



African Housing Groups Respond to the HIV and AIDS Crisis



Keywords: Low-Income Housing, Informal Settlements, HIV and AIDS, Community Based Responses, Housing Groups and Co-operatives

Abstract

HIV and AIDS is an urgent housing and human settlements issue, especially among women and children living in poverty and suffering from poor housing conditions in urban slums in the South. The link between poverty and HIV prevalence is well established, and the fact that inadequate shelter increases the vulnerability of the urban poor to HIV and AIDS is better understood. Since 2003, Rooftops Canada and our partners in Kenya, Tanzania, Cameroon, Zimbabwe, South Africa, and more recently Uganda, have been working on strategies and developing programs to respond to the AIDS crisis in these countries. These programs link shelter to poverty reduction through sustainable economic and social development, environmental protection, respect for human rights, democratization and gender equality.

This paper compiles the experiences of housing organizations and resource groups in Sub-Saharan Africa responding to HIV and AIDS among their constituent stakeholders. Responses focus on promoting social sustainability, enhancing operational capacity and improving financial sustainability. Social sustainability deals with the impact of HIV and AIDS on the social viability of communities. Community-based responses relate to issues of stigma and discrimination, reducing the impact of housing rights violations and responding to the specific vulnerability of children, women and youth. Operational capacity analyzes housing groups' responses to the organizational impact of HIV and AIDS – including loss of staff, leadership and institutional memory, decreased productivity and capacity – and the experience of including HIV and AIDS within the core organizational mandate. Financial sustainability explores the challenges of reconciling financial and social goals.

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Introduction

HIV and AIDS is an urgent housing and human settlements issue, especially among women and children living in poverty and suffering from poor housing conditions in urban slums in the South. The link between poverty and HIV prevalence is well established. There is now more research and experience which links the impact of inadequate shelter with increasing the vulnerability of the urban poor to HIV and AIDS. Recent evidence points to the importance of secure and affordable housing as a “strong determinant” of health (Kjellstorm et al., 2007). There is a growing body of practice-based evidence which shows that housing interventions work to enable homeless and unstably housed persons to achieve and maintain stability, and that for persons living with HIV/AIDS, improved housing status is directly related to reduced risk behaviours, improved access to health care, higher levels of antiretroviral treatment adherence, lowered viral loads, and reduced mortality (NAHC 2007; Tucker, 2007).

HIV and AIDS is increasingly an urban phenomenon (Van Donk, 2006). Asia and Africa, the most rapidly urbanizing regions of the world, share many conditions that fuel the HIV epidemic. Stigma and discrimination against those infected are fuelled by a lack of knowledge about HIV and how it is spread. Cultural attitudes and practices leave women particularly at risk of infection (FAO, 2003). “Poor living conditions, including homelessness, undermine safety, privacy and efforts to promote self-respect, human dignity and the attendant responsible sexual behaviours” (UN Habitat, 2001). The immense human settlement challenges in urban slums – overcrowding, tenure insecurity, inadequate water, sanitation and basic services – are intensified by the impact of HIV and AIDS on poverty and vulnerability. High densities, overcrowding and poor housing conditions increase the risk of opportunistic infection. Inadequate water and sanitation increase the disease burden and pose challenges to providing home-based care (Tomlinson, 2007). Surviving family members and orphans lose their homes because they cannot afford housing payments or because of inheritance practices that typically disadvantage women. Children, particularly girls, drop out of school to care for sick parents and siblings and more children end up living on the street in order to survive (ICAD, 2006). Leadership and skills within the urban co-op and community housing are being eroded due to AIDS-related death. Forced eviction – resulting either from insecure tenure or stigma – violates dignity and threatens safety, while disrupting medical regimes, access to nutrition and home-based care for those affected.

Housing and human settlements actors and agencies are being forced to re-think their strategies for achieving adequate housing¹. Housing cooperatives and groups present a natural constituency to focus HIV prevention and stigma reduction efforts. Improved housing conditions not only “address the need for shelter but have real and significant continuing effects on individual health” (UN Habitat, 2001).

“When housing co-op members die from AIDS-related diseases and leave loans unpaid, you suddenly find yourselves on the front lines of the AIDS crisis. We have to integrate HIV and AIDS issues as part of the whole process of housing and shelter provision.”
- National Cooperative Housing Union (NACHU), Kenya

¹ Adequate housing is defined within the Global Strategy for Shelter for All as meaning: adequate privacy, adequate space, adequate security, adequate lighting and ventilation, adequate basic infrastructure and adequate location with regard to work and basic facilities-all at a reasonable cost. (The Right to Adequate housing, (Art. 11 (1)):13/21/91, CESCR General Comment No. 4)

With better understanding of the impacts of HIV and AIDS on housing and human settlements activities, an increasing number of cooperative and non-profit housing groups are developing innovative responses. This includes finding ways to protect and ensure the tenure rights of surviving family members and orphans who cannot afford housing costs or are at a disadvantage because of traditional inheritance practices. Other goals include responding to the loss of leadership in cooperative and community housing-based movements, and working with coalitions to secure people's rights to housing and health care.

Since 2003, Rooftops Canada² and our partners in Kenya, Tanzania, Cameroon, Zimbabwe, South Africa, and more recently Uganda, have been working on strategies and developing programs to respond to the AIDS crisis in these countries. Our work is guided by a vision that links shelter to urban poverty reduction through sustainable economic and social development, environmental protection, respect for human rights, democratization and gender equality. The strategy aims to promote preventive behaviour and reduce stigma; develop practical, community-based responses that help manage risk to housing groups and NGOs; facilitate the development of operational support mechanisms; and to sponsor advocacy and sharing experiences at national, regional and global levels. Cooperation between our African partners is encouraged and promoted through regional exchanges, networking and solidarity action.

This paper compiles the experiences of housing organizations and resource groups in responding to HIV and AIDS among their constituents stakeholders. Responses focus on promoting social sustainability, enhancing operational capacity and improving financial sustainability. The experiences profiled are from Coalition des Organisations Non-Gouvernementales et

Organisations Communautaires de Base du Cameroun Oeuvrant dans le Domaine des Établissements Humains (CONGEH), Housing People of Zimbabwe (HPZ), Johannesburg Housing Company (JHC), Mazingira Institute/Settlements Information Network Africa (SINA), National Cooperative Housing Union (NACHU), Planact, the Social Housing Company (SOHCO) and WAT Human Settlement Trust (WAT). The paper is based on the outcomes of a workshop held in Vancouver³ in 2006 prior to the World Urban Forum 3.

SOCIAL SUSTAINABILITY

Social sustainability deals with the impact of HIV and AIDS on the social viability of communities. It relates to issues of stigma and discrimination, the impact of housing rights



“How do you provide home-based care when there is no home?” This Zimbabwean family has created a makeshift shack in the rubble of their home destroyed in the massive evictions. Housing People of Zimbabwe works with evicted families and housing cooperatives to mitigate the impact of HIV and AIDS and to respond to the challenges faced by people living with HIV and AIDS. (Photo: E. Moore)

² Rooftops Canada, a registered not-for-profit organization, is the international development program of non-profit, cooperative and social housing in Canada.

³ The Workshop “Housing and HIV/AIDS in Sub-Saharan Africa, Aboriginal Communities and Social Housing in Canada” was held in Vancouver from the 15-17 June, 2006. It brought together 25 participants from African and Canadian Aboriginal housing groups, cooperatives, social housing groups, community groups and NGOs involved in housing, HIV and AIDS.

violations and the increased vulnerability of specific groups such as children, women and youth. It also deals with the issues of access to and affordability of housing-related services.

Many urban informal settlements lack tenure security, putting households at risk of forced evictions.⁴ Stigma and discrimination make families affected by HIV and AIDS more vulnerable to eviction and isolation. Evicted individuals and families become dispersed and separated from their communities, have reduced access to water and sanitation and cannot adhere to medical regimens. The lack of adequate and affordable water and sanitation increase the risk of opportunistic infection. Legal frameworks and organizational by-laws often prohibit orphans and children from inheriting houses from their deceased parents or from being co-op members. Here are some of the strategies Rooftops Canada's partners have adopted to respond to these issues.

Education and awareness: Awareness programs aim to demystify HIV and AIDS by providing specific information on prevention, care, support and treatment. Training programs help to reduce stigma and discrimination, create a space for open dialogue and communication and prepare trainers, animators and peer counsellors to provide leadership for community-based responses. The programs work through existing cooperatives and community-based housing groups where there is mutual trust and experience of working together. Specific housing programs include training individuals to write wills to ensure the proper designation of heirs and the training of the leadership of housing communities to create a fostering environment for those living with HIV and AIDS. Resource and publicity material such as posters and brochures broaden awareness of HIV and AIDS in general as well as of aspects related to housing in particular, such as land rights and HIV and AIDS.



Training trainers on the role of women in improving habitat is part of CONGEH's Gender, HIV AIDS and Habitat (GSH) program in Cameroon. CONGEH uses the African tradition of "the speaking tree"- gathering communities in the open - to facilitate community dialogue about HIV and AIDS. (Photo: K. McMillan)

Support mechanisms: Rooftops Canada partners help people create support mechanisms to cope, including forming groups of people living with HIV and AIDS (PLHAs) and providing peer education and counselling programs. This has helped identify and respond to the specific housing concerns of PLHAs. Outcomes of these efforts include PLHAs declaring their status and increased awareness and support for PLHAs from other housing cooperative members.

Gender and habitat: While lack of security of tenure affects millions of people around the world, women face added risks and deprivations. In Africa and South Asia especially, women are systematically denied their human rights to own, control or inherit land and property. The HIV and AIDS pandemic has led to an increase in evictions of widows following the death of their husbands

(Benschop, 2004). Evictions expose women with HIV and AIDS to higher risk. Housing

⁴ Operation Murambatsvina, for instance, carried out by the Government of Zimbabwe in 2005, left more than 700,000 people homeless in cities across the country. UN Habitat reported that massive demolitions robbed 2.4 million people of their housing and livelihoods.

organizations such as CONGEH in Cameroon and WAT in Tanzania have long advocated for secure land tenure and property rights for women. They include HIV and AIDS as a key element of their education, training and advocacy programs. Recognizing the crucial role women play in habitat production and development, CONGEH has developed the Gender, AIDS and Habitat (GSH) project. Through the creation of “social spaces” – a physical or virtual meeting space - created within communities to (a quarter, a village) CONGEH brings development tools and resources, including land consultation clinics, a microfinance fund and skills in livelihoods development and entrepreneurship to communities. Communities participate in education on HIV, discussion housing issues and develop local strategies to improve living conditions. This strategy has brought resources to communities and has been particularly empowering to those who mobility is limited by availability of resources and to women whose mobility is limited by social constraints. Through these initiatives, women are more informed and better able to negotiate their position – on sex and other power equations -- within the household and the community.

Safety nets: Creation of safety nets for affected families includes accessing micro-finance for livelihoods, and skills training and nutrition support for impoverished families. Planact, a South African NGO, undertook a Sustainable Livelihoods Assessment of families living in two informal settlements in Johannesburg and is developing a livelihood support strategy on this basis. Herb and vegetable gardens are being encouraged both to enhance

“We must ensure that women are armed with information to stop the spread of HIV and AIDS.” WAT Human Settlements Trust (WAT) is a long-term advocate of women’s inheritance rights and lobbies for land and housing along with urban poor communities. WAT creates safety nets for families through its micro-finance program.
(Photo: WAT Human Settlements Trust)



nutrition and as a source of income. In the extreme case of Zimbabwe, where the majority of the population is malnourished and unemployed, the focus is on basic humanitarian relief.

Orphans and vulnerable children: Care of orphans and vulnerable children -- specifically with regard to their housing and nutritional needs -- is a crucial response as the number of child-headed households increases. In Kenya, one co-op has been allocated land to develop shelter options for AIDS orphans, while another has initiated feeding programs. In South Africa and Zimbabwe, co-ops are re-examining their by-laws to allow children heading households to retain ownership of their houses.

Advocacy and lobbying: Advocacy and lobbying efforts focus on ensuring tenure security, gaining access to land for housing and facilities development and ensuring equality in inheritance and succession policies. Working with local authorities, councillors and policy makers enables increased access to services and information, and the ability to influence decision making, policy and programs.

OPERATIONAL CAPACITY

To many of these organizations, HIV and AIDS was something “external” to their work until it began impacting on their own capacity in a visible way. Staff are infected, affected or dying from HIV and AIDS. Organizations are dealing with a loss of leadership and trained workers, and with them a loss of institutional memory and productivity. Housing organizations have to cope with the extra demands on the organization in order to introduce new initiatives to respond to HIV and AIDS.

Policy and strategy: Developing an HIV and AIDS policy and strategy is an organization’s first step after acknowledging the threats posed to it by HIV and AIDS. The Johannesburg Housing Company (JHC), NACHU, HPZ and WAT began this process through sensitization and training of staff and board members. This is followed by research to better understand the impact on their constituencies and the services that can be called upon to help. NACHU’s strategy evolved from the Knowledge,

Attitude and Practice survey they undertook of housing cooperative members. The Social Housing Company (SOHCO) in South Africa has focused on preserving and protecting institutional memory by documenting processes and systems, examining succession issues and planning, and diversifying their sources of supply of services. Staff and tenants are supported with peer and professional counselling and access to medical advice and services. In Uganda, Shelter and Settlements Alternatives (SSA) carried out research on the impact of HIV and AIDS on Human Settlements. Through case studies, focus group discussion and interviews, the research shows how the five key elements of a slum household -- insecurity of tenure, poor structural quality and durability of housing, lack of access to safe water and proper sanitation facilities, and insufficient living area -- have a negative impact on PLHAs and people affected by HIV/AIDS. It also demonstrates that slum households present increased risk of exposure to those not infected with HIV/AIDS. The study was shared with stakeholders in human settlements development and in the AIDS service sector to build a common dialogue on the issues and promote increased networking, develop and influence policy.

Succession planning: Succession planning is one of the strategies to deal with the loss of leadership within cooperatives, housing groups and organizations. NACHU is exploring a strategy of involving youth in the governance and management of housing cooperatives to prepare them to take on co-op leadership roles. SOHCO has identified succession planning among tenants as a medium-term goal. Documentation is one way to record and retain institutional memory and to plan for succession. Social Housing Institutions (SHIs) are maintaining information about next of kin as part of client profiles, and instituting succession policies among tenants.



NACHU’s HIV and AIDS workplace policy acknowledges the threat HIV and AIDS poses to the organization and the importance of a proactive, integrated and sustained response. The policy provides guidance on HIV and AIDS programs and ensures compliance with local and international guidelines and laws. (Photo: NACHU)

SOCHO is encouraging clients to engage in forward planning in respect of the possibility of premature death and to record and monitor the level of preparedness of clients for such an eventuality. This is done by proactively educating and probing customers about whether they have a will, designating an heir or beneficiary in respect of tenure rights and identification of next of kin information for the purpose of emergencies as well as the short and long-term care of minors.

Partnerships and networks to provide life-support skills:

Partnership and collaboration are important elements of most organizational policies around HIV and AIDS. In South Africa, both JHC and SOHCO have entered into agreements with health care providers and the Health Department to provide services to their tenants. They support positive living by ensuring availability of male and female condoms, first aid kits and gloves in housing offices. WAT and the HPZ are part of larger local networks and coalitions around HIV and AIDS services. Most groups are facilitating the formation of support groups for PLHAs. Planact trains volunteers and community-based organizations in home-based care to assist affected families. One of these, the Masizakhe Home-Based Care project, recently received official status as a non-profit organization.



A “Remembrance Tree” – presenting thoughts, prayers and memories of loved ones lost – was created at a World Aids Day 2006 event organized by Masizakhe Home-Based Care in South Africa. As part of the Johannesburg Connections Project: An Integrated Community Approach to Addressing HIV and AIDS in Informal Settlements, Planact is helping Masizakhe launch its services in the community with nutritional support for families affected by HIV and AIDS. (Photo: J. Park)

FINANCIAL SUSTAINABILITY

Housing organizations, cooperatives and NGOs are constantly confronted with the need to reconcile their financial and social goals. In many cases, financial viability has been the catalyst for housing groups to respond to HIV and AIDS in their communities. HIV and AIDS threatens financial viability as residents become ill and are unable to pay their rent, mortgage/loans or savings subscriptions. Housing and other micro-finance programs are put in jeopardy when clients are unable to repay loans. Families infected or affected with HIV and AIDS are unable to contribute sweat



SOHCO’s social sustainability initiative in South Africa resulted in the HIV and AIDS action plan. Better information systems and tighter credit control are being used to monitor payments and lessen the risk of default. (Photo: Social Housing Company)

equity⁵ to incremental construction projects. It is a difficult challenge to try and ensure that all of the members of a housing co-op or tenants of a social housing project continue to access housing when a significant number can no longer meet their financial obligations.

In response to this situation, the Johannesburg Housing Company (JHC) has developed a tenant hardship cover for families affected by illness or death. This provides a short-term safety net for rent and funeral expenses. Tenants receive a fixed amount for funeral expenses and another amount for rent coverage, after which alternate accommodation has to be found if the family income situation does not improve.

SOHCO is integrating HIV and AIDS programs into its business plan with the understanding that improving social stability will improve its financial stability. Responses include mitigating non-payment through credit control, protecting clients through insurance, examining succession issues and planning, and diversifying sources of supply of services. They are engaging in extensive capacity building of tenants with respect of implications of non-payment toward fostering a culture of repayment. SOHCO is also investigating a suitable hardship cover to create a safety net for families coping with AIDS-related death or illness.

WAT in Tanzania, is developing and testing an HIV and AIDS Reserve Fund as part of its Housing Micro-Finance program.

LESSONS LEARNT

This paper demonstrates that HIV and AIDS is a housing issue. Efforts to ensure adequate housing for urban slum dwellers – to secure tenure, inheritance rights, adequate water and sanitation, economic development – also address many of the issues of vulnerability that relate to HIV and AIDS. Here are the key lessons learnt from the experiences of Rooftops Canada and its partners in sub-Saharan Africa:

1. Housing organizations are gaining legitimacy in the HIV and AIDS space, as other actors realize the importance of housing responses to HIV and AIDS. HPZ is a member of the Zimbabwe AIDS Network; WAT is part of a ward AIDS committee; and Planact's community-based responses are being developed along with the City of Johannesburg HIV and AIDS unit. However, housing organizations are still not recognized as HIV and AIDS organizations and find it difficult to access resources and funds specific to HIV and AIDS programs.
2. The focus so far has been on mainstreaming HIV and AIDS in all organizational activities, as well as developing partnerships and networks with HIV and AIDS organizations. It is important to assess and validate the impact of these mainstreaming strategies on both the housing constituencies -- particularly on PLHAs -- and on the housing organization itself. For the sector it is necessary to build models and benchmarks, tools and capacity. This will be the focus of the next phase of engagement around HIV and AIDS as Rooftops Canada plans an assessment of these programs.

⁵ Sweat equity is used to denote unpaid, non-financial contribution made to a project in terms of time and effort. In the case of housing this manifests as physical labour on the construction site, project management and supervision.

3. Housing cooperatives and groups are uniquely positioned in the area of prevention and have the opportunity to reach out to different generations, particularly youth. Increasing awareness of the issues surrounding HIV and AIDS serves to reduce stigma and enables housing communities to become safe spaces for positive living. Training community trainers, peer educators, sensitizing leadership and building support groups create a facilitative environment for open discussion, disclosure and for promoting preventive behaviour.

4. HIV and AIDS is a development issue that needs an integrated and cross-sectoral approach that responds to social and economic vulnerability. Housing organizations are realizing that it is not sufficient to provide information – information has to be backed up with access to treatment, services and support. Building support and referral networks are critical to meeting needs arising from the pandemic.

5. Reconciling financial viability with social sustainability remains a key challenge for organizations working on housing issues. HIV and AIDS programs are not the core business of these organizations; however, the organizations must also respond to the impact of HIV and AIDS on their operational sustainability.

6. There continues to be a lack of knowledge about the key relationship between housing and HIV and AIDS. It is crucial to build networks around the issue and to bring practitioners together to share and document experiences and resources. Building a strong alliance with UN Habitat is an essential part of a strategy that will bring housing issues to the top of the agenda of organizations that focus on HIV and AIDS programs.

This article was prepared by Rooftops Canada – Abri International with inputs from CONGEH, HPZ, JHC, NACHU, Planact, Shelter and Settlements Alternatives, SINA, SOHCO and WAT. For more information and resources on HIV and AIDS and Housing, please contact Rooftops Canada at info@rooftops.ca.

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Rooftops Canada facilitated an international networking event during the World Urban Forum in Vancouver, bringing together housing and urban practitioners dealing with the impact of HIV and AIDS. The proceedings were widely disseminated through the Settlements Information Network Africa (SINA) bulletin. (Photo: Rooftops Canada)

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