Food and nutrition support is essential for keeping people living with HIV healthy longer and for improving the effectiveness of treatment.

People living with HIV have weakened immune systems and increased nutritional needs. Poor people living with HIV often only begin treatment after HIV — and malnutrition — have already reached an advanced stage.

Poor nutritional status and HIV can reinforce each other in a vicious cycle. The combination of food insecurity and HIV can result in greater poverty, malnutrition and health risks.

In the first months of anti-retroviral treatment (ART), mortality can be two to six times higher in malnourished patients, with similar challenges faced by tuberculosis (TB) patients. Malnutrition is generally more severe in people with HIV/TB co-infection.

HIV can also disrupt the livelihoods of people living with HIV, their families and other groups, such as orphans and vulnerable children. They are often unable to work, either from illness or treatment side effects, and they face rising healthcare costs. This can quickly lead to higher food insecurity, causing people to possibly forego treatment, beg, sell off assets, engage in sex work or send children to work instead of school.

WFP support allows food-insecure and malnourished people living with and affected by HIV to recover their health and livelihoods. Support for households affected by HIV helps lessen the socio-economic impacts of the disease.

WFP’s food and nutrition assistance is an essential and cost-effective means of enhancing the uptake of and adherence to ART and TB treatment while also reducing treatment side effects. It treats infection-related malnutrition and promotes nutritional recovery. Good adherence to ART also reduces the need for additional, costly treatments.
**What we do**

WFP’s HIV and AIDS policy addresses two main objectives:

- **Care and treatment** to ensure nutritional recovery and treatment success through food and nutrition support;
- **Mitigation and safety nets** help lessen the socio-economic effects of HIV on individuals and households.

WFP assists governments to integrate food and nutrition into health programmes and to build broad safety nets that protect livelihoods.

**Care and treatment:** WFP supports nutritional recovery as a standard part of the HIV and TB comprehensive treatment package. This package includes nutrition assessment, education and counselling for all patients and nutritious food for malnourished patients during the first six months of treatment. Education and counselling allow people living with HIV and TB to learn more about nutrition and healthy lifestyles.

**Mitigation and safety nets:** WFP provides food assistance for temporary relief during the acute stage of disease for people receiving treatment. This assistance helps reduce food insecurity, encourages patients to access services and eases the burden of care on households and communities; it also supports orphans and vulnerable children. People living with HIV may participate in livelihood promotion activities, like urban gardening, carried out by WFP partners.

---

**UNAIDS: One UN in Action**

WFP is a co-sponsor of UNAIDS, a UN Joint Programme that works to achieve universal access to HIV prevention, treatment, care and support. Within UNAIDS, WFP is responsible for the integration of food and nutrition into the HIV response and, together with UNHCR, is responsible for the HIV response in humanitarian emergencies.

---

**NORTH STAR ALLIANCE**

WFP and global logistics company TNT established North Star Alliance, an initiative that aims to reduce the impact of HIV and other sexually transmitted illnesses on the transport sector in Africa. Roadside Wellness Centres across southern and eastern Africa enhance the HIV response of national health care systems. Services reach truck drivers, sex workers, order officials, dock workers, police and transport communities.

---

**Where we work**

In 2011, WFP supported 2.3 million people in 38 countries through its HIV and TB programmes.

In **Zimbabwe**, WFP provides nutrition support for malnourished people living with HIV and TB undergoing treatment, including those in prevention of mother-to-child transmission activities. Food assistance acts as a safety net for highly vulnerable households affected by HIV or supporting orphans and vulnerable children.

WFP conducts urban programming in **Ethiopia** that assists malnourished people living with HIV undergoing treatment and food-insecure HIV-affected households.

In **Haiti**, WFP provides monthly supplementary food rations to people living with HIV to encourage treatment adherence. Take-home rations for HIV-affected households help improve food security.

In **Mozambique**, the government’s Cesta Básica programme provides food for people living with HIV and TB who are undergoing treatment. WFP assisted the government in piloting vouchers that take advantage of a mobile phone and internet-based registration and management system.

Throughout **Afghanistan**, WFP supports people living with TB undergoing treatment and TB-affected families to reduce vulnerability to food insecurity and increase treatment success.