



HIV-SENSITIVE SOCIAL PROTECTION:

WITH FOCUS ON CREATING LINKAGES BETWEEN SOCIAL CASH TRANSFER PROGRAMMES AND HIV SERVICES

Eastern and Southern Africa carries the global burden of HIV/AIDS and the impact on children, adolescents and their families is tremendous. UNICEF advocates for an HIV response that effectively focuses on the needs of children, adolescents and pregnant women and integrates HIV responses across sectors, including social protection.

Social cash transfer programmes address the structural drivers of HIV, including social and economic inequalities, thereby reducing risky sexual behaviour among adolescents and improving access to healthcare. When social cash transfers are combined with interventions such as adolescent-sensitive clinical care, the effects on HIV prevention, mitigation and adherence to treatment can become even greater.

In light of this, UNICEF conceived an intervention, aiming to strengthen the linkages between HIV services and national social protection programmes. The focus of the programme is on families with children and adolescents, vulnerable to, or affected by HIV and AIDS. The programme, funded by the Government of the Netherlands, is now being implemented in Malawi, Mozambique, Zambia and Zimbabwe in close collaboration with national, provincial and district level governments.

IMPORTANT ASPECTS OF PROGRAMMES LINKING SOCIAL CASH TRANSFER PROGRAMMES WITH HIV SERVICES:

- **Capacity strengthening:** Training of community volunteers/workers to be better able to provide information about sexual and reproductive health and HIV to adolescents in cash transfer households.
- **Referrals for additional social services:** Outreach to cash transfer households by community workers to assess the needs of the household members and refer them to available health (and other social) services.
- **Awareness building:** Targeted outreach to adolescents in social cash transfer households by trained community social welfare volunteers to promote adolescent-responsive sexual and reproductive health services at local health centres; and use of cash transfer pay points to provide HIV-related information and services.
- **Strengthening existing services:** Improve the availability of adolescent friendly health services.

DESIGN OF PROGRAMMES LINKING CASH TRANSFER BENEFICIARIES TO HIV SERVICES IN THE FOUR COUNTRIES:

Malawi - Development of a “Linkages and Referral” programme

To address multi-level vulnerabilities in Malawi, the Government of Malawi introduced a “Linkages and Referral” programme linking individuals in social cash transfer households to additional services, including HIV-related services. The linkages and referral system includes three components:

1. Identifying the availability, capacity and willingness of service providers to participate in the programme;
2. Home visits to households included in the programme to identify the needs of beneficiaries and refer them to the appropriate services;
3. Monitoring of the referrals where both service seekers and service providers fill in a quality survey to assess the satisfaction and performance of the received service.

Mozambique – Providing information and services through social action fairs

In Mozambique, activities focused on strengthening the social protection system through supporting the development of the newly adopted National Basic Social Security Strategy for 2016-2024 (ENSSB II) and its Operational Plan 2017-2019. Moreover, investments have been made towards strengthening a community-based case management system able to link vulnerable children and their families (including social protection beneficiaries) to available health and social services. Finally, linkages between social protection and HIV have been created through the organization of so-called health and social action fairs providing social services (including HIV counseling and testing) at site and to communities and members of social protection beneficiary households in 10 targeted districts.

Zambia - Creating demand for HIV services while improving the availability of services

In Zambia, the demand for HIV services is being strengthened through community volunteers who target adolescents in households receiving cash transfers. The availability of adolescent friendly services is improved through increased capacity of health workers and peer educators to provide adolescent-responsive HIV and sexual and reproductive health services. In addition, adolescent friendly spaces have been created at health centers where peer educators provide adolescents with sexual and reproductive health information (including HIV), free condoms and referrals to on-site voluntary counseling and testing for HIV.

Zimbabwe – Providing support to adolescents and care-givers affected by HIV

In Zimbabwe, children from households included in the Harmonized Social Cash Transfer (HSCT) Programme receive child protection and welfare services. Trained community peer support volunteers known as Community Adolescent Treatment Supporters (CATS), help identify adolescents living with HIV, support them cope with HIV-status, facilitate clinical referrals, offer psychosocial support and support adherence to treatment. The cash transfers pay-point is used as a point of information provision, identification and referral for services, reaching both cash transfers beneficiary households and the wider community. Health service providers also identify cases that may require peer support and refer for them to CATS for ongoing community level support. The model includes cross referrals between the health sector and the social welfare sector for child protection and welfare related support.

LESSONS LEARNED

- **Ensure the basics of a cash transfer programme is in place first:** Before linking social cash transfer beneficiaries to additional services, it is important that the basics of the cash transfer programme itself is working. Additional components or linkages should be added when the cash transfer programme is well established.
- **Clear roles and responsibilities:** Accountabilities of implementing ministries need to be formalized to improve management of resources and activity implementation at the district level. While working across sectors provide many advantages it also becomes more important that the responsibilities of the different actors are clearly defined.
- **Embedded structures:** Government leadership and coordination at national and sub-national levels aligning the initiative within current structures rather than as a “project” outside the ministries work is needed to ensure sustainability and inclusion of linkages programmes in the current social protection systems.
- **Adaptive programme design:** When developing a linkages programme, it is important to ensure there is flexibility in the design to allow for improvement based on lessons learned.
- **Strengthening capacity:** Capacity development and empowerment of government teams, from community and district workers to decision makers, to improve the understanding of social protection and the needs of children and adolescents in beneficiary households, is crucial.



Ministry of Foreign Affairs of the Netherlands



For further information on the initiative to expand and scale up HIV-sensitive social protection in Malawi, Mozambique, Zambia and Zimbabwe, please contact: Pamela Dale, Social Policy Specialist, UNICEF Regional Office for Eastern and Southern Africa pdale@unicef.org, or Anurita Bains, Regional Advisor HIV/AIDS, UNICEF Regional Office for Eastern and Southern Africa, abains@unicef.org.

http://www.unicef.org/esaro/5482_HIV_AIDS.html

https://www.unicef.org/esaro/5483_social_protection.html