

# OXFAM AUSTRALIA EVALUATION REPORT

## UMkhanyakude Partnership Programme



Photo: Evening Meal, by child member of family, OAus 2007

**February/March 2008**

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## **2: Glossary of Terms**

**ABET** Adult Basic Education and Training

**AIDS** Acquired immune deficiency syndrome

**AMREF** African Medical Research Foundation

**ART** Antiretroviral therapy

**HIV** Human immunodeficiency virus

**KZN** KwaZulu-Natal

**MDIC** Maputaland Development Information Centre

**NGO** Non-Governmental Organisation

**OAus** Oxfam Australia

**OVC** Orphans and other Vulnerable Children

**PRA** Participatory Rural Appraisal

**VCT** Voluntary Counselling and Testing

## **1. Introduction**

In 2005 Oxfam Australia initiated a Food Security Program in the Umkhanyakude District of KwaZulu-Natal, South Africa that aimed to strengthen food and nutrition security within the context of HIV and AIDS in the region. In line with the development needs in Umkhanyakude, Oxfam Australia commissioned this report in order to evaluate the impact of their support to various partner organisations, the sustainability of their programmes, and to review strategic options going forward.

Umkhanyakude District Municipality is located in the northeast corner of KwaZulu-Natal (KZN). The District Municipality is divided into five local municipalities and a district management area (DMA). Within the region is located the first world heritage site in South Africa, the iSimangaliso Wetland Park situated along the Elephant Coast. Umkhanyakude is a popular tourist destination for scuba divers, bird and game watchers, with most game reserves hosting the big five. Further, the municipality is home to large commercial sugarcane plantations and commercial timber plantations, which are a source of employment for migrant workers that are usually employed seasonally.

It is against this beautiful, seemingly wealthy visual that one encounters the local rural population who live in squalid conditions, a graphic reminder of the stark inequalities that characterise much of rural South Africa. Umkhanyakude is one of the poorest municipalities in the country and has been identified as a Presidential Node, to facilitate the “crowding in” of development through various government departments and donor organisations, in response to the high levels of poverty, illiteracy and unemployment. Among the active donors in the area is Oxfam Australia (OAus).

This document is an evaluation of OAus’ involvement in the Umkhanyakude district.

## **1.1. Objectives of the Evaluation**

The aim of the evaluation is to assess the progress and impact of the OAus partner's work in their target communities against the following domains of change:

- Strengthening the capacity of families to protect and care for orphans and vulnerable children by providing economic, psychosocial and other support.
- Ensuring that government protects the most vulnerable through improved legislation, policy and implementation and by channelling resources to families and communities.
- Ensuring that all people, especially the most vulnerable, have access to the quality and quantity of culturally appropriate food to lead a healthy and productive life.
- Ensuring that partner organisations have the organisational and technical capacity to implement program initiatives.

In addition, the findings of the evaluation process are intended to inform a set of recommendations that will guide the development of the strategic plan for the next phase of the Program (5 years).

## **2.0. Field Work**

### **2.1. Methodology**

A literature review of the documents supplied by OAus, such as the Annual and the Midterm reports was conducted, to familiarise the team with the partners with whom OAus was involved, their objectives, operations and the progress of these programmes to date. The documents also gave the team an idea of the challenges faced by OAus in the interventions.

The main tools for information collection were key informant interviews with representatives of the partner organisations, coupled with focus group discussions with some beneficiaries and home based care groups. Questions for

the interviews were derived from the objectives of the terms of reference for this evaluation (see annex one).

## **2.2. Partner selection and fieldwork**

The fieldwork was conducted in February 2008 over a period of five days. Six partners were identified with the assistance of the OAus office in Durban. Of the selected six, five partners were visited and interviewed. Unfortunately attempts to set up an appointment with the sixth organisation proved to be impossible. Other organisations selected as replacements were unavailable for interviews due to commitments in Durban.

Of the five partners visited, only the Umbobo Drop In Centre did not have beneficiaries available for interviews. In addition, due to the long distances travelled, the team encountered time restrictions and was unable to conduct home visits of some beneficiaries who were terminally ill and who were recipients of food packs and home based care programmes, although willing beneficiaries had been identified.

Once an initial field report had been completed, a meeting with OAus staff in Durban was conducted. In addition, email correspondence was conducted with relevant OAus staff in Melbourne, Australia.

## **2.3. Structure of Report**

The main component of the report focuses on strategic issues that have emerged from the discussions with a particular focus on broad programmatic findings and recommendations. These include some reflections on the overall impression of the OAus Program, its objectives, the overall strategic plan and recommendations for the future.

The reports from the key informant interviews with the partner organisations and with OAus staff in Durban are reported separately in annex two for further

reference. This is intended to be of use for OAus staff concerned about particular programmes. Some of the detail has been incorporated into the broad strategic discussions to give substance to some of the arguments. On the whole, these reports are records of the particular issues discussed with partner organisations including details on:

- A brief history of the organisation;
- The original and current aims and objectives of the organisation;
- Government and or donor support received by the partner including details for specific programmes;
- Responses to the questions around targeting of beneficiaries and capacity building, challenges and suggestions; and
- Findings pertaining to the individual partners.

### **3.0. Discussion on overall objectives of the OAus Programmes**

The following section provides an overview of the four domains of change raised by OAus for evaluation. Overall the evaluation team gained a positive impression of the programmes, largely supported by how partners responded in the interviews. One issue that has made these interventions successful is the fact that OAus has worked with existing institutions and attempted to build on and improve functioning programming. As expressed by a number of partners interviewed, OAus has made itself accessible, approachable, making its relationship with the partners amicable, transparent and based on mutual respect.

#### **3.1 Strengthening the capacity of families to protect and care for OVC by providing economic, psychosocial and other support**

The definition of the “family” in terms of targeting for OAus programming has revealed some challenges. Defining the concept of a “nuclear family” is inappropriate as recognised by OAus, particularly in the African context and in this particular locality which is an area impacted by HIV and AIDS and temporary

migration. Many parents have died or migrated leaving their children under the care of grandparents, members of the extended family or other community members. In many cases the terminally ill and OVC are being taken care of by community members or by carers who are not related to them. There is thus a need to re-examine what is a family unit or household, particularly for effective targeting in programmes.

As confirmed by most respondents, members of an extended family were often caring for children. This extended family consisted of the immediate caregiver and children, sometimes living with other family or kin, with non-resident family members with whom there was likely to be important social and economic interaction. In these cases the non-resident family member was likely to represent a significant factor in assessing family capital, and was likely to be an important contributor to the resilience or vulnerability of families affected by HIV and AIDS (Belsey, 2005)<sup>1</sup>.

This complements a broader definition of family as a social unit, which refers to people linked by marriage or kinship or to people claiming descent from common ancestors in a lineage, tribe or clan (Bruce *et al*, 1995)<sup>2</sup>. People may form and extend families by adopting and fostering children, defining non-relatives as family, or establishing consensual partnerships. It appears that this understanding of the extended family should be recognised explicitly in OAus programming particularly as it forms the primary social security mechanism of the communities in which the organisation is working.

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<sup>1</sup> As Belsey explains, resident and non-resident family members make up the family network, which may be intergenerational, horizontal, or a combination of the two. The responsibilities and obligations of non-resident family members may be culturally or legally defined, and may involve the provision of care or support for those within the network affected by HIV and AIDS (individuals with the disease and their immediate families). Specific duties often include, but are not limited to, economic support, inheritance or care of the widow (referred to as levirate in areas of Africa), assistance in the education of children, and the foster-care placement of orphans within the family network (2005).

<sup>2</sup> J. Bruce, C.B. Lloyd and A. Leonard, *Families in Focus: New Perspectives on Mothers, Fathers and Children* (New York, The Population Council, 1995).



When reflecting on the impact of OAus programmes, respondents largely indicated that beneficiaries, whether targeted within households or families, had benefited from improved capacity to protect and care for vulnerable children. This was very evident when reflecting on the issue of economic support, which was particularly true for programmes focused on income generation such as Hot Girls Fancy Stitch and the Maputaland Development Information Centre (MDIC). However, beneficiaries that received support in kind, in the form of food parcels or as produce from their gardens, were also largely positive about the impact on their capacity to care for children. In addition, for the terminally ill and OVC involved in home based care schemes, psychosocial support had been successfully offered through counselling.

A major concern raised during interviews that would require some attention in the future was that of child sexual abuse, especially in the context of orphaned girl children. Several respondents indicated that this was still in existence particularly as families - and to an extent the community - have remained silent about the issue. Due to AIDS death, usually of parents, children remain vulnerable to all forms of abuse. This is especially the case for girls. Both OAus and partner organisations should explore this. Thus in terms of protection of vulnerable children there is a need to re-examine how interventions can be adapted to focus more firmly on the sexual abuse of children. These programmes will need to be implemented in a way that does not destroy the relationship between the interveners and the community.

The key question to ask is to what extent does the legislation safeguard their rights ~ and how might these rights become real on the ground? On reflection of these issues, the OAus staff in Durban indicated that they had already taken forward the issue of child abuse through their new program called the Southern Africa Children's Social Protection Program (SACSPP). Apart from dealing with abuse, the program was explicit about engaging policy in terms of children's rights to social protection.

### **3.2 Ensuring that government protects the most vulnerable through improved legislation, policy and implementation and by channelling resources to families and communities**

While the issue of linkages between HIV and AIDS and food and nutrition security were well understood, issues around government legislature and the role of advocacy for policy change amongst partner organisations was not well conceptualised. In all the interviews conducted partners had no idea about what was being done by OAus on the issue and neither were they doing anything in terms of their own programmes. The response was the same regardless of how the research team framed the question. This was a clear indication that there was a lack of understanding about how policy and legal processes work. This can be taken further and can be construed as a warning that many partners and beneficiaries are unaware of the role of advocacy in ensuring that their rights as citizens of the country are met and that government has a primary responsibility of meeting basic needs.

If this is truly deemed a strategic area of the OAus Program, as iterated in policy documentation, then an information campaign will be necessary to raise awareness of this issue and to initiate a process of enabling organisations and individuals to engage government in terms of policy making. The ongoing situation of livelihood insecurity in Umkhanyakude raises important questions about the role of the state and suggests that new needs for social protection are emerging, which are different from the past. The entwined stressors affecting the region, which are described in the following section, continue to impact negatively on informal social security systems and generally compound the poverty and vulnerability of people throughout Umkhanyakude. As such, the grant system, which is largely successful in South Africa, should be more effectively complemented by other social services that are less efficient in the area. The role that OAus and their partner organisations might play in advocating

and supporting such an enabling environment is an important question. Indeed, programmes, even if successful, cannot provide the scale of impact that is necessary to underpin resilience and bolster livelihoods. This raises questions around state-NGO interaction in terms of providing social protection that might provide the basis for large-scale impact on poverty and livelihood insecurity. A similar challenge for OAus and their partners is how to ensure that the rights of people are protected and that the existing legal framework be harnessed to ensure long-term rural livelihoods in a context of social justice. This raises challenges to understand the existing legal framework in order to ensure communities are able to realise their rights.

This reiterates the importance of working strategically with government, building the capacity at district level to be both more responsible to the obligations to its citizens and for communities to be more proactive in articulating and claiming their rights. In terms of practically responding to these rights, OAus has an important role to play in helping communities articulate and claim their rights and supporting government to meet its obligations in the area of livelihood security. In reaction, OAus staff reiterated the role of the new program - the Southern Africa Children's Social Protection Program (SACSP) – in engaging policy in terms of children's rights. This evaluation therefore dovetails well with the Durban office's own appraisal of gaps and focus for the future.

### **3.3 Ensuring that all people, especially the most vulnerable have access to the quality and quantity of cultural appropriate food to lead a healthy and productive life**

Most of the programmes have achieved this objective for their targeted beneficiaries, although for some it has been an indirect achievement. Food packs, which have been distributed as an emergency measure to the ill and to OVC, have definitely improved the access to food for these vulnerable groups.

However the impact is short-lived and temporary. While it is a necessary intervention in terms of relief for the most vulnerable, it is not a sustainable one.

On the other hand the vegetable gardens have the ability to provide consistent supplies of healthy food, if they are fully operational. The uptake of the gardens has been slow in some programmes. For example, in Hluhluwe and Ophondweni, poor community participation in gardening was a serious challenge. It seemed that participants were more interested in engaging in harvesting than the establishment and maintenance of gardens. For those actively involved, they have benefited not just from the produce but also from the knowledge of the importance of good nutrition and a regular and diversified diet, as well as how to establish their own gardens.

In terms of adequacy, most partners felt that OAus could do more in terms of funding food security programmes and increase the numbers of food packs being distributed. In many ways this was a predictable response in a context of high vulnerability to hunger. However, it does raise an important question about relief responses in the form of food packs that are often easier to implement and more popular with beneficiaries - and the spectre of dependency. The bottom line is that OAus will probably not be operating in Umkhanyakude beyond the lifespan of the existing project cycle and a possible extension. The issue of the legacy created is thus important.

In terms of a legacy, there is a need for OAus to be explicit about strengthening livelihoods and reducing dependency, particularly if the overarching objective is long-term development. There is clearly a role for short-term relief interventions within a development programme, as long as these are integrated with other more sustainable livelihoods initiatives, and provide additional support in times of increased vulnerability. As such, livelihood initiatives at the most basic level should ultimately aim to provide enough in terms of income or production to support families in times of acute need. As articulated by a member of staff in

Australia, this should include supporting people to plan and manage their resources for these situations if required.

The role of “developmental relief”, which is discussed in more detail in subsequent sections, therefore comes into focus. This acknowledges that some people, particularly the most vulnerable, will require relief due to the complex array of stressors affecting their lives. However, it does push programmes to look beyond relief in the form of food packs to other sources of dependable support, such as government grants, whilst attempting to underpin longer-term livelihoods.

#### **3.4 Ensuring that partner organisations have the organisational and technical capacity to implement**

The response from partner organisations indicated that, as a whole the capacity development programme has been adequate. Across the board, representatives of the partner organisations felt that the training support provided by OAus was sufficient to meet their immediate needs. However, when considering the future impact and ongoing sustainability of these programmes, particularly around livelihoods, it is likely that a great deal more investment into capacity strengthening will be required.

According to the respondents, there has been a positive impact not only on programmes but also on the personal lives of those trained. Some respondent who had received training felt that their life skills beyond the scope of the programmes had been greatly enhanced. However, one significant issue that emerged was the selection of personnel for training to ensure the full impact of the training for the organisation and project. In one instance, the head of an organisation had benefited from several training opportunities with little being distributed to other support staff. This has obvious dangers in terms of investing in too narrow a field.

Another important issue that emerged was the need to build teams of leaders rather than focus on a few individuals. Although focusing on individuals with demonstrable leadership skills and drive was important, the danger remained that this was a fragile base on which to build sustainability. In other words, a broader leadership base through strengthen capacity should become a key focus for OAus.

## **4.0 Results and Analysis**

### **Discussion on overall impression of the OAus Programmes**

The following section focuses on broad, overarching issues that emerged from the evaluation, which have informed the strategic recommendations that follow. These issues include the geographical extent of OAus operations, the relationship between food security and HIV and AIDS, ensuring sustainable livelihoods as a “legacy” of OAus operations, engaging with multiple stressors and monitoring and evaluation.

#### **4.1. Geographical Extent**

It was recognised by both OAus staff and most partner organisations that the geographical area covered by OAus programmes in Umkhanyakude was immense. Whilst this demonstrated the extent of the area requiring programmes dealing with HIV and AIDS and food insecurity, it also raised a number of logistical challenges. For example, while the road network is widespread, making most areas accessible, the condition of the roads present challenges to reaching beneficiaries on a regular basis. As a result in some areas there was need for the use of 4 X 4 vehicles. However, due to a high level of crime in the area characterised by frequent hijackings, this has become a serious risk for persons travelling in such vehicles. OAus face a tough set of decisions when considering

how to access distant communities whilst also protecting staff of partner organisations from the likelihood of a hijacking.

The issue of geographical distance and accessing distant communities raises an interesting reflection on Chambers' book - *Rural Development: Putting the Last First*<sup>3</sup> – that argues that poor rural people are largely unseen by 'outsiders' – people who are themselves neither rural nor poor, such as aid workers, donors, government staff and researchers. These outsiders often have two opposing approaches to rural development: one of academics who take a critical and pessimistic view, and one of practitioners who are more actively engaged and optimistic. The views of both are "top-down" with limited understanding of rural poverty. Their knowledge of rural areas is limited to two main sources: large-scale questionnaire surveys which often simplify and mislead; and the brief and hurried visits from urban centres of "rural development tourism" with their many biases against seeing, meeting or learning from the poorer rural people.

Clearly OAus have chosen to work with those living far off the "beaten track" in difficult circumstances. Rather than seeing themselves as having the solution OAus chooses to work with partner organisations that are more likely to have access through recognising and articulating local people's appropriate realities, knowledge and resources. Having recognised poor people's experiences through partner organisations, OAus attempts to recognise deprivation as a trap with five linked clusters of disadvantage: not only poverty, but also physical weakness, isolation, vulnerability and powerlessness.

Reiterating the sense of isolation and "displacement", most of the programmes visited were not clearly marked off the main road, which made them difficult to find. This may say something about the research team's anxiety to finding places in time for interviews. However, the issue of geographic extent was cited by the

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<sup>3</sup> Rural Development: Putting the Last First, Longman: Harlow (now Pearson Scientific), by Robert Chambers, 1983, still in print <http://www.ntd.co.uk/idsbookshop/details.asp?id=234>

MDIC programme, where even the local based enumerators have problems accessing some the programmes, due to their remoteness and the lack of public transport. Similarly, the Umbobo Drop in centre also cited issues of distance and access of the drop in centre and other subsidiary feeding schemes by the terminally ill and orphans and other vulnerable children (OVC), due to the distances to these centres as well as the unreliability of the public transport system. It is simple to conclude that while the programmes supported by OAus are successful and beneficial to the immediate communities, the issue of the vastness of the area limits the overall extent of the impacts. However, it should be recognised that the very fact that some of these far-flung areas are being visited is an indication of an impact being made.

The challenge is more to do with either the replication of such programmes to increase the impact or to find ways of scaling them up to a situation where they are sustainable. To scale something up is to increase something in size, number, or extent - ultimately to achieve large-scale impact. For scaling up to be sustainable it must be sustained over time and space – meeting the needs of the present without compromising the ability of future generations to meet their own needs. This is discussed further under “strategic recommendations”.

#### **4.2. Food Security, HIV and AIDS**

The issue of HIV and AIDS seems to have been well understood and accepted as a major issue in all the programme areas visited. Both the partners and the beneficiaries spoke freely of the epidemic and some of the beneficiaries identified themselves to be living openly with HIV. The carers, who identify the beneficiaries in most programmes, also provide psychosocial support for the terminally ill and OVC, encouraging dialogue about the epidemic. While they may still exist within the communities, issues of stigma and witchcraft do not seem to be major challenges in the communities visited. The new emphasis in the programmes has been on the quality of life, through the improvement of the living conditions and better food and nutrition.



The (non)-issue of stigma is significant and deserves attention. As is evident from a number of recent studies including a few from nearby AmaJuba District in KZN, there is evidence of an emerging inequality in the provision of resources: AIDS orphans are stigmatised, and many households are too poor to fully support the children for whom they have taken responsibility (HEARD, 2007)<sup>4</sup>. Recent results from a study in AmaJuba - and Chikwawa in Malawi - point to high levels of stigma, denial and reluctance to talk openly about the disease (HEARD, 2007). This was particularly evident amongst the Chikwawa sample, where HIV and AIDS was not referred to directly but rather considered the outcome of various other factors, including food insecurity and witchcraft. When asked why HIV had not been mentioned on their list of stressors, caregivers suggested that HIV and AIDS was not a problem but a result of multiple challenges faced, such as hunger, lack of money, droughts. Considering how often stigma around HIV and AIDS undermines development efforts (see Baylies, 2001)<sup>5</sup>, it is commendable that levels of openness and engagement have been achieved in the OAus programmes.

Through basic training of the various beneficiaries, through several initiatives, the linkages between HIV and AIDS and food and nutrition seem to be well understood in the programmes visited. Again, this is a significant achievement considering the complex interactions between the epidemic on the one hand and livelihood insecurity with resultant food and nutrition insecurity on the other. Gillespie has shown through detailed reviews of scientific evidence that there is a complex “bidirectional” relationship between the progression of HIV and AIDS and livelihood and food insecurity (2007)<sup>6</sup>. On the upstream side of viral

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<sup>4</sup> HEARD (2007) “Experiencing Vulnerability In Southern Africa: The Interaction Of Multiple Stressors”, unpublished report submitted to the Regional Network on AIDS, Livelihoods and Food Security (RENEWAL), May.

<sup>5</sup> Baylies, C., (2001) ‘The impact of AIDS on rural households in Africa: a shock like any other’, Institute of Social Studies, United Kingdom.

<sup>6</sup> Gillespie, SR. Kadiyala, S and Greener, R (2007) Is Poverty or Wealth Driving HIV Transmission? AIDS, Vol 21, November.

transmission, livelihood insecurity may put poor people at greater risk of being exposed to HIV ~ for example through forced migration to find work, or through poverty-fuelled adoption of transactional sex as a “survival” strategy (Gillespie, 2007). On the downstream side, the various impacts of chronic illness and premature mortality on household assets and resources are well documented.

In terms of responding to this complex reality, the OAus programmes have led to the introduction of vegetable gardens, which have been influential in assisting beneficiaries set up their own gardens in their homesteads. Similarly, while the issuing of food packs is a short-term measure particularly focused on the nutrition needs of AIDS affected families it has had a very positive impact especially for the terminally ill and OVC. There are some concerns about food packs and the creation of dependency as opposed to establishing sustainable solutions, which raise questions about whether these are a solution to the food security issues in the area. Again, more details of these recommendations are provided in the final section.

### **4.3. Improving and Diversifying Livelihoods**

Of the five programmes visited, four have the improvement of livelihoods as an explicit focus. Building livelihood diversification refers to the process of people increasing the variety of activities they use to build their livelihoods. For example rural households may, in addition to farming, make handcrafts to sell for additional income.

The MDIC is promoting livelihoods through income generating programmes and through developmental and skill development. In addition they facilitate training in the municipalities, which they are servicing. It was recognised by both OAus and MDIC that this outreach is limited due to the geographic area serviced and a lack of resources.

Hot Girls Fancy Stitch is mainly an income generation programme focused on

skill development for their members. Their outreach is limited to the members of its group although the wider community does benefit through the ripple effect. This may be a suitable candidate for replication, which implies making an “exact copy” or reproduction to achieve a consistent result elsewhere.

To a lesser extent Ophondweni Youth Development has a livelihood focus, particularly for the youth in school and out of school in the area, and subsequent general community members. Although training of the youth in life skills is still a focus of the centre, the escalation of HIV and AIDS in the area has necessitated a shift in focus to caring for the terminally ill and the orphaned children over and above focusing on food security. This no longer just involves the youth but the wider community including the elderly. It was interesting to note that in some of the programmes, both old and younger men were involved in the caring of the chronically ill, which would generally be the responsibility of women.

The Hluhluwe Advent crèche does have a focus on livelihoods although this is indirect. The programme facilitating the production of arts and crafts was originally aimed at women who were living with HIV, but due the inconsistency in attendance the elderly were encouraged to join and ultimately to take over the group. This has worked well for the community, as a larger number of families have benefited. Further most of the elderly involved also attend literacy classes at the centre. When analysed through sustainable livelihoods framework, all of the five “capitals”, namely social, natural, economic, human and physical are being strengthened by the various programmes being funded by OAus.

However, hard questions should be asked about the sustainability of these livelihoods programmes. It was not clear whether the training in crafts, for example, would continue to underpin the livelihoods of the elderly without linking to active markets. It was also unclear whether the project partners and the beneficiaries could sustain the inputs required to develop the crafts, if OAus was

to withdraw. These are “classical” development challenges experienced by a large number of development agencies.

Building on analysis conducted by Drimie in 2006, which included OAus programmes in Mozambique, the most promising field innovations are often those that help diversify livelihood strategies, which enable people to be more resilient in the face of shocks<sup>7</sup>. When reflecting on the rationale of many field interventions, the basic logic was that a household with well-diversified assets and livelihood activities cope better with shocks and stresses than one with a more limited asset base and few livelihood resources. Resilience may be shaped or created by some of the following key factors:

- Livelihood diversification;
- The role of social capital;
- Building of the asset base;
- Access to markets; and
- Formal sector employment.

It is key to note the role of markets and to question whether the OAus programmes are in fact underpinning sustainable (or resilient) livelihoods by engaging this issue. Certainly people’s livelihoods may have become diversified and many of the interventions build on existing social structures and institutions (social capital). But questions remain as to whether these initiatives can be sustained without building up family assets and ensuring that the outputs of the activities were in demand through markets. Often a major limiting factor facing livelihood programmes is accessing information around markets. A marketing system should be developed to give impetus to producers of crafts, and other goods including farming produce, to enrich the local economy.

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<sup>7</sup> Drimie, S (2006) “Strengthening responses to the Triple Threat in the Southern Africa region – learning from field programmes in Malawi, Mozambique and Zambia: Synthesis Report”, Joint Project of Concern Worldwide (CW), Oxfam International (OI) and the Southern Africa Regional Poverty Network (SARPN), Johannesburg, June.

In order to address this issue OAus might focus more explicitly on the identification of current successful livelihood diversification strategies in Umkhanyakude, and identifying alternatives for further diversification; identifying the constraints and opportunities that people in communities have to accessing markets; providing, or supporting the provision of, technical knowledge and skills; and exploring options for enhancing finance or credit access. Diversification is not a panacea for reducing risk or enhancing adaptation, and in fact some research shows that in some circumstances it may increase risk. This highlights once again the importance of understanding specific local level needs and conditions.

#### **4.4. Multiple Stressors**

While it was acknowledged that HIV and AIDS was one of the biggest stressors affecting communities within Umkhanyakude, a number of other issues should also be recognised as negatively affecting the area. For example, issues of climate change affecting livelihoods through impacts on agriculture and water, political tensions in a province where such tensions escalated in a “civil war” in the late 1980s and 1990s, and issues of poor infrastructure and “connectivity”.

This is not to deny that the effects of HIV and AIDS are far-reaching, and not limited to those who contract the disease. As clearly recognized by OAus and their partners, the impacts extend to families, co-workers, businesses, communities, and health care systems. However, the disease alone does not define the factors that determine vulnerability in Umkhanyakude. Multiple, interacting processes of social, political and bio-physical change influence the capacity of individuals, households, families and communities to respond to HIV and AIDS. Furthermore, negative outcomes for large numbers of people affect in turn, the context itself. For instance, the context will change as more people seek support from governments and change livelihoods and uses of natural resources to meet immediate needs. As a result a dynamic cycle emerges wherein

vulnerability is generated by both exposure to change, by responses to change, and by the outcomes of these processes.

It is thus important to recognise these other “sources” of vulnerability, which were not clearly stated or acknowledged by partners, although in some instances they were implicit in describing the general context in which they worked. For example, although political tension was not outwardly experienced, it was articulated as another stressor by MDIC. This involved members of MDIC being perceived as supporting a political party in opposition to the local leadership and the municipality. Although this was understood by MDIC, it has not deterred the implementation of the programmes or the collaboration between the two institutions. This is because the dealings were on a personal level. However this informal agreement could be problematic if the current personnel changed in the future with resultant negative effects on programmes in the area.

Another significant stressor that was not implicitly recognised although alluded to in discussions around water was that of climate. Climate change is only one of the many stressors that affect resource-constrained communities such as those living in Umkhanyakude (see Alison Misselhorn’s report for OAus on this issue<sup>8</sup>). Climate change implies that the average annual rainfall is likely to decrease; temperatures are likely to increase; rainfall is likely to become less predictable, with higher risk of extreme rainfall events as well more likelihood of very low rainfall years; less water is likely to be available for crops, livestock, drinking and sanitation; and sea-levels are likely to rise, possibly threatening some fresh water resources. Overall, changes in water resources and the hydrological system are arguably the most profound of the environmental changes expected with climate change.

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<sup>8</sup> Misselhorn, A (2007) “Adaptation to climate change in Umkhanyakude District, KwaZulu-Natal”, draft report to Oxfam Australia, Melbourne, Australia.

Misselhorn has argued that climate changes can vary within just a few kilometres, producing highly localised patterns of environmental as well as social response (2007). Furthermore, people's resources, and their vulnerability and adaptive capacity vary enormously between communities and even between households. Locally specific coping and adaptation strategies, as well as farmers' knowledge about adapting to climate variability, are therefore an indispensable part of the adaptation picture. Key recommendations to understand local level needs include: working closely in and with communities and with partners working in Umkhanyakude to understand its specific vulnerabilities as well opportunities; identifying the human capacity strengths as well as weaknesses in communities - for example skills gaps that hinder income generation or employability; developing initiatives to support adult basic education and literacy; identifying and supporting groups or individuals who are already initiating and/or seeking ways to strengthen livelihoods and/or adapt; sourcing and facilitating the provision of information to communities on agricultural and non-agricultural market opportunities, employment opportunities, and income generating activities; and working with communities to strengthen their civil voice in lobbying for better service delivery.

Another issue cited by partners was the lack of infrastructure, particularly pertaining to availability of water, which was noted in all the programmes visited. For example, water was cited as a major limiting factor to the success of community food gardens. This resonates with other experiences in South Africa, particularly around urban agriculture where the high cost of water and supporting the necessary infrastructure have been major obstacles for community gardens. The infrastructure issue also pertains to the road network, access to social services, including grants, access to information and extension and a range of other issues relating to governance. This relates somewhat to the role of supporting government to provide these services and also to advocacy; the government is obliged to provide these services to all citizens and should be held accountable to delivery of targets.

The point about identifying these different stressors is that there has been a long-term erosion of livelihoods over time both regionally and within Umkhanyakude with resultant increases in levels of food insecurity as a major outcome of less resilient livelihood strategies. Related to this, the term “vulnerable livelihoods” becomes a useful conceptual lens to characterise households or communities who generally, year in year out make only barely enough to sustain their life and for whom a small shock quickly slides them into deficit. These groups or households are distinct from those who have enough resources to accumulate marketable surpluses in most or some years from which they can draw on in bad times. The level of these resources or asset holdings in large part determines the resilience of households in a particular context. In the context of families’ decision making or planning around the future, households with vulnerable livelihoods are clearly less likely to be able to make long-term decisions. Rather their reality is “survivalist”, based on what is immediately available with short-term trade-offs that often have long-term implications.

#### **4.5. Monitoring and Evaluation**

The research team noted a general lack of formal monitoring and evaluation mechanisms in the programmes run by the partner organisations. OAus confirmed this although it was noted that other mechanisms of monitoring existed such as accounting for budgets as a prerequisite of partnership arrangements and creative tools such as the Fancy Stitch digital stories project, which circumvented weak formal M&E tools. In addition, a formal evaluation was conducted of MDIC (which claimed never to have received a copy of the report). Other forms of monitoring were commonplace within organisations. For example, the Ubombo Drop in Centre confirmed that carers were monitored by a supervisor. As a result the following issues were uncovered during the monitoring: -

- Some of the intended beneficiaries never received food packs; and
- Some of the items in the food packs were removed such as cooking oil.



Since OAus work within existing structures and institutional arrangements, a subsidiary partner Sibembeseni is mandated to provide support to partners such as Umbobo Drop in Centre. This has, however, not worked out as efficiently as expected. In the cases where partner have failed to perform to expectation, termination is initiated over a period of six months. As a facilitator, OAus assist the partners to set up their own monitoring and evaluation structures. In terms of partners sharing knowledge and experiences, a forum was already in existence, which was formed by the municipality, although the group to date has done not much.

The example of the Umbobo Drop In Centre and food parcels confirms the importance of both monitoring of programmes throughout their lifecycle to ensure impact and ultimately a formal evaluation against set criteria to effectively take stock of the project and the use of donor funds. Monitoring can easily be designed around existing structures with simple reporting procedures that can easily be checked by OAus.

It might be argued that such arrangements would undermine the trust and autonomy enjoyed by partners. For example, OAus has stressed that their role was that of a facilitator in all programmes and with all the partners they were involved with. As such they encouraged and provided guidance to partners but did not enforce the activities carried out or the decisions made. But it should be reiterated, as it was noted by OAus staff, that a change in personnel in partner organisations might lead to changes in existing informal checks and balances.

## **5. Strategic Plan Recommendations**

### **5.1. Strengths and Challenges**

The following recommendations are based upon an assessment of the strengths identified within the OAus programmes as well as a critical appraisal of the challenges, as seen by both the research team and the various respondents.

### ***Strengths***

As identified above, the strengths displayed within the programme include:

- A widespread awareness of HIV and AIDS, with resultant de-stigmatisation of the epidemic within communities;
- The positive relationship experienced between partners and OAus. Most partners felt OAus was consultative, transparent and open to engaging problems;
- Programmes were designed to fit within existing institutions rather than being imposed by outside;
- OAus seems to have a clear grasp of participatory development. Within most programmes, OAus was seen as a partner that was accountable to the local level.
- Most of the interventions were programme specific thus demonstrating a grasp of the complex challenges facing communities. In other words, there was not a “one size fits all” approach.
- The two-way relationship between HIV and AIDS and food security was relatively well understood particularly by partner organisations. For example home based carers were well versed in issues of food types and preparation, nutrition and quality of life for people living with HIV.

### ***Challenges***

- In some cases, knowledge around HIV and food security was not easily translated into local practise by beneficiaries. For example, a nutrition garden with maize and bean production did not seem an appropriate source of nutrition for a feeding scheme.

- Some partners indicated that a lack of a unifying framework did not allow for easy integration among the various programmes. This was partly a communication problem.

The following issues have been identified as key for the ongoing strategic planning process.

## **5.2. Beyond Boutique Programmes**

### **5.2.1. Consolidation, replication, scaling up and sustainability**

There is a need for the consolidation of some of the interventions implemented by OAus in Umkhanyakude, given the geographical extent of the area. This might entail replicating or scaling up successful programmes as important strategic options for the future particularly if OAus looks towards expansion across the municipality. Until now, many programmes have not matched the size and expected duration of the problems experienced by the families living in communities affected by HIV and AIDS. John Williamson has emphasised this when he cautioned that the aim of programmes by government and civil society was:

*“Not to save a few orphans in those rare communities in which external agencies operate, but to **strengthen the capacity of families and communities to cope**. Developing programmes that significantly improve the lives of individual children and families affected by HIV/AIDS is relatively easy with enough resources, organizational capacity and compassion. Vulnerable individuals and households can be identified, health services can be provided, school expenses of orphans can be paid, food can be distributed, and supportive counselling can be provided. Such interventions meet real needs, but the overwhelming majority of agencies and donors that have responded so far have paid too little attention to the massive scale of the problems that continue to increase with no end in sight. As programs to date have reached only a small fraction of the most vulnerable children in the countries hardest hit by AIDS, the fundamental challenge is to develop interventions that make a difference over the long haul in the*

*lives of children and families affected by HIV/AIDS at a scale that approaches the magnitude of their needs*<sup>9</sup>.

### **5.2.2. Scaling Up beyond Projects**

Project-based approaches are inherently limited. Even when they are scaled out in terms of being expanded to other sites, they are unsustainable if dependent on external funding. They are also likely to leave large numbers of people out of the loop if not joined up by systemic strategies. What are critically needed are universal approaches, responding to the rights of citizens, including children, to receive essential services. Once again, this raises the question of OAus becoming more explicitly involved in enabling partners and communities to engage with government and to understand and advocate for their rights within the South African legal dispensation.

There are two major challenges facing attempts to assist vulnerable families. At the macro-level, this needs government assistance through social security provisions (social welfare), as well as health, education and other services that make up the social wage, together with efforts to scale up promising community-based activities. At the micro-level, greater local philanthropy, mobilisation and organizational capacity needs to be drawn in, especially amongst better-off members of communities, such as shopkeepers, professionals, and entrepreneurs, to support the efforts of local volunteers to assist vulnerable families. This exemplifies the enabling environment in which communities will be able to help themselves once an external agency, such as OAus, withdraws at the completion of a programme.

### **5.3. Families as focus**

A clear rationale for targeting families needs to be clearly defined and understood by partner organisations. This implies understanding whom to target with what

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<sup>9</sup> Williamson, J (2000). *Finding a way forward: Principles and strategies to reduce the impacts of AIDS on children and families*. Washington, DC: USAID (p. 3).

intervention within a family in order to have the most impact. A key question around gender and gendered power relations within families needs to be clearly debated. In addition a clear focus on youth within families needs to be considered.

Related to this, the issue of gender, in both programmes and target groups is important. KZN is characterised as a largely patriarchal society, particularly in rural areas, where gender issues still play a significant role. This was noted at the Advent Crèche where the proprietor is not only a woman, but an “outsider” (i.e. not of the district, the province or the country) who has to deal with the local leadership which is male dominated.

#### **5.4. Sustainable Livelihoods**

The legacy of livelihood programmes needs to be carefully considered particularly in a context where OAus may exit a partnership. Questions around linking livelihood activities, such as crafting, agricultural production and livestock husbandry, need to be clearly connected to markets to ensure basic supply and demand response. This will involve the identification of appropriate markets and the provision and use of appropriate (and timely) information.

#### **5.5. Development Relief**

Although the relief objective for the most vulnerable beneficiaries through food parcels was essential, questions remain as to what would happen when OAus withdrew from a number of projects. Adopting a development relief approach may help to ensure that programmes move beyond dependency. For example, there may be ways to connect food and nutrition gardens to food parcels.

The experience of keyhole gardens in Lesotho as a development relief effort provides an interesting case study. Key lessons from this programme are detailed below and in annex three, which provides a workshop report focused on

lessons learned from the Livelihoods Recovery through Agriculture Programme, facilitated by CARE Lesotho.

#### **5.5.1. Livelihoods Recovery through Agriculture Programme (LRAP)**

As a developmental relief programme, the Livelihoods Recovery through Agriculture Programme (LRAP) provides lessons that can be shared in the region. The LRAP programme is popularly known as *Lirapa* in Sesotho, a word meaning, “homestead gardening”. LRAP was developed in response to the food and livelihoods crisis that emerged in 2002 not only in Lesotho but also in the southern Africa region in general. The tenet guiding this programme centred on addressing the underlying causes of household vulnerability and achieving this through the creation of a conducive policy environment that supports secure livelihoods. Being implemented jointly by CARE and the Lesotho Ministry of Agriculture with support from the Department for International Development (DFID), the programme has been hailed as an example of “good practice” that provides useful lessons for interventions engaged with vulnerability in the region.

The main focus of the programme has been on homestead gardens, the promotion of crops that meet the nutritional requirements of people living with HIV and AIDS, building household capabilities for food production and working with local NGOs to scale up their work and get support to vulnerable households. In this regard, the programme was not only run by one NGO but partnerships have been created with a diverse number of players. The critical aspect of the LRAP programme has been the partnership with the Ministry of Agriculture that has ensured that government extension services are strengthened. Within this framework, LRAP hinges on the following key themes:

- A solid research base and analysis of long-term trends and dynamics in Lesotho,
- The importance of mainstreaming HIV and AIDS concerns into agricultural programmes,
- The need to build interventions within existing institutions, and

- Embracing “new” concepts such as social protection.

These are expanded on below.

#### ***5.5.1.1. Building on research and analysis***

The importance of information and analysis for decision–making is emphasised within LRAP as a way of gaining better insights into the livelihood mechanisms of vulnerable households. The approach is unique in that the analysis focuses on livelihoods and not just “food gaps”, assets and activities. Furthermore, it embraces an analysis of a suite of “multiple stressors” that include employment, the environment, HIV and AIDS and institutions. In so doing, it engages vulnerability in a more holistic way and not in terms of “HIV exceptionalism”. Apart from informing and influencing policy direction, the research component of the LRAP has in addition provided clear direction for interventions.

#### ***5.5.1.2. Mainstreaming HIV and AIDS***

Challenges facing many organisations have converged around understanding the meaning of HIV and AIDS mainstreaming. Due to misconception, organisations have been faced with possibilities of pushing or adding HIV and AIDS mainstreaming into activities that are not relevant. There are important lessons that can be learnt from the LRAP definition of “mainstreaming HIV and AIDS” for other regional programmes grappling with the reality of the epidemic. Mainstreaming in this case is not understood as a series of activities but rather a process of changing attitudes and deepening understanding about complex issues, which requires continual learning and reflection. Furthermore, LRAP’s engagements with HIV and AIDS are practical and about how interventions can help prevent infections, ensure care and support for those already infected and to lessen the impacts of the epidemic.

#### ***5.5.1.3. Building on existing institutions***

LRAP is extolled because of its clear links to existing institutions at community and government levels. This innovation of building and nurturing partnerships across sectors, from the extension services to the private sector creates an environment for sharing goals and hence greater funding opportunities. Other resultant benefits include symbiotic relations for transferring skills and experiences among partners. LRAP in this context provides excellent opportunities for scaling up activities and influencing the programme choices of the Government of Lesotho as well as policies in other countries.

#### **5.5.1.4. Towards Social Protection**

Social protection describes:

- All public and private initiatives that provide income or consumption transfers to the poor,
- The protection of the vulnerable against livelihood risks, and
- Enhancement of the social status and rights of the marginalised.

Against this background, social protection is best understood as reducing the economic and social vulnerability of poor, vulnerable and marginalized groups of people (Devereux & Sebates-Wheeler, 2004)<sup>10</sup>.

LRAP as social protection is seen as providing relief and helping avert deprivation. As already inferred, the programme boldly addresses underlying causes of household vulnerability by providing a development response to a humanitarian challenge. Increasingly eminent within the programme is its potential to enhance household incomes and capabilities through support mechanisms that are provided by government and non-governmental agencies in the short and long term. Moreover, LRAP addresses issues of social equity by supporting and strengthening enabling policies. In addition, the process also enables vulnerable people to realise their rights to livelihood security.

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<sup>10</sup> Devereux, S and Sabates-Wheeler, R, 'Transformative Social Protection', October 2004, IDS Working Paper 232.



#### **5.5.1.5. Framing expectations**

LRAP is an example of a process that involves continuous learning, synthesizing and acting. With this in mind, the programme should not be viewed as a single event but a series of events. In emphasis, it is a process that is long-term, involving education, skills development and new ways of thinking and working so that staff and partners automatically seek to understand and address risks and vulnerabilities associated with HIV and AIDS and food security.

#### **5.5.1.6. Key lessons for the region**

Important lessons that can be learnt from LRAP originate from its appreciation and understanding of the complexity of multiple stressors in the region. There is a growing realisation that these stressors are often complex and emanate from both human and environmental origins. In addition, the societies exposed to these stressors also respond at different scales and levels. This general understanding allows actors to view food in a broader context and aims at not only analysing vulnerability but also finding opportunities of building community resilience. Hence, vulnerability analysis is further widened to give much attention to health and nutrition issues.

Lying at the core of this programme is the high level of comprehension and response to the bi-directional relationship between AIDS and food security. For example, the recognition that deaths caused by AIDS were exacerbated by hunger and poor nutrition led to the promotion of homestead gardening targeted specifically to communities with high levels of food insecurity. Another critical issue already discussed, is the fact that mainstreaming HIV and AIDS concerns into agricultural programmes has helped to reduce stigma and eventually facilitated building of partnerships with other organisations. The engaging of partners has influenced external assistance through training partners on food security and HIV. Moreover, in terms of targeting, LRAP has been careful to include the most vulnerable and marginalized.

## **5.6. Capacity Strengthening**

### **5.6.1 Devolution of Leadership**

Whilst most OAus partner organisations can be commended for the concerted efforts on community development and mobilisation, it was noted that some of the individuals in leadership positions, such as chairpersons or chief executive officers, are often overworked or overstretched. In such cases it is recommended that a devolution of responsibility and leadership within partner organisations in effected. Of course this would mean that such members would have to undergo specialised training aimed at improving their knowledge and skills to that effect. In so doing this will ease the burden to the current leadership and improve channels of accountability and transparency.

### **5.6.2. Training**

The majority of partner organisations highlighted the need for training on various spheres of community development. This requires more information and would require each individual organisation detailing their training needs starting with those that are urgent. Further the targeting of whom gets trained in what is essential so that the training is effectively targeted. At the same time, the training should be aimed at teams of people to build a broad base of capacity to ensure effective leadership and running of programmes.

### **5.6.3. *Unifying Framework and Communication***

There appears to be a need for partner organisation in Umkhanyakude to forge a strategic working relationship within a unifying framework with one objective, to strengthen their methods of community development and improve their relationship with the donor community. This would enable information sharing and possible scaling up of initiatives through “joined up” development. In addition, it would enable partners to systematically address the immediate challenges facing their respective communities. For example, such a forum would be very beneficial in terms of linking programmes such as Ophondweni

Youth Development to the experience of MDIC for developing programmes aimed at the youth and skills development.

In addition, such a forum could also benefit from additional contact time with OAUs and the regional experience that the organisation offers. Some of the partners indicated that more contact time with OAUs was necessary to improve the efficiency of the programmes run in the communities.

#### ***5.6.4. Monitoring and Evaluation Framework***

It is clear that a comprehensive monitoring and evaluation framework is required for most programmes to gauge impact and to enable information sharing particularly around successful processes. OAUs should rethink its stance as a facilitator on the development of monitoring and evaluation tools, which implies that partners are assisted in monitoring themselves, and to allow OAUs to monitor the partners to gauge impact for consolidation and scaling up. As such the encouragement of more creative ways of monitoring impact, such as that used by Fancy Stitch in the digital stories project, should be explored.

### **7.0 Concluding Comments**

In summary OAUs should be commended for its activities in Umkhanyakude and for carrying out its operations in an open manner that has built and sustained genuine partnerships. This was the general impression gained from all partners interviewed.

As such it is clear that OAUs should continue with the Program with some attention to consolidating and scaling up successful elements, strengthening (and diversifying) leadership capacity, placing more attention on an advocacy strategy (whether through this Program or linking it to another), and finally to developing a more effective M&E system.

The question about relief operations through food parcels should be reconsidered through the lens of “development relief”, of which LRAP is a useful example from CARE Lesotho.

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## **Annex One: OAus Evaluation Guidelines**

Guidelines for the interviewing of partner organisations

### ***1. Strengthening the capacity of families to protect and care for orphans and vulnerable children by providing economic, psychosocial and other support***

- What has been done to strengthen the capacity of families to protect children
  - Economic support
  - Psychosocial
  - Other
- How frequent and appropriate are the interventions  
  
(Livelihoods approach- psychosocial)
  
- How is an OVC defined and identified? (targeting – who, why and how)
- Are there any monitoring and evaluation instruments?

### ***2. Ensuring that government protects the most vulnerable through improved legislature, policy and implementation and by channelling resources to families and community***

- What is being done to advocate for change at the policy?
  - Outline the programmes existing
- How are messages being translated from the ground?

### ***3. Ensuring that all people, especially the most vulnerable have access to the quality and quantity of culturally appropriate food to lead a healthy and productive life***

- How do you ensure that different groups have access to the quality and culturally appropriate food that they require?
- Please describe these programs
- Have they been evaluated and if so what has been the outcome of this evaluation (collect appropriate documentation)?
- (within the context of HIV&AIDS – accessing nutritional security and the understanding of the context)

#### **4. Ensuring that partner organisations have the organisational and technical capacity to implement program initiatives**

- What capacity strengthening programmes have been through the OA process – technical capacity?
- What challenges were faced – nature of the relationship with OAus and how and how it can be improved (is it about \$\$ only)?
- Do you think that OAus has provided with adequate knowledge and assistance on programmes aimed at improving the general livelihoods (in the context of food and HIV&AIDS)?
- The impact of the programmes – positive and negative (ripple effect)

#### **Guidelines for the beneficiaries**

- How did they get involved (targeting)?
- What have been the benefits they received from the programme (describe in detail the benefits and how it has changed their lives)?
- What are their expectations and have these been met –
- What is the relationship between beneficiary and partner organisations and OAus?
- Challenges and suggestions of improvements
- Household statistics (number of orphans – how many are sick, who are the care givers)

## **Annex Two:**

### **Partner Interviews**

#### **1. Hluhluwe Advent Crèche**

The Advent crèche was established in 2005 as an initiative of a missionary of the Advent Church. Since it was started, the centre has grown, with the assistance various donor and government support both in cash and in terms of food packs, school uniforms and transport. The main objective of the centre has been to cater for vulnerable children living in households that have had problems with alcohol abuse as well as the elderly in the community. The lack of education, skills, particularly life skills, and limited livelihood options, as well as the abuse of alcohol has been major challenges faced by this community. In due course the effects of HIV and AIDS were noted in the community, as some of the children at the centre were HIV positive, there was a lack of food for the ill and for orphans and other vulnerable children, and there were issues of stigma and witchcraft, which were perceived to be the principal reason for the sickness and deaths<sup>11</sup>.

In response to some of the new challenges the programme manager attended an HIV and AIDS course at McCord Hospital to better understand and respond to the challenges posed by this epidemic. The following activities were initiated:-

- a support group was started for HIV positive community members particularly children attending the crèche and the primary school, and
- a peer education programme was formed through the African Medical Research Foundation (AMREF) to strengthen life skills and to deal with matters of abuse in the community as well as the HIV and AIDS epidemic.

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<sup>11</sup> The last point deserves particular mention, as it is an indication of HIV and AIDS as a relatively new challenge facing communities. Finding ‘scapegoats’ for the overwhelming impact of the epidemic has been a feature of many communities beginning to grapple with this new reality (see Steinberg, 2008 for an in-depth look at this phenomenon in an Eastern Cape community).

### **1.1. Key targeted programmes**

- The Advent Crèche targeted vulnerable children catering for their educational needs and also serves children in the wider community
- Orphan Care - mainly for Orphaned and Vulnerable Children (OVC)
- Feeding Scheme - targeting school going children and the elderly
- Gardening – to provide provisions for the centre and for the affected households
- Home based Care - for the terminally ill
- Luncheon craft club - targeted elderly and community women
- Adult Based Education Training (ABET) – targeting the elderly

### **1.2. Sponsorship and Donations**

Sponsorship has been obtained from the Department of Health, Umseleni Hospital, the European Union, the Department of Social Welfare, AMREF and ABET. OAus became involved in 2005 after a proposal was submitted. This led to a number of programmes sponsored by OAus:

- Food gardens – to address food and nutrition insecurity
- Feeding Scheme – including the buying of food packs to support child headed households and those with terminally ill persons

### **1.3. The Relationship between OAus and the Advent Crèche**

The Partner described the relationship as professional, transparent and based on mutual respect. OAus was commended for its open attitude and willingness to listen to partners thus indicating that they valued their opinions and suggestions.

### **1.4. Targeting of beneficiaries**

Home-based carers, whom undertake home visits, in need carried out the identification of OVC and household. Other beneficiaries are identified and referred from the local clinic.



### **1.5. Training**

Training revolves around the following activities:

- Home based care
- Importance of food and nutrition on response to terminally ill persons
- Project management
- Journaling (report writing)
- Computer literacy
- HIV and AIDS Awareness

### **1.6. Training Needs Identified**

A number of additional training needs were identified as necessary for the future:

- Community development
- Bookkeeping
- Staff development – computer literacy

### **1.7. Interview with Home Based Care Group**

As a follow up to the interviews with the partner organisation, a focus group discussion was held with a group of home-based carers. An outline of these discussions is presented below:

- The carers became involved as they recognised the need to assist the terminally ill and OVC
- They have received training from the local hospital on HIV and AIDS care
- They have undergone training on permaculture and gardening with an emphasis on the linkages between food, nutrition and HIV and AIDS
- The carers have been trained to establish vegetables gardens in OVC and terminally ill homesteads
- One of their main tasks is the identification of OVC and the terminally ill and referring them for the provision of food packs, cooking, feeding and provision of counselling support and HIV and AIDS

The home-based care group identified a number of challenges affecting the community and themselves, including:

- Unemployment
- High numbers of orphans
- Lack of Education
- Skills shortage
- Escalating numbers of out of school youth with few skills
- More community participation including the men in the community taking responsibility in fighting the HIV and AIDS epidemic
- Poor living conditions affecting quality of life
- Alcohol abuse
- Crime

The challenges facing Hluhluwe are typical of many South African rural communities. The high levels of illiteracy may hinder skills development in programmes that need education as a basis. The training on gardening skills itself has been slow and has been further hindered by the lack of rain. Even with the water harvesting techniques being employed, the garden at Hluhluwe is still not operational and a lack of water has been cited as the main reason. However some of the discussions conducted with partner organisations and beneficiaries revealed that the agricultural training has improved the farming methods of the communities, from old and costly methods of farming, which did not yield positive results.

The linkages between HIV and AIDS and food and nutritional security were well understood by the beneficiaries and the partners; this training is on going and has not been completed. With the high unemployment and the high number of in and out of school youth, more livelihoods options are essential which are not agriculture-based. The uptake of community participation, particularly by the older men, has been slow due the patriarchal nature of these communities. This makes it difficult to confront issues of alcohol abuse and crime within the

community as a whole. Further the socioeconomic complexities evident in South Africa warrant for a multidimensional approach to deal with these challenges.

## **1.8. Hluhluwe Advent Crèche Beneficiaries**

### Involvement

The beneficiaries learnt about the Crèche's activities from the community hospital at Umseleni and from community social workers. Some of the beneficiaries were visited by the founder during the initial missionary work and were encouraged to join in order to benefit from the services offered by the centre. During their visits they discovered that the Crèche was giving food parcels to community members who continued to be in need.

### Beneficiaries

The beneficiaries acknowledge the positive impact of the centre and that the programme has bettered their lives which were characterised by poverty, unemployment, lower levels of education, high prevalence of orphans, alcohol abuse, crime and escalating rates of HIV infection amongst the community members (both young and old). Whilst beneficiaries acknowledge the relief that the Crèche and OAus was giving to them, most of them felt that this programme could be improved by increasing the frequency of food packs given to the families in need.

### Relationship with partner Organisations

Beneficiaries stated that their relationship with the Crèche was cordial and based on mutual respect. They also applaud the efforts of the Crèche to better the general livelihoods of the people and children in that area.

### Challenges and suggestions for improvement

- A need for the Crèche to reduce the school fees which the majority of the respondents thought was high (especially when the rate of unemployment was high amongst the parents)
- The provision of school uniforms for the children of the beneficiaries
- Access to social grants remains a key challenge to the community and they felt the Crèche could help in this regard
- Children do not have appropriate documentation (certificates) in order to access social services
- An increase in the quantity and frequency of distribution of the food packs

#### Household statistics

- The high number of orphans is a major challenge in the community. According to the beneficiaries this was largely due to the AIDS epidemic that strikes both the youth and adults in the community
- Women are the main caregivers in this community

### **1.9. Findings and Analysis**

While the programme remains a centre of hope for the community, and the contributions of OAus have had a positive impact, it seems that more needs to be done to improve the operations of the centre to ensure its sustainability and efficiency. One emerging issue is that as the programme grows and the challenges of the community increase, there will be need for better-qualified staff to assist in the management of the various programmes. There is also need for more community participation and involvement in the various programmes, and not just as beneficiaries, and especially in the relationships with the local leadership.

Training of the staff is essential and should not be targeted at one person to avoid the loss of those skills if that person moved on. The retention of scarce skills and institutional memory remains a challenge across South Africa.

There is a need for consistent monitoring and evaluation to measure the impact of the programme on the community. Financial management training is essential to improve the channels of communication since the centre has received donor support from other organisations.

The centre has undertaken work on human capital development by improving the quality of life of the terminally ill and the social capital by assisting and equipping the communities to deal with the HIV and AIDS epidemic, through support groups, peer education, craft and adult literacy courses. In relating this to food security, the availability, access and utilisation of food is limited to the beneficiaries and for those who received food packs. This is clearly not sustainable in terms of accessibility. Within the community as a whole climatic factors and the poor soil conditions and poor rainfall hinder successful cultivation of food. Access is limited due to the high numbers of unemployment with resultant impacts on being able to purchase adequate food. Due to the poor health of some of the beneficiaries who join the programmes late, food utilisation is also problematic

## **2. Umbobo Drop in Centre Jozini**

The centre was established in 2001 in response to the high numbers of orphans in the area largely due to HIV and AIDS epidemic. This was done with the assistance of the Department of Social Welfare. The five traditional authorities formed a committee with the objective of getting other government departments involved. The core service of the centre is to feed and care for orphans and to assist terminally ill people. A full time co-ordinator was employed to facilitate the process of assisting orphans.

### **2.1. Programmes aimed at OVC and the terminally ill**

- Food parcels
- Feeding Scheme in Umbobo and the surrounds
- Engagement of Carers

- Gardening

Carers who are supervised by an overseer undertake the targeting of OVC and the terminally ill. The centre assists the OVC in the attainment of ID documents so that they can access orphan or child grants.

On the issue of understanding the linkages between HIV and AIDS and food and nutrition security, the carers underwent training with the Department of Health, which continues to work with the centre. The training covered the importance of healthy eating and food preparation.

## **2.2. Training**

While the carers have received initial training there is a need for follow up as well some management training especially for the new co-ordinator in programme management and computer literacy

## **2.3. Relationship with OAus**

There were some issues with the management, in terms of report writing and financial management of the programme, but OAus assisted with ensuring that these issues were rectified. However a new programme coordinator has been employed. The relationship of the Drop in Centre and OAus has been described as amicable, based on mutual respect and professionalism. The partner noted that OAus listens to them and values their opinions as well as being flexible with their funding.

## **2.4. Challenges faced by the Centre**

Some of the challenges noted by the centre included:-

- The area serviced by the centre is too large geographically
- Access to the Drop In Centre and the feeding schemes were problematic due to the unreliability of the public transport system

- There is a need for transport (vehicles to enable the centre to meet the needs of the communities)
- For the members of the group who are involved in the running of the centre, the issue of compensation for their time and cost of travel, in a form of allowances was noted
- There is a need to increase the number of food parcels, as the current number not enough
- More support is needed for the soup kitchen or feeding centres
- There is a need to establish more gardens, as there is currently only one in operation growing sugar beans and maize
- The duplication of programmes by various organisations in the area was mentioned raising the need for more coordination and dialogue especially with government departments.

## **2.5. Findings and Analysis**

The area served by the Ubombo Drop-In Centre is geographically large, composed of five districts. Some of the areas are remote and often in accessible due to poor roads and unreliable public transport. The issue of transport to and from the centre, as well as accessing the localised feeding schemes is problematic, particularly for the children and the sick that depend on these feeding centres. Thus in regard to food security, for some of the villages, while there might be availability of food, physical accessibility compromises the food security of the targeted groups.

The evaluation team were not able to interview beneficiaries of this programme.

## **3.0. Hot Girls Fancy Stitch (Ingwavuma)**

Hot Girls Fancy Stitch is an income generating and skills development organisation aimed at empowering women in the rural district of Ingwavuma and Jozini. The organisation was founded in 2001. The membership of the

programme has expanded from the original 27 in 2001 to 400 within 7 years. The products produced by the centre included greeting cards, wall hangings and other arts and crafts.

### **3.1. Key objectives:**

- Create sustainable jobs for local people with the primary intention of alleviating poverty
- Skills development
- Effective and sustained marketing drive
- To establish itself as an independent business
- Responding to HIV and AIDS and the needs of OVC in particular.

### **3.2. Sponsorship and Donations**

- National Development Association (NDA)
- OAus
- Self generation

### **3.3. Relationship between Hot Girls Fancy Stitch and OAus**

Fancy Stitch described their relationship with OAus as warm, cordial, professional and based on mutual respect and a degree of openness. OAus is said to be flexible in its funding and does not expect much in return. Their funding is not bound with many difficult conditions and there is always room for negotiation. The directors and the programme members regard OAus “as family”, who listens and value their suggestions and opinions.

In particular OAus has contributed the following to the organisation:

- Staff development courses that include women empowerment courses and general skills development
- Acquisition of a framing machine which boosts the production of picture frames
- Acquisition of a paper making machine, for the making of the greeting cards



- Establishment of a garden on the premises for food security needs
- Donations for the preparation for an Exhibition in London (making wares to sell in the UK).

### **3.4. Training**

Members of the programme have received the following training:-

- Programme management
- Financial management
- Computer literacy
- Picture Framing
- Writing skills – for report writing
- Paper making – the programme manager was trained and she will in turn train the other member of the programme
- Nutrition and food – a dietician was engaged to teach the beneficiaries about the importance of nutrition and food, including the preparation of food and balanced diets

In addition OAus has sponsored some the members of the programme to attend conferences on a variety of themes including HIV and AIDS. One the members, who had prior training in HIV and AIDS, had started a support group on HIV and AIDS issues. Unfortunately the support group is no longer functioning due the time and work limitations.

### **3.5. Future Training Needs**

- HIV and AIDS awareness training was cited by staff as critical in the light of the escalating rates of HIV infections and the high prevalence of orphans
- Marketing courses
- Monitoring and evaluation courses (specifically on the organisational activities)
- A need to have a full time AIDS Counsellor

### **3.6. Impact on livelihoods**

While there has been a boost in the production of wares, markets in which to sell has been a challenge given the remoteness of the programme. OAus has assisted in the establishment of a vegetable garden on the programme site, growing a variety of produce, which in turn the women have replicated in their homesteads. The majority of the beneficiaries agreed that the programme has changed their lives for the good. The income they receive from the programme enables them to feed and clothe their families. Further, the community and skills development courses have bettered the lives of the staff as well those of the community who are the primary beneficiaries.

### **3.7. Challenges**

- Distance to and access to local markets
- Marketing skills
- Dealing or coping with HIV and AIDS
- More capacity building for more members of the group

### **3.8. Findings and Analysis**

While the main focus of the programme is explicitly on income generation, the programme does not reach out into the community in terms of food security and HIV and AIDS. This is understandable as the initiative is focused on the 400 members of the group who in turn benefit their families and indirectly the larger community. The income received from the programmes, well as the nutrition, food and gardening, has enabled the members to buy food and other essential items, and many have established small gardens around their homesteads.

In terms of HIV and AIDS issues, the organisation refers its members to Love Life, a government funded organisation, as well as to the Ingwavuma Orphan Care, which is OAus funded. OVC are referred to the Care Centre when identified by programme members. There does not seem to be any form of

insurance for the family if the member dies, despite the investment the member contributes.

#### **4.0. Ophondweni Youth Development Centre**

The Ophondweni Youth Development Centre was established in 2000, as a community initiative, with a core function of youth development. According to the programme leader, young people are marginalised and lack appropriate life skills. Due to the high prevalence of the HIV, the focus of the Centre has gradually shifted to cater for caring for the terminally ill and OVC. Consequently the growing number of orphans in the areas necessitated an orphan care programme, which was funded by the Nelson Mandela Children's Fund in 2003. The new focus of the Centre is explicitly on the improvement of the quality of life for the terminally ill and orphaned children. In addition, the programme aims to engage the community in livelihoods and encourage community participation.

#### **4.1 Programmes run by the Centre**

The current focus of the centre is:-

- Improving care and psychosocial support
- Raising awareness about HIV and AIDS
- Home based care (with the assistance of the EU, carers were sent for food and nutrition training)
- Improving quality of life for the community members

The centre also works closely with the local clinic and the Department of Agriculture in terms of training, with the Department of Agriculture advising the programme on what suitable crop varieties can be grown in the area.

#### **4.2 Sponsors and donors**

- European Union
- Nelson Mandela Children's Fund
- OAus

### **4.3. Relationship between Ophondweni and OAus**

The programme manager described the relationship with OAus as good, professional and transparent. OAus listens to them and values their participation and opinions. However the programme manager noted that OAus was slow to respond to capacity needs and requests.

The programme manager also raised the issue of consulting the people in positions of power at the outset of the programme particularly with traditional and political leadership. As Ophondweni did not undertake this consultation, it could have potentially threatened the viability of the programme. These issues do not reflect badly on the relationship between the programme and OAus since the programme manager acknowledged that the oversight was the responsibility of the local partners.

When asked what could be done differently, the programme manager suggested that a proper workshop on food security for the community and the local leadership would be welcome. When discussing with OAus staff, this issue was questioned as food security was comprehensively covered at partner events. As such the comment may have to do with individual staff member concerned.

### **4.4. Funding from OAus**

The funding from OAus started in 2006, mainly in supporting food gardens of which four were established. Further the programme aimed to engage the community in developing sustainable livelihoods. Four nutrition gardens were established around the area but only one is operating to full capacity. The other gardens are facing critical issues of water shortage. The programme focus is currently on food and nutrition, to improve the health of the terminally ill as well as an emphasis on the quality of life.

### **4.5. Targeting and Identification**

The team of carers mainly carries out the identification of the terminally ill and the OVC in need of assistance, during house-to-house visits as part of their duties. As such the identification is done at the local level. There is, however, no formal monitoring instrument in place although the programme manager does undertake field visits.

#### **4.6. Training**

The programme manager has received the following training:-

- Programme management
- Youth development
- Writing skills

Further capacity building or training need have been identified in:-

- Computer literacy
- Programme and financial management
- Advocacy
- Value adding of the vegetables produced
- Community development

A workshop focused on adding value to products such as vegetables was requested but not granted. The Centre sourced other funding and this workshop was to be held in the last week of February 2008. The workshop would include nutrition training by a dietician as well as looking at livelihoods based upon the use of indigenous plants for sustenance.

#### **4.7. Challenges and future plans**

As previously mentioned, water is a major challenge facing this area. While the programme manager has a vision of expanding the gardens that are doing well to 60ha, the challenge of water shortage, as well as inadequate numbers of seedlings are limiting factors. Water pumps have been identified as an urgent need in an attempt to access borehole water.

The programme manager mentioned the need to establishing a forum for the communities that are involved in community gardens, to enable them to share experiences and expertise. Finally, more contact time with OAus was mentioned as a necessity to increase the efficiency of the programmes.

#### **4.8. Ophondweni Youth Development - Beneficiaries**

##### *Involvement*

The community involvement was prompted by the escalating rates of HIV infection and AIDS-related deaths resulting to increasing numbers of orphans. In their daily dealings with this organisations the beneficiaries recognised the significant contribution that the organisation had made in terms of improving people's livelihoods, in particular gardening and knowledge of HIV and AIDS.

##### *Benefits of participation*

- Gardening skills
- Received help to cope or deal with the escalating rate of orphans in the area
- HIV and AIDS awareness initiatives
- Psychosocial support
- Food parcels
- Assisting children without identification and other vital documents

##### *Expectations*

- The majority of the respondents stated that there had not encountered serious problems with the OYD. To an extent this organisation attend to their needs efficiently
- The organisation helped community members to meet with various government departments; namely the department of Health, Social Development and Home Affairs

### Challenges

- Water challenges – beneficiaries proposed that OAus fund them so that the organisation could build a water pump
- The increasing number of orphans
- Hunger was still a major challenge in some of the schools in the area
- Lack of skills in the community
- Unemployment
- HIV and AIDS
- Poor infrastructure

#### **4.9. Findings and Analysis**

This programme seems to be doing well in the communities it is working. In particular it was noted that the issue of HIV and AIDS was spoken about freely. The programme manager has some interesting ideas for the future. While the programme has had a positive impact, the objective for which it was formed has shifted to cater for the immediate needs of caring for the sick and OVC. This is a positive development as it represents a response to an immediate need. However, the original aim of supporting young people should not be completely lost and ways of bringing youth in more centrally should be found.

#### **5.0. Maputaland Development Information Centre (MDIC)**

The Methodist Church founded the organisation in 1978 with a general focus on poverty alleviation and improvement of livelihoods. In terms of the scope of operation MDIC focuses on Wards Seven and Eleven of the Umhlabayalingana municipality in the Umkhanyakude district. In principle MDIC have four operating units: the finance unit, business development, knowledge management and integrated development in which the OAus programme is situated. All these sections complement each other.

#### **5.1. Other programmes run by the MDIC include:-**

- Cashew nuts

- Community game reserves
- Renovations of schools
- HIV and AIDS awareness through Love Life
- Food security programmes

MDIC works through enumerators, who are short-listed by councillors and then selected by MDIC. The enumerators are locally based and responsible for identifying and assessing the potential of community initiatives, as well as data collection on programmes in their respective areas. Some programmes identified may be recommended for scaling up. The MDIC works closely with other government departments such as the Department of Agriculture, Social Welfare, Home Affairs and the local municipality.

## **5.2. Food Security Program**

Some beneficiaries of the food security programme received some basic training on the relationship between food security and HIV and AIDS epidemic at the local hospital. MDIC does play a referral role where there is a need such as OVC, who are then referred to Ubombo Drop in centre or Tholulwazi. However, apart from this basic training and referral, the food security programmes does not place much emphasis on the linkages between the epidemic and food insecurity.

## **5.3. Donor Support**

Donor support for MDIC comes from:

- The Kelloggs Foundation
- SIDA
- OAus
- Tembe Traditional Authority

## **5.4. Training**

MDIC staff have received the following training:

- Project management



- Disaster Management
- Writing Skills
- Other training such as mushroom production are facilitated by MDIC.

Training needs that were identified included:

- More training on the impact of the HIV and AIDS and awareness initiatives
- Modern methods of farming
- Computer skills
- Disaster management
- Community development

#### **5.5. Relationship with OAus**

According to the MDIC officials their relationship with OAus is good. It is largely characterised by mutual respect and understanding, flexibility and openness, which in essence is fundamental for the core business of this organisation. In addition OAus honours the agreement it made with the Centre. However the interviewees felt that OAus should consider an increase in the financial support given because the funding affects the life span and the impact of the programme. It was also felt that OAus could sponsor bigger programmes, by minimising on the number of partners and maximising on the impact.

#### **5.6. Challenges**

- Due to the large geographic area covered and the condition of the road network, accessing some of the beneficiaries has proved to be problematic for both the enumerators and the members of the MDIC. The use of 4 X 4 villages has been problematic due to hijackings in the communities.
- There is a need for more resources (financial and capacity development)
- The up scaling of some programmes proved to be problematic, such as the mushroom programme which faced challenges in attaining spores in time and in the marketing of the mushrooms.

### **5.7. MDIC Beneficiaries**

The research team met with a committee representing the beneficiaries. Through the subsequent discussion, it was established that MDIC has worked a great deal with and for this area and that it has cultivated mutual trust and sound working relations with the immediate communities.

#### Benefits

The committee identified a number of direct benefits accrued from MDIC:

- Capacity building and community development
- Regular interaction with MDIC and OAus that has led to community mobilisation and development

#### Challenges

In terms of challenges the committee identified the following:

- Lack of water, sanitation and infrastructure
- A need for a dipping tank
- Branding of livestock

#### Relationship with MDIC

Beneficiaries emphasised that they have a very cordial and mutually beneficial relationship with OAus and MDIC.

#### Training Needs

In terms of training needs, the following was identified:

- Capacity building and community development training
- Business Management
- Specialised courses on youth development
- Cooperatives

### **5.8. Findings and Analysis**

The Maputaland Development Information Centre is regarded as being effective in improving the livelihoods of its beneficiaries. Despite the political tension in the area this has not deterred the implementation of programmes. The geographical extent of the area reduces the overall impact, with the result that the benefits are localised. While HIV and AIDS are not a key focus of the programme, other work is being done in the related programmes and the centre plays a referral role for those in need.

## **6.0 Meeting with external partners (Municipality)**

The MDIC involves local and traditional leadership in all of its programmes. Although there is no formal agreement with the local municipality the two organisations work closely together. The political dynamics in the area has restricted the signing of an agreement between the two organisations.

A meeting was held with the Local Economic Development Officer for Agriculture, in the municipality who had a very close working relation with the MDIC. It emerged that MDIC was the most recognised organisation in the municipal area and the Agriculture department often consulted the MDIC officials for advice. An effective working relationship has been cemented over the years.

### **6.1. Relationship with OAus**

According to the LED, OAus, through MDIC, has achieved a great deal in terms of improving the skills of the community, especially on modern farming methods. The positive bearings of the livestock and mushroom programme attest to that effect. The food security programmes are boosting subsistence farming in the Mafa area, especially the Nguni Livestock programme.

### **6.2 Impacts of OAus Programme**

According to the LED for Agriculture, some of the positive impacts have been the realisation of mushrooms as a business and not just for consumption. Food parcels have improved the food security of the area, which is characterised by

poverty, illiteracy and unemployment. He also noted that the targeting of MDIC is good and does not undermine the existing social systems and structures.

### **6.3 Options for Strengthening the Relations**

- OAus programs must be marketed more effectively in the communities
- MDIC and OAus ought to be recognised for the effort they place on community development
- There is a need to improve intergovernmental relations
- There is a need to intensify public participation

### **7.0 Interview with OAus South Africa office**

A meeting was convened with OAus staff based in Durban. This was a preliminary feed back session on the fieldwork conducted in Umkhanyakude as well as a discussion of OAus operations and future plans in Southern Africa.

The OAus team acknowledged that the issue of government protecting the most vulnerable through legislation, policy and implementation was of limited focus under this programme. OAus did, however, indicate that another project called Advocacy Mapping was carrying out this activity. The OAus staff also acknowledged the challenges posed by the geographic extent of their area of operation.

Some of the key points to note from this meeting were:-

- The notion of the development of seed-banks to counteract the challenge of seed extinction in the area
- The need to encourage the utilisation of natural resources in meeting food needs. Although this was in existence, it was to on a small scale and more encouragement was needed.

- A need to think of innovative ways to deal with emerging developmental challenges in the communities
- OAus officials cited some of the key monitoring and evaluation tools they use to monitor organisations in as far as the management of funds by partner organisation. These included the termination of working relations with the partner organisation in case of mismanagement (financial or administrative).
- Provision of safety nets, to mitigate the impacts of multiple stressors such as climate change, unemployment, retrenchment of workers and issue of migrants.

**Annex Three: Worksop Report - LRAP**

**Understanding and Addressing Underlying Causes of Food Insecurity in Lesotho**

SARPN  
CARE

**Workshop Report**

*Food Insecurity in Lesotho*

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*Lessons Learnt from the Livelihoods Recovery Through Agriculture Programme (LRAP) 2002-2006*

**REGIONAL MEETING**

17 February 2006

Burgers Park Hotel, Pretoria South Africa

**WORKSHOP RATIONALE**

Since 2002 CARE International Lesotho has been implementing the Livelihoods Recovery Through Agriculture Programme (LRAP). LRAP is a developmental relief response to the food security crisis experienced in Lesotho since 2002. The programme was designed and has been implemented in partnership with the Lesotho Ministry of Agriculture and Food Security and local non-governmental organisations and with the support of the UK Department for International Development (DFID).

The overall goal of the programme has been to improve the livelihood security of vulnerable rural households by increasing awareness of the prevailing vulnerability in Lesotho, influencing policy through practical interventions and building productive agricultural assets that have a short term impact on food security while addressing some of the chronic, underlying causes.

The regional meeting was designed to share LRAP practice, research and policy lessons with a wide regional audience. Displays before and during the workshop showcased LRAP’s work on the ground, and a series of presentations from CARE, NGOs and government addressed topics such as:

- Understanding livelihood change and evolving vulnerability in Lesotho;
- Homestead gardening -what’s new and what difference does it make;
- Beyond the homestead gardening - mainstreaming HIV and AIDS through positive living and nutrition;
- Understanding food security - policy and partnerships;
- Lessons for the region from LRAP.

Participants were drawn from several countries from around the Southern African Development Community (SADC) region. The workshop was designed to enable participants to deliberate directly with LRAP project partners including CARE, the Ministry of Agriculture and Food Security, NGOs, research institutions and community members.

**AN INTRODUCTION TO LRAP**

Improving food production and nutrition is one of the best ways to help vulnerable households cope with HIV/AIDS and its impacts. There is a strong two-way relationship between food insecurity and the epidemic:

households affected by HIV/AIDS have less time and energy for food production, while reduced access to food increases people's general vulnerability and accelerates the disease in those already infected. Homestead gardening can help to break this connection. It offers a wide range of potential crops than field-based agriculture, requires less time and labour and can provide a source of extra income. Meanwhile, mainstreaming HIV/AIDS concerns into agricultural programmes also helps to reduce the stigma associated with HIV and build partnerships with other organizations.

## **PANEL 1: BACKGROUND OVERVIEW**

### **WHY LRAP? Tom Kelly, DFID:**

Tom Kelly detailed a number of reasons why DFID supported LRAP. Essentially the programme recognised that hunger was a long-term problem, which required a long-term planning horizon with diversified responses for an effective response. Donors required reliable mechanisms to respond to hunger beyond food aid, which, although important in some scenarios, was not a solution to long-term vulnerability to food insecurity. A diversity of responses was required, as alternatives to traditional food aid programming, including building of self-reliance and encouragement of a wider range of partnership.

DFID recognised that LRAP was not just a single NGO response, but a programme based on partnerships with a wide range of players. The partnerships involved worked well and provided useful lessons for elsewhere, which raised the importance of need to carefully assess the impact and outcomes of programmes. LRAP was commended because of the innovation demonstrated in working across sectors, from the extension services to the private sector. It was concluded that LRAP offers excellent opportunities to influence the programme choices of the Government of Lesotho, including the emerging food security policy, as well as other policies in other countries.

### **WHAT IS LRAP? PJ Lerotholi, CARE:**

The Livelihoods Recovery through Agriculture Programme is often popularly referred to in Lesotho as *Lirapa* - the Sesotho word meaning "homestead gardening". LRAP was developed as a response to the food and livelihoods crisis that emerged in 2002, partly as a result of the Southern Africa drought and a series of episodic shocks such as floods and rainfall variation. With support from DFID and the Ministry of Agriculture and Food Security (MoAFS) designed and began implementation of a programme to provide a rapid response to the food security crisis in Lesotho.

The goal of LRAP is to improve the capacity of vulnerable rural households in Lesotho to cope with shocks and stresses. LRAP does this by addressing the underlying causes of household vulnerability and by supporting and strengthening the development and implementation of enabling policies that assist vulnerable people to secure their

livelihoods. LRAP focuses on homestead gardens, the promotion of crops that meet the nutritional requirements of people living with HIV/AIDS, building households capabilities for food production and working with local NGOs to scale up their work and get direct support to vulnerable rural households. The partnership with MoAFS ensures that government extension services are strengthened through the initiative.

LRAP is presently in its final six months and is emphasising lesson learning and analysis, which will be shared across the region. LRAP is being integrated into the Lesotho Poverty Reduction Strategic Plan and the emerging Priority Support Programme, which is being developed by PMTC, CARE and the British Council. Lessons around impact and outcomes will be carefully built into this process.

#### **Homestead gardening - what's new and different in LRAP? Mampho Thulo, Rural Self Help Development Association (RSDA):**

Although homestead gardening has been present in Lesotho for a long time, LRAP has facilitated its improvement by bringing together knowledge, experience and good practice to derive practical lessons. It also helped to raise awareness about the links between homestead gardening, HIV/AIDS and micronutrients. By emphasising the importance of living positively, LRAP has reintroduced hope to those living with HIV through practical means. LRAP has therefore brought a new meaning to food gardens.

Technologies such as plot construction, improvement of soil fertility, as well as cropping practice has been promoted by the LRAP. Technologies such as inputs (better quality seeds), water harvesting and conservation (homestead dams), small livestock and marketing (eggs and poultry) and food preservation (canning, drying) have also been promoted. NGOs have been involved in giving training, providing inputs, facilitating on-going mentoring and technical advice, and supplying advisory services on marketing. The documentation of lessons learned and the exchanges between farmers and NGOs have promoted *Lirapa* as an example of good practice throughout Lesotho.

The homestead gardening programme is clearly sustainable since the technologies being promoted are based on natural resources, which are widely available. The investment cost is also very small. LRAP has created new knowledge through peer-to-peer learning, which also underpins sustainability. There are, however, a number of challenges facing the programme. For example, people should be helped in decision-making around market disposal for surplus and bulk buying of seeds and seedlings. The weather conditions also remain to be a challenge.

#### **Beyond the homestead garden - Mainstreaming HIV and AIDS through Positive Living and Nutrition, Ntsie Tlale, CARE:**

One of the core principles of LRAP is the concept and promotion of positive living in a holistic manner. LRAP started with homestead gardening as an initial intervention on mainstreaming HIV/AIDS into food security programming. Over time, partners on LRAP realised that food gardens were an important entry point for dealing with the impacts of HIV and AIDS at community and household level, which led to a growing interest in



positive living. This approach encourages individuals to take control of their lives and can slow the progression from HIV to symptomatic HIV. The approach works on the belief that it is important to understand HIV as a chronic illness and to use home gardens, and home remedies, to ensure good nutrition. Focusing the mind, body and soul in a positive way is critical for people living with HIV/AIDS.

Good nutrition through a diet containing all the primary and secondary nutrients is crucial to provide the necessary antioxidants to protect the body against viral infections. This also increases the immunity of the individual, which is of great importance for a person living with HIV/AIDS. The primary as well as secondary nutrients can be found in a variety of fruits and vegetables which can be easily cultivated in the homestead gardens. Some of the plants such as *Amaranthus* and African potato can also be used as home remedies. That implies that by using the positive living approach people will be able to use a sustainable approach for addressing HIV/AIDS.

## PANEL 2: LESSONS LEARNT

**Understanding livelihood change and evolving vulnerability in Lesotho, with ideas for appropriate programming responses, Stephen Turner and Palesa Ndabe, CARE:**

The objective of the LRAP research component is to gain a better understanding of evolving livelihood strategies of vulnerable households. Research formed a key component of the programme development by drawing out the implications of the findings for relevant interventions. The LRAP research component has aimed to reach its target audience and influence relevance policy through a number of consultative linkages with decision makers and policy structures. This includes workshops with communities and with local NGO implementing partners, and through widespread dissemination of research briefs and reports.

LRAP and its partners have needed to understand how Basotho design their livelihood strategies within these changing conditions in order to target their support to those strategies effectively. Much has changed in Basotho livelihoods over the last two decades with evolving vulnerability arising from a number of factors including unemployment, environment, HIV/AIDS and institutional change. It is clear from the research that rural Lesotho is not an agrarian economy or society, as South African mine labour has more than halved in 15 years. New opportunities have arisen with Lesotho factory work although these are coupled with new vulnerabilities.

Environmental factors have also increased vulnerability, as an unreliable climate has become a constant, there is some evidence of continuing land degradation continues, water remains a key constraint and there is increasing dependence on the biosphere for energy. HIV/AIDS has been recognised as the nation's worst crisis, leading to deeper vulnerability for women and girls, new vulnerability for children and older people, which has led to increasing vulnerability for livelihoods and ultimately the state. Deteriorating governance hurts the poor most and many formal institutions are threatened by the epidemic. Many indigenous institutions continue to be resilient.

In terms of building on the research, a number of programme responses have emerged.

The analysis has emphasised the importance of linking livelihoods and HIV/AIDS initiatives, as well as rural and urban initiatives. Other issues that LRAP research has highlighted as key for programming include helping society to tackle gender inequity, promoting effective interventions in governance and social support, supporting ways for the vulnerable to produce food, helping people overcome water constraints, and helping extension services adjust to new vulnerabilities.

#### **Lessons from LRAP for the region, Scott Drimie, Independent Consultant:**

The prevailing situation of increasing vulnerability to hunger in Lesotho and the region demonstrates how risk is driven upwards by often silent but intensifying conditions of political, socio-economic and environmental vulnerability. As a developmental relief response, LRAP clearly is an example of “good practice” that provides useful lessons for interventions engaged with vulnerability in the region. In particular, the focus on influencing policy beyond the programme through practical interventions is important.

The LRAP definition of “mainstreaming HIV/AIDS” is useful for other regional programmes grappling with the reality of the epidemic. Mainstreaming is understood not as a series of activities but rather a process of changing attitudes and deepening understanding about complex issues, which requires continual learning and reflection. Thus LRAP’s engagement with HIV/AIDS is practical and about how interventions can help prevent infections, ensure care and support for those already infected and to lessen the impact of the epidemic.

LRAP is a long-term process that involves education, skills development and new ways of thinking and working. Some of the key lessons that can be learnt from LRAP for the region are that it embraces complexity and engages with multiple stressors, it comprehends and responds to the bi-directional relationship between HIV/AIDS and food security, in terms of targeting LRAP is careful to include the most vulnerable and marginalised, it pushes to work with many partners and in turn tries to influence these in practical ways.

#### **Understanding food security - policy and partnerships**

**Senator and Hon. Minister Dr Phoororo, Lesotho Ministry of Agriculture and Food Security:**

LRAP was described in terms of a “developmental marriage” between the MoAFS, DFID and CARE. Each of these organisations had a specific role to play in tackling food insecurity; DFID as a committed donor, CARE as an implementer of programmes and MoAFS as a facilitator and government partner. The relationship between the three institutions was regarded as unique in that they integrated poor landholders in development streams through LRAP with direct outcome of providing a mini “green revolution” at the household level by low cost irrigation systems, water and soil conservation agriculture.

#### **Lessons Learned**

A number of important lessons can be derived from LRAP that can inform development

relief programming across southern Africa. Many of these lessons have been captured in the presentations, a few of which have been further elaborated below.

### **Promoting small scale agriculture**

Farming households facing food insecurity are often exposed to drought, low soil fertility and a variety of other factors. Water harvesting for irrigation, conservation farming techniques as well as access to seed is an important in agricultural production amongst farming households in the rural areas. From these interlinked challenges and programming responses, it is evident that food security will depend on many stakeholders working together in new ways, coupled with agricultural policies that promote sustainable agriculture suited to Lesotho's situation. This challenges organizations to work with many more and diverse partners. This approach should be coupled with awareness and understanding of different vulnerable groups, and how vulnerability is changing in the context of the multiple impacts of HIV and AIDS. The LRAP experience suggests that it is possible to promote small-scale agriculture on a large scale that answers the food insecurity and HIV/AIDS problems of the rural Basotho.

### **Evolving livelihood strategies**

Central to the LRAP approach is an understanding of how local people have developed and designed livelihood strategies that engage with diverse opportunities and challenges in Lesotho. It is clearly important to understand how livelihood strategies are constructed, and the rationale behind these decisions, in order to target support effectively. LRAP has therefore been developed using effective research to underpin the programme.

### **The impact of HIV/AIDS on livelihoods**

LRAP recognizes and responds to the fact that HIV/AIDS creates new vulnerability and weakens or destroys many households. It is clear that in order to support vulnerable households to improve their livelihoods, it is important to understand the impact of the epidemic. The incidence of HIV/AIDS was found to be high in the areas targeted by LRAP, evident from the high frequency of funerals, a growing number of orphans and from the high level of chronic illness. LRAP recognized that the impact of HIV/AIDS on livelihoods varied depending on the specific livelihood strategy employed by the household before its member/members fell ill.

It was also recognised that deaths caused by HIV/AIDS were exacerbated by hunger and poor nutrition. LRAP responded in terms of promoting homestead gardening as a nationwide effort with a specific focus on people within communities who have high levels of food insecurity. Nutrition education should form part of the process in order to educate the communities which food to cultivate for their specific situation. Another clear lesson was to integrate different responses to the various impacts of HIV and AIDS and the temporal dimension to the epidemic. Thus access to counseling was improved through expanding current services and making them widely known. Employment of HIV-positive people who were living openly with the virus to work with communities and AIDS-patients was also promoted to engage with stigma. The participation of civil society actors in the various district AIDS task forces to promote the coordination of efforts was an important dimension to this approach.

### **Gender and generational changes in rights and decision-making**

Lesotho is experiencing rapid change in social norms, standards, expectations and behaviour. It was found that these changes are affecting household's structures, and in turn, affect livelihood options and performance. It increases the proportions of economically vulnerable households. These findings have implications for targeting and providing appropriate support. It is therefore important to do careful targeting in order to include the marginalized.

#### **ADDITIONAL INFORMATION**

For additional information on LRAP and other related programmes, please visit the CARE-Lesotho website at [www.caresa-lesotho.org.za](http://www.caresa-lesotho.org.za)

For additional information on the workshop and the presentations, please visit the SARPN website at [www.sarpn.org.za](http://www.sarpn.org.za)

*Lessons Learnt from the Livelihoods Recovery Through Agriculture Programme (LRAP) 2002-2006*

**AGENDA - 17 February 2006**

<b>12:00 - 13:25</b>	<i>Lunch and Displays</i>	
<b>13:30 - 13:50</b>	Introductions and Welcoming Remarks	<b>Session Chair:</b> Joanne Abbot, CARE
<b>13:50 - 15:00</b>	<p align="center"><b>Panel 1: Background Overview</b></p> <p align="center">Why LRAP?</p> <p align="center">What is LRAP?</p> <p align="center">Homestead gardening - what's new and different in LRAP?</p> <p align="center">Beyond the homestead garden - Mainstreaming HIV and AIDS through positive living and nutrition</p>	<p>Tom Kelly, DFID</p> <p>PJ Lerotholi, CARE</p> <p>Rural Self Help Development Association</p> <p>Ntsie Tlale, CARE</p>
<b>15:00 - 15:15</b>	<i>Tea</i>	
<b>15:15 - 16:10</b>	<p align="center"><b>Panel 2: Lessons Learnt</b></p> <p>Understanding livelihood change and evolving vulnerability in Lesotho, with ideas for appropriate programming responses</p> <p align="center">Lessons from LRAP for the region</p> <p align="center">Understanding food security - policy and partnerships</p>	<p>Stephen Turner and Palesa Ndabe, CARE</p> <p>Scott Drimie, Independent Consultant</p> <p>Senator and Hon. Minister Dr Phoororo, Lesotho Ministry of Agriculture and Food Security</p>
<b>16:10</b>	Closing remarks	Joanne Abbot, CARE

