



USAID/Food By Prescription



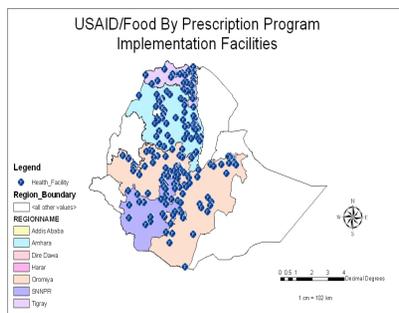
THLBPE059

From Hand-Outs to a Sustainable Economic Strengthening Approach: The Back to Work Initiative for People Living with HIV (PLWH)

Authors: Noah Nigussie, Fitsum Tesfaye, Marie-Eve Hammink, and Gideon P.E Cohen (Dr.)
USAID/Food by Prescription Program - Ethiopia

USAID/FBP in Ethiopia Overview

- USAID/Food by Prescription Program (FBP) is under implementation in 206 hospitals and health centers in 7 regions in Ethiopia.
- Save the Children has been implementing FBP since 2009.
- A further 200 health facilities will be covered in 2012.
- The program works to improve the nutritional, clinical and functional status of malnourished HIV positive adults and OVC through Nutritional Assessment, Counseling and Support (NACS).
- The program promotes access to therapeutic food, provides capacity building of health facilities, procures equipment and develops IEC/BCC materials.



Why Economic Strengthening (ES)?

- HIV and AIDS is a threat to household economic resilience.
- People Living with HIV often lose their jobs or are unable to work due to illness and stigma and are at risk of becoming destitute.
- After taking ART and receiving nutrition support, as PLHIV's health improves, they need help to access economic opportunities and become self-reliant.
- FBP works to establish effective linkages to community resources and economic strengthening initiatives.
- The Back To Work Initiative seeks to involve the private sector in developing a sustainable economic strengthening model for PLHIV
- Back To Work will be implemented in both Urban and Agricultural environments.

Example

- Back To Work is being piloted in Metahara Sugar Factory where more than 29,000 workers and their families live
- FBP initiated NACS in the clinic in the sugar plantation
- FBP established a referral system to ensure re-entry into the work place for employees after their nutritional status improves and they are able to return to work
- The program provided training for the factory management and organized an internal committee to monitor the progress of Back To Work

Results

- 85 PLHIV who had ceased to work due to illness and malnutrition are now back at work
- 24 malnourished patients were ensured of continued employment
- The committee is working independently to ensure the aims of the initiative.



Lessons Learned

- Involving the private sector is essential
- Promoting wage earning opportunities promotes self-reliance and can be developed into a realistic livelihood strategy for PLHIV

Acknowledgements

The work described was supported by the American people through the United States Agency for International Development (USAID) with funding from the U.S. President's Emergency Plan for AIDS Relief (PEPFAR).