

# Caregiver's health is strong predictor of orphan's health

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The health of a caregiver is the most important predictor of orphan health, according to a new Duke University study that spans five less-wealthy nations in Africa and Asia. More important than an orphan's geographic location, living conditions or past trauma, the Duke study finds that an unhealthy caregiver likely means an unhealthy child.

The findings prompt Duke researchers to call for international orphan policies to place greater attention on assessing and treating an orphan and his caregiver's health together, rather than focusing solely on children's health.

Published in [PLoS One](#) today, the study of more than 1,300 randomly selected [orphans](#) and abandoned children from six diverse settings found strong and consistent associations between poorer [child health](#) and poorer health among their caregivers. One in five children was in fair or [poor health](#), with one in four reporting symptoms like fever, cough and/or diarrhea in the previous two weeks. Forty-five percent of the caregivers in the study reported their own health to be fair or poor, and one out of four also had similar symptoms in the past two weeks.

Children in fair or poor health were also more likely to have suffered additional [traumatic events](#) beyond losing a parent and to receive fewer than three meals a day. However, children whose caregivers were more involved in their lives and well-being were less likely to be sick or unhealthy.

The multi-site study included community-dwelling orphans ages 6-12 and their caregivers from six culturally- and economically-diverse sites across five countries: Cambodia, Ethiopia, India, Kenya and Tanzania. All of the children in the study have survived the death of one parent or were abandoned by both parents.

Of 153 million children orphaned worldwide, 145 million reside in less-wealthy nations where high rates of HIV/AIDS and other diseases like malaria and tuberculosis claim thousands of lives every day.

"This study produces strong evidence to inform policy and resource allocation relevant to the health of this large vulnerable child population worldwide," said Nathan Thielman, lead author and associate professor of medicine and global health at the Duke Global Health Institute.

"Specifically, policies that promote orphan well-being should include health assessments and interventions that target the caregiver-child dyad."

Researchers say a lack of economic resources may be a contributor to poor child health. Orphans are often cared for in households headed by females or the elderly; these households may have less money and are less likely to cover medical expenses associated with caregiver illness, further limiting their ability to provide adequate nutrition and access to health care for the child.

The researchers say their study provides strong support for establishing more family-based clinics in resource-poor settings that offer services and treatment to both children and their [caregivers](#). They also suggest adding comprehensive caregiver health assessments to existing tools used to measure the well-being of orphans.

Provided by Duke University

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