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Introduction and background

Access to health care is all about receiving support and treatment, the links between treatment and prevention and how they can combine to reduce the impact of infections; and the barriers to receiving treatment. Children who have been orphaned by HIV/AIDS may not receive the health care they need. This is sometimes because it's assumed that they are infected with HIV and their illnesses are untreatable. However, most AIDS orphans are not HIV infected. Research by UNAIDS shows that about 2/3 of children born to HIV positive parents do not contract the infection. Thus HIV/AIDS orphans are at a greater risk of dying of preventable infections because of the mistaken belief that when they become ill, it must be due to HIV/AIDS and, therefore, no point in seeking medical care.

Study objectives

The study examines the effects of HIV/AIDS on orphans and vulnerable children's (OVCs) access to health care. It identifies health care determinants and challenges to health, including morbidity pattern, perceived quality of health care support and health-promotion within OVCs.

Methodology:

A descriptive cross-sectional study design consisting of judgmental/purposive sampling was used to select the study locations. The study population was OVC's parent/s, family caregivers/guardians and community key informants. A household with a child less than 15 years of age orphaned or made vulnerable by HIV/AIDS or a related illness was the sampling unit whereas the sampling frame included all households with children less than 15 years of age orphaned or made vulnerable by HIV/AIDS or related diseases in Kibera division. Sample size was determined using Dobson's formula for descriptive studies. Data was collected using both quantitative and qualitative techniques. Quantitative data was analyzed using SPSS computer.

Policy recommendations
There is need to address the material needs of AIDS-affected households, whether in form of income-generating activities/projects, vocational training, food, clothing or school fees. HIV-positive parents and guardians are very vocal about the need for material support to provide for their many dependants.

There is also need to promote and improve the provision of quality health care to OVCs at an affordable cost. It is important to introduce a social insurance scheme whose premium regimen can be affordable by low income households.

The government through the ministry of health should ensure adequate supply of drugs, more trained personnel and diagnostic equipment such as laboratories and x-ray machines in order to enhance access to treatment for OVCs. Government officers from the relevant fields should also increase their surveillance in getting rid of quacks in Kibera who go about dishing out drugs to unsuspecting clients with full disregard of the ethics of medical practice in Kenya. Further, the government should explore the role of alternative health care providers.