IMPROVING PROJECT RESULTS THROUGH INTEGRATION

Why Integrate Water, Sanitation and Hygiene into HIV/AIDS Project Designs?

THE CHALLENGE

90% of People living with HIV/AIDS (PLWHA) are affected by diarrheal disease, often resulting in morbidity or mortality.¹

11 times greater risk for dying from diarrhea for HIV-positive infants than for infants who were HIV-negative according to a study done in the Democratic Republic of Congo.³

HIV+ babies are 6 times more likely to develop persistent diarrhea if they suffer from acute diarrhea.

20 to 80 liters of water per day (greater than the “basic access” of 20 liters per person) is needed additionally to support bedridden PLWHA.²

Risk is 3.5 times greater for HIV-negative babies born to HIV-positive mothers for developing recurrent bouts of diarrhea than babies born to HIV-negative mothers.⁴

THE SOLUTION

Providing access to a safe, reliable and sufficient water supply and basic sanitation is essential for both the PLWHAs and their caretakers who are often relatives, friends and neighbors. By integrating Water, Sanitation and Hygiene (WASH) you may see:

Prevention of Mother to Child Transmission
A reduction of exposure through unsafe breastfeeding, the option of safe alternative feeding and a reduction of the risks of sexual violence associated with collection.

Risk reduced by 1/2 for infant infection when safer infant feeding methods are implemented, combined with infant feeding counseling and support.⁵

Health Management
An increase in the effectiveness of treatment and a reduction in the chances of opportunistic infections such as diarrhea.

An estimated 1/3 decrease in diarrhea-related deaths in young children with improved sanitation facilities. If hygiene promotion is added, such as teaching proper hand washing techniques, deaths could be reduced by 2/3.

Home-Based Care
A reduction in the additional burden for care-givers and an improvement in quality of life and feelings of dignity of PLWHA.

30 to 40% reduction in diarrhea when hand washing, sanitation, and water treatment, and safe storage is implemented.⁷ PLWHA households with access to more water have cleaner environments and therefore fewer routes for transmitting diarrhea causing pathogens.⁶

Economic Stability
A decrease in the number of days PLWHAs and their caregivers miss from work due to hygiene and sanitation related relapses.

$9 in economic benefits for every dollar spent on sanitation⁸, which can accelerate economic and social development in countries where sanitation is a major cause of lost work and school days because of illness.⁹

Promising Futures, Community by Community
Plan
WASH and HIV

Worldwide, an estimated 33.3 million people live with HIV, the greatest burden being Sub-Saharan Africa with an estimated 22.5 million HIV positive people. HIV burden often coincides with regions experiencing high levels of poverty and low levels of access to water and sanitation. Opportunistic infections, resulting from a combination of environmental pathogens and the suppression of immune function in PLWHA, have negative effects on PLWHA’s quality of life and can hasten the progression of HIV to AIDS. The frequency of these infections is closely tied to the level of water and sanitation services available to households affected by the disease as well as the hygiene practices of household members. Evidence suggests that diarrheal disease, one of the more common opportunistic infections, reduces the absorption of antiretroviral medicines and essential nutrients further exacerbating the consequences of HIV and AIDS. Water and sanitation services which are located in close proximity to HIV-affected households can have important labor saving effects, reducing the burden of caregiving and allowing more time for other activities, including school and income generation. Above and beyond the needs of the general population, households affected by HIV/AIDS require a greater quantity of water for bathing, washing and taking medicine, adapted sanitation facilities that meet the unique needs of the chronically ill and excellent hygiene to prevent opportunistic infections. However, access to these services may in fact become more difficult for households caring for PLWHA due to declining physical health, worsening economic status and/or stigma.

- Easy access to safe and sufficient water and sanitation is indispensable for people living with HIV/AIDS and for the provision of home-based care to AIDS patients.
- The majority of HIV/AIDS patients are being cared for at home within their local communities by relatives, friends and neighbors. For the caregivers, adequate WASH greatly reduces the extra burdens which they already carry.
- Adequate access to water is needed for taking medicines, softening foods to make them palatable, bathing patients and washing soiled clothing and linen.
- For the patients, WASH means human dignity and basic access to personal hygiene. For example, over half of patients suffering from HIV/AIDS have chronic diarrhea. Having a latrine nearby is then crucial.
- For mothers who are HIV positive, the risk of transmitting the virus through breast milk is 1:3. Irrespective of whether they can, or for various reasons cannot replace breastfeeding by bottle feeding, clean water is important for the babies’ care.

LEARN MORE ABOUT PLAN’S INTERVENTIONS AND HOW THEY CAN IMPROVE YOUR PROJECT’S SUCCESS:

8 http://www.unwater.org/wwd08/docs/10Things.pdf
12 http://www.crsprogramquality.org/storage/pubs/watsan/WatSan-innovations-PLHIV2.pdf