

HIV/ AIDS in a Fragile State: An Analysis of Structural Factors that shape Vulnerability and Resilience of Child-Headed Households in Zimbabwe.

Introduction: Over the past decade Zimbabwe has faced critical structural challenges in the various domains of health, education, economic and social welfare. Although on the road to recovery, the country is still considered a fragile state; fragile states are countries “where the state power is unable and/or unwilling to deliver core functions to the majority of its people” (OECD in Stepputat and Engberg-Pedersen, 2008). These conditions exacerbate the vulnerability of already vulnerable populations such as the poor, women, orphans and vulnerable children and migrants. “Vulnerability refers to people who are at a higher risk and have reduced ability to cope with negative impacts” UNICEF (2006). Child-headed households are a particularly vulnerable population group often faced with myriad survival challenges. This analysis sought to assess how structural factors in Zimbabwe shape their vulnerability and resilience. Resilience is “the human capacity to face, overcome and be strengthened by or even transformed by, the adversities of life” (Grotberg, 1995). Structural factors are the “physical, social, cultural, organizational, community, economic, legal or policy aspects of the environment that impede or facilitate efforts to avoid HIV infection”, in this study however, structural factors refer to wellbeing and not HIV infection.

Methods: This situation analysis is the first phase of a larger study on the Quality of Life of child-headed households in Zimbabwe. A qualitative study design approach was employed. Data collection was two pronged with the initial data being collected between May 2012 and February 2013 through a review of literature obtained from various databases and search engines. 9 journal articles, 3 theses, 13 reports and 6 conference proceedings and 18 newspaper articles published between January 2011 and January 2013 were reviewed. In the second prong, data was collected between April and May 2013 in three districts in Zimbabwe- Harare, Chegutu and Mhondoro districts and a total of 19 Child-headed household interviews, 2 key informant focus group discussions and 6 key informant interviews. Thematic analysis was conducted to identify emerging themes from the literature and interviews.

Results: Structural factors that increased the vulnerability of child-headed households can be divided into social, economic, policy and community domains. Collectively these structural factors include Food insecurity; Migration to neighbouring countries; Cholera outbreak; disintegration of the health system; weakened safety nets due to migration, morbidity and poverty; hyper-inflation and economic meltdown; shortage of commodities and unemployment. Increased vulnerability recorded among child-headed households include: reduced financial and material support from the extended family; orphans stopped receiving Better Education Assistance Module (BEAM) and dropped out of school; flooding of the informal sector making it difficult to piece jobs. Increased resilience was recorded as the economic meltdown resulted in a thriving black market economy creating employment for CHH.

Conclusion & Recommendations: The socio-economic instability in Zimbabwe increases the vulnerability of child-headed households through impeding on their survival strategies. Structural conditions also offered opportunities for children to cope with their challenges of orphanhood. There is a crucial need for programmatic focus on this often overlooked population group particularly in housing, health and livelihoods.

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