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RIGHT TO FOOD AND HIV/AIDS

Enabling people to feed themselves is the primary obligation of states. When individuals are unable to do so, in cases such as when HIV/AIDS makes them physically incapable or when loss of infected parents leaves orphans struggling, the state is obligated to provide direct assistance.

Linkages

HIV/AIDS makes people more vulnerable to food insecurity; in turn, food insecurity makes them even more susceptible to full-blown AIDS. Mobility and migration due to food insecurity and the effects of malnutrition heighten susceptibility to HIV/AIDS. Improved nutrition can extend the productive lives of HIV/AIDS patients, enabling them to provide for themselves and their families more effectively. Providing assistance to HIV/AIDS orphans can deter the high-risk behaviour that is often bartered for sustenance.

The impact of the disease on human, social, and financial factors results in loss of labour, the subsequent loss of natural and financial resources, and consequently, strain posed on people living with those affected by HIV/AIDS. Stigma often leads to marginalization and discrimination, not only of the person affected by the disease, but of their whole family. Loss of knowledge is one of the less tangible losses associated with the loss of a family member; this too often leaves a young population ill-equipped to manage the impacts of the epidemic and to maintain safe, sustainable livelihoods. It also results in decreasing school attendance among orphans and vulnerable children.

Human Rights-Based Approach

Food security is generally needs-based – food and resources are made available to people because they "need" them. When a family member is infected with HIV/AIDS, the family's needs increase. A rights-based approach considers that every person has the human right to feed themselves. When a family member is infected with HIV/AIDS, the family's increased vulnerability simultaneously increases the state's obligations to provide for them and protect them against discrimination.

A human rights-based approach that refers to the right to health, the right to adequate food and the right to an adequate standard of living on the one hand, and the human rights principles of participation, accountability, non-discrimination, transparency, human dignity, empowerment and the rule of law on the other, can provide a framework upon which HIV/AIDS programs can build. Discrimination against women is another vital issue when considering responses to HIV/AIDS. Women's economic dependence on men, their high poverty levels and lack of access to opportunities and resources, contribute to their susceptibility to HIV/

AIDS infection. In cases where women have a low status, they also have less say in decisions about sex and may thus be coerced to have sexual relations in risky situations. The full realization of human rights and fundamental freedoms for all is an essential element in a global response to the HIV/AIDS epidemic. It can mitigate the social stigma attached to the disease and combat discrimination against people living with or at risk of contracting HIV/AIDS. Rights must be realized in the areas of prevention, care, support and treatment for the sake of those already infected and also to reduce vulnerability to HIV/AIDS.

The Right to Adequate Food

The nutritional needs of people infected with HIV/AIDS rise considerably, partly due to the body's inability to absorb consumed nutrients, and partly because the body needs more energy to cope with the infection. The right to adequate food entails higher nutrition standards for infected persons. An adequate diet is also vital to slow down the onset of disease. Breastmilk provides the best nutrition, health and care for babies. If mothers are infected, however, there is a chance of mother to child transmission. Mothers must therefore weigh the risk of transmission during breastfeeding, against the risks of using infant formula. In particular, if the mother does not have access to safe water and adequate sanitation, bottle-feeding a child may put him/her at greater risk of contracting other diseases and will also deprive the child of other benefits associated to breastmilk.

Right to Food Guidelines

The Right to Food Guidelines* contain a number of provisions specifically addressed to people living with HIV/AIDS. They request that states protect access to resources and assets of people living with HIV/AIDS, and address their specific nutritional needs. Guidelines on vulnerable groups and safety nets are also directly relevant. As regards breastfeeding by HIV positive mothers, the Guidelines recommend that the latest indications provided by WHO and UNICEF should be followed.

The right to adequate food can play a pivotal role in offering a more comprehensive and holistic response to the epidemic. It can empower people to cope with the disease themselves and to have a say in how public authorities address their rights.

* The Voluntary Guidelines to Support the Progressive Realization of the Right to Adequate Food in the Context of National Food Security, adopted by FAO Council in November 2004, are available for downloading on the right to food website: www.fao.org/righttofood.



