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# Overview of Nutrition and Food Efforts on the African Continent: The Africare Experience

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# Who we are

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- Founded in 1970, working throughout Africa
- Have been in a total of 35 countries
- Currently in 25 countries on the continent
- Provide development assistance in 3 Program areas:
  - Health & HIV/AIDS
  - Agriculture and Food Security
  - Water and Sanitation



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# Food Aid Program

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- ❑ USAID/DCHA/  
FFP – PL 480  
Title II
- ❑ USDA - Food for  
Progress & Food  
for Education
- ❑ World Food  
Program



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# 2008/9/10 Country Programs

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- **10 FFP food aid programs:**

Burkina Faso; Chad; Liberia; Malawi; Mali; Mozambique; Niger; Rwanda; Sierra Leone; and, Uganda

- **7 WFP programs countries:**

Mali; Mozambique; Namibia; Niger; Rwanda; Zimbabwe; and, Zambia.

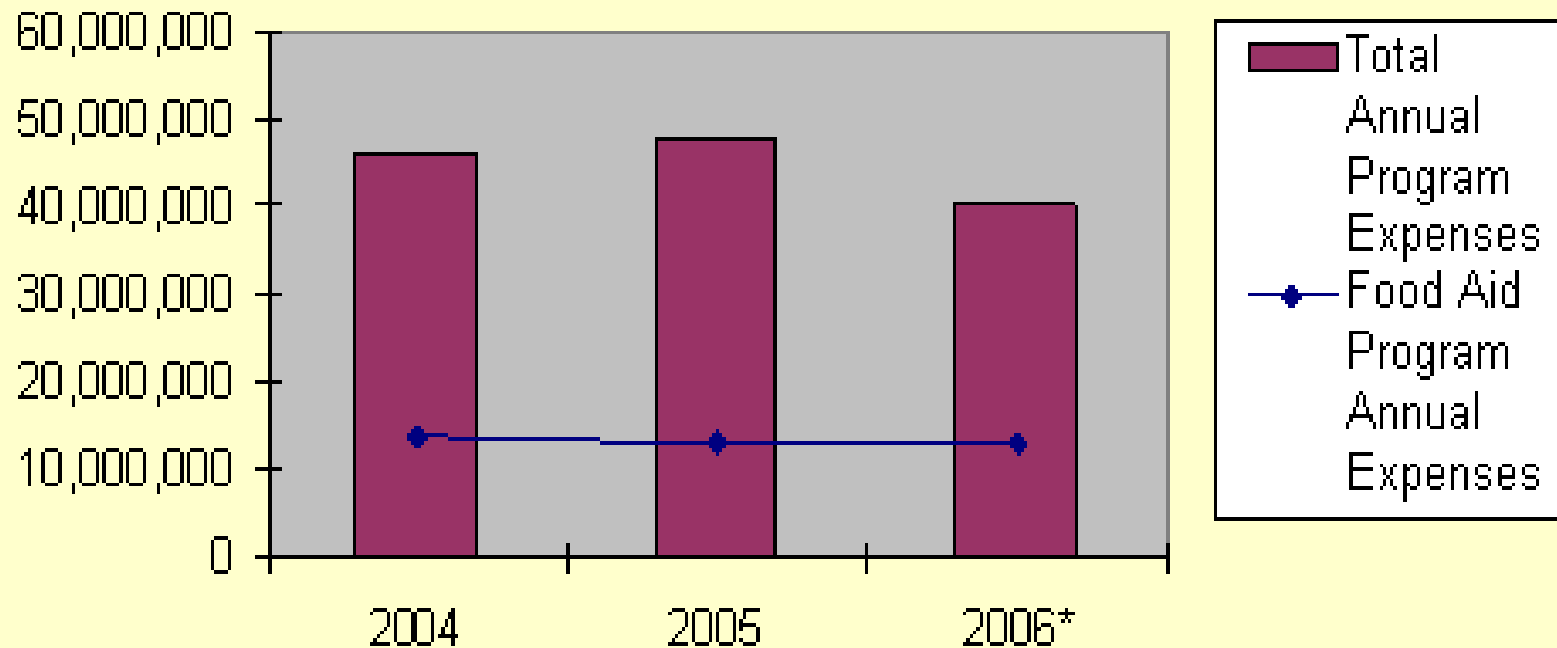


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# Percentage of Programming

## Ratio of Food Aid Programming to Total Programming



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# HIV/AIDS Program

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- Implementing approx. one program per country
- HIV/AIDS programs are either stand-alone or combined with other interventions
  - TB
  - Malaria
  - Food Security



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# Case Example: The Injongo Yethu Project in South Africa

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- With funding from PEPFAR, World of Hope Foundation, Rainbow Funds
- Goal: To increase the awareness of, and expand access to quality treatment, care, and support services for people infected and affected by HIV/AIDS.
- Location: Eastern Cape Province of South Africa



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## Development Significance-Eastern Cape Province

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- The Eastern Cape is South Africa's poorest province and has been hard hit by HIV and AIDS
- HIV/AIDS prevalence rate of 23%
- Young men and women ages 25–29 years have been severely affected, with an estimated prevalence rate of 31%



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# Project Objectives

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1. **Reach 80%** of the population with HIV/AIDS Prevention education; PMTCT services and counseling and testing
2. provide evidence-based HIV disease management through comprehensive treatment for **PLHIVs** in the target area
3. **To** provide a continuum of care and support services to **all** PLHIVs and homecare providers/caregivers in the target area
4. To develop sustainable care and support services for households with orphans and vulnerable children



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# Framework for Care & Support Activities

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## Definition:

Care that is provided from the time that HIV is diagnosed and throughout the continuum of HIV infection

Palliative care services are:

- Facility based

- Home based, and

- Community based



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# Types of Palliative Care Services

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- ❑ Clinical
- ❑ Community - through support groups, we provide
  - ❑ Spiritual
  - ❑ Psychosocial
  - ❑ Social and Prevention services
  - ❑ Nutritional service provision
  - ❑ Basic Care package



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# Basic Care Package

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- Acceptance of status
- Disclosure
- Prevention with positives
- Opportunistic infections
- Adherence counseling
- Treatment literacy
- Nutrition counseling



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# HIV & Nutrition

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- ❑ The cycle of malnutrition and HIV has been well documented
  - ❑ Poor nutritional status has a detrimental effect on immune system development and function
  - ❑ Declining immune function, as is experienced in HIV infection, has a direct and indirect impact on nutritional status.
- ❑ Several factors may contribute to declining health and nutritional status for PLHIVs
- ❑ Nutrition interventions can improve health outcomes and are an integral part of HIV care in our programs



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# Psychosocial Factors

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- ❑ Household income and food insecurity
- ❑ Food availability and access
- ❑ Social and cultural issues
- ❑ Personal beliefs



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# Biological Factors

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- ❑ Metabolic changes and nutrient requirements
- ❑ Gastrointestinal complications
- ❑ Reduced food desire, access, intake, digestion
- ❑ Reduced nutrient absorption, utilization
- ❑ Increased weight loss, wasting, malnutrition
- ❑ Gastrointestinal complications – diarrhea, particularly in the later stages of infection.
- ❑ Chronic infections and illnesses – Opportunistic infections (OIs).



# Food & Nutritional Support



- ❑ Nutritional assessment (weight loss, BMI, nutrition related symptoms),
- ❑ Nutritional Screening
- ❑ Nutritional counseling
- ❑ Therapeutic, Supplementary and supplemental feeding
  - Moderately and severely malnourished PLHIV, PMTCT mothers and OVC
- ❑ Replacement feeding and support:
  - Antenatal, peri and postpartum counseling and support to HIV positive mothers concerning infant feeding options



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## Food & Nutritional Support (2)

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- ❑ Development and/or adaptation of food and nutrition policies and guidelines
- ❑ Micronutrient supplementation according to WHO guidelines
- ❑ Establishment of clinic garden, Household and community gardens
- ❑ Establishment of Demonstration Soup Kitchen, and Cooking Clubs
- ❑ Development of a Recipe book



# Linkages & Integration

- All PLHIVs are linked with social services that can assist in the assessment of household food security and direct food and livelihood assistance to families that are food insecure.
  
- Linkages and integration with other services and programs
  - PMTCT
  - C&T
  - Wellness Child Clinics
  - ART (Treatment) services



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# *Accomplishments*

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- ❑ Provided over 2100 PLHIVs nutritional support
- ❑ Over 2,000 household gardens have been established
- ❑ Clients who joined the support groups have their CD4 counts monitored each month.



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# *Accomplishments (2)*

- Positive out-comes been shown as:
  - clients gained weight
  - had higher CD4 counts, and
  - reduced hospital visits.



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# Thank you

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**For more  
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