



## **COVID-19-Associated Orphanhood and Caregiver** Loss in South Africa

An urgent call to integrate care for affected children into every national response, health, and social development plan

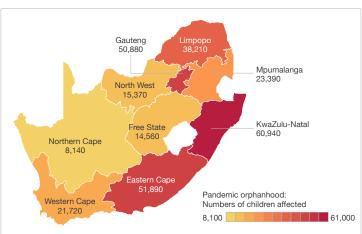


Fig 1: Pandemic orphanhood and caregiver death estimates associated with excess COVID-19 deaths, by Province, South Africa, 2020-2022

#### Global, Regional, National, and Provincial Estimates.

New evidence shows important patterns of childhood vulnerability among families exposed to COVID-19 associated death<sup>2</sup>. Globally, it is estimated that more than 10 million children have lost a parent or caregiver to COVID-193. In the Africa Region, a minimum of 2.5 million children lost a parent or caregiver to COVID-19 in just two years. As of December 2022, in South Africa, over 285,000 children have been bereaved due to the excess COVID-19associated deaths of their parents or caregivers. Provinces with the highest burden were Kwazulu-Natal, Eastern Cape, and Gauteng, with over 60,000, 51,000, and 50,000 children affected, respectively (figure 1).

#### Losing A Parent or Caregiver.

COVID-19-associated orphanhood has reached proportions - globally, approximately one child was orphaned every six seconds in 2021. Research shows that children who have lost a caregiver have higher risks of physical, sexual, and emotional abuse and sexual exploitation, which may lead to HIV infections, mental health problems, economic strain, and food insecurity4. These children need rapid and ongoing support and access to services to prevent these tragic consequences. As we have learned from the HIV/ AIDS pandemic, if care and protection of orphaned children is not included in national health and social development responses, an entire generation of children will be affected.

### **Increasing Childhood Vulnerability** in COVID-19.

Both HIV and COVID-19 cause highest mortality amongst South African populations that have been marginalized. Head of household death can increase family poverty, violence, and transactional sexual exploitation for adolescent girls. Grandparents also have a major role in caregiving and financial support. With high COVID-19 mortality rates in older people, the crisis is exacerbated. It is essential that children at risk of separation from their families across the region are not placed in institutions - which are detrimental to their health, wellbeing, development, and safety. South Africa has led the way in promoting family-based care for children affected by HIV-associated orphanhood: It is critical now to guarantee investments in safe and nurturing family-based care for those who have lost their caregivers to COVID-19.

With over 338,360 estimated excess pandemic deaths in South Africa, Imperial College London (using MRC data) estimates the following impacts on children.

190,400

children have lost one or both parents (orphanhood) to COVID-19

214,660

children have lost their primary caregiver, including a parent or custodial grandparent to COVID-19.

285,100

children have lost their primary or secondary (co-residing grandparent) caregiver to COVID-19.

For nearly every adult excess death, one South African child loses a primary or secondary caregiver.

The Global Reference Group on Children Affected by COVID-19 including WHO, University of Oxford, USAID PEPFAR, CDC, UCL, Imperial College London, and the World Bank – led a research study on extreme threats to children during the COVID-19 pandemic, titled "Children: The Hidden Pandemic (2022)".

Disclaimer: The views, findings, and conclusions in this article are those of the authors and do not necessarily represent the views or official position of the U. S. Centers for Disease Control and Prevention (CDC), USAID, PEPFAR, or the U. S. Government.

Unwin, H. J. T., Hillis, S, Chen, Y., Cluver, L., Sherr, L., Goldman, P. S., ... & Flaxman, S. (2021). Global, regional, and national minimum estimates of children affected by COVID-19-associated orphanhood and caregiver death, by age and family circumstance: a modelling study. The Lancet CAH, 6(4), 249-259, 2022 04.

Lachman, J. M., Kelly, J., Cluver, L. D., Ward, C. L., Hutchings, J., & Gardner, F. Reducing Child Maltreatment in South Africa: Feasibility of a Locally Developed Parenting Program

for At--Risk Low--Income Families.



# What works to protect children affected by COVID-19-related orphanhood and vulnerability?

We have strong evidence from South Africa of useful and cost-effective programs to protect children who have lost caregivers:

- Provide families caring for orphaned children with a social grant,
- · Strengthen caregiving with a parenting support program,
- · Make sure children can go to school.

Figure 2 shows research on HIV-affected children in South Africa. Combined services to strengthen **parenting**, **economic**, **and schooling support protects children** from abuse, violence perpetration, and HIV-risk behaviours, and improves education, mental health, and healthcare access. The color-coded circles and numbers represent programming achievements in specific 2030 Sustainable Development Goals and targets respectively, benefitting health, education, gender equality, and peace and justice.

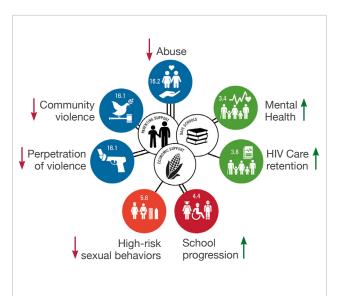


Fig 2: Lancet CAH (adapted diagram): combined social grants, interventions for South African children and adolescents <sup>2,3</sup>

#### What must can be done now in South Africa?

Care for children who have lost parents or caregivers to COVID-19 or excess deaths must be integrated into the national COVID-19 Response Plan as an urgent priority. The three essential components include:



**PREVENT deaths** of parents and caregivers through equitable vaccine coverage, treatment, and robust public health measures.



**PREPARE families** and systems to provide safe and loving family-based care for children who lost their primary caregivers, through kinship care, foster care, or adoption.



**PROTECT children** by providing bereavement support and alternative care services; and using evidence-based strategies that reduce poverty and violence and strengthen their recovery. Effective models combine 'cash plus care' social grants, positive parenting, and help keeping children in school.

Province	Excess Deaths	Pandemic Orpanhood (# children)	Caregiver Loss (# children)
Eastern Cape	58,814	34,571	51,891
Northern Cape	10,328	5,263	8,136
Limpopo	37,898	28,432	38,205
KwaZulu-Natal	69,797	41,659	60,944
Mpumalanga	25,963	16,197	23,390
Free State	19,491	8,734	14,559
North West	18,338	10,311	15,371
Gauteng	66,467	32,597	50,883
Western Cape	31,265	12,640	21,719
South Africa Total	338,361	190,404	285,098

**Table**: Provincial estimates for pandemic orphanhood and caregiver loss based on excess deaths, South Africa (MRC death data, NICD age specific COVID hospital death data)

In communities, Civil Society Organizations and Faith-Based Organizations are often first line responders and play a huge role in connecting with and caring for children affected by orphanhood and bereavement. Harmonization of community programmes that protect public health, build parenting skills for surviving caregivers and support education, with national plans on child protection and social protection in South Africa can ensure sustainable and more integrated responses.

Data at provincial levels can inform localized programs, by indicating where the orphanhood burden is highest. Essential collaborations between health, education, and social development sectors, along with national, donor, private, and faith-based sectors, will help identify children suffering bereavement, and link them to support and services that promote their recovery and resilience. The time to bring hope for every child still reeling from their continued pandemic-linked losses, is now. By caring together for these children, this nation can build flourishing families and communities.

In the words of Nelson Mandela, "There can be no keener revelation of a society's soul than the way in which it treats its children."