
2014-2015 UBRAF thematic report

Protecting vulnerable households and individuals

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ACHIEVEMENTS

In 2014-2015, the Joint Programme, led by the World Bank and UNICEF as co-conveners of the Social Protection Care and Support Group (SPCS), put social protection (SP) firmly on the global HIV agenda, highlighting its critical role in the success of the AIDS response, addressing social and economic inequalities, HIV risk behaviour and HIV-related stigma and discrimination, all of which are factors that serve to exacerbate marginalization and increase vulnerability to HIV exposure.

In order to ensure global understanding of the vital role of social protection, care and support within the HIV response and build the evidence based for effective social protection programming, the Joint Programme has carried out the following work in 2014-2015:

- The World Bank and UNICEF co-convened Social Protection, Care and Support (SPCS) working group had a remarkable two years in terms of positioning social protection in the HIV response. A series of events co-led by the UNAIDS Secretariat, the World Bank and UNICEF further raised the social protection profile in the HIV response and accelerated commitments, as well as resulting in key decisions pertaining to SPCS. Led by the secretariat and the World Bank, a meeting with senior government officials from 7 East and Southern African Countries was organised and generated commitment on scaling up social and structural intervention to prevent the sex transmission of HIV in concerned countries. The secretariat was successfully advocated with the African Union for scaling up social protection to HIV prevention, treatment and impact mitigation in its programmes;
- The Secretariat in collaboration with the World Bank, UNICEF and Housing Works further organised 2 annual meetings at the World Bank Offices in Washington DC bringing together senior government social protection actors, civil society and researchers to share understanding on the emerging evidence on scaling up social and structural approaches for HIV prevention, treatment care and support;
- In Kenya, the ILO, UNICEF, World Bank, SIDA and DFID supported the first National Social Protection Conference where discussions focussed on improving social protection systems. In Cambodia, the ILO, UNDP, UNICEF and UNAIDS Secretariat are jointly advocating for the inclusion of people living with HIV and key affected populations in existing social protection schemes;
- Following sustained advocacy and positioning of SPCS, the 34th PCB thematic sessions was devoted to addressing the social economic drivers of HIV through social protection. As a result cash transfers were included in the package of HIV prevention services for adolescent girls and young women in UNAIDS' guidance to countries and partners, and USAID/PEPFAR developed a US\$210 million two year project to focus on mitigating the specific vulnerabilities affecting young women in 10 East and Southern African Countries;

- To facilitate the provision of systematic support to countries, the Secretariat, ILO, UNICEF, World Bank, WFP and other Cosponsors jointly developed the UNAIDS HIV and Social Protection Assessment Tool to support country action;
- The ILO, the Secretariat, UNICEF, the World Bank, WFP and partners, undertook a multi-country study to investigate the access to and effects of social protection on workers living with HIV and their households in Guatemala, Indonesia, Rwanda and Ukraine. In Kenya, the ILO, UNICEF, World Bank, SIDA and DFID supported the first National Social Protection Conference where discussions focussed on improving social protection systems. While, in Cambodia, the ILO, UNDP, UNICEF and UNAIDS are jointly advocating for the inclusion of people living with HIV and key affected populations in existing social protection schemes;
- The World Bank is a major source of financing for national social protection systems in over 70 countries, with increased safety nets for those orphaned or impoverished by AIDS. Programmes include income transfer programmes, social safety net programmes, skills development for poor high risk youth, conditional cash transfer programmes, improving nutrition and health services, and childhood education promotion. For example in Malawi where the Bank project aimed at setting up social safety net delivery systems and coordination across programmes for the vulnerable and PLHIV;
- The World Bank additionally supported studies investigating how conditional cash transfers can reduce sexually transmitted infections in Lesotho, Malawi and Tanzania. The World Bank also supported a Tanzanian study showing how negative shock due to food insecurity led to riskier sexual behaviour, encouraging further investigation into how social protection programmes can reduce this HIV epidemic driver;
- UNDP supported 54 countries in social protection. In 35 of these, UNDP worked with governments, development partners, civil society and other stakeholders to make social protection policies and programmes HIV-sensitive. UNDP continued using results from its nation-wide studies on the socio-economic impacts of HIV at the household level in this work. As a result, HIV-sensitive considerations were incorporated into a national survey instrument to identify poor households in Cambodia;
- WFP published an AIDS and behaviour supplement, demonstrating how social transfers can facilitate treatment access. An evaluation of WFP's PEPFAR-funded HIV operation in Ethiopia, suggested that engagement in economic strengthening activities is a predictor of retention to care and adherence to ART. WFP also created a working group to gather lessons learned on linking HIV and nutrition programmes to social protection;
- UNICEF supported scale-up of sustainable social protection programmes that

enhance HIV prevention, treatment, care and support for vulnerable families and individuals. This included UNICEF dedicating resources for programme scale up, technical assistance, strengthening multisectoral coordination and integration, and community system strengthening;

- UNICEF and the Transfer Project carried out an impact evaluation of cash transfer programmes in 13 countries. UNICEF and EPRI also convened a south-south learning event, which disseminated initial findings and shared lessons from qualitative and quantitative research that was conducted as part of UNICEF's HIV-Sensitive Social Protection study;
- The UNAIDS secretariat, with support from cosponsors and partners, published the HIV and Social Protection Guidance Note and Social Protection Advancing the AIDS response a compilation of 10 case studies showing how social protection advances the AIDS response. The secretariat also organized a number of events for example with the ILO and the World Bank at the International AIDS Conferences in Africa and Asia Pacific to create awareness on the new evidence on HIV and social protection;
- UNODC supported the establishment of the Prisoner Reintegration and Empowerment Organization (PREO) that provides social support to ex-prisoners including in facilitating access /continuation of HIV treatment.

MAJOR CHALLENGES AND HOW THESE WERE ADDRESSED

While the AIDS response is becoming more targeted and focused, some interventions – such as those addressing underlying drivers of HIV infection and non-adherence – require improved working with broader development sectors, including child protection and social protection systems and often take a medium 5- 10 years to produce results. A further challenge is the fact that the vast majority of evidence on social protection and HIV prevention, treatment, care and support is from sub-Saharan Africa and focuses on young women and girls. Information on the impacts of social protection among other groups - including key populations is increasing – and in other HIV epidemic contexts and geographical areas - including the Caribbean and Latin America. Many operations such as food transfers, assets accumulation, and school feeding and general food distribution are not designed specifically for people living with HIV. While this is the favoured approach and people living with HIV including orphans and vulnerable children are usually covered by such programmes, this means that several factors, such as targeting criteria, stigma and the implementation modality, may inadvertently exclude people living with HIV and affected households, if programmes are not adequately designed.

There is also a need for a UNAIDS Secretariat-wide push and advocacy on HIV and social protection through inclusion of social protection in regional and country bi-annual work plans, supported by a centrally (headquarters) resourced HIV and social protection portfolio. Finally, the UNAIDS Investment Framework modelling of 2011 proposed

investing 40% in enablers and synergies (15% and 25% respectively) and 60% in basic programmes to effectively enhance the impact of HIV programmes. However, there is continued under-investment in critical enablers and development synergies, towards which it is believed that national HIV programmes spend less than 2% of national HIV budgets.

Conditional cash transfers proved effective in reducing HIV risk behaviours and in some cases HIV incidence and keeping girls in school, while broader social protection schemes, including building social protection floors, can support the continued success and implementation of such mechanisms. Innovations such as cash transfers coupled with care and support, or savings-led microfinance coupled with awareness raising and building understanding of gender norms and how they influence prevention, treatment and mitigation, should also be up-scaled.

KEY FUTURE INTERVENTIONS

In order to address these challenges and make further progress in protecting the vulnerable, the following key future interventions will be undertaken:

- The World Bank will continue to build strong social protection systems and national social protection floors and support interventions that encourage HIV testing and research on how to best link newly-diagnosed patients to care. The World Bank will also support programmes that reduce social and structural drivers of HIV epidemics, including poverty and inequality. Such programmes include income transfer programmes, social safety net programmes, skills development for poor high risk youth, conditional cash transfer programmes, improving nutrition and health services and childhood education promotion;
- UNICEF will identify and address gaps hindering national level scale up of social protection programmes that contribute to HIV programme goals in prevention, treatment and mitigation and provide technical assistance and strengthen national and sub national capacity to plan, effectively target, implement, manage and sustain social protection programmes;
- UNDP will support implementation of cross-sectoral co-financing for HIV-sensitive social protection at country level; support integration of HIV-sensitive social protection into Global Fund policy and implementation; and continue strategic engagement on social protection for HIV/health including through national consultations and socio-economic impact analyses (Asia Pacific), training/recommendations on social inclusion policies (Latin America and the Caribbean), and environmental and social impact assessment regulations and practice (West and Central Africa, Eastern and Southern Africa);
- WFP will review and analyse its ongoing programmes with HIV-sensitive lenses to ensure that they are effectively reaching vulnerable PLHIV and their families;
- The UNAIDS Secretariat will roll out the HIV and Social Protection Assessment tool; develop a baseline indicator for the cash transfer target in the HIV prevention goal; broker partnerships between the poverty, inequality and HIV movements on ending AIDS poverty and inequality through social protection;

- The ILO will provide countries technical support for NSPF assessment and social protection policy, strategy and system reform, including improving HIV sensitivity within NSPFs;
- UNODC will continue to advocate, promote and build capacity of national partners including CSOs to provide social protection services for people who use drugs and for people living in and/or released from prisons and other closed settings;
- UN Women will continue upscaling innovative initiatives on complementing cash transfers for young women with care and support and access to micro-credits and savings – with gender awareness and trainings on how gender norms influence prevention and mitigation of HIV.

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