

Where Are the Children? Identifying Children Who Need Care and Treatment

Kigali 18 June 2007: A panel chaired by UNICEF's Director of Programmes Alan Court discussed the missing face of children in HIV treatment programmes. The panelists and topics presented were:

- Matthews Maruva of Elizabeth Glazer Pediatric AIDS Foundation on 'Barriers to diagnosis and disclosure of HIV infection in children in Zimbabwe';
- Bettina Schunter of UNICEF on 'Family disclosure, Improved Survival Outcomes for Affected Children in Punjab';
- Agnes Binagwaho of Rwanda's AIDS Control Commission on 'Improved Paediatric HIV/AIDS Care and Treatment through Acceleration of HIV Testing Services';
- John Obonyo of Tororo District Hospital on 'Routine Pediatric HIV Counseling and Testing to link Prevention of Mother to Child HIV Transmission and Pediatric HIV Care Services in a Ugandan Health District Hospital'; and
- Eunice Kapandura of Acres of Love on 'The Experience of a Young Person Living with HIV who has Benefited from Identification and is Making a Difference in the Lives of HIV Positive Children and Young People. [Read more...](#)

The main issue to come out clearly in the presentations was the missing faces of children in planning for HIV and AIDS programmes. Three years ago, no one could find any data on children and HIV and this didn't appear to bother anyone. Several reasons accounted for this, mainly denial, stigma, the fear of a mother to disclose her HIV status, lack of support from fathers, and medical staff showing no concern on the health status of the children.

In 2003 and onwards, as the missing face of children became a rallying point for advocacy, research was conducted and confirmed that children, hard hit by HIV and AIDS, were receiving little support.

Countries like Rwanda have shown tremendous political commitment to reversing the trend and community mobilization efforts to ensure that mothers are aware of, and are able to access, services to prevent and protect the child are beginning to pay off.

However, fathers remain the missing link. The panelists agreed that the battle to protect children so far weighs heavily on the mother's side. The father is absent and, sometimes, a woman receives no support to the extent that she fears disclosing her status to her husband.

This point was brought home by the testimony of an HIV positive young mother, who said she had been a virgin up to the time she married but then found herself infected and widowed only fourteen months into her marriage. Had it not been for the support she received from an HIV support group, she wouldn't have lived on.

She said disclosing one's HIV status is an important step not only in protecting adults, but also children and keeping family ties, thus ensuring the child's right to live and be

cared for by both parents is protected. The session called upon all implementers to ensure the child's face is prominent in all HIV programming and interventions.

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