



# Caregiving Context and its Influence on Developmental Outcomes of HIV-Affected Children in Africa

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# Background

**90%** (approximately 2.3 million) of all HIV positive children globally live in SSA

**16 million** have been orphaned by HIV/AIDS

**70-90 million** children are living in families affected by parental or caregiver HIV illness

# Background

With the introduction of ARVs HIV infected children are living longer

Focus on HIV-related  
**neurodevelopmental  
disability** and **quality of life**



# Evidence on Developmental Status

*Multiple developmental impairment; even in the era of ARVs.*

Author	Year	Country
Msellati	1993	Rwanda
Boivin	1995	DRC
Drotar	1997	Uganda
Van Rie	2008	DRC
Baillieau	2008	SA
Potterson	2009	SA
Abubakar	2010	Kenya
Boivin	2011	Uganda
Kandawasvika	2011	Zimbabwe

Author	Year	Country
Jelsma	2011	SA
Ruel	2012	Uganda
Hoare	2012	SA
Laughton	2012	SA
Lowick	2012	SA
Boyede	2013	Nigeria
Whitehead	2013	SA
Kandawasvika	2014	Zimbabwe

# Background

HIV-affected children form the largest group of children adversely impacted on by HIV pandemic

## HIV affected children experience

- neurocognitive delays (Le Doaré et al., 2012)
- mental health problems (Cluver, Gardner, & Operario, 2007),
- poor educational outcomes (Guo, Li, & Sherr, 2012).

Effects most pronounced in resource constrained settings such as Africa (Le Doaré et al., 2012)



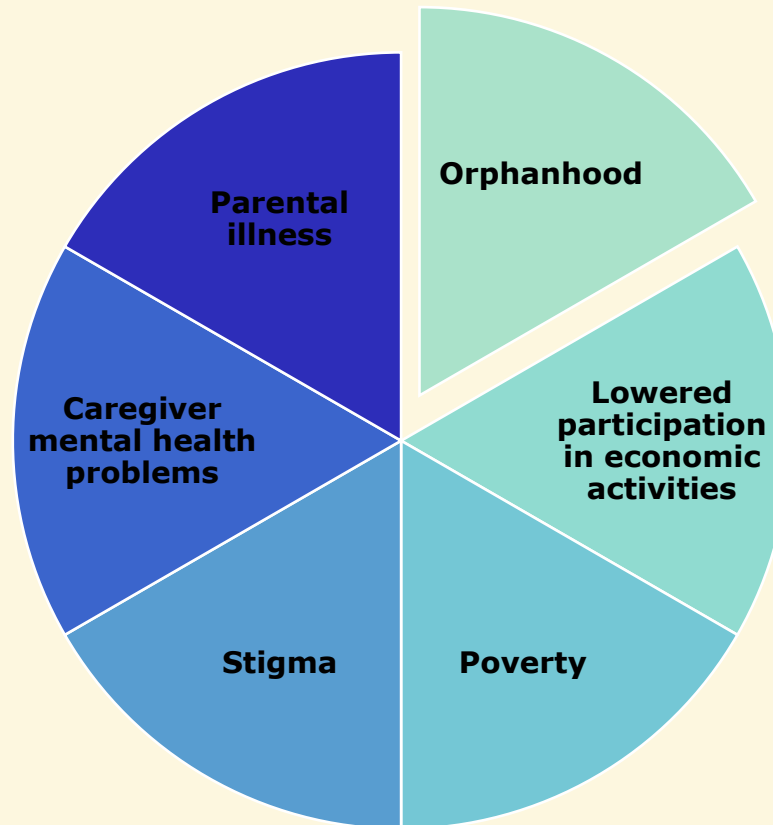
# What leads to poor outcomes?

Multiple pathways to poor outcomes such as advanced disease stage and poor nutritional status, among others

Here we focus on the *caregivers and the caregiving environment*



# Caregiving context - **multiple risk**





# What is the Impact of the Compromised Caregiving Context?





# Impact of the Caregiving Context

Limited evidence among preschool children, few exceptions.

(Busman et al, 2013)

Relatively more evidence from older children – both infected  
and affected

(Abubakar et al, in preparation; Cluver et al, 2012 & 2013)

Evidence for adverse impact of compromised caregiving  
context



# Impact of the Caregiving Context

Among HIV-infected and HIV-affected children caregiver's

- ❖ suboptimal parenting behaviour
- ❖ poor mental health
- ❖ low SES
- ❖ stigmatisation
- ❖ illness and death

Have been associated with **poor cognitive, mental and educational outcomes**

*(Abubakar et al, in press; Allen et al, 2013; Cluver, 2012)*



# What can we do to enhance their developmental outcomes?



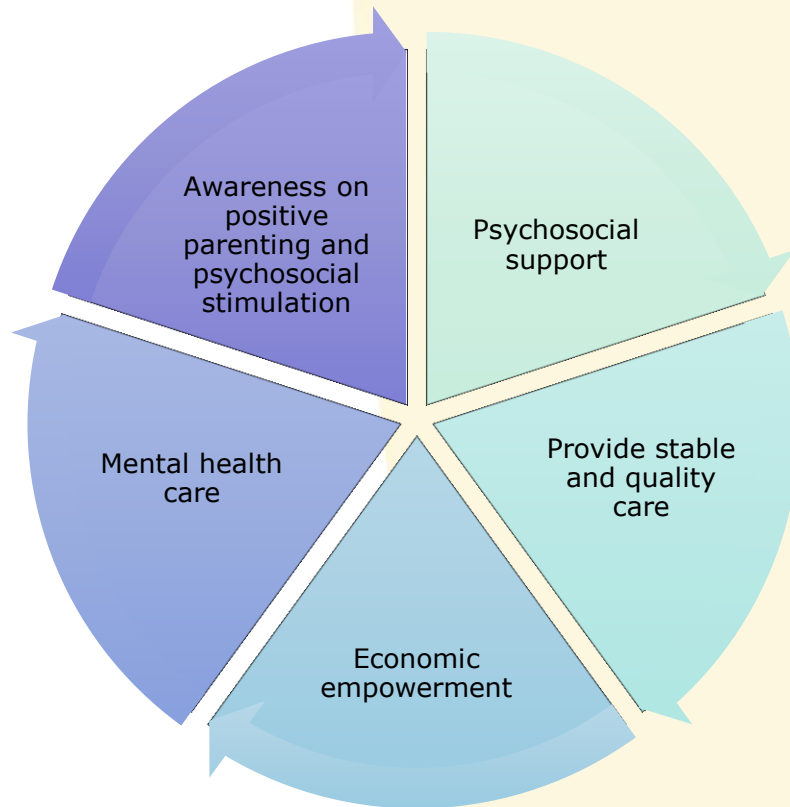
# Interventions to Enhance Outcome

Evidence on how best to intervene in the context of HIV is limited (Sherr, 2011)

Core would be to address modifiable **risk factors** and provide **protective environments**



# Interventions to Enhance Outcome



**Focus on enhancing caregivers' potential**

# Interventions to Enhance Outcome

## *Approaches for enhancing caregivers' potentials*

- ❑ Parenting behaviour and psychosocial stimulation

*(Boivin et al, 2013; Potterson et al, 2010)*

- ❑ Poverty – through cash transfers

*(The Kenya CT-OVC evaluation team, 2012; Handa et al, 2012)*

- ❑ Mental health – parenting programmes that give access to psychosocial support

*(Boivin et al, 2013)*

# Conclusions

- ❖ Caregiving context plays a crucial role in shaping developmental outcomes in the context of HIV
- ❖ Quality of care is compromised when the caregiver is **physically, mentally** or **economically** not doing well

# Conclusions

Investments aimed at **enhancing the caregivers' condition** will contribute towards ensuring children growing up in the context of HIV achieve their developmental potential





# THANK YOU

