

# HIV and livelihoods in Africa

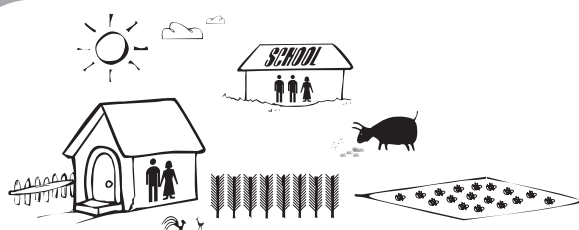
## What can National Societies do?

In 2004, the Food and Agriculture Organization (FAO) reported that AIDS had killed around 7 million agricultural workers since 1985 – in the 25 hardest-hit countries in Africa alone<sup>1</sup>. The FAO is now predicting that AIDS could kill an additional 16 million agricultural workers by 2020.

For millions of families, this means that the availability of food and their access to it is severely affected by AIDS. Many experts consider that **AIDS is not only a health, political**

*“Livelihoods support is a must in HIV-programmes”*

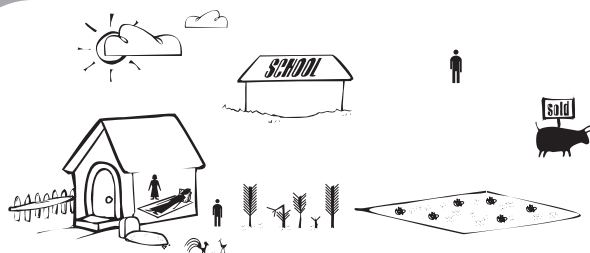




Both parents are engaged in subsistence farming, and their three children attend school.



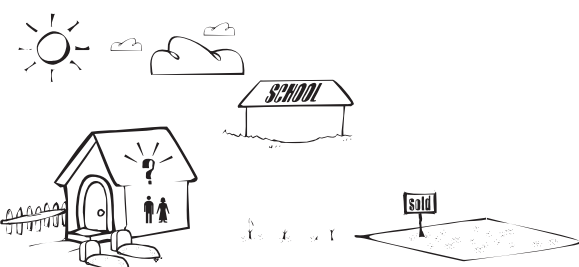
One parent falls ill and one child is withdrawn from school to help at home.



The ailing parent dies. The other parent falls ill. One child is sent to live with extended family, while the other two look after the second parent, tend the land and care for the animals. The condition of the land deteriorates. As a result some assets have to be sold.



The second ailing parent dies. The two children try to cope. Given the circumstances, they sell the land.



The children's ability to survive is uncertain.

and/or security crisis; it is increasingly being recognized as a livelihood crisis<sup>2</sup>. As a result, support is urgently needed for household and community-based livelihoods activities.

The impact of AIDS on an individual farmer's family can be devastating, as illustrated in the series of drawings.

Since agriculture is the key source of livelihoods<sup>3</sup> for the majority of African people affected by HIV, this good practice will concentrate in particular on agriculture. However, it is better to consider livelihoods more generally.

*HIV infection affects livelihoods and insecure livelihoods increase risk of HIV infection*

The Red Cross Red Crescent is recognized for its capacity to alleviate suffering in emergencies, and to mitigate the effects of disasters. During the Pan-African Conference in 2004, all African National Societies committed themselves to contribute significantly to the reduction of food insecurity (as a consequence of weakened livelihoods) of populations made vulnerable by HIV.

To this end, Red Cross Red Crescent programmes need to **focus** on three essential components:

- prevention* as a means of reducing HIV infection rates
- care* for those already infected with HIV; and
- mitigation* by improving the resilience<sup>4</sup> of communities to the social and economic impact of AIDS, through improved access to nutritious food and reliable sources of income.

1. [http://www.sahims.net/doclibrary/2004/09\\_September/08/Abstract/HIVAIDS%20food%20security%20and%20rural%20livelihoods.pdf](http://www.sahims.net/doclibrary/2004/09_September/08/Abstract/HIVAIDS%20food%20security%20and%20rural%20livelihoods.pdf)

2. [http://www.eldis.org/hivaids/vulnerability/pdfs/Socialprotection\\_devereux\\_sabates.pdf](http://www.eldis.org/hivaids/vulnerability/pdfs/Socialprotection_devereux_sabates.pdf)

3. Put simply, 'livelihoods' means varied ways by which people make a living. In a food security context, it refers to people, their capabilities, assets, and activities needed to sustain a means of living.

4. In this context, resilience means the ability to cope with and recover from illness/death in families affected by AIDS.



## Prevention

*By raising awareness about HIV and supporting livelihoods of vulnerable families, National Societies can help increase people's capacity to protect themselves from contracting HIV infection and reduce the incidence of HIV.*

For example, when families no longer have sufficient assets to sustain themselves, they may be forced to take on high-risk activities, which, in turn, make them more susceptible to contracting HIV (e.g. women and girls exchange sex for income, food or protection for themselves and/or their siblings). Loss of assets may also lead to seasonal or permanent labour migration. In this case, migrant families (including children) and those staying at home and lacking protection are at higher risk of contracting HIV infection<sup>5</sup>.

## Care

*By providing nutritional support and emphasizing the nutritional needs for people living with HIV (PLHIV) and AIDS National Societies help improve the quality of life and daily functioning of PLHIV. Intake of nutritious food helps boost the immune system which in turn can slow the progression of HIV into AIDS.*

Furthermore, adequate nutrition also increases the ability of all family members to cope with the situation. This in turn will alleviate suffering.

For example, weak nutritional status undermines people's ability to contribute to any kind of household economic activity or to participate in household tasks. In the case of PLHIV, insufficient food intake makes anti-retroviral therapy (ART) less effective. Without regular access to nutritious food, there is a high risk of PLHIV not continuing with ART, due to the discomfort caused by ingesting these drugs on an empty stomach.

## Mitigation

*By supporting livelihoods of PLHIV and their families, National Societies can help to reduce their vulnerability and increase their resilience in dealing with the socio-economic impacts of AIDS.*

*“AIDS is not only a health, political and/or security crisis; it is increasingly being recognized as a livelihood crisis”*

For example, for various reasons families affected by AIDS may not be able to produce crops or continue raising

livestock. They may not possess any other viable means of income or asset generation. Their children may not be able to attend school. Such families have little or no

chance of surviving with human dignity, let alone growing to their full potential. Their reduced capacity to sustain themselves has an impact on their basic standard of living, which in turn seriously jeopardizes their well-being and that of future generations.

## What steps can National Societies concretely take?

There are a number of initiatives National Societies can undertake concerning HIV to reduce its impact on households and communities. Ideally, the focus of the programmes should not be limited to only one aspect of the situation, but should aim to balance all three components, i.e. prevention, care and mitigation.

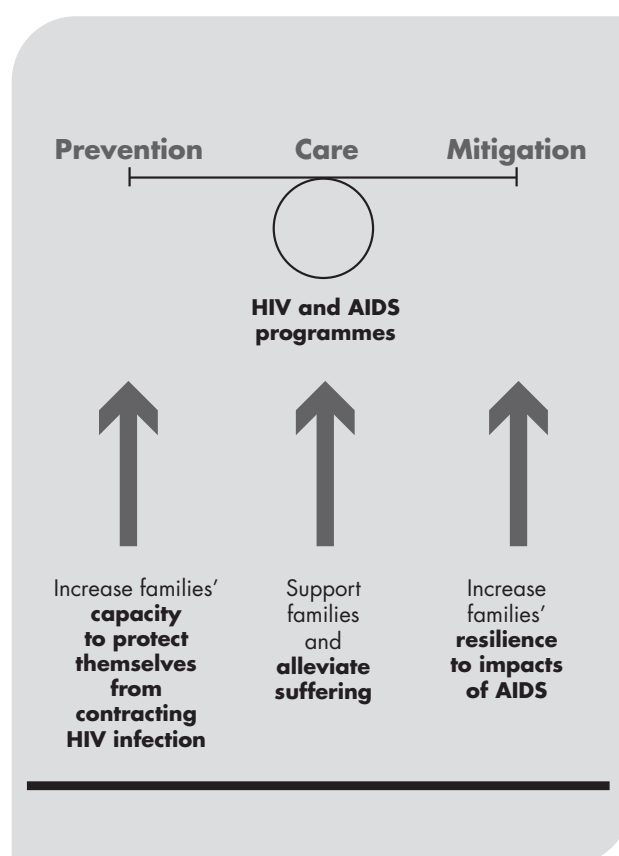


Figure 1: Three-pronged approach to be reflected in all National Society programmes.

Table 1 (see page 4) provides some basic examples of ways in which livelihoods can be integrated into a more comprehensive approach.

5. It must be noted that not all migrant families are at risk of contracting/transmitting HIV. However, the circumstances surrounding migration do increase this risk and can include, for example, poverty, exploitation, and separation from families and partners.

Table 1:

# Livelihoods initiatives

Prevention	Care	Mitigation
<p><b>To raise awareness and strengthen the capacity of vulnerable people to protect themselves from contracting HIV infection and reduce the incidence of HIV.</b></p> <p>By providing new income-generation opportunities, ideally located near people's homes, people will be able to sustain their livelihoods. National Societies could be engaged in programmes involving <b>skills training and education</b>.</p> <p><i>Examples: bike repair, soap making, bread making, carpentry, egg production, veterinary service, etc.</i></p>	<p><b>To alleviate the suffering of, provide support to, and fully involve PLHIV and their families.</b></p> <p>By ensuring that PLHIV <b>have access to nutritious food</b>, ART will be more effective. Food should be provided to both PLHIV and their family members – given that 'sharing' (often inevitable) will reduce food intake of the HIV infected person.</p> <p><i>Example: family food rations for PLHIV and their families, to be provided through home-based care<sup>6</sup> (HBC) programmes.</i></p>	<p><b>To increase resilience to impacts of AIDS within a family and the community as a whole.</b></p> <p>By providing <b>support to orphans and vulnerable children (OVCs)</b>, enabling them to earn a living in the short and/or long-term National Societies could support children in their efforts to complete their schooling and help them acquire necessary skills. They can also help raise awareness to protect them from abuse and 'asset grabbing' by family members.</p> <p><i>Examples:</i></p> <ul style="list-style-type: none"> <li>■ Community-support programmes can provide school uniforms, transport to school, school fees and materials in order to acquire or maintain children's education and/or vocational skills.</li> <li>■ Support school gardens and backyard gardens.</li> <li>■ If appropriate, National Societies could facilitate legal support to families affected by AIDS in the drafting of wills, provision of information on property rights, etc.</li> </ul>
<p>By providing <b>income-generation schemes</b> and relevant training in enhancing skills National Societies could assist with small-scale, self-employment business schemes.</p> <p><i>Examples: tea selling, charcoal production, fishing (boats, nets), seed multiplication, fodder production, poultry or small livestock breeding, etc.</i></p>	<p>Providing <b>food or cash</b> will prevent the family from selling productive assets in order to obtain food or cover the costs of transport and medical fees. This prevents 'asset erosion' and children may continue attending school.</p> <p><i>Examples: provision of food rations or small cash sums to PLHIV or alternatively food/cash-for-light-work or food/cash-for-training.</i></p>	
	<p>Providing <b>nutritional education</b> to PLHIV and their families could ensure that:</p> <ul style="list-style-type: none"> <li>■ improved intake of nutritious food can slow the progression of HIV into AIDS.</li> <li>■ better choices are made in food consumption.</li> <li>■ the loss of nutrients can be reduced by adopting better cooking practices.</li> <li>■ In addition, counselling on prevention of mother-to-child HIV transmission (via breast-feeding) enables the family to make the most appropriate nutritional choices.</li> </ul>	
<p>National Societies provide families with a <b>variety of means</b> to ensure they have access to sustainable and reliable sources of income and food.</p> <p><i>Examples: seeds, tools, fishing nets, material for small-scale irrigation, fertilizers, poultry, livestock, resources for backyard gardens, etc.</i></p>	<p>By providing <b>support for saving water and fuel</b>, families can economize on both money and time – enabling them to look after the sick and to meet medical costs.</p> <p><i>Example: provision of fuel-efficient stoves or of material to improve collection of rooftop water.</i></p>	<p>Providing <b>food or cash</b> to families will avoid further 'asset erosion' as a result of high medical fees due to illness and/or funeral costs.</p>
	<p>By providing <b>support for backyard gardens</b>, sufficient and good quality food can be produced for families. In addition, surpluses can provide small revenues and through gardening adolescents can increase their farming skills.</p>	<p>All initiatives mentioned under <b>prevention</b> could also serve mitigation purposes: <b>skills development</b> and the <b>provision of resources for sustaining reliable sources of income</b> as well as <b>food and income-generation schemes</b> for family members.</p>

<sup>6</sup> Home-based care (HBC) has many forms; within the Red Cross Red Crescent, it traditionally entails care and support provided by Red Cross Red Crescent volunteers, who at times may be HIV positive themselves. They act as care facilitators and support households with PLHIV by providing hygiene training, basic nursing care and food rations. They also disseminate key health and nutrition messages. Furthermore, they work to reduce the stigma associated with HIV. Additional livelihoods support should become part of the overall assistance provided.





These programmes work best as combinations and when they are carefully integrated with HIV/health programmes. ‘Stand-alone’ programmes should be avoided.

## **How can National Societies integrate livelihoods into HIV/health programmes and vice versa?**

The concept of *integrated programme strategies for HIV and livelihoods* aims to incorporate livelihoods/food security components into HIV/health programmes and vice versa. The purpose of such a holistic approach is to optimize the impact of all of programmes. This approach acknowledges that HIV is not only a health crisis, but a crisis of much broader proportions.

There are numerous ways of ensuring integration. Figure 2 (see page 6) provides some concrete examples of what National Societies can do to ensure an integrated approach is adopted.

Wherever feasible, programmes should be ‘mainstreamed’ – that is, incorporated into the existing activities and/or programmes of organizations already working in this area.

It is important for National Societies to always work closely with the affected communities, as they are better placed to identify initiatives that would be most appropriate and useful to address their needs.

*“Programmes that focus on both HIV/health and livelihoods increase their overall impact.”*

Figure 2:

## Examples of integrated food security/livelihoods and HIV/health programmes

National Societies supporting government initiatives in a 'roll-out ART' programme include various food security components for their clients, such as backyard gardens for PLHIV (provision of seeds, fencing material, water harvesters and some help with clearing land). A hospital garden is added to the location in which anti-retroviral drugs are provided; the garden serves as an example and as a meeting point to discuss both the effects of the disease, as well as backyard garden related problems.

National Societies working on HIV prevention develop income-generation projects for vulnerable households to support food security.

Families with PLHIV and OVCs involved in National Societies' HBC programmes benefit from food-for-light- work or cash-for-light- work projects.

National Societies involved in HIV prevention include nutritional counselling for pregnant and lactating women.

National Societies working with PLHIV support school garden projects, which provide training opportunities (and foodstuffs) for orphans and other children made vulnerable by HIV.

National Societies operating HBC programmes include a livelihoods component and start small-scale livestock programmes, backyard gardens, or income generating projects targeted at both PLHIV and their family members.

**Incorporation  
of food security/  
livelihoods programme  
activities in existing  
HIV/health-related  
programmes**



National Societies running HBC programmes include nutritional counselling for PLHIV including need for adequate food for ART adherence.

National Societies with an HIV-awareness programme in the townships include urban gardening projects.

National Societies working in health programmes with PLHIV incorporate care-providers and OVCs into programmes aiming to sustain household food security, by introducing small-scale activities such as home orchards, fish mongering, tea selling, honey making, or by providing loans or farming implements, etc.

National Societies operating a community project with communal gardens, poultry or fish rearing use a part of the revenues (financial or in-kind) to provide training for community-based care providers, including HBC facilitators.

National Societies supporting government in ART programmes include nutrition promotion and education, possibly strengthened with small-scale vegetable seed provision.



National Societies supporting families of PLHIV in backyard gardening include education on balanced diet and awareness-raising on HIV prevention.

National Societies involved in food aid distribution include condom distribution in a specific context alongside an HIV awareness campaign.

**Incorporation  
of HIV/health-related  
programme activities  
in existing  
food security/  
livelihoods programmes**

National Societies distributing seeds, tools and fertilizers include more awareness on ART, prevention strategies, and advocate on stigma and discrimination reduction.

National Societies working with the community on animal husbandry or fruit tree production include awareness of ART programmes or HBC project components.

National Societies involved in food distribution include education for pregnant mothers on the use of voluntary counselling and testing (VCT) for the prevention of mother-to-child transmission of HIV.

National Societies that run food security or livelihoods programmes (e.g. communal gardens, seed banks, seedling production, income-generation) include an HIV awareness component in the project.

National Societies working with existing agricultural or livelihood groups, (such as farmers cooperatives, trade unions, pastoralists, etc), include HIV awareness in their programmes.

National Societies engaged in income-generation or agricultural projects within a community use a part of the financial revenues to provide medical support for children living with HIV.

National Societies working with the community on animal husbandry or fruit tree production include awareness of ART programmes or HBC project components.







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