



MAINSTREAMING HIV/AIDS IN WATER SANITATION AND HYGIENE

Introduction

For many years, AIDS has been a leading cause of adult disease and deaths. The 2004/05 National HIV/AIDS behaviour survey by Ministry of Health surveillance unit estimates prevalence among adults aged 15-49 years at 6.4%, and 0.7% among children less than 5 years. And 5.8% among those aged 50-59 years.

Diarrhoeal diseases are the most common OI's experienced by people living with HIV/AIDS in Africa and elsewhere. Most of these OI's are water borne or waster washed and cause significant loss of functional days (miss work and school days, loose income, human suffering e.t.c)

Mainstreaming HIV/AIDS in WASH brings about more cost effectiveness of WASH services for People Living with HIV/AIDS (PLHA). It looks at aspects of risk and benefits associated with hygiene, Hand washing, faecal management, safe water and disposal of waste water.

Key areas to address/ discuss;

1. Abstract from Ministry of Water and Environment; WASH sector strategy for mainstreaming HIV/AIDS 2005-2010
2. Facts about HIV/AIDS
3. HIV/AIDS as a WASH sector issue
4. Strategies to mainstream HIV/AIDS in WASH

1. Abstract from Ministry of Water and Environment; WASH sector strategy for mainstreaming HIV/AIDS 2005-2010

Ministry of Water and Environment developed a strategy to provide guidelines on how to mainstream HIV/AIDS in the water and sanitation sector as mandated by the poverty Eradication Action Plan (PEAP).

The strategy doesn't propose stand alone activities but builds on and incorporates HIV/AIDS related activities into existing sector work plans both medium and long term.

Objectives

The strategy is presented under five major objectives. The proposed strategies do not stand alone but reinforce each other towards achieving a similar goal.

1. To promote the development and implementation of policies relevant to the HIV/AIDS epidemic in the water sector.
2. Preventing transmission and reducing the risk of infection in the water sector.
3. To provide care and support
4. To promote/ build partnership with NGOs/ CBOs , donors ,ministries, and other stakeholders for the effective implementation of AIDS activities in the water sector.
5. Capacity building of social scientists.

Mainstreaming HIV/AIDS by local government

At local government level/district, mainstreaming HIV/AIDS will take place at the district water office, sub- county level and village level.

District water office

The district water office will be responsible for mainstreaming HIV/AIDS at the district level and local government level. It will play a supervisory role and collaboration role; enter into complementary relationships with mostly NGOS and CBOs to offer technical and other forms



of support in the sector. Further the water office will assure quality of activities undertaken by the contractors to ensure that HIV/AIDS is mainstreamed in their activities. The role of the DWO will conform to and be regulated within the realm of decentralization and local government act and relevant water policies.

The LG already has links with NGOs that help in the planning process; these links can be exploited to encourage NGOs with skill and comparative advantage in mainstreaming HIV/AIDS to enter into partnerships with the water office.

Some NGOs, AIDS service organizations and Faith Based Organizations can also be influential sources of funding depending on their development bias. Also the AIDS support organization and AIDS information center and post test clubs of People Living with HIV are also valuable partners.

Sub-county

As a result of wide ranging reforms in the water supply and sanitation sector, sub counties are mandated to carry out implementation activities. Implementing HIV/AIDS will mainly be the role of extension workers which should be carried together with their main tasks and responsibilities which include the following;

- Mobilizing and training local communities in hygiene and sanitation improvements and community management of water supply and sanitation.
- Assisting rural communities and growth centers to analyze their water supply and sanitation situation and problems and find solutions.
- Supporting communities to plan and budget for their community –based water supply and sanitation projects and facilitate communities to request for assistance.
- Assisting communities to implement, monitor and evaluate their water and sanitation activities.
- Coordinating and supervising water and sanitation work being done in sub-counties.
- Monitoring and reporting progress.

Village level

At the village level, which is the final area of implementation of water and sanitation activities and also greatly ravaged by HIV/AIDS mainstreaming HIV/AIDS is critical in the following areas;

- Prioritizing community needs for assistance.
- Establishing water and sanitation committees with women holding managerial positions on equal basis with men.
- Siting water points within technically feasible limits
- Raising local share of capital contribution.
- Maintenance and repair of water systems
- Selecting water source caretakers
- Own and control sanitation facilities in a hygienic manner.

Role of the Civil Society in mainstreaming HIV/AIDS in Water Supply and Sanitation.

With the current reforms in the water sector, Civil Societies are used widely in implementing water and sanitation activities. They are particularly important given the low levels of staffing at district and sub county levels. For instance, health assistants and community development assistants are inadequate for mobilization and follow up across multi- sectors. Besides these are faced with serious constraints such as lack of transport and other incentives to enable them effectively perform. Since Civil Society is increasingly assuming the roles of implementation



of water and sanitation activities, they should be obliged and supported to incorporate aspects of HIV/AIDS in their operations.

2. Facts about HIV/AIDS (For this section, more time should be spent in discussion with the participants during strengthening of the structures)

How people get HIV/AIDS;

HIV is mainly spread through;

- Having sex with an infected person without a condom
- Injecting drugs with needles that are contaminated with blood containing HIV.
- Getting HIV-infected blood or other body fluids into a wound or deep cut through blood transfusion or accident.
- An HIV-positive mother passing the virus to her baby during pregnancy, child birth or when breast feeding.

You can not get HIV through;

- Kissing, hugging, shaking hands with an infected person
- Sharing drinking or eating utensils, sharing toilets with an infected person.
- Mosquito bites

How to control the spread of HIV;

People who are positive should;

- Obtain counselling and support to manage the condition
- Should take precaution to avoid re-infection and avoid passing it on to others

People who are negative should;

- Take precaution, not to have sex without a condom.
- Should have regular HIV tests with their sexual partners
- Provide support to HIV positive persons.

3.0 HIV/AIDS is a WASH sector issue

Issues of HIV/AIDS persons, affected families and WASH

- **Clean** water supply is needed to reduce exposure to germs which cause specific illnesses like diarrhoea, cholera e.t.c. Evidence indicates that HIV affected persons require 20 litres of water per capita daily (WSP 2007), including 1.5 litres of safe water for taking medicine and 24 buckets of water to wash daily in case of a bout of diarrhoea.
- **Sufficient** water supply is needed for personal hygiene as well as keeping the surrounding clean. E.g washing clothes, utensils, bathing, house mopping e.t.c.
- **Sufficient** water is also needed for small-scale food production (vegetables gardens, livestock)
- **Reliable** water supply is needed to avoid people resorting to unsafe sources which in turn would affect their health.
- HIV infected and affected persons need **Affordable** water supplies
- **Nearby** water supplies – especially for those who are sick and their care-givers. (High **time** costs of fetching water from afar impact on time for care and support, Risk of rape when collecting from further away)



Issues of HIV/AIDS and Sanitation

HIV reduces the body's ability to fight infection, many of such infections are water & sanitation related and can make HIV infected people very sick. Access to improved sanitation services can improve the health of PLHA.

- Diseases related to dirty water, inadequate toilets and lack of hand washing and other hygiene behaviour can be life threatening to HIV persons.
- Parasitic worms and organisms that cause diarrhoea are spread when germs from faeces get into peoples food, drink or eating utensils (hygienic practices should be promoted to avoid this).
- **Safe** sanitation facilities like pit latrines are needed to reduce exposure to pathogens. Presence of latrines in a compound is associated with fewer episodes of diarrhoea.
- **Accessible** sanitation facilities like pit latrines and hand washing facilities are necessary for the sick and weak.
- **Convenient** san. Facilities; those convenient for use by the sick
- Toilet structures big and wide enough to allow a sick person to be assisted to the toilet
- **Safe waste water management** should be promoted since the Tuberculosis bacilli breeds in damp ground.

Health & hygiene education

- Because of reduced immunity, HIV infected people are particularly susceptible to water-related diseases.
- Health and hygiene education is especially important to reduce exposure to pathogens - especially hand-washing. Evidence shows that 30- 40% reduction in diarrhoeal disease is associated with hand washing or presence of soap.
- Good nutrition is a key important component of healthy living and health education.

Discussion; Question and Answer (Facilitate this session in a participatory manner, taking note of all the answers raised by participants)

1. What are some of the problems related to limited access to water, and how can they be solved
 2. What are some of the key messages you would give to Home Based Care Givers in relation to WASH.
- 4. Strategies to mainstream HIV/AIDS in WASH (more discussion should be allowed in a participatory way)**
- Incorporate HIV/AIDS concerns into planning procedures; human resource management procedures, community mobilisation tools, capacity building strategies e.t.c
 - Promote sexual behaviour through advocacy for the ABC strategy (Abstain Be faithful, Use condoms).
 - Promote behaviour change programmes through seminars, community meetings, posters and brochures.
 - Ensure free access to condoms
 - Contact organisations in the area to implement some of the planned HIV/AIDS mainstreaming activities especially through the use of educational drama and film shows.
 - Develop HIV prevention messages in the local language.



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Learning for Practice and Policy
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**Action – Research
at household,
community and
school level project**



- Promote coordination and collaboration with other agencies, departments and organised groups in the communities.