

Speech of HE the President Sam Nujoma read by Minister of Health and Social Services at OVC Workshop 25th November 2002

Director of Ceremonies

Honourable Minister of Women Affairs and Child Welfare

Honourable Deputy Ministers from Botswana and Mozambique

Ms Diana Swain, Mission Director, USAID Namibia

Members of the Diplomatic Corps

Members of the UN Family

Ladies and Gentlemen

It is a great honour to have been asked to open the 2002 East and Southern African OVC Workshop on Orphans and Vulnerable Children. Unfortunately due to other commitments I am not able to be with you today but please be assured that I am with you in spirit. My Honourable Minister of Health and Social Services will deliver my speech.

It is a great honour for our country to hold such a prestigious workshop and I would like to thank the organisers for choosing Namibia.

Namibia like all the countries represented here at this workshop have been hit badly by the scourge of AIDS. With a population of only 1.8 million and with an estimated 22.3% of all Namibian adults infected with HIV, you can see the crisis we are dealing with. Unfortunately, HIV is the cause of much more devastation, a devastation that continues to destroy the very fabric of our society; I am of course talking about the growing numbers of orphans and vulnerable children.

- As of 2001, there was an estimated 82,671 orphans in Namibia, of which half are AIDS orphans. By 2021, there will be an estimated 251,054 orphans, of which 3/4s (200,000) will be AIDS orphans.

Coping with the Global cumulative impact of over 21 million AIDS deaths on orphans and other survivors, on communities, and on national development is an enormous challenge, especially in African countries with social and health services already reeling from lack of human and financial resources. To date in the World, 14 million children younger than 15 years of age have lost either their mother or both parents to AIDS, with 95% of these children living in sub-Saharan Africa.

AIDS is causing unprecedented threats to children's well being and safety, and a child's vulnerability begins to increase long before a parent dies. The common impacts include deepening poverty, such as pressure to drop out of school, food insecurity, reduced access to health services, deteriorating housing, and worsening material conditions.

Children that have been orphaned as a result of the HIV/AIDS epidemic are especially vulnerable. Because HIV/AIDS primarily affects adults of childbearing age, the parenting abilities of the population responsible for caring for and nurturing the children is greatly affected. Without parents to care for them (during the parent's illness and after their

death), children are especially vulnerable in terms of their survival, protection, and development. Traditionally these children would be taken in by extended family, but with the rapid spread of HIV/AIDS and the growing numbers of orphaned children, these systems are becoming increasingly overburdened. Many children are left to care for themselves and their younger siblings. In many cases, these children are cared for by grandparents who themselves are dependent on the care of their children. In all of these situations there is a dramatic decrease in family income and emotional support available for the children. To compensate for this loss of income, children often stop going to school in order to work, thus decreasing their long-term prospects of overcoming the burden of poverty. Young girls and boys may even be drawn into dangerous lifestyles in order to provide for themselves and their siblings, especially if they have been unable to find psychosocial support. If these vulnerable children are to become healthy contributing members of society, efforts must be made to identify and build on local support mechanisms.

It is therefore imperative to create a favourable environment to enable extended families to take care of their orphans as well as their own children. The ability of households to meet their children's needs must be reinforced, whether it concerns basic needs such as food and clothing, or their education or health care needs.

When considering the basic needs of these children we are inclined to think in terms of food, shelter, clothing, love, and security, a combination of the material and psychological needs. These children have the same needs, except the fulfilment of these needs is potentially in jeopardy when a parent or carer becomes ill and eventually dies. Meeting these needs is important for the growth and ability of a child to succeed through life. According to the United Nations Convention on the Rights of the Child, meeting the psychosocial needs of children is not only a privilege, but also a right of the child.

The identification and support of orphans and vulnerable children is paramount and it should be our aim to ensure that children try to stay in a family setting. What we should not create is a society of institutional care. Africa is a land of families and we should build on this, not destroy it. Our main aim is to empower the community to support and care for each other.

By itself, no single intervention will make a substantial impact on the full range of social, health, economic and psychosocial problems facing orphans and vulnerable children. The problems are too many and varied. A planned and coordinated set of policy, social mobilization, and programmatic interventions by public sector and civil society actors is needed for the way forward.

Other these next five days you have a unique opportunity to learn from each other, share experiences and plan effective measures for the future. I believe that your role here is to ensure that we improve the quality of life of orphans and vulnerable children and increase their chances of becoming active and productive members of our society.

It is therefore important that during you're debating and planning this week that your future plans:

- Respond to the basic needs of OVC and their families
- Allow a greater access to education and training
- Improve access to the use and quality of health care available to OVC and to other members of the community
- Extend access to counselling and testing to the community level in order to allow a greater prevention of HIV/AIDS and to put communities in a better position to prepare their children's future.
- Improve the national ability to plan and put into action measures to help OVC.
- Create a sustainable mechanism for collaboration between national institutions, NGOs and the private sector to facilitate setting up programs for OVC.

With a focus on these key issues you have the ability to achieve:

- An increase in the number of orphans and vulnerable children benefiting from schooling and care appropriate to their needs.
- Improved access to treatment and health care facilities within the community.
- A greater ability at a national level to assess and find solutions to the problems of orphans and vulnerable children.
- Stronger links between communities, the health system, the Government, NGOs, voluntary organizations and the private sector.

You know why you are here and what you have to do so I don't want to waste any of your valuable time in achieving your goals. I wish you good deliberations and look forward to seeing your outcomes and it is now my honour to declare this workshop open.