

Health Intervention and Social Work plus Education As Joint Prevention of Social Pathology in Orphans in Lesotho

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Original Article

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Abstract:

Joint efforts to protect adolescent girls from health consequences of HIV infection and social pathology of large urban environments celebrated its 10th year anniversary in 2019. More than 82 female orphaned children and adolescents have been receiving medical care against deadly diseases (AIDS, TB) and education. No death from HIV disease have been noted during that period.

Introduction

Several papers in *Clinical Social Work & Health Intervention*, *American Journal of Tropical Medicine*, *Medical Horizon*, *Journal of Prenatal and Perinatal Psychology and Medicine*, *Prenatal & Life Sciences Journal*, etc., as in journals related to the prevention of social pathology, social work in the tropics, have been reporting the need for joint projects addressing social needs and social work in combination with healthcare against three major killers - HIV, tuberculosis, and malaria. Similar programs have been successful in: Cambodia and India (HIV therapy plus education); Kenya (Nutrition plus education); Uganda, Lebanon, Ukraine (HIV, TB and malnutrition). HIV and TB in migrants and homeless ventures between social work and healthcare are feasible, cheaper and require less staff than those run separately for health problems and separately for social distress (street life, street children, orphan status, substance abuse). (1-5)

Methods

The aim of this paper is to present a report of a 10 year successful program oriented in both

fields relating to social pathology - orphan status due to deadly disease; AIDS and diseases belonging to major killers in Sub-Saharan Africa (HIV TB).The orphanage serves for 18 female children where both parents or one died from a major killer in the South African region (AIDS, TB) in a 50,000 rural region of several villages near Maseru. Since 2009, it has been served by staff from the Dept. of Missiology John Paul School of Missiology, the SEUC Bicolored World NGO with the St. Elizabeth University Missiology program and St Cecilia Parish (Fig Photo) Habua-sono.

Results and Discussion

Within the last 10 years more than 80 female orphans have been accepted for school and full boarding; 54 of them also due to HIV, for boarding education and healthcare. Two female humanitarian workers from Bicolored World and SEUC with local staff of teachers directly observed DOT therapy for HIV has been successfully administered for 10 years and none of children had died directly from AIDS or TB or other opportunistic infections. Joint program-educ-



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tion-healthcare plus prevention of social pathology (orphan status, street childhood) was amalgamated into one functioning program resulting in inclusion of adolescents either back to their incomplete or surrogate families, or directly to high school or work training in the neighboring (50 km border distance) capital city of 200,000 inhabitants for studies or work in RSA. Before this, similar programs in Ha Buasono had been run by the same team in Kenya, Uganda, Ukraine, Greece, Cambodia or India in 2002-2010 (6-12).

Conclusion

In conclusion, orphan status may be surprisingly protective in early detection of three major killers – HIV, TB and Malnutrition because full boarded orphanages offer apart of medical care, free education and free food as prevention in anti-malnutrition strategy, combating together 3 major UN goals in Sub-Saharan Africa - nutrition, health, education, combined in one program.

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