

UNPAID CARE WORK AND THE GIRL CHILD



When a parent develops AIDS related symptoms, children often shoulder new responsibilities. These include domestic work, income-generation, childcare and care giving activities such as feeding, bathing, toileting, giving medication, and accompanying relatives to clinic or hospital for treatment. Given the long-standing gender imbalances and discrimination in education, it is perhaps not surprising that girls are often the first to be withdrawn from school when families become affected by HIV and AIDS.

When a family has limited resources and has to choose between educating the boy or the girl, most choose the boy and the girl drops out. The bias against educating girls is exacerbated when one or both parents fall sick, since it usually falls on the girls to take care of the ailing parents and to assume responsibility for the other siblings. When schools are located far away, the time required to get there and back makes might be considered too much and being taken from the responsibilities relating to caring for the family.

Current statistics show that girls are the first to drop out of school during social and economic crisis:

- In Zambia, where an estimated 16,5% of the adult population is living with HIV,¹ school completion rates for girls were 10 to 15 percent lower than for boys in 2000.²
- In 2001, in Kenya's heavily AIDS-affected Nyanza Province, girls made up only 6% of those who are promoted to grade five. In contrast, in the Eastern Province, which had the lowest rate of HIV prevalence of Kenyan provinces, 42% of those passing into grade five during the same year were girls. Education officials attributed the disparities to the spread of HIV and AIDS and noted that twenty years previously, before the epidemic's impact was felt, the numbers of boys and girls advancing to grade five were roughly equal.³

Challenges

- Girl children pay a high price in lost opportunities; they will never have equal choices in the family, community or education as long as they are carrying almost complete responsibility for caring for people living with HIV and AIDS.
- Most importantly, the schooling of girls is largely affected in the form of neglected homework and missed extracurricular activities. Their caring role means many girls have to leave or regularly stay away from school.
- Girl child caregivers are especially vulnerable as they are not in the traditional income earning age bracket, and are frequently not protected by policies or support programmes, as they are often 'invisible' to authorities.
- In addition, while they can be good providers of love and support, they are simply young and inexperienced; and usually cannot provide adequate medical care.
- They are often not the targets of information sharing, further disempowering them. This burden means that many girl child caregivers are without the necessary skills and support, and at the same time they are having their childhood stolen from them.
- The psychosocial burden of care on girls is particularly high, emotions of fear, helplessness, and anticipation of the worst, fatigue and lack of sleep from caring at night is common place.

Recommendations

- Child caregivers must be explicitly acknowledged in policies and standard of care guidelines, and their particular needs must be recognised.
- Education systems need to offer flexible schooling options that recognise their additional burden, and they need psychosocial support that recognises their particular needs as child caregivers.
- The greater involvement of men and boys in delivering community and home based care is a crucial response in alleviating the burden on women and girls. The increased involvement of men will mean 'more hands to do the work' and will challenge gender norms that are fuelling inequalities.
- Governments should enact and enforce laws proscribing all forms of discrimination including discrimination in access to education.
- Governments should take steps to strengthen the ability of extended families to care for AIDS affected children and provide them with formal schooling.
- Governments should also provide targeted educational subsidies and waivers of school fees to all children at risk of not enrolling or withdrawing from school because of inability to pay.

1. UNAIDS and the World Health Organization, "Epidemiological Fact Sheets on HIV/AIDS and Sexually Transmitted Infections – Zambia, 2004 Update," p. 3.
 2. National HIV/AIDS/STD/TB Council, "Strategic Framework 2001-2003," (Lusaka: October 2000), p 9.
 3. Human Rights Watch interview with W.K.K. Kimalat, permanent secretary of the Ministry of Education, Nairobi, Kenya, March 5, 2001.

If you would like more information on the campaign contact the GEMSA secretariat on +27116226597 or email admin@gemsa.org.za or go to www.gemsa.org.za.

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