

# Water, sanitation & hygiene and HIV and AIDS: Opportunities for integration

Access to safe drinking water, sanitation and hygiene (WASH) is essential for the 33 million people worldwide living with HIV and AIDS. People living with HIV (PLHIV) have rates of diarrheal diseases up to six times higher than in those who are not infected, have greater need for hygiene than those whose immune systems are not compromised, and require good nutrition for antiretroviral therapy (ART) to work best. Partnerships with WASH programs have the potential to yield a range of benefits for PLHIV, improving health and protecting livelihoods.

## Improving treatment efficacy

Safe water to drink, adequate hygiene and clean, user-friendly and accessible toilets are essential to home-based care (HBC) for people living with HIV and their families. Antiretroviral (ARV) drugs, which can help people live better and longer lives, rely on adequate food and at least 1.5 liters of safe water a day to be effective. By reducing risk factors for diarrheal diseases, people living with HIV retain more nutrients, allowing ARVs to be more effective.

## Preventing opportunistic infections

Hygiene is critical for preventing the spread of disease, including pneumonia, the leading killer of children under five years old in the world. However, for PLHIV, hygiene can prevent a range of opportunistic infections, including diarrheal diseases. Studies have shown that improved hygiene practices can reduce the risk of diarrhea by 30% or more, greatly increasing quality of life.

## Mitigating stigma and discrimination

PLHIV are frequently unable to access community water taps and latrines due to stigma and discrimination. Inclusive WASH programs that emphasize universal access to safe drinking water and sanitation may serve to include people living with HIV as members of the community, helping to address stigma and discrimination and increasing access to basic services for everyone.



Many women and girls spend hours each day collecting water in containers that can weigh up to 40 pounds when full – the weight of a four-year-old American child.



**Zeinabu Kayisi, Malawi**

“Being able to maintain the pump myself makes me feel independent and strong!”

## Enhancing training and BCC

Use of latrines and regular hygiene behaviors, including hygienic food storage and menstrual hygiene, require behavior change communication (BCC) efforts and social marketing campaigns. These provide opportunities to improve the training of community health workers and other extension workers to build bridges between WASH and HIV/AIDS awareness and education programs worldwide, and to share best practices for BCC and other approaches common to the two sectors. For example, educating communities that HIV cannot be spread by toilet seats can reduce stigma against PLHIV and increase WASH access overall; this awareness-raising will be most successful when done jointly by both sectors.

## WaterAid's experience

Our work in Tanzania, Nepal, India and Ethiopia, among others, has highlighted important ways that WASH and HIV programs can be coordinated to have positive impacts for both:

- WASH organizations must be aware that PLHIV have increased need for water--both for hygiene and for consumption--and should approach projects from the standpoint of inclusivity so as to avoid perpetuating stigma.
- WASH and HIV organizations and government programs can work together to provide accurate information for PLWH and their caregivers on water treatment and storage, sanitary use of toilets, effective personal hygiene, hand-washing, general hygiene and menstrual hygiene.
- By joining up at the planning stage, WASH and HIV partners can together increase effective services that yield improved health outcomes for people infected and affected by HIV and AIDS, reduce stigma and discrimination, and enhance women's access to basic services by reducing their time spent seeking water.



Unsafe water leads to the spread of deadly water-related diseases like cholera and typhoid.



## Nadia, Rawanda

"The water has made a big difference. Before, the little children would always fall sick. I was lucky that the water came in time for my baby."



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