

# The Impact of Parental Death on Child Outcomes: Evidence from Ethiopia



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**Parental death is one of the many risks faced by children in poor communities, especially in Africa in the context of the HIV/AIDS pandemic. While the death of a parent at any age is a significant and distressing event, Young Lives research in Ethiopia finds that the age the child is when a parent dies is important for outcomes later on. If a parent dies early on in a child's life (between ages 0 and 6) then the death *per se* does not seem to affect children's health, education, sense of optimism or self-esteem at age 12, in part due to the fact that younger children are more likely to be absorbed into the care of close relatives. In sharp contrast, if its mother dies in middle childhood (between ages 7 and 12) a child is less likely to be enrolled at school or to be able to read or write, and if the father dies it seems to reduce the child's sense of optimism. These effects appear to apply equally to boys and girls alike. These findings are an important contribution towards the development of a policy framework for supporting orphans and other vulnerable children in Ethiopia.**

In the early 1980s, barely two per cent of children in Africa under the age of 14 years had lost a parent. Two decades later, this figure had risen to over 15 per cent, making parental death a *systemic* shock experienced by children (Deininger et al. 2003). As in the rest sub-Saharan Africa, where the HIV/AIDS pandemic is estimated to have claimed at least 2 million lives and left 12 million children without parents, parental death is a significant risk faced by children in Ethiopia.

Although the adult HIV rate in Ethiopia of 2.1% in 2007 is low compared to some areas in Africa, the Ministry of Health estimates that between 800,000 and 1.2 million children have been orphaned due to AIDS. National data indicates that around 4.6 million or roughly 10 per cent of all children are orphans although for some age groups the percentage is as high as 24 per cent (DHS 2005). It is difficult to know precise total numbers, in part due to differing perceptions of who is an orphan, but we found that within the Young Lives older cohort of 1,000 children in Ethiopia, one in five children had lost either one or both parents by the time they reached the age of 12. Around 117 had lost a parent before the age of 7 to 8 (when we first interviewed them in Round 1) and a further 80 between then and our second survey round when they were then aged 11 to 12 years.

Losing a parent can lead to significant negative impacts on a child's short- and long-term welfare and development. Numerous studies have shown that children who have lost one or both parents accumulate fewer skills and qualifications, and that age, gender, and changes in home circumstances and caregiver can

## ORPHANS IN ETHIOPIA

- Around 4.6 million or roughly 10 per cent of all children in Ethiopia have lost one or both parents.
- Within the Young Lives older cohort, one in five children had lost one or both parents by the time they reached the age of 12.
- Losing a mother between the ages of 8 and 12 reduces school enrolment and achievement and increases drop-out.
- Children who have lost a parent accumulate fewer skills and qualifications, with potential impacts for them far into adult life.

all be contributing factors. As governments develop strategies for dealing with these effects, more evidence is needed to support the design of effective interventions for different groups of children.

Young Lives has examined the impact of parental death on children in Ethiopia, focusing on children's education outcomes (including school enrolment, ability to read and write, and numeracy skills) and their perceptions of well-being. We find that both education and subjective well-being are statistically affected by the death of a parent, especially for children who lose their mother in middle childhood. We also find that these effects apply to boys and girls alike.

## Government planning and policy

In response to the magnitude of the issues faced by increasing numbers of children in the context of HIV/AIDS, a global initiative linking UN agencies, national governments, donors and civil society organisations was launched to develop national plans of action for orphans and vulnerable children. Between 2003 and 2007, 17 African countries (including Ethiopia) took part in a rapid assessment, analysis and planning process to identify the needs of children who are orphaned, living with sick parents, or residing in extreme poverty. The process has generated significant debate about how to target vulnerable children without risking stigmatisation or creating tensions within the community, as well as how to define 'orphan' and 'vulnerable' in different contexts. While the initial plans tended to be regarded as an emergency response, many now see the need for greater cross-sector coordination to integrate planning for orphans and vulnerable children (OVCs) into wider government strategies and poverty reduction processes. Within this there is also recognition of the need for a stronger evidence base (particularly in relation to age and gender) to take into account the needs of different groups of children.

Ethiopia's 2004-2006 National Plan of Action for orphans and vulnerable children identified the need for a more coordinated approach to supporting orphans through the building of legal and regulatory frameworks, situation analysis, advocacy and capacity building. While the plan has not yet been extended, government ministries, donors, UN agencies and NGOs are working to coordinate their efforts under the Federal HIV/AIDS Prevention and Control Office (HAPCO) and the Ministry of Women's Affairs is planning for the development of a comprehensive child protection policy.

In the first place there is a need for data to establish both numbers and to document the needs of orphans and other vulnerable children in Ethiopia, especially in relation to access to education, healthcare, shelter, other basic needs and psychosocial support. Under HAPCO, the national OVC taskforce is planning to undertake a new situation analysis as a vital first step towards establishing a long-term policy framework. Research such as this study by Young Lives can make an important contribution towards building the necessary evidence base.

## The impact of losing a parent on children's development

Our in-depth participatory discussions with children and adults in five communities suggest that losing a parent is perceived to be one of the main threats to children's well-being. When we look at the effect it has on children's welfare, we find differences depending whether it is the mother or father who dies and the child's age when it happens.

Losing a mother in middle childhood (between ages 8 and 12) has a significant negative impact on schooling outcomes, compared to if the mother had not died. As Table 1 shows, losing the mother reduces school enrolment by around 21 per cent, increases the percentage of children who cannot write at all, even with difficulty and with mistakes, by around 20 per cent, and increases the number who cannot read at all or can read only letters rather than words or sentences by around 30 per cent. While the death of a father does not have the same impact on a child's education, it does seem to reduce the sense of optimism a child feels about their life and future, and this is probably linked to economic factors.

**Table 1. Schooling outcomes at age 12 (Young Lives older cohort)**

	Both parents alive at age 12	Mother died between ages 8 and 12	Father died between ages 8 and 12
School enrolment	95%	78%*	92%
Missed school for at least a week over past year	13%	33%*	13%
Drop-out rate	2%	11%*	1%
Never schooled	2%	10%*	5%
Proportion who cannot read anything or read only letters (not words or sentences)	23%	42%*	25%
Cannot write at all even with difficulty and errors	10%	26%*	9%
<i>Caregiver perception of what grade they would like the child to complete</i>			
Caregivers who are close relatives (parent/grandparent/sibling)	12	12.3	11.8
Other caregivers (distant or non-relatives)	12	7*	–

\* significantly different at the 10% level or more from the group of children with both parents alive.

Source: Adapted from Himaz 2009: Table 1

We also looked at the effect that losing a parent early in childhood (between ages 0 to 6) has on children's outcomes at age 12, compared with the outcomes of those that did not lose a parent, and find that parental death before age 4 does not affect children's health, education, sense of optimism or self-esteem (Table 2). This may be because most of the children in our sample who lost a parent at such a young age benefited from a range of potential 'protective factors' such as being integrated into the households of close relatives. Many children also showed positive personal traits such as energy and ambition (see Bekele's story, below), although this would not be enough to lift a child out of poverty in the absence of other support. Having a smooth transition into a new household after a parent's death seems to be important, as does being treated well by their new caregivers. Other protective factors include having supportive friends and peers, and caregivers who feel positively about the child's education (Himaz 2009).

**Table 2.** Subjective well-being and psychosocial outcomes at age 12 (Young Lives older cohort)

	Both parents alive at age 12	Mother died between ages 8 and 12	Father died between ages 8 and 12
Children's perception of current position on 'ladder' ranging from 1 to 9	4.35	4.13	4.04
Expected position 4 years from now	6.22	5.57	5.55*
'Perception of respect' index (normalised score, mean 0, standard deviation 1)	0.07	-0.14*	0.07
Feelings of agency (normalised score, mean 0, standard deviation 1)	0.32	0.19	0.40
Feelings of self esteem (normalised score, mean 0, standard deviation 1)	0.04	-0.19*	-0.08
Number (Total)	782	19	57
Boys	406	11	28
Girls	376	8	29

\* significantly different at the 10% level or more from the group of children with both parents alive

Source: Adapted from Himaz 2009: Table 1

### BEKELE'S STORY

Bekele (age 12) lives with his maternal grandmother (age 58) who took him to live with her as soon as his parents died. He shares a small, make-shift house with six other children, and although there is usually enough food he often eats the same thing every day. For this reason Bekele works hard, both in school and out of school, and when the researchers last visited he described how he earns 55 birr (about US\$5) each week by working two hours every evening and all day Saturday and Sunday.

His grandmother says he is different from other boys because he is more serious: "He does not tend to spend the money he earns [through running errands] on candies or chewing gums like other children." And that he is more ambitious: "[He] worries about the family like an adult and his prime objective is to be a great man and to get to a good status in the future."

Bekele says that he expects his life to be better than his grandmother's because "I will have knowledge wealth from my education [and] material wealth [such as] sofa and refrigerator since I am learning and work hard."

## The role of caregivers in shaping outcomes for children

In contrast to children who lose a parent when they are quite young, older children are not always absorbed into extended families with close relatives. They are sometimes sent out to be looked after by distant relatives, non-relatives or to work in other households, especially if their mother has died.

The majority of children who lose their mother experience a change in caregiver, and in 42 per cent of cases this is not an immediate relative. Poorer learning outcomes among maternal orphans may be partly due to the great changes in living arrangements these children face at a critical period in life – the time of starting school – which in turn has serious implications for future school enrolment. It may also cause them drop out early, miss school, and reduce their ability to read and write. None of these impacts upon educational outcomes are found among those children who have lost a father. They are unlikely to experience the same disruptions in living arrangements as

maternal orphans, with 89 per cent continuing to live with their mother as their main caregiver. But responsibility for the poor results cannot be solely attributed to the type of caregiver as children who are not maternal orphans fare better than children who are, even if they too are in the care of a distant relative or someone who isn't related to them at all.

## Changes in living circumstances

Our research also suggests that there is a need to address the significantly poorer circumstances faced by paternal orphans. The lower optimism among children who have lost their father may well be associated with the fact that these households are poorer due to losing the main breadwinner and so children may feel they have fewer assets available to them as well as having to work more. Indeed, having to work at home is given as a reason for missing school by 30 per cent of all the children in the Young Lives sample. Furthermore, the chances the remaining parent will die are high (this was alluded to by around 15 per cent of children who cited illness of a family member as the main reason they miss school). If this happens, and our data suggests that it will for at least a quarter of the children who have already lost their father, the data collected in future rounds of the Young Lives survey will show us what this means for these children's opportunities and outcomes as they go through life.

## Policy implications

The Young Lives research indicates the magnitude of the issues surrounding orphans in Ethiopia, both in terms of sheer numbers and the impact losing a parent has on children's welfare and development in the short and medium term.

Being orphaned in middle childhood – especially losing their mother – can lead to significant negative learning outcomes for children at age 12. This in turn may reduce a child's chances of getting a good job, their productivity and their sense of well-being. The death of their father in middle childhood reduces children's sense of optimism about the future, which is also likely to affect these areas.

These findings demonstrate the need for a policy framework to address the complexity of issues facing orphans and other vulnerable children in Ethiopia. Without a clear strategy, increasing numbers of children will be left to face the consequences of losing a parent with little support. Unless the disadvantages associated with parental death are mitigated through interventions such as specific social protection initiatives including education support, these children are more likely to become trapped in poverty.

The Government of Ethiopia along with other actors is currently working to build the evidence base to support the development of a policy framework. As this research highlights, it is important to distinguish the needs of different groups of children, particularly in relation to age, changes in caregiver and altered living circumstances, as these all have a strong bearing on children's outcomes in the context of losing a parent.

## RELATED RESOURCES

African Child Policy Forum 2008 *Reversed Roles and Stressed Souls: Child-Headed Households in Ethiopia*, Addis Ababa.

K. Deininger, M. Garcia and K. Subbarao (2003) 'AIDS-Induced Orphanhood as a Systemic Shock: Magnitude, Impact and Program Interventions in Africa', *World Development* 31:7.

Federal Democratic Republic of Ethiopia (2004) *Orphans and Vulnerable Children National Plan of Action 2004-2006*, Addis Ababa.

UNAIDS (2008) 'Country Situation: Ethiopia, July 2008', Factsheet (available at: [http://data.unaids.org/pub/FactSheet/2008/sa08\\_eth\\_en.pdf](http://data.unaids.org/pub/FactSheet/2008/sa08_eth_en.pdf))

UNICEF (2006) *Africa's Orphaned and Vulnerable Generations: Children Affected by AIDS*, New York: UNICEF.

## ACKNOWLEDGEMENTS AND CREDITS

This Policy Brief has been written by Laura Camfield, Rozana Himaz and Helen Murray based on two Young Lives working papers: *The Impact of Parental Death on Child Schooling and Subjective Well-being* (Himaz 2009) and *Does the Age of Orphaning Matter to Child Outcomes?* (Camfield and Himaz 2009, in press). We would like to thank Douglas Webb (UNICEF Ethiopia) and staff at Save the Children in Ethiopia and London for their comments and advice.

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