Flyer 2: Practical Outcomes of HIV/AIDS Mainstreaming

Purpose: Why Does Mainstreaming Matter?

The HIV/AIDS pandemic in sub-Saharan Africa has reached such crisis proportions that it affects every aspect of life. The goal of "mainstreaming HIV/AIDS" is to ensure that the impacts of HIV/AIDS are addressed and reduced in communities and within organizations, in all sectors. Many development and humanitarian organizations want to mainstream HIV/AIDS, but do not know where to start. Others wonder what an HIV/AIDS "mainstreamed programme" might look like and how it might operate.

This flyer continues a series that outlines basic lessons learned in mainstreaming HIV/AIDS, while maintaining core business. It offers practical illustrations of outcomes of mainstreaming HIV/AIDS in livelihoods' work, using examples from work in Malawi. These are examples of what mainstreaming could achieve, both in terms of change in an organisation's internal ways of working and the daily work of staff, and in how these can lead to direct improvements in lives of people at risk or already affected by AIDS. Subsequent flyers outline the mainstreaming process used by about 20 organisations in Malawi, including civil society organisations and government departments, with support from Oxfam.

Overview: Oxfam Malawi

Oxfam Malawi is funded by Novib, Oxfam GB, Oxfam Hong Kong, and Oxfam Ireland. The Shire Highlands Sustainable Livelihoods Programme operates in Mulanje and Thyolo Districts. The Partner Support Programme involves organisations, and national coalitions on education and economic justice.

Awareness and Sensitivity Must Lead to Action

Awareness-raising and training for managers and staff of development and humanitarian organisations, and of government departments, are essential steps in mainstreaming HIV/AIDS. However, if the process stops at "improved awareness," this does not result in practical changes in the way they work, nor does it lead to improvements in the situation of people affected by HIV/AIDS. It must go beyond awareness-raising.

Despite frequent references to the pandemic as "cross-cutting," and increasing calls for "multi-sectoral responses," many people who manage and implement programmes outside the health sector continue to carry out their work as if HIV/AIDS has no impact on themselves and their missions. The purpose of mainstreaming HIV/AIDS is to help people get beyond "business as usual" and to address the issues in meaningful ways in all sectors, both inside their own organisations and in the communities they serve.

A simple way to guide mainstreaming could be to ask of any situation, "How does HIV/AIDS come into play here?" Staff must learn to relate the disease to issues that at first glance might seem unrelated to illness and death, such as agriculture, or bureaucratic processes. Once relationships are seen, changes can be made.

The mainstreaming process cannot tell development workers to make specific changes, since it is impossible to anticipate all situations. It can guide them through a learning process, so they understand key issues of the pandemic, are comfortable thinking about them, and are better able to creatively and proactively change their ways of working. This flyer gives a few examples; readers are encouraged to supply information to others.

This is one of a series of flyers designed to assist organisations in mainstreaming the issue of HIV/AIDS into their core work and internal policies, without losing their primary focus. This is Flyer 2 (29 October 2001).

Agricultural Programmes: Labour Saving, High Returns

Staff of the livelihoods programme realized that certain activities were not accessible or relevant to families badly affected by shortages of labour and time brought on by AIDS. Women and girls in particular bear increasing burdens of farming and caring for others. Some activities have been modified to take into account how AIDS limits people's ability to engage in agriculture:

- Animal husbandry: Less emphasis on goats, and more on smaller livestock (rabbits or chickens), which are easier to care for, can be kept near the home, and create higher returns of food and cash.

- Soil conservation: Less emphasis on building labour-intensive ridges to channel rain water, but more on less intensive methods, such as planting soil-holding grasses along contour lines.

- Crop selection: Experimenting with hardy crops that need little maintenance, or give higher returns of nutritious food or cash income per unit of labour. Examples include herbs used for essential oils or perennial legumes.

Throughout, emphasis is on working with people who are affected, so they can identify their own constraints and propose and try alternatives.

AIDS Threatens Local Government Decentralization in Malawi

The Government of Malawi plans to change in fundamental ways by decentralizing authority and responsibility from central to district levels. Many participants of the decentralization process viewed AIDS as an issue that "the National AIDS Control Programme will deal with." They saw no need for decentralisation plans to address the issue of AIDS.

However, in Mulanje, the District Administrator, managers and staff of line ministries all spoke of ways in which AIDS undermines government's ability to function. Local government staff are themselves living with HIV or AIDS, or affected by chronic illness and death in others. Common results in government include higher absenteeism, growing health care costs, lower productivity, reduced work quality, and workforce losses as staff die and are not replaced. Thus, the reliability and quality of services provided to local communities suffer.

During a meeting to discuss the implementation plan for decentralisation, staff who had engaged in the AIDS mainstreaming process raised these points. They helped ensure that decentralisation plans were taken back for further thinking on how to better anticipate, plan for, and hopefully minimise these impacts from HIV/AIDS.

Targeting Those Affected Most

Development agencies must revaluate policies on how they target specific groups of people, taking into account the effects of HIV/AIDS.

Much development work, especially in the field of livelihoods, has traditionally given support to adults from 25 to 50 years of age. This is exactly the age group worst affected by chronic illness and death from HIV/AIDS.

With increasing understanding of how HIV/AIDS is affecting families, Oxfam and several partners are now starting to identify other groups to work with, such as orphans, children heading households, elderly caring for young children, and youth. They have a range of different needs and abilities, often distinguished by both gender and age. Some issues involve opportunities for education and training, support for child care, recreation, and so on.

Changing Ways of Working: Groups

Many development agencies use meetings to address "the community" at large, and rely on group-based activities for on-going work.

However, community and group initiatives may unintentionally exclude those affected by AIDS, who may not participate in such activities. Some are simply too weak or ill to participate. Women in particular may lack time, due to increasing burdens of care-giving, running the home, and providing food and cash. People may withdraw because they feel shame, or have been persecuted because they are HIV-positive or have relatives with AIDS.

Now that the issue has been identified, Oxfam and partners are linking with churches, home care providers, and meeting with individuals affected by AIDS, identifying new ways of working that do not inadvertently exclude badly affected people.