented and given higher profile, policymakers (in the area of welfare) will continue to argue that home-based and community-based care are effectively absorbing orphan costs. Ewing contends, that while a community response reduces the cost of care to the government (in the short term) it is increasing the cost to both the family and community, further impoverishing those already impoverished.

Badcock-Walters chapter "Education" (chapter 5) illustrates the highly problematic impact HIV/AIDS is having and will continue to have on education in South Africa. Like Giese and Ewing he problematises the government's decision to mobilise caregivers in communities to care for children affected by HIV/AIDS. He agrees that a traditional network of support *does* function effectively, but *only* when one member of an extended family network experiences difficulties. In the context of HIV/AIDS, however, many members of one family network are likely to be affected "and consequently, the capacity of the network to react is badly compromised by the multiple impacts upon it" (p98). One of the consequences of the disablement of community support systems, according to Badcock-Walters, is the removal from (or lack of enrolment into) school, driving the child "into a life of servitude or obligation (either within an extended family environment or outside it), into employment or unemployment, perhaps involving a life of crime or prostitution as a survival strategy" (p99). Gow and Desmond in Chapter 6 ("Households") further document the negative impact of the epidemic. They provide an

analysis of the serious economic, psychological and social impact of the cycle of HIV/AIDS illness and death on child members of a household.

Part 2 deals primarily with government interventions that have been undertaken to try and mitigate some of the impacts of the epidemic on children in South Africa. Streak chapter "Mitigating the impacts with a focus on government responses" provides an analysis of the government's budget around HIV/AIDS and at the same time documents her difficulties in accessing information from relevant departments. In the end she is forced to make an estimate of how much was set aside for HIV/AIDS and how much has actually been spent. A frustrating finding is that many departments *under spent* on their HIV/AIDS budgets. In chapter 8 ("Treatment of HIV/AIDS and related illnesses") paediatrician Mc Kerrow outlines and praises the government's strategic plans to deal with the treatment of HIV/AIDS, but at the same time disapproves of the government's deficiencies in delivery, referring to them as "yet another comedy of errors in this country's response to the epidemic" (p180). Smart's chapter "Preventing transmission of HIV" provides an interesting analysis of the way in which the response to the epidemic can be divided into three periods: the pre-democracy decade, the period following the first democratic elections, and the present. While providing interesting insight into the first two phases, Smart fails to provide an engaging critique of Mbeki's (alarming) response to the epidemic.

This book provides a well-integrated and very comprehensive analysis of both the impact of the epidemic and the response of the government, researchers, policymakers, communities and families who are grappling with how to deal (in the most cost-effective way) with the consequences of this ravaging epidemic. One criticism of this book is the use of the acronyms HIV and AIDS. Through out the book they are used in disparate ways, at times correctly and other times incorrectly. For example when talking about condoms it is incorrect to talk about avoiding contracting AIDS, as HIV is the virus that is transmitted through sexual contact rather than AIDS, which is the syndrome acquired over time once HIV infected. It is crucial that writers use these terms correctly so that they do not contribute to reinforcing pervasive misunderstandings about the disease. It is likely that other readers may criticise this book for the negative story it tells about children and families struggling to survive in the context of HIV/AIDS. Perhaps their line of argument will be that it overlooks the ways in which families and communities have drawn together to provide relatively *successfully* for the well-being of their children. The emphasis on the negative impact of the epidemic may be criticised by some as subjugating the stories of resilience that exist in those areas most hard hit by the epidemic.

It is suggested that more case studies highlighting the lived, day to day experiences of children and families as they negotiate themselves through the complex challenges presented by the HIV/AIDS epidemic would have provided a balanced tone to the book. However, in an attempt to be politically correct (or to reassure ourselves that things will turn out okay) we may run the risk of masking the harsh realities of the epidemic, and it is these multiple "realities" that this book so effectively exposes.

This book will be valuable for anyone wanting to better understand the epidemiology, demographics and impacts of HIV/AIDS in South Africa. In particular, students and researchers in the social sciences and related disciplines will find this an invaluable

source of information and a thorough introduction to the way in which HIV/AIDS has (and continues to) threaten the well-being of South Africa's children.

Reference.

Jones, T (2001) Who cares? **AIDS Review 2001**. Pretoria: University of Pretoria.