WASH and HIV
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Overview

- Why integrate WASH into HIV/AIDS programmes? (and vice versa)
- Explore additional WASH needs of people living with HIV and AIDS
- Identify priority WASH practices to integrate into HIV/AIDS programmes
- Identify key considerations when integrating HIV into WASH programmes
- Share experiences
- Highlight some useful resources
Where do you stand on WASH and HIV?

• ...Haven’t given it much thought.
• ...Have been ‘watching that space’.
• ...Planning to engage, not sure where to start.
• ...Currently programming.
Why integrate WASH into HIV/AIDS programmes? *(USAID/WHO 2010)*

- Effects of ↓ access to WASH are magnified for HIV+/immune-compromised
- ↑ susceptibility to opportunistic infections such as diarrhoea (Lule et al. 2005)
- Infections reduce quality of life and can speed progression from HIV to AIDS (?)
- Diarrhoea reduces absorption of ARVs and essential nutrients (Bushen et al. 2004)
- ↑ evidence on WASH needs/health impacts of WASH interventions, for HIV+ people and their families

• WASH practices can
  – ↓ episodes & severity of diarrhoea among HIV+ people
  – help to protect caregivers/other household members from diarrhoeal disease (& HIV)

• A healthier/stronger household is more economically viable and resilient to the challenges of HIV
Doris lives in the western highlands of Papua New Guinea. She spends much of her time caring for her dependant husband, Fidelis. Fidelis is chronically ill with AIDS related illnesses, and suffers from regular bouts of debilitating diarrhoea. Doris found out she was HIV positive after being tested during an antenatal care visit early in 2010. Baby William is now six months old and is HIV negative.

What are the likely WASH needs of Doris and her family?
WASH needs of Doris and her family

ACCESS to ADEQUATE AMOUNTS of GOOD QUALITY WATER for:
- drinking;
- taking ARVs;
- food preparation;
- ? replacement feeding;
- washing clothes;
- personal hygiene

ACCESS to SANITATION for safe handling and disposal of faeces and items soaked with menstrual blood

HYGIENE:
- hand washing;
- menstrual management;
- food hygiene.

WASH needs of Doris and her family
Basic water needs of people living with HIV & AIDS (USAID/WHO 2010)

1 l/day. Water for replacement feeding of infants < 6 mths (w/o cleaning)

1.5 l/day. Water for taking ARVs.

2 l/day. Water for replacement feeding of infants > 6 mths (w/o cleaning)

20-80* l/day. Hygiene needs of person living with HIV, laundering clothes and bedding.

20 l/day min. Basic water for drinking, food preparation, laundering & personal hygiene.
Guidelines on

HIV and infant feeding

2010

Principles and recommendations for infant feeding in the context of HIV and a summary of evidence

World Health Organization

UNAIDS

UNFPA

UNICEF

Burnet Institute
## In case you are wondering....?

<table>
<thead>
<tr>
<th>FLUID</th>
<th>KEY POINT</th>
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<tbody>
<tr>
<td>Urine &amp; faeces</td>
<td>HIV has never been isolated in urine or faeces. (Water Environment Federation, 2000)</td>
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<tr>
<td></td>
<td>Urine and faeces quickly (in 1 hr) diminish infectivity of any HIV present. (Moore BE, 1993; Water Environment Federation, 2000)</td>
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<td>Likely to be more virus in faeces of people with end stage AIDS. Risk to caregivers more likely to be due to other pathogens in faeces.</td>
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<tr>
<td>Menstrual blood</td>
<td>Menstrual blood of HIV+ women may contain virus at a higher load than regular blood (Reichelderfer PS et al, 2000)</td>
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<td>Waste water</td>
<td>HIV infected blood introduced into dechlorinated tap water had no detectable virus after 5 mins. (Moore BE, 1993)</td>
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And what about the WASH needs of other marginalised groups whose behaviours put them at increased risk of HIV or other communicable diseases?

- Stigma and discrimination is exacerbated for people who sell sex or inject drugs
- Hand washing before injecting is protective against many infections, including blood borne viruses
- Access to safe water for people who inject drugs is critical, as it reduces a range of complications

Although WASH needs of HIV+ people exceed the needs of those who are uninfected, they often have less access to water and sanitation facilities than their neighbours (Magrath and Tesfu 2006).
Priority WASH practices to integrate into HIV/AIDS programmes (USAID/WHO 2010)

✓ Treat drinking water
✓ Store treated drinking water safely
✓ Promote hand washing
✓ Handle and dispose of faeces safely
✓ Manage menstruation
✓ Prepare, handle and store food safely
✓ Promote personal cleanliness of people living with HIV and their environment
Why integrate HIV into WASH sector programmes? (USAID/WHO 2010)

- Government Ministries often work in silos.
- Access to WASH is a basic human right (for everyone!); needs of HIV+ people often exceed those of general popn.
- Houses who have lost primary income earners are less able to pay for water/latrines.
- Fewer able bodied people in households means fewer people able to manage and engage with water/sanitation activities (Franks & Cleaver 2002).
Key considerations for integrating HIV into water supply and sanitation activities

• Protecting sectoral human resources through HIV prevention and mitigation activities

• Considering special hardware needs of those affected by HIV in WASH programmes and activities, for example
  – lengthening pump handles to make it easier to pump water
  – building wells or latrines closer to HIV affected households
  – building ramps or platforms for easier access

• ‘GIPA’ principles
Experience of AT in PNG......
• [http://www.wateraid.org/uk/what_we_do/how_we_work/equity_and_inclusion/8321.asp](http://www.wateraid.org/uk/what_we_do/how_we_work/equity_and_inclusion/8321.asp)
  – Studies, examples from Nepal, Tanzania, Ethiopia, India

• [http://www.watercentre.org/projects/sharing-experiences-hygiene](http://www.watercentre.org/projects/sharing-experiences-hygiene)
  – Hygiene Improvement Project, Ethiopia, Uganda, Kenya, Tanzania
http://www.wsscc.org/topics/hot-topics/hiv/aids-and-wash
http://www.hip.watsan.net/page/4489

- **WASH-HIV Integration Toolkit**
  - A collection of resources from the Hygiene Improvement Project and others to support the integration of water, sanitation, and hygiene (WASH) in HIV/AIDS programming.

- Also see publications and resources link
  [http://www.hip.watsan.net/page/4142](http://www.hip.watsan.net/page/4142)
Need help?

• Burnet Centre for International Health can partner with you to assist integration of HIV into WASH programming:
  – Project design
  – M & E
  – Operational research
  – Training

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