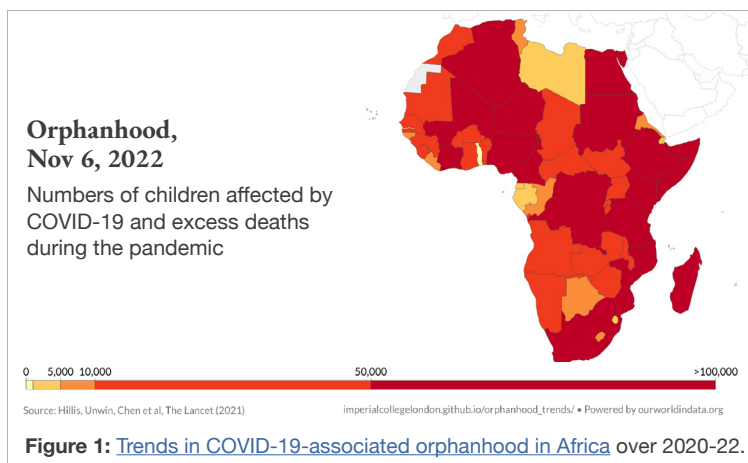




COVID-19-Associated Orphanhood in Malawi¹

An urgent call to integrate care for orphaned children into every national plan for children.



Global, Regional, and Malawi Minimum Estimates.

New evidence shows alarming patterns of childhood vulnerability, especially among families exposed to COVID-19-associated death.¹ Globally, it is estimated that more than 10.5 million children have lost a parent or caregiver to COVID-19 as of May 2022¹. Furthermore, in Africa, it is estimated that over 2.5 million children have lost a parent or caregiver to COVID-19 in just two years (figure 1). Research shows that COVID-19 deaths are underreported; therefore, these estimates are based on the total number of deaths from any cause during the pandemic, reflecting the true impact of the pandemic². Therefore, any child that lost a parent or caregiver during the pandemic is vulnerable and must be identified and linked to care³. Malawi had a minimum of 38,800 children bereaved by the death of a parent or caregiver due to COVID-19, by November 2022.

Losing A Parent or Caregiver.

Research shows that children who have lost a parent or caregiver have higher risks of physical, sexual, and emotional abuse, which may lead to HIV infections, mental health problems, economic strain, and food insecurity³. In Malawi, as of 2015, “over 1 million children did not live with their biologic parents.”⁴ The number of children newly affected by orphanhood in Malawi nearly doubled over six months (July 2021 - December 2021) compared to the first 12 months of the pandemic. We learned from the HIV/ AIDS pandemic that these children need immediate support to prevent the generational impact of these challenges.

Increasing Childhood Vulnerability in COVID-19.

HIV and COVID-19 cause high mortality amongst Malawian populations, particularly marginalized groups. The death of the head of household can increase family poverty, violence, and transactional sexual exploitation for adolescent girls. Grand-parents also have a significant role in caregiving and financial support. With high COVID-19-related mortality rates in older people, the crisis is exacerbated. Children at risk of separation from their families across the region must not be placed in institutions – which are detrimental to their health, well-being, development, and safety. Malawi has promoted family-based care for orphaned and vulnerable children⁴; therefore, it is critical now to guarantee investments to further support safe and nurturing family-based care for those who have lost their caregivers during the pandemic.

With over 21,200 excess pandemic deaths occurring through November 7, 2022 in Malawi, the Imperial College London's [Orphanhood Tracker](#) further reports at a minimum in Malawi

32,000

children have lost one or both parent(s) to COVID-19.

35,200

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

38,800

children have lost their primary or secondary caregiver to COVID-19.

In Malawi, for every single excess pandemic death, approximately two children lose a parent or caregiver.

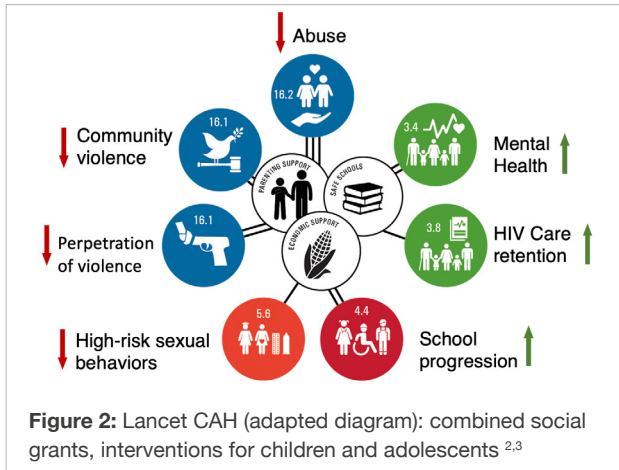
Disclaimer: The views, findings, and conclusions in this article are those of the authors and do not necessarily represent the views or official position of the U. S. Centers for Disease Control and Prevention (CDC), USAID, PEPFAR, or the U. S. Government. The Global Reference Group on Children Affected 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](#)” (September 2022).

¹ Hillis S, N'konzi JN, Msemburi W, et al. Orphanhood and Caregiver Loss Among Children Based on New Global Excess COVID-19 Death Estimates. *JAMA Pediatr*. Published online September 06, 2022. doi:10.1001/jamapediatrics.2022.3157

² Wang H, Paulson K R, Pease S A et al. Estimating excess mortality due to the COVID-19 pandemic: a systematic analysis of COVID-19-related mortality, 2020–21, *The Lancet*, Volume 399, Issue 10334, 2022, Pages 1513–1536, ISSN 0140-6736, [https://doi.org/10.1016/S0140-6736\(21\)02796-3](https://doi.org/10.1016/S0140-6736(21)02796-3)

³ 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.

⁴ National Plan of Action for Vulnerable Children in Malawi 2015-2019. Available [here](#)

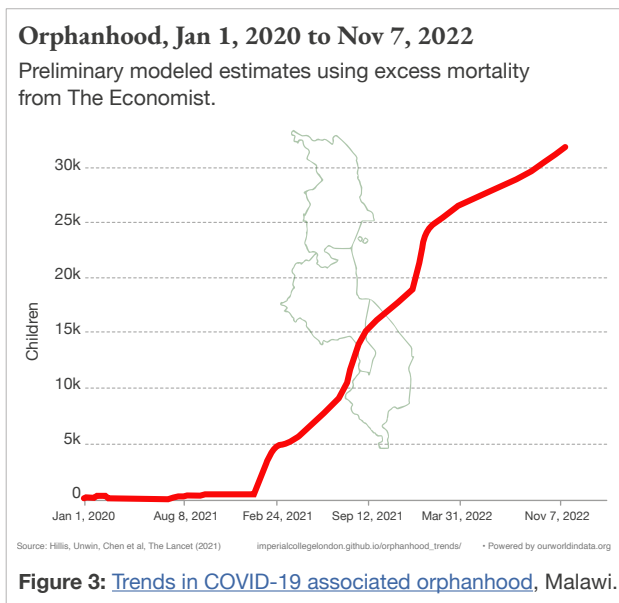


What works to protect children affected by COVID-19-related orphanhood and vulnerability?

We have strong evidence of valuable 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 that combined services to strengthen **parenting, economic, and schooling support protect children** from abuse, violence perpetration, and HIV-risk behaviors. These combined services also improve education, mental health, and healthcare access and reduce abuse, community violence, violence perpetration, and high-risk sexual behaviors. 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.



What can be done now in Malawi?

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 using evidence-based strategies that reduce poverty and violence and strengthen their recovery. Effective models combine ‘cash plus care’ social grants, evidence-based parenting programs, and keeping children in school.

Civil Society Organizations and Faith-Based Organizations are often first-line responders in communities and play a massive role in identifying, connecting with, and caring for children and adolescents at increased risk of being orphaned. To deliver much-needed support to families and children, the Malawian government, with local and international partners, launched the [National Plan of Action for Vulnerable Children](#), [COVID-19 Urban Cash Intervention](#) and expansion of the Afikepo Program, which highlight the political commitment to strengthen coordination between the government and CSOs in response to the COVID-19 pandemic. Harmonizing existing programs that build parenting skills for surviving caregivers and support education, with national plans on child protection, social protection, and crises response in Malawi, can ensure sustainable and more integrated responses.

Overall this scope expansion to build parenting skills for surviving caregivers and support education, child protection, and socio-economic protection in Malawi fully aligned with those proposed in the ‘PREPARE families’ and ‘PROTECT children’ approaches above can ensure sustainable child protection responses and impact. COVID-19-associated orphanhood does not come in waves – it is a steadily increasing slope (figure 3). Thus, we have a moral imperative to prioritize investments for children who are and who will be orphaned and have increased risks due to COVID-19 within the national COVID-19 Response Plan. Hesitation is a luxury we cannot afford. The time to act and call the world to act, to protect every child, is now.

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.”