

HSRC RESEARCH OUTPUTS

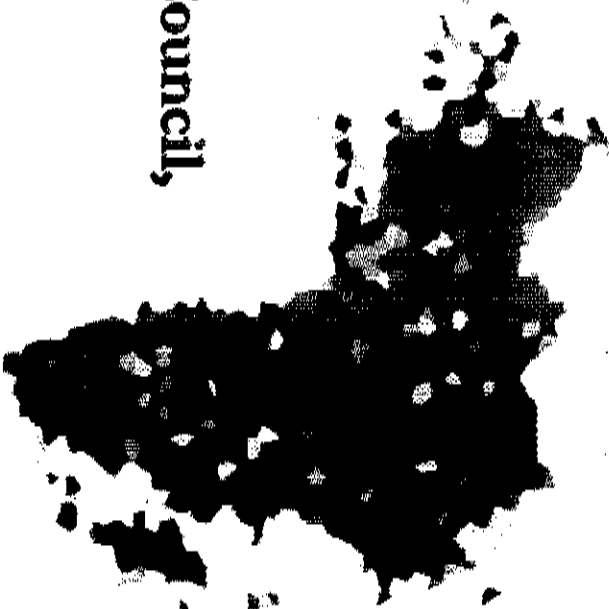
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***HIV/AIDS and Food Security –
Preliminary findings for ActionAid***

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Key objective:

- reflection and exchange of experiences on promising initiatives to support communities affected by HIV/AIDS to meet their food requirements
- document best practices in improving livelihoods of HIV/AIDS affected households – across region

Methodology

- Use of “mitigation workshop” framework – documentation of “success stories” for dissemination (www.sarpn.org.za).
- Case studies chosen in consultation with ActionAid.
- Cases:
 - ActionAid in Zim (2);
 - ActionAid in Moz (2);
 - MSF and NASFAM in Malawi (2);
 - NERCHA in Swaziland (1);
 - others documented elsewhere.

The impact of HIV/AIDS on agriculture/food security has been known for some time:

- A decrease in the area of land under cultivation at the household level (due to a lack of labour stemming from illness and death among household members).
- A decline in crop yields, due to delays in carrying out certain agricultural interventions - weeding.
- Declining yields may also result from the lack of sufficient inputs, e.g. fertilizer and seeds.
- A reduction in the range of crops produced at the household level.
- A loss of agricultural knowledge and farm management skills, due to the loss of key household members due to AIDS.
- Decline in livestock production as the need for cash and the loss of knowledge and skills may force some families to sell their animals.

Approaching the Case Studies - principles

- The challenge for the agricultural community is to develop food security interventions / farming practices that adapt to the reality of middle and late-stage HIV/AIDS affected environments and yet maintain productivity levels
- There is a need for interventions to be designed and assessed not only in terms of their ability to mitigate the current impact, but also in terms of their ability to reduce susceptibility to future infection and vulnerability to various types of HIV/AIDS impacts

**Emergency Response Programme, Family AIDS Caring Trust
(FACT) Nyanga Case Study on Ox-drawn Ploughs,
Zimbabwe - ActionAid**

- provision of seed and agricultural tools, in particular hoes and ox-drawn ploughs, and also fertiliser, to HIV/AIDS infected and affected families and individuals
- local organisation identifies the direct beneficiaries through their own structures
- organisations were given budgets to identify and procure local inputs that were necessary
- home-based care initiative was reinforced and supplemented by the ox-drawn plough initiative

ActionAid in Partnership with FACT Chiredzi and Linkages for the Economic Advancement of the Disadvantaged Programme, Drip-Irrigation Project, Chiredzi, Zimbabwe

- The distribution of drip-irrigation kits for community nutrition gardens for households worst affected by HIV/AIDS
- The use of drip-irrigation as a necessary strategy to reduce the reliance on rain-fed agriculture in a drought-prone region
- Drip-irrigation is very cheap (GBP27) in comparison to conventional irrigation - ensures 3 crops per annum as opposed to a single crop as per rain harvest.
- The technology has been used to grow immune-building varieties of crops that benefit people living with HIV/AIDS.
- The project strengthens community-based initiatives through supporting labour-sharing and mutual assistance arrangements.

How are these different from standard interventions?

- Interventions are not imposed by outside “experts” but based upon opinions and ideas expressed through community discussions
- focuses on building the capacity of local AIDS service organisations, locally based extension services whether from the government or the partner organisation
- takes cognisance of history of rural restructuring and builds on this
- basic objective is achieved and then builds on this
- acknowledges the strengths, particularly the knowledge base, that exists within the communities with which it works
- distribution of implements as a core focus of an HIV/AIDS and food security intervention was a departure from standard projects and one that allowed the beneficiaries themselves to choose the most suitable inputs around which to build their livelihoods

These strategies imply that interventions around food security cannot continue as "business as usual".

Should be:

1. be more creative in the delivery of services;
2. work multi-sectorally with other stakeholders;
3. provide a co-ordinated response;
4. providing a decentralised process in which the local capacity of rural institutions are strengthened and local safety nets supported to promote community-based initiatives.

NERCHA Intervention: Ensuring Food Security for Orphans and Vulnerable Children in Swaziland (*Indlunkhulu* Project)

- The National Emergency Response Council on HIV/ AIDS (NERCHA) is a statutory Council tasked to oversee the conversion of the "National Strategic Plan for HIV//AIDS" into action - mandated by the Swaziland government to co-ordinate all activities and deal with all aspects of the HIV//AIDS epidemic.
- NERCHA's Impact Mitigation office seeks to reduce the impact of the disease through various interventions and particularly by increasing community participation
- The implementing agency that NERCHA is working with in the case of orphan and vulnerable children is the Ministry of Agriculture and Co-operatives (MOAC). In addition, NERCHA utilises existing social structures to deliver HIV//AIDS services. In the provision of orphan care at the community level, these services are delivered through the Chieftaincy system

- With the number of orphans projected to reach 120,000 by 2010 there is an urgent need to provide OVCs with access to food as well as adequate care and support services. To address this, the traditional concept of *Indlunkhulu* is being revised. This is a *siSwati* term referring to the provision of food from the Chief's fields for members of the community that are unable to support themselves.
- MOAC provides the initial agricultural inputs, which are funded by NERCHA, for the *Indlunkhulu* fields, which are then established with the assistance of labour from the local community.
- Once the commitment of the Chieftaincy is evident, a supply of grain and pulses is placed by the MOAC in each Chieftaincy to feed OVCs until the first harvest from the *Indlunkhulu* fields is ready.
- NERCHA recognises that in addition to access to food, orphans require social and psychological support to ensure that they develop to be productive members of their communities - therefore utilised the structures put into place for the *Indlunkhulu* project to provide care and support services for the OVCs within communities.

The NERCHA "philosophy" is based upon four tenants, which may be instructive for other interventions:

1. A national vision informs all interventions in that the reach must be as wide as possible across the country. This is to ensure that equity is a key principle and that the human rights of all people are addressed - it is "easy to create pockets of privilege"
2. The challenge is to ensure that all interventions are ultimately driven from the communities themselves after initial facilitation. The debilitating effects of poverty limit affected people's perspectives, as their choices are ultimately severely limited.
3. NERCHA is determined not to create new structures but to find and build on local initiatives. In NERCHA's view, there is always something to work with at community level, which will ensure that duplication is avoided and capital costs are reduced.
4. The challenge of sustainability must be considered throughout every intervention particularly in an environment where donors have a short-term financial commitment.

Success factors underpinning “successful” interventions:

- participatory methods to design interventions - working with existing local structures
- need for capacity building at local level and within organisations
- understanding of the relationship between HIV/AIDS and development
- scaling up has significant resource and support implications and also raises the question as to how effectively projects can be replicated

Success factors underpinning “successful” interventions:

- given the reality of AIDS, the entire approach to development must undergo a vigorous reconceptualisation - interventions in any community should always combine development, relief and rehabilitation aspects
- policy should encourage and be influenced by local implementation
- better targeting and participation helps affected people take charge
- focus on multi-sectoral partnerships at district and village level
- base policy and practice on experimentation and evidence of success.