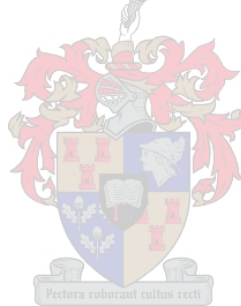


**HIV/AIDS AND CLIMATE IN FOOD SECURITY
CRISES: A STUDY OF SOUTHERN AFRICA
2001-2005**

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Thesis presented in partial fulfilment of the requirements for the degree Master of Arts (International Studies) at the University of Stellenbosch

Supervisor: Dr Scarlett Cornelissen

December 2006

Abstract

This study is based on the premise that HIV/AIDS and variable rainfall, in other words, events such as droughts and floods (climate), are likely to be prevalent in Southern Africa for the foreseeable future. Thus, these two factors are likely to accompany future food crises in the region. This study investigates the Southern African Food Crisis in the period 2001-2005, with certain objectives in mind. Firstly, the impact of HIV/AIDS and climate on food security is investigated. Secondly, in light of the findings relating to the first objective, it is investigated what an optimal humanitarian intervention in a food crisis in the Southern African context, characterised by variable rainfall and high prevalence of HIV/AIDS, might entail. Finally, the appropriateness of humanitarian interventions in the Southern African Food Crisis to ameliorate the long-term impacts of HIV/AIDS and climate on the region is considered.

The study makes use of an extensive literature review, supplemented by a smaller set of e-mail and semi-structured interviews. Especially with regards to the second and third research objectives, the Consortium for the Southern African Food Security Emergency (C-SAFE) is used as a case study of an intervention in the above stated context. C-SAFE – composed of a consortium of international and local non-governmental organisations - is the largest humanitarian intervention programme that was created with the specific goal of ameliorating the food crisis in the Southern African region. They were primarily active in four countries: Lesotho, Malawi, Zambia and Zimbabwe. The study focuses on C-SAFE operations in these four countries in order to assess the impact of variable rainfall and HIV/AIDS and other underlying causes – such as macroeconomic factors and government policy – on food insecurity in Southern Africa and to examine how these factors influence a humanitarian intervention programme such as C-SAFE.

The most important findings of this study are that neither HIV/AIDS nor climate is driving food insecurity in Southern Africa. The impact of HIV/AIDS can however be devastating at household level. It is found that both factors, serve as catalysts bringing to the fore the underlying vulnerability of households. The findings of this study further suggest that interventions should provide resilience building to shocks such as

drought, indicating a complex set of relief and developmental needs in the region. Furthermore, HIV/AIDS can be seen as a crisis in itself, requiring a comprehensive multisectoral response, however possibly requiring special attention in times of food insecurity. Finally it is argued that livelihoods erosion over time has meant that the work of relief agencies fulfilling their mandate, providing short-term relief to households and communities in need, regardless of the quality of such interventions, are ineffectual in addressing cycles of vulnerability in Southern Africa as inadequacies at national level, most notably a lack of government capacity, remain.



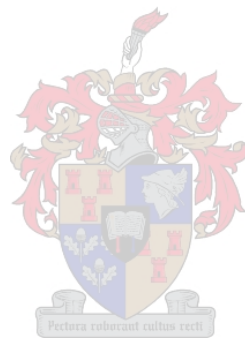
Opsomming

Hierdie studie is gegrond op die argument dat die teenwoordigheid van MIV/VIGS en onreëlmatige reënval (klimaat) waarskynlik 'n algemene verskynsel in Suider-Afrika sal wees in die voorsienbare toekoms. Dus, sal hierdie twee faktore waarskynlik toekomstige voedselkrisisse in hierdie streek vergesel. Die studie ondersoek die Suider-Afrikaanse voedselkrisis in die periode 2001-2005, met sekere doelwitte voor oë. Eerstens word die impak van MIV/VIGS en klimaat op die afwesigheid van voedselsekuriteit ondersoek. Aan die lig van die bevindinge van hierdie eerste doelwit word daar ondersoek wat die vorm en aard van 'n optimale humanitêre intervensie in 'n voedselkrisis in die Suider Afrikaanse konteks (wat gekenmerk word deur hoë vlakke van MIV/VIGS en wisselvallige reënval) sal wees. Laastens word die sukses van intervensies in die onlangse voedselkrisis om die langdurige impak van MIV/VIGS en klimaat op die streek te verlig, oorweeg.

Die studie maak gebruik van 'n omvattende literatuuroorsig, aangevul deur 'n kleiner stel e-pos en semi-gestruktureerde onderhoude. Om die tweede en derde navorsingsdoelwitte hierbo vermeld aan te spreek, word die Consortium for the Southern African Food Security Emergency (C-SAFE) gebruik as 'n gevalle studie. C-SAFE is 'n konsortium van internasionale en nasionale nie-regeringsorganisasies. Dit is die grootste voedsel noodhulpverleningsprogram in Suider-Afrika tot op hede. Dit was in veral vier lande in Suider-Afrika betrokke – Lesotho, Malawi, Zambië en Zimbabwe. Hierdie studie fokus op die bedrywighede van C-SAFE in dié vier lande om sodoende na te spoor wat die impak is van MIV/Vigs en wisselende reënval, en ander onderliggende oorsake – te name makroekonomiese faktore en regeringsbeleid – op die voedselkrisis waaronder die Suider-Afrikaanse streek tans te buk gaan, en om te ontleed hoe hierdie faktore 'n humanitêre hulpverleningsprogram soos dié van C-SAFE beïnvloed.

Die belangrikste bevindinge van die studie is dat nóg MIV/VIGS nóg klimaat die primêre oorsake vir die afwesigheid van voedselsekuriteit in Suider Afrika is. Die studie bevind ook dat intervensies, sowel in die geval van MIV/VIGS as wisselvallige ongeredelike reënval, hoort aandag te skenk aan die onderliggende weerloosheid van

huishoudings in die lig van skokke soos droogte. Daar word ook bevind dat MIV/VIGS opsigself 'n krisis is wat 'n omvattende respons benodig, maar wat moontlik gedurende voedselkrisisse spesiale aandag behoort te ontvang. Laastens word daar voorgestel dat die agteruitgang van die ekonomiese welstand van verskeie huishoudings oor tyd, moontlik impliseer dat humanitêre agentskappe wat hulle mandaat om kort termyn verligting aan huishoudings en gemeenskappe te bring uitoefen, ongeag van die gehalte van sulke intervensies, oneffektief daarin is om patrone van sikliese weerloosheid in Suider-Afrika te bekamp, aangesien tekortkominge op nasionale vlak, verneam 'n tekort aan staatskapasiteit onveranderd bly.



Declaration

I, the undersigned, hereby declare that the work contained in this thesis is my own original work and that I have not previously in its entirety or in part submitted it at any university for a degree.

Signature.....

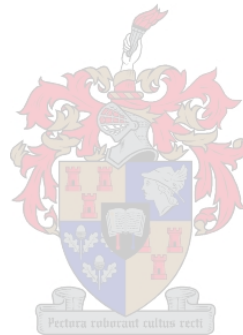
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Acknowledgements

The following people deserve a special word of gratitude for their contributions to this thesis in various ways.

- My supervisor Dr. Scarlett Cornelissen for her professional supervision and for providing me with opportunities to add value to this project.
- All of my interviewees, especially Steffen Horstmeier and Steve Goudswaard for assistance in organizing interviews.
- Family
- The “circle of trust” (with fluctuating membership).



List of Acronyms

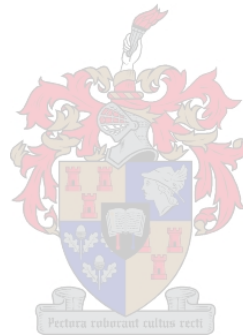
ADMARC – Agricultural Development and Marketing Corporation (Malawi)
ADRA – Adventist Development & Relief Agency
AIDS – Acquired Immune Deficiency Syndrome
ART – Antiretroviral Treatment
ARV – Antiretroviral
CARE – Co-operative for Assistance and Relief Everywhere
CHE – Complex Humanitarian Emergency
CRS – Catholic Relief Services
CSB – Corn Soy Blend
DAP – Development Assistance Programme
DFID – Department For International Development (British)
C-SAFE – Consortium for Southern African Food Security Emergency
FAO - Food and Agricultural Organisation (of the United Nations)
FFA – Food For Assets
FFP – Food For Peace
GMB – Grain Marketing Board (of Zimbabwe)
HIV - Human Immuno Deficiency Virus
IMF – International Monetary Fund 
INGO – International Non-Governmental Organisation
NFRA- National Food Reserve Agency (of Malawi)
NVF - New Variant Famine hypothesis
OECD – Organisation for Economic Co-operation and Development
OFDA- Office for US Foreign Disaster Assistance
PEPFAR – Presidents Emergency Plan for AIDS Relief
PLWHA- People Living with HIV and AIDS
SGR – Strategic Food Reserves
SO – Strategic Objective
TFA – Targeted Food Assistance
USAID – United States Association for International Development
WFP - World Food Programme
WV - World Vision

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Chapter one

Introduction

1.1 Problem statement

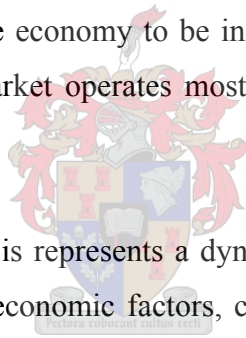
In 2001 various environmental and political factors converged causing an extensive food crisis in Southern Africa. This crisis was typified by a lack of access to food by millions of people. In 2002, 15.2 million people, an average of 26% of the populations of the affected countries, were in need of food aid (Drimie, 2004:6). It is generally accepted that extreme weather conditions for the most part triggered the crisis, but that there were certain deeper underlying circumstances that made the region vulnerable to these weather conditions (for example see Wiggins, 2005; Mbaya, 2003; Drimie, 2004). These underlying causes include poor governance, the longer-term effects of Structural Adjustment Programmes (SAPs), HIV/AIDS and poor agricultural techniques. The crisis extended over six countries: Zimbabwe, Zambia, Malawi, Lesotho, Mozambique and Swaziland. Of these Zambia, Zimbabwe and Malawi were considered most severely affected.

This thesis is based on the assumption that there is a strong possibility that similar food crises can occur in the region in the future. This is mainly due to the interaction of underlying factors relating to poverty and underdevelopment, causing numerous households to be vulnerable to shocks to food production. Most Southern African countries are extremely poor and are classified as Least Developed Countries (LDCs).¹ These LDCs include Mozambique, Lesotho, Zambia, Malawi and Zimbabwe. These countries typically have very high unemployment rates.² Thus, when shocks to the food supply, for example caused by drought occur, the extra costs of food due to its scarcity, is an even bigger challenge for many households, many of whom are dependent on rain-fed subsistence farming. High unemployment rates also

¹ LDC's are classified as such by the United Nations Development Programme, based on low income levels, low human resource bases and limited diversity of the economy.

The UNDP reports Zambia as having a poverty rate of 87.4% in 1993, Malawi 76.1% in 2004, Zimbabwe 64% in 2002 and Lesotho 56.1% in 2002.

significantly narrow the tax bases of Southern African countries. Thus, significant state support for agriculture is not possible due to a lack of funds. Importing production shortfalls may also be a problem. In addition various authors (for example Devereux, 1997, 2002; Samatebele, 2003 and Marquette, 1997) have commented in the last decade, on the impact of SAPs on agriculture in the region.³ The World Bank and International Monetary Fund (IMF) introduced SAPs in the early 1980s as a tool to provide developmental assistance or help with balance of payments deficits in the form of loans to poor countries. SAPs were accompanied by a standard set of policy guidelines with which countries applying for aid from these institutions had to comply. The overarching aim behind the policies was to bring about liberalisation in these countries. Typical policies in this regard included currency devaluation, privatisation and the removal of subsidies on produced goods (Nel and McGowan, 1999:329). Often state intervention in the economy (including agricultural production) has been constrained due to the requirements of lending institutions which do not consider state intervention in the economy to be in accordance with the principle of liberalism, implying that the market operates most efficiently when left to regulate itself.



The Southern African Food Crisis represents a dynamic interaction between various structural factors. Political and economic factors, climate (most notably drought) as well as HIV/AIDS have impacted on it. All of these factors vary to some extent from country to country, as can be deduced from studies of individual countries or groups of countries (for example, Frankenberger et al, 2003; Samatabele, 2003; Matlosa, 1999, Wiggins, 2005). Certain countries refused genetically modified food aid. Some eventually accepted it sooner than others. In Zimbabwe a controversial land reform policy and the chaos that ensued upon its implementation, has been very well documented. The land reform programme seems to have had a significant impact on the crisis in that country, by causing a massive decline in food production (Wiggins, 2005:11). The authorities in Zimbabwe have also been reported to be harassing aid

² The CIA World Fact book (2005), reports Zambia's unemployment rate as 50% in 2000, that of Zimbabwe 70% in 2002 and that of Lesotho 45% in 2002.

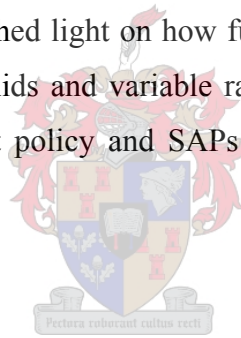
³ According to Samatebele (2003:5) high interest rates, brought on by the SAPs make it impossible for commercial small-scale farmers to borrow money for food production in Zambia. Devereux (2002:77) reports that amongst other things, due to widespread poverty and a thin network of traders, it is highly unlikely that the private sector would be able to replace the state to steer agricultural production in Malawi.

workers and trying to monopolise food supplies through its Grain Marketing Board (GMB) in order to use food as a political tool. Other countries mismanaged their food supplies. Malawi for example sold off its “strategic reserves”, anticipating a greater yield than was eventually harvested (Devereux, 2002:73). These problems were further amplified in certain cases by severe macro-economic pressure and a lack of foreign reserves leading to an inability to import production shortfalls. Population growth in Malawi has also contributed to the crisis, as a rapidly growing population puts severe pressure on soil that is becoming increasingly less fertile (Devereux, 2002:76).

Two of the factors identified above, climate, which for the purposes of this thesis relates to recurrent droughts and floods, as well as HIV/AIDS, are particularly prevalent in the region and is expected to be prevalent for the foreseeable future (see for instance Whiteside, 2002; UNAIDS, 2004). These two factors might thus logically be expected to have an enduring impact on the region. Thus, studying exactly what their impact on this crisis has been could provide valuable insight into the nature of the crisis as well as possible future crises. Specifically studying the possible impact of HIV/AIDS and climate on food insecurity can prove to be useful in designing future humanitarian and/or developmental interventions. These two factors can however not be studied in isolation as they interact in a dynamic manner with various other factors including those cited above, contributing to a very complex set of demands on humanitarian aid interventions. The objective of this study is to understand what an optimal humanitarian intervention in a food crisis in Southern Africa, characterised by variable rainfall and high HIV/AIDS prevalence rates would entail. To achieve this one case study of a consortium of Non-Governmental Organisations (NGOs) – that represents the largest response to the crisis to date - will be made use of, in addition to the examination of available literature.

In late 2002 C-SAFE (Consortium for Southern Africa Food Security Emergency), a conglomeration of sixteen NGOs including three large International Non-Governmental Organisations (INGOs) launched large-scale humanitarian interventions in Malawi, Zimbabwe and Zambia. Sponsored by the United States Agency for International Development’s (USAID) office for Food For Peace (FFP), C-SAFE was meant to provide a second food aid pipeline in the region next to that of

the World Food Programme (WFP), which has historically been a major contributor of relief aid in the region. C-SAFE includes World Vision (WV), Catholic Relief Services (CRS) and Co-operative for Assistance and Relief Everywhere (CARE). The interventions were organised so that one of the INGOs would lead operations in a specific country. World Vision took the lead in Zimbabwe, CARE took the lead in Malawi and CRS took the lead in Zambia. In October 2004 operations in Malawi were phased out and replaced with a more long-term, purely development orientated, Development Assistance Programme (DAP). In 2005 operations in Lesotho were initiated with WV taking the lead in that country as well. Given the scope of C-SAFE operations, where the consortium was primarily active in four countries, this thesis focuses on the nature and dynamics of the Southern African Food Crisis with reference to these four countries, i.e. Lesotho, Malawi, Zambia and Zimbabwe. An assessment is made of the way that two primary factors – HIV/Aids and variable rainfall – have shaped the crisis and have influenced a humanitarian intervention such as that of C-SAFE, in order to shed light on how future responses may be structured to pre-empt the effect of HIV/Aids and variable rainfall. At the same time the way that factors such as government policy and SAPs have added to the crisis, is also investigated.



1.2 Research Questions

The following research question is investigated in this study:

What role did HIV/AIDS and the phenomenon of recurrent droughts and floods play in the Southern African Food Crisis of 2001-2005, with respect to influencing how role players such as NGOs approached the crisis, and how these factors may affect the region in the future?

The following additional questions will also be investigated:

- To what extent and in what ways might HIV/AIDS and the phenomenon of recurrent droughts and floods inform humanitarian interventions in food crises in Southern Africa?
- Was the response provided by humanitarian initiatives such as C-SAFE appropriate (in light of the above) and thus, how can the strategy followed by

humanitarian aid workers be improved to ameliorate the long-term impacts of HIV/AIDS and climate in the region?

1.3 Relevant literature and theoretical points of departure

The literature reviewed in this section focuses on the concepts that are central to the study, i.e. HIV/Aids, climate and humanitarian intervention or relief. Current literature on the topic of the role of HIV/Aids and climate in Southern Africa derives from two primary sources – a small, albeit growing body of academic work on the contours of HIV/Aids in the region, and a larger body of work by NGOs, think-tanks and independent consultants. Together, these two sets of literature emphasise a number of aspects that are predominant in the Southern African Food Crisis.

Many (for example Whiteside, 2002 and Loevinsohn and Gillespie, 2003) describe HIV/AIDS as a long-term epidemic that will increasingly impact on the world and the Southern African region in the next two decades.⁴ It is the fact that HIV/AIDS is expected to remain or even become more prevalent in the future, that necessitates this current investigation and its focus on food (in)security. The most extensive and most widely publicised effort to theorise on the impact of HIV/AIDS in the Southern African Food Crisis was by De Waal and Whiteside (2003). They coined the term “New Variant Famine” suggesting that the illness and the death of productive adults sets off a vicious cycle of orphaned children, increased household dependency ratios and economic decay. The effects of this process are especially severe and rapid as the nature of the illness makes traditional famine coping mechanisms, such as reducing ration sizes, ineffective. The hypothesis they pose is that HIV/AIDS accounts for why many households face food shortages. Since this study has a similar focus on HIV/AIDS, it is useful to evaluate the explanatory value of the hypothesis by De Waal and Whiteside (2003), as will be done more comprehensively in Chapter Two. The NVF hypothesis has been criticized for various reasons. The use of the term “famine” is deemed an inappropriate exaggeration by some (Itano, 2003). Various authors (Ellis, 2003; Harvey, 2004) note that the food crisis is driven by more than just HIV/AIDS. They feel that the importance of HIV/AIDS as a cause of food

⁴ Whiteside (2002:313) discusses the current and future relationship between HIV and poverty. He states that it could even be as long as 20 years (approximately by the year 2022) before the world epidemic has peaked.

insecurity is overstated. Other criticisms relate to De Waal and Whiteside's supposed underestimation of the ability of people to adapt to or cope with HIV/AIDS. Finally, their assumption that rural areas disproportionately carry the burden of the care of the sick and of orphans, has also been contested (Ellis, 2003:18).

Extensive research has also been undertaken on climate in the region, relating to its past and projected future rainfall variability. Many comment on the fact that the region suffers from recurrent droughts and floods. According to Thompson et al (2003) predicting these droughts has been difficult in the past. For example in 1997/98 a large drought was predicted, which only materialised to a relatively insignificant extent. Nevertheless, in research done on the period 1980-2001, it was established that every single country in the region had suffered from at least one major drought in that period (Thompson et al, 2003).

Climate change induced by pollution has also been forecasted. This phenomenon is almost certain to impact on the region. Arnell (2004) uses hydrological modelling to produce scenarios upon which he predicts that various regions in the world including Southern Africa are likely to suffer increased water stress in the future. Rockstrom (2003:870) concurs with this view. In referring to southern and Eastern Africa, Rockstrom notes that based on various predictions of climatic change, it is fair to assume that mitigating droughts will be even more important in the future.

Moreover, the region on occasion suffers floods in parts, further negatively affecting agricultural land. Floods have been documented in the region for centuries and have had some influence on the current crisis, though to a lesser extent than drought. With regards to the current crisis, Mozambique, Malawi and Zambia suffered floods in the 2001/02 planting season, which destroyed crops (Drimie, 2004; Tearfund, 2003). Floods are however much less widespread than droughts. However, as is elaborated on in Chapter Two, simulations factoring in increased greenhouse emissions suggest an increase in the frequency and intensity of rainfall variability (for example see Mason and Joubert, 1997 and Arnell, 1998).

The above stated facts warrant an investigation into the role played by HIV/AIDS and climate in the recent crisis, in order to understand what role it might play in future

crises and in what ways these two factors might inform an optimal humanitarian response to a food crisis.

Existing research on the Southern African Food Crisis overwhelmingly falls within the domain of non-peer reviewed literature. For example, Wiggins (2005), Devereux (2002), Samatabele (2003) and Mbaya (2003) study the broad causes and characteristics of the crisis in one or more countries. Though these authors offer relatively comprehensive analyses in this regard, they do not study the impact of HIV/AIDS or climate explicitly.

Only a few authors (for example see Harvey, 2005; Griekspoor et al, 2004) have related the recent Southern African crisis to interventions, and critically commented on the response by humanitarian agencies. No one has referred to the potential impact of the long run factor, climate, on interventions, while only a few have done this with regards to HIV/AIDS. Harvey (2005) conducted interviews with various NGOs operating in the region in order to understand how HIV/AIDS should be factored into interventions in food crises in the region. Kadayala and Gillespie (2003) commented on the role food aid should play in combating HIV/AIDS. However, knowledge with respect to the role of HIV/AIDS in a food crisis and the optimal response in this regard is still in a very early stage of development. Although Harvey (2005) offers various insights, further analysis is still needed. This study will not be able to answer all of the questions on this matter. It will however summarize and synthesize various ideas in this regard, hopefully contributing to a better understanding of HIV/AIDS in the context of food crises.

“Developmental relief” as a concept and philosophy guiding interventions has been used by aid agencies for over a decade. This concept is important for the purposes of this study, as it is the strategy followed by C-SAFE. Understanding the response by C-SAFE to the crisis implies understanding the philosophy behind the response. In other words demystifying the concept “developmental relief”, serves as means of contextualising the specific case study. At this early stage it also seems worthwhile studying the application of this concept as there appears to be both developmental and relief related needs in the region. Developmental relief implies combining developmental and humanitarian aid in a joint intervention programme. It is based on

the assumption that the symptoms as well as the causes of complex emergencies need to be addressed for any sort of sustainable difference to be made. According to Bradbury (1998:329) this strategy has two interpretations. The first is the so-called development continuum, which was especially popular in the 1990s. This continuum entails that relief aid is provided initially while there is a progressive movement towards phasing in development related aid, until finally purely developmental aid is provided. The second interpretation is a strategy followed by which relief and development are linked from the inception of the intervention. Four broad sets of activities are typically followed in applying developmental relief. These are, i) the participation of the recipient communities in the project, ii) evaluation of the intervention, iii) the strengthening of civil society institutions in the communities intervened in, and iv) capacity building. This is informed by three broad categories of objectives i) Strengthening local participation, capacity and civil society, ii) economic and agricultural revitalisation and iii) peacebuilding and reconciliation (Mancino, Malley and Cornejo, 2001). Given the nature of the food crisis in Southern Africa, the latter category of objectives does not apply here.

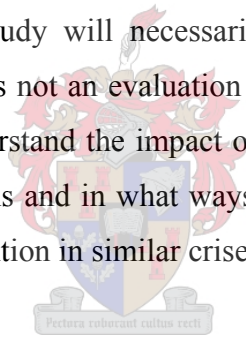
1.4 Purpose and significance of study

This study is motivated by a desire to understand the optimal way of intervening in a food crisis in the Southern African context. This context is characterised by two long-term structural factors, HIV/AIDS and recurrent droughts and floods. These factors cannot be eliminated (at least not in the short-term in the case of HIV/AIDS), but merely managed. In this regard the findings will have future relevance. The study will also indicate the impact of these two long-term factors. A third motivation behind the study is to document the complexities of the Southern African Food Crisis, which has received very little systematic or peer reviewed academic attention.

1.5 Methodology

In addressing the above stated research questions the possible impact of the independent variables, HIV/AIDS and climate on the dependent variables, food insecurity and executed interventions is investigated. In addition it is also investigated, what the nature of optimal interventions with regards to the two independent variables should be.

This study is qualitative in nature. The data gathered is in text form or in the form of verbal or written communications. This study is also inductive. No hypothesis or theory is being tested here. As the data collection process developed so too did an understanding of the food crisis and the facts relating to the research questions. In this regard the NVF hypothesis discussed above and below in chapter two should merely be seen as a theoretical tool used to facilitate better understanding. The study by no means has it as a central objective to test this hypothesis. The unit of analysis of this study is the intervention by humanitarian aid organisations (specifically C-SAFE) at regional level. This research is exploratory, descriptive and explanatory, with some evaluation. Little peer reviewed academic work has been done on the food crisis and especially the work of C-SAFE. Thus, this study will help build a descriptive knowledge base on the food crisis and on the work of this consortium of humanitarian aid NGOs. Eventually some explanatory statements regarding the link between variables will be made. The study will necessarily also include some evaluative statements, although this study is not an evaluation of C-SAFE. C-SAFE is merely a case study used in order to understand the impact of HIV/AIDS and climate on food insecurity and NGO interventions and in what ways these two independent variables might inform an optimal intervention in similar crises.



Two main methods of study were used. The first was an extensive review of secondary resources. The second consisted of supplementary interviews. Secondary resources consulted include journal and newspaper articles, books as well as discussion papers and reports by consultants to NGOs. The Southern African Regional Poverty Network's website, in particular, was used extensively. A total of 15 supplementary interviews were conducted. These were either face to face or e-mail interviews, with an initial e-mail questionnaire sent out to C-SAFE staff. With the exception of one interview with an independent consultant (Drimie interview, 2005) all the other interviews were conducted with C-SAFE employees. Face to face interviews were semi-structured and varied in length from five minutes to one hour. Three of the interviews were unplanned and were thus subject to time constraints. Lists of interviewees and interview questions are provided in appendices A and B respectively. Face to face interviews provided an opportunity to explore the basis list

of questions sent off via email to greater depth. Appendix B lists both the email questionnaire and extended list of questions used in the face to face interviews.

Snowball sampling was used to source interviewees. This method was employed to pinpoint certain key informants. Neumann (2004:394-395) states that an informant is an individual with relevant (preferably current) field experience, whom a researcher consults in order to obtain information about the field. The sample included technical staff from the C-SAFE Regional Programme Unit (RPU) in Johannesburg and at least one employee based in each of the four C-SAFE countries.

The use of C-SAFE as a case study can be justified by the fact that it represents a significant enough intervention to make for comprehensive coverage of the crisis. This includes experience with the crisis in terms of time span as well as a large enough spread of countries. C-SAFE is made up of sixteen organisations including three large INGOs with different organisational cultures, which is likely to make for sufficiently diverse perspectives on the crisis. The novel nature of the organisation furthermore validates this specific case study.

The time frame used for this study is meant to cover the period from when the crisis was recognised by humanitarian aid institutions, until the end of interventions by C-SAFE in the crisis, i.e. from about 2001 until 2005. Due to the timing of this study (completed in early 2006) the latter may not be completely adhered to. Interventions were scheduled to be discontinued and replaced by more developmental interventions by the end of 2005. However, the C-SAFE intervention has been extended into a fourth year ending in October of 2006.

For the purposes of this study the following countries were selected: Zimbabwe, Zambia, Malawi and Lesotho (see map 1.1 below). Though these countries were selected due their association with C-SAFE, all four are good candidates in terms of the two independent variables studied in this thesis. Climate and HIV have impacted on all of these countries. The respective adult (16-49 years) infection rates for the year 2003 according to UNAIDS (2005) were as follows: Zimbabwe 24.5%, Zambia 16.5%, Malawi 14.2% and Lesotho 28.9%. These statistics are important as they validate the assumption that HIV/AIDS is likely to impact significantly on the region

in the future. Prevalence rates are already high and are still rising according to Whiteside (2002:313).



Map 1.1: Map of Southern Africa with countries selected for this study highlighted in yellow. Adapted from <http://www.myristica.it/foto/21JSG02.html> (Map not according to scale).

Mention should however be made of how the empirical data is gathered on which various authors base their assertions regarding HIV/AIDS and why some dispute this data. UNAIDS and World Health Organisation (WHO) statistics should in particular be considered, as they are most often cited. In the absence of significant survey data, the data for sub-Saharan Africa, with a so-called generalised epidemic where HIV is primarily transmitted by way of heterosexual sex, is gathered at antenatal clinics at regular intervals.⁵ This is in the form of, for example, the testing of blood for HIV antibody levels. This time series data is then fitted to HIV/AIDS epidemic curves relevant to the area (for example urban), in order to make inferences to larger and even different populations, such as children. The necessary prior knowledge for such an exercise is gathered by reviewing published studies, which might indicate HIV prevalence rates among various populations. However, many women in the region do not have access to antenatal services. Thus, the data is often obtained from an inadequate sample (Walker, et al, 2004:282; Morison, 2001:11). Moreover, with the exception of South Africa, clinics that participate in these tests do not represent a random sample. Often sites in rural areas are neglected due to poorer accessibility. According to Grassly et al (2004:36) this bias against rural areas has been lessened in Malawi, in that more of these studies have recently been conducted in rural areas. Nevertheless, this limitation should be borne in mind, especially for the other three countries. Certain errors also creep into the data gathering process. These include errors from problems with laboratory testing as well as the poor handling and storage of samples (Walker, et al, 2004:2183).

The above stated methodology does pose certain sources of uncertainty. Uncertainties arise with regards to inferring from data gathered from pregnant woman to other population groups. Other sources of uncertainty include limitations of the epidemic curve used to estimate new infections and limitations to the estimation of the survival of sick adults (Grassly et al, 2004:31). However, validity studies have confirmed that these statistics are roughly accurate (Walker et al, 2004:2185). According to Morison (2001:11) this is especially the case in generalised epidemics like the one in Southern

⁵A Generalised epidemic is defined as one in which more than 1% of pregnant women are HIV positive (Walker et al, 2004:2180).

Africa, while estimates are less accurate in locations where infection is more concentrated in specific population groups, such as recreational drug users.

1.6 Key concepts

(I)NGO

Weis and Gordenker (1996:20) define NGOs as organisations that aspire to self-governing on the basis of their own constitutional arrangements, that are private and that have no ability to direct societies or to require support from them and that are not in the business of making a profit. INGOs are defined by the same source as organisations that comply with the above, but also have transnational goals, operations or connections.

HIV/AIDS

HIV refers to the Human Immuno Deficiency Virus. The virus destroys or impairs the functioning of the human immune system (UNAIDS, 2005). HIV will be observed in terms of people who are HIV positive. Obviously not all HIV positive people know their status. Thus, the prevalence will be measured in terms of those who are known to be HIV positive for example by being treated for HIV or given extra nutrition, because of their status.

AIDS is the Acquired Immuno Deficiency Syndrome caused by the HI virus. This illness, as the name implies, breaks down the human immune system. According to UNAIDS (2005) the illness is characterised by the collection of certain symptoms and infections, such as respiratory infections or chronic diarrhoea. Similar to HIV, AIDS can only be observed by way of studying those that are known to have it or who are known to have died due to this illness. C-SAFE in general uses being chronically ill (three months or more) as an indicator of AIDS. Again there is a limitation to such an operationalisation, as it is almost certain that some cases will be missed, because the health status of a person is or was not known.

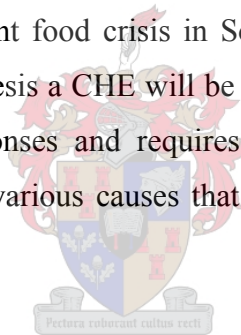
Climate

According the *Dictionary of Physical Geography* (2000:87) climate refers to the long term atmospheric characteristics of an area. It is determined by factors such as temperature, pressure, wind, rainfall and humidity. Given the causes of the food crisis

and the assumption with regards to the future impact of drought and floods in the region, climate will be observed as droughts or floods. These two concepts need to be refined further. Drought is a very imprecise concept (Thomas and Goudie, 2000:148). Drought can be defined with various objectives in mind in various ways. The notion of an agricultural drought is specific, in common use and appropriate to this study. Thus, in accordance with that definition drought will be observed as a lack of rainfall negatively impacting on crop production. Floods are defined as the inundation of land that is not normally submerged (Thomas and Goudie, 2000: 202; Whittow, 184:197).

Complex Humanitarian Emergency

In defining Complex Humanitarian Emergency (CHE) the “broader” definition provided by Albala-Bertrand (2000:22) is used. Often a CHE is defined as a humanitarian emergency brought on by factionalist conflict. This ignores the fact that other factors can also lead to and trigger emergencies, such as socio-economic and environmental factors. The recent food crisis in Southern Africa is a case in point. Thus, for the purposes of this thesis a CHE will be defined as a negative state, which overtakes normal societal responses and requires an additional response (Albala-Bertrand, 2000:17). CHE have various causes that may include political, economic, social or environmental factors.



Southern African food crisis

The Southern African food crisis can be defined as the humanitarian emergency that emerged in Malawi, Zambia, Mozambique, Angola, Zimbabwe, Lesotho and Swaziland in 2001 and which is still the object of interventions by humanitarian aid NGOs. The crisis was caused by various factors including poor agricultural management and severe drought (see for example, Devereux, 2002; Samatebele, 2003; Tearfund, 2003; Red Cross, 2002). The most salient symptom of this crisis has been a lack of food and nutrition in the region, in some cases leading to premature death.

NGO Conglomeration

Following the C-SAFE website an NGO conglomeration can be defined as a group of NGOs and INGOs working together in a geographical region to deliver humanitarian aid.

Intervention

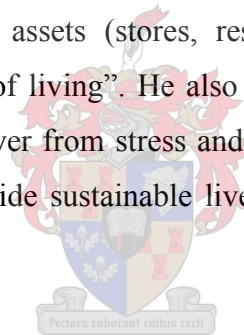
Following from the literature discussed, an intervention can be defined as a response to a Complex Humanitarian Emergency, by humanitarian aid organisations. In this case it is the response in the form of developmental relief on the part of certain NGOs and INGOs, specifically the C-SAFE conglomeration.

Vulnerability

Dubois (2003:16) defines vulnerability as, “the probability of an individual or household of seeing its overall standard of living worsen when confronted by a dramatic event”. Examples of dramatic events might include, floods, dips in commodity prices or HIV infection.

Livelihood

For the purpose of this study Marsland’s (2003:59) definition of livelihood is used. He defines it as “the capabilities, assets (stores, resources, claims and access) and activities required for a means of living”. He also notes “a livelihood is sustainable when it can cope with and recover from stress and shocks, maintain and enhance its capabilities and assets and provide sustainable livelihood opportunities for the next generation”.



1.7 Delimitations and limitations of study

The objective of this study is not to provide exhaustive information regarding the complex dynamics of food insecurity in each of the four countries identified above. Rather it is to sufficiently analyse the dynamic in each country in order to tease out the specific role played by HIV/AIDS and climate in causing food insecurity. Thus, it will be possible to discuss in a focused way the role played by these two factors in causing food insecurity. Based on this, an analysis of how best to intervene in a food crisis accompanied by these two factors is made possible.

Limitations with regards to the operationalisation of HIV and AIDS as well as with HIV/AIDS data have been identified above. This limitation is however not unique to this study. The fact that the HIV status of many is not known makes this limitation unavoidable.

Lastly, with regards to the data collection methods, interviews with C-SAFE personnel, as well as secondary resources can in no way provide the same insight that first hand knowledge acquired by way of visits to the intervention sites or interviews with recipients of aid would provide. Moreover, this study only makes use of a limited number of interviews, 15 in total. These interviews only include C-SAFE personnel. Sufficient relevant texts were used as a means of triangulation. Furthermore, a conscious effort was also made to increase the quantity of secondary resources used, again as a means of triangulation.

1.8 Thesis structure

This thesis is divided into five chapters. Chapter one provides a broad overview, identifying the research problem, methodology and justifications for the study. Certain concepts are defined in order to clearly explain what is being embarked on by the author. The rest of this thesis is structured in the following way.

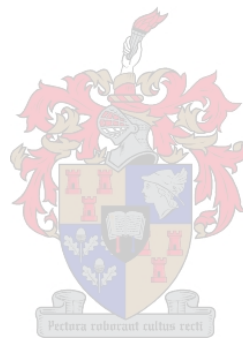
Chapter two provides a more comprehensive literature review, relating to HIV/Aids, climate, food insecurity and humanitarian intervention. Literature on the expected future and observed past impacts of HIV/AIDS on the region is discussed. In addition, the New Variant Famine hypothesis developed by De Waal and the criticism it has evoked is discussed more fully. The notion of recurrent droughts and floods in the region and its past observed and projected future impacts on the region is also discussed. The chapter also develops a measuring instrument for the dependent variable food security. Finally, chapter two also unpacks the concept of developmental relief. It is described theoretically in terms of the rationale behind it.

Chapter three discusses the causes of the crisis as well as factors that exacerbated it. Specific attention is given to the complex interaction between various factors in causing food insecurity, while explaining the specific impacts of HIV/AIDS and climate in this regard.

Chapter four addresses the specifics of C-SAFE's intervention in the crisis. The strategies and activities followed by the organisation are described. The chapter

furthermore analyses to what extent and in which manners HIV/AIDS and climate should inform humanitarian interventions in food crises in Southern Africa. Various constraints faced by C-SAFE in its intervention are discussed in as much as they impact on what might constitute an optimal intervention.

Chapter five concludes the study by revisiting the research questions and providing answers to these questions. The most important facts relating to the questions asked are highlighted and conclusions are drawn. The chapter also identifies certain possible areas for future research.



Chapter Two

Theoretical Orientation


2.1 Introduction

This chapter seeks to contextualise the four variables, HIV/AIDS, climate, food security and the humanitarian intervention, which were identified in chapter one. More in depth justification for studying the impact of HIV/AIDS and climate on food (in)security is provided. The expected future impact and the observed past impact in general of the two independent variables on Southern Africa is discussed. Thirdly, a measuring tool for the concept, “food security” will be provided. Lastly, the intervention strategy, developmental relief, is discussed further. The concept is demystified, while the main points of criticism developmental relief has historically evoked, is laid out.

2.2 HIV/AIDS

2.2.1 The impact of HIV/AIDS on Southern Africa

“AIDS is an extraordinary crisis, it is both an emergency and a long-term development issue” “Rates of infection are still on the rise in many countries in sub-Saharan Africa...” (UNAIDS, 2004:3).



As this quote suggests, HIV/AIDS is expected to impact on Sub-Saharan Africa for the foreseeable future. Various authors (for example Barnett and Whiteside, 2002; Whiteside, 2002:313) classify the pandemic as a “long wave” event. The effect of HIV/AIDS is expected to last decades. Although methodologies of arriving at these results have been disputed, HIV/AIDS is generally expected to constrain economic growth in the region.⁶

However, HIV/AIDS is expected to impact firstly, most visibly and most severely at the household level. Families are broken up as parents die, with extensive economic and social consequences.

⁶ Drimie (2002:11) notes that cumulative losses incurred at national level due to the absenteeism of labourers, loss of production, loss of wages, training costs, higher recruitment and the draining of

The medical costs involved in treating an ill household member can comprise up to one-third of a household's income. To this may be added funeral costs, which can be even higher. The virus affects people of working age. Thus, household income and productivity is inhibited. HIV/AIDS also increases food shortages, in that it reduces the agricultural workforces of many countries (UNAIDS, 2003:9). Furthermore, many people afflicted by HIV/AIDS develop a short-term outlook. They may for example become petty traders, rather than engaging in agriculture (Loevinsohn and Gillespie, 2003:16).

The loss of income and labour caused by the illness of an adult has to be made up in some other way. "Coping mechanisms" include taking children out of school to help grow food or to find employment elsewhere. This impacts on the future well-being of that child and his or her family, as he or she is deprived of a decent education. Families sometimes sell off household assets, to increase the short-term supply of money. Households may also substitute the type of crops they produce with less labour intensive crops. These crops are often less nutritious (Drimie, 2002:15). Women often turn to transactional sex in order to make ends meet. This increases the spread of the virus. Many of the effects of these "coping mechanisms" are irreversible (Loevinsohn and Gillespie, 2003:15). For example, once you have sold assets to pay for medical costs, you will not be able to buy it back or to buy a similar asset, as you may be too ill to earn an income. Furthermore, many of these strategies seem to impoverish households further. Due to the negative consequences of so many "coping mechanisms", the term has widely been dismissed as a misnomer within the context of high HIV/AIDS prevalence (for example see Drimie, 2002:18; Barnett and Whiteside, 2002).

People living with HIV and AIDS (PLWHA) need better nutrition than healthy people, as the body uses nutrients much more rapidly, due to the fact that it has to combat both HIV and opportunistic infections. An HIV patient needs about 10% more energy than someone who has not contracted the virus. An AIDS patient needs a minimum of 20 % more energy and up to 50% more protein. A good mix of vitamins

savings is very difficult to determine. However, it is clear that HIV/AIDS will have a major impact on the Gross Domestic Product (GDP) of various countries.

is also essential (C-SAFE, 2003:19). Thus, a shock to the food supply could be catastrophic to households with HIV positive members.

Due to the AIDS related deaths of adults, many children are orphaned. Under such circumstances they would either stay with relatives, often grandparents, or on their own in child headed households. The former situation can place extreme financial pressure on extended families. In the latter, children are left to look after themselves. In these situations children are burdened with financial and other adult responsibilities long before they ought to be. There is also a correlation between being orphaned and poor physical and mental development. Orphans are much more likely than other children to be stunted. Being stunted has long-term health consequences, such as a compromised immune system and mental functioning (Barnett and Whiteside, 2002). Often in child headed households the phenomenon of children leaving school to earn an income is repeated, in order to pay for the school fees and living expenses of siblings. The social costs of being orphaned are also quite severe. These children grow up in disrupted families. They are often deprived of love and are insufficiently socialised, due to a lack of adult supervision. In addition to infected individuals, AIDS orphans are widely subjected to discrimination, due to stigma.

HIV/AIDS furthermore depletes social capital. Some of the most skilful members of society die, leaving vacancies in institutions. Education standards have already been severely hampered in Southern Africa by the loss of teachers. This is especially a problem in remote, rural areas (Barnett and Whiteside, 2002). In rural areas traditional knowledge with regards to wild foods and coping with food shortages in general may also not be passed on in time, placing the surviving children at risk of greater food insecurity.

HIV/AIDS has a very strong gender dimension. Women are often doubly burdened in that they have to work the family land (in rural areas) and provide alternative forms of income. In addition they carry the burden of caring for sick relatives. Women for various reasons are more vulnerable to the disease and its effects than men. From a biological point of view women are more likely to be infected during sexual intercourse than men. Skewed power relations also make women vulnerable. African women are generally of lower socio-economic status than African men (May,

2003:13). The physical and economic power men have over women often make them helpless to refuse sex or to negotiate with regards to condom use. In situations where spouses die and the wife does not marry their husband's brother (in patrilineal systems) they often lose their property (a productive asset) and are thus driven into poverty. When women become infected, they may be rejected by their families and also under these circumstances lose their land (UNAIDS, 2003:8). Finally, mother to child transmission of HIV in-utero, during childbirth or during breast-feeding, is the second most common mode of transmission of HIV in the region next to heterosexual sex.

2.2.2 The New Variant Famine hypothesis

A study of the current impact of HIV/AIDS on the Southern African region would be incomplete without evaluating the explanatory value of the NVF hypothesis. This section will examine whether the NVF hypothesis provides a good explanation for why HIV/AIDS is important. If it is a good tool in this regard, interventions might be modelled on it.

According to De Waal and Whiteside (2003), the illness and death of adults (as opposed to children and elderly people in other famines) lead to a decline in food production and a loss of income in general, as well as a change in the make up of the crops being produced. Sick adults plant less labour intensive, but also less nutritious crops. There is also a dynamic interaction between HIV/AIDS and malnutrition. Infected people need more nutrition and cannot afford to skimp on food intake. This makes the traditional famine coping mechanism of rationing food and simply eating less ineffective. Nutritional status also plays a role in mother to child transmission and in the vulnerability to infection for adults as well as the transition from HIV to AIDS. Furthermore, the premature death of adults leads to a loss in the transfer of knowledge from parents to children, who in many cases now head households. Often children do not acquire knowledge about wild fruits and the recipes for preparing them from their dying parents. This further undermines their nutritional status. Children are also not as good as their more experienced parents in planning food consumption in times of shortage.

A main factor leading to the impoverishment of rural areas is taking care of orphans and sick adults. The burden of care is especially placed upon rural women as urban orphans are often sent to stay with rural relatives. Thus, kinship networks become overextended. The most important cause for concern according to the NVF hypothesis is the fact that the economic decline of households is much more rapid than in other famines, due to the loss of productive adults. The prospects for recovery are also much less. Both factors are a function of the undermining of coping mechanisms, such as the use of accumulated skills and kinship networks. This leads to an increasing number of young women engaging in commercial sex, which in turn potentially increases HIV transmission. Thus HIV/AIDS is causing a protracted and extensive crisis, with no clear solution.

On a very basic level the NVF hypothesis in Southern Africa was criticised by Itano (2003) for use the term famine, which she holds is generally defined as mortality rates doubling coupled by a 20% increase in acute malnutrition under children. Itano (2003) suggests that there appears to be less evidence of suffering in Southern Africa than one might expect, given the scenario sketched by the NVF hypothesis. The WFP argues that this is so because the response to the crisis was of a high quality. Others like the former Zambian agriculture minister, Dr Guy Scott, believe this is because the crisis was never as severe as it was made out to be (Itano, 2003). A common criticism of the NVF hypothesis is the argument that the food crisis is driven by more than just the HIV/AIDS pandemic (Ellis, 2003; Harvey, 2004). Ellis (2003:18) furthermore notes that the NVF hypothesis is too static. De Waal and Whiteside preclude the possibility of adaptation to HIV/AIDS in the region. Thus, AIDS induced famine represents an end state. The region seems to be doomed and there is nothing that can be done about it. The assumption that rural areas disproportionately carry the burden of care is also contested. Ellis notes that many deep rural areas might be unaffected and many urban areas might be affected. Thus, the rural vulnerability that AIDS creates might be exaggerated. Griekspoor et al (2005:397) state that no studies have been published on the impact of HIV/AIDS on urban and peri-urban food security and in “unstable societies”, meaning those ridden by for example conflict and natural disasters. Rather, quantitative studies at the household level have been done, using proxy indicators for HIV prevalence. These include dependency ratios and the number of fostered orphans. Conclusions on the community level are then made based on the

data acquired at household level. Thus, from this it seems the extent to which HIV/AIDS is impacting on food security at aggregate level can be disputed.

A lot of what De Waal and Whiteside state is widely accepted in literature on HIV/AIDS in the region as presented in section 2.2.1. The death of productive adults is leading to social and economic disarray for other household members, affecting their food security. Many orphans are sent to relatives to stay after their parents die. There are however also many child headed households. The failure of coping mechanisms, to the point where the term is considered to be a misnomer has been widely documented. The point Ellis (2003) makes that new coping mechanisms might evolve, should be borne in mind. However, no such coping mechanisms have as yet been documented. Thus, at least for now this criticism does not render the NVF hypothesis irrelevant to this study.

It does however seem that the NVF hypothesis is based on evidence that is still being contested. This relates to the origin of data and the relative impact ascribed to rural areas. Nevertheless, the explanation De Waal and Whiteside give for how HIV/AIDS is impacting on Southern Africa is worth considering. A lot of it is substantiated by the discussion in section 2.2.1. Nevertheless, at this early point of the study, it already seems that this influence might not be as significant as De Waal and Whiteside state. The NVF hypothesis it seems provides an incomplete explanation for the current food insecurity in the region. Thus, the importance of factors other than HIV/AIDS should be considered thoroughly.

2.3 Climate

2.3.1 Previous climatic conditions

Various authors (for example Vogel, s.a.; Leichenko and O'Brien, 2000) have stated that Southern Africa is a region prone to droughts and floods. When reviewing records of natural disasters in the region, it is clear that these events are quite frequent.

Literature exists on climatic conditions in the region since 1800. Measured records of observed rainfall for the twentieth century are available. For the period before 1900

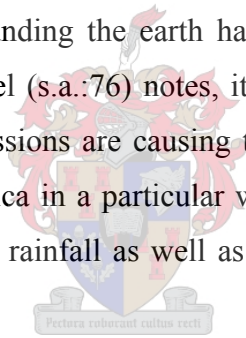
climate simulations, and in the case of Endfield and Nash (2002), documentation provided by missionaries of the London Missionary Society are available. These documents clearly indicate the pattern of recurrent droughts and floods, which is a region wide phenomenon. The missionaries reported droughts in 1820-7, 1831-5, 1844-51, 1857-65, 1877-86 and 1894-9. Wetter periods were identified in 1816-17, 1829-30, 1851-2, 1863-4, 1874-5, 1889-91 and 1899-1900 (Endfield and Nash, 2002:36). The famous Dr. David Livingston noted that he thought that drought occurred in phases (Endfield and Nash, 2002:41). The relative severity of the droughts then seems to have been much greater, as he is also reported to have said that he thought that the region was drying out, with droughts becoming increasingly severe. However, floods were occasionally also noted. In 1891 Livingston wrote that he feared heavy rains could spoil crops (Endfield and Nash, 2002:42). Nicholson (2001:130), using proxy indicators of rainfall based on available instrumental measures for the nineteenth century had similar findings, affirming that there was substantial variability in rainfall in the region in the nineteenth century. In using records of measured rainfall in the 20th century the same trend is observed.

The “EM-DAT” database established by the World Health Organisation’s (WHO) Centre for Research on the Epidemiology of Disasters (CRED), available online (www.cred.be), indicates that droughts and floods were very common in the countries included in this study in the twentieth century. The website contains data of the occurrence and effects of thousands of natural and technological disasters and complex emergencies since 1900. The database lists two sets of top ten disasters for each country, including disasters not directly related to climate, such as epidemics. These figures represent the top ten disasters in terms of mortality and top ten disasters according to the amount of people affected. For the purpose of this discussion there is no need to separate the disasters in this manner. In studying these lists of disasters it is evident that they are dominated by droughts and floods. The lists contain one category of disaster called “famine”. It is not indicated what the causes of these famines were. They might very well be related to climatic shocks. According to the EM-DAT database source Malawi suffered its most severe droughts from 1990-1994. Malawi also suffered its most severe floods in 1991, 1997 and 2001. Zambia suffered its most severe droughts in 1992, 1995, 2001 and 2002. The country suffered its most severe floods in 1978, 1998, 2001 and 2004. Zimbabwe had its most severe droughts in

1982, from 1993-1995, 1998 and 2001-2002. Zimbabwe's most severe floods were in 1998, 2000, and 2001. Lesotho had its most severe droughts in 1968, 1983, 1984, 1992, 1995 and 2003. Lesotho's most severe floods were in 1985, 1987, and 2000. This data indicates that at least one of the four countries suffers a severe drought every decade. The EM-DAT data indicates that the most severe droughts and floods for all four countries included in this study occurred since 1968. Moreover, bar two disasters all the others occurred since 1983. Thus, the question can be asked: Are droughts and floods becoming more severe? Fauchereau et al (2003:151) consider this to be the case. They note that the region has had significant climate change in the latter half of the 20th century. They explicitly state that droughts are becoming more widespread and intense.

2.3.2 Global warming and climatic change

Due to man-made disruptions to the environment, such as emissions from motor vehicles, the ozone layer surrounding the earth has been weakened. This has been widely documented and as Vogel (s.a.:76) notes, it is deemed to lead to changes in global climate. Greenhouse emissions are causing temperatures around the world to rise, impacting on Southern Africa in a particular way. Global warming, it has been argued, in itself is impacting on rainfall as well as indirectly impacting via existing weather patterns.

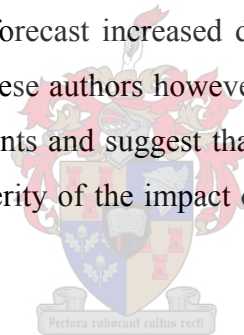


Since the 1970s there has been a trend developing whereby climatic anomalies (droughts and floods) in the region are accompanied by El-Niño Southern Oscillation (ENSO) and La Niña weather patterns (Fauchereau et al, 2003; Dai and Trenberth, 1998:3367).⁷ ENSO is a natural phenomenon that occurs every two to seven years. ENSO leads to a temperature increase of at least 0.5° Celsius of Sea Surface Temperature's (SSTs) in the Indian Ocean while La Niña leads to a decrease of at least 0.5° Celsius. It is widely contented that rainfall anomalies on the African continent are influenced by Sea Surface Temperatures (SST's) in the Indian and Atlantic Oceans (Nicholson 2001:130). Nicholson (2001:133) notes that there is a

⁷ El Niño refers to a shift in the ocean winds in the area between South America and the Indo-Australian region, bringing warm water westward (into the Indian Ocean). The Southern Oscillation refers to a seesaw of atmospheric pressure in this region. During an ENSO event the Southern Oscillation is reversed. La Niña refers to the opposite. The flow of warm water is to the east (NDMC, 2005).

negative relationship between ENSO and rainfall in the region and a positive relationship between La Niña and rainfall in the region. However, the correlation between ENSO and a lack of rain is much more pronounced than the correlation between La Niña and increased rainfall. Furthermore, since the ENSO weather phenomenon started to significantly coincide with droughts in the region (from the 1970's), the droughts and floods have become much more severe (Dai and Trenberth, 1998:3370).

Vogel (2005:31) however, notes that there is still not conclusive evidence to indicate an increase in the amount of ENSO associated droughts. Various authors however predict an increase in the amount and severity of droughts and floods due to global warming. Mason and Joubert (1997:300) using climatic models, forecast an increase in the intensity and frequency of extreme rainfall events in the Southern African due to increased greenhouse emissions. Dai and Trenberth (1998:3367) also note that various global climate models forecast increased duration of drought and increased flooding in warmer climates. These authors however do note the correlation between ENSO and extreme climatic events and suggest that increased greenhouse emissions are leading to the increased severity of the impact of ENSO on these climatic events (Dai and Trenberth, 1998:3370).



2.4 Food Security

Before the Southern African Food Crisis is investigated further, certain criteria for analysis need to be put in place. This requires an operational definition of the concept food security.

There are many definitions of food security. A review of literature on food security indicates that the notion, “levels of analysis” is a central consideration in defining this concept. A household level definition will be different from a national level definition. With regards to food security at the micro level, Sen’s (1981) work is often cited.

He states that disparities in local markets mean that humanitarian responses to famines cannot merely focus on the macro-level⁸. Many people lack the means of acquiring food, because the way economies are run deprive them of the “right” to obtain it (ODI cited in Drimie and Mini, 2003). In other words, Sen (1981) adds political and social dimensions to the notion of food security, in that economic and social stratification is considered a key cause of food insecurity. What this implies is that in addition to food availability at aggregate level, a second indicator, access at household level, has to be added to the measurement instrument one wishes to develop. Thus, although the present study is a regional level study, to not take into account local disparities, would be an oversimplification and in fact a misrepresentation of food (in) security in Southern Africa.

A third aspect, quality of food, is often added to this definition. Within the context of a generalized HIV/AIDS epidemic, adding this dimension to a definition of food security seems well advised. As the discussion above on HIV/AIDS indicates, PLWHA have special nutritional requirements.

Thus, for the purpose of this study food security will be defined as an adequate supply of food at aggregate level to meet the necessary nutritional needs for a healthy life, coupled with access at the household level, and the sufficient quality of the available and accessible food to meet nutritional requirements.

2.5 Developmental Relief

The concept developmental relief has been debated quite extensively for the last decade and a half. Developmental Relief aims to link relief, which relates to the provision of physical protection, health, food, water and shelter with development (which relates to instilling long-term self-sufficiency) in order to address both the symptoms and causes of crises. For the purposes of this study it is important that the specific case study included in this study is also understood in terms of the broader logic (one of developmental relief) it follows.

⁸ Though the situation in Southern African might not at any point have complied with the criteria of a famine (as per Itano, 2003), the basic premise of Sen (1981) is still considered applicable.

The overarching objective of developmental relief is to contribute to sustainable long-term development in a given society. Thus, basic needs must be met and vulnerability to possible future disasters must be addressed (IFRCRCS in White and Cliffe, 2000:318). Besides not undermining long-term development, the approach also holds that conflicts should not be fuelled by aid agencies. The phrase “do no harm” is often used in this regard. Other values on which developmental relief is based are accountability to beneficiaries, contextuality and respect for local culture and knowledge (Mancino et al, 2001:6). Three objectives of developmental relief were highlighted in chapter one. They are i) strengthening local participation, capacity and civil society, ii) economic and agricultural revitalisation as well as iii) peacebuilding and reconciliation. The following typical activities have also been identified: i) Participation of recipient communities in the project, ii) evaluation of the intervention, iii) strengthening civil society institutions and iv) capacity building.

A second interpretation of developmental relief holds that both humanitarian and developmental assistance is provided from the very beginning of an intervention. This approach has in recent years arguably become the more favoured one. The reasons for this change include the following. The progressive shift from relief to development excluded the possibility that at certain times both relief and development might be needed. It also did not take sufficient cognisance of complex disasters where a smooth transition from relief to development typically is not possible, as these emergencies are often self-sustaining (White and Cliffe, 2000:316). Furthermore, relief and development are not necessarily sequential and often impact on each other (UN in White and Cliffe, 2000:317). It could be argued that a lack of government capacity in Southern Africa is impacting on how HIV/AIDS can be addressed and thus, puts increased pressure on NGOs to meet increased nutritional needs of many PLWHA.

However, linking development and relief has been criticised in the past for various reasons. It has been stated for example by Bradbury (1998) that developmental relief is based on the myth of aid dependency. By using the example of Somalia in 1991-93, he states that there is no evidence of a “relief mentality” under the population, who ended up not even receiving most of the aid appropriated to them, due to interferences by militia groups. By a “relief mentality” he means recipients turning into “free-riders”, not willing to contribute to their own well-being. Harvey and Lind (2005)

provide a broader definition of dependence. According to them, it relates to a country not being able to meet immediate needs in the absence of relief assistance. This becomes a problem if it persists after an intervention has been going on for a while. Harvey and Lind (2005:6) also reject the notion of aid dependency as it could result in needy people being denied aid. They furthermore note that aid makes up a smaller segment of household livelihoods than NGOs assume, as it is hardly reliable and transparent enough for dependency to occur. Thus, they substantiate Bradbury's claim to some extent. Developmental relief is also criticised for being based on the assumption of a smooth return to a "normal" state, once the problem has been addressed. As Bradbury (1998:330) notes, developmental models of relief are based on the assumption that the crisis is a temporary phenomenon. Clearly this has much significance to this study, as this thesis is based on the assumption that the crisis in Southern Africa is not a temporary phenomenon. This assumption according to Bradbury ignores the fact that many emergencies are protracted, due to more complex circumstances than merely natural disasters. Development also by definition entails working with the government in the recipient country. The objective is to build capacities. Sometimes, these capacities may however be that of belligerents, in which case development would contradict the humanitarian principle of neutrality (White and Cliffe, 2000:320). Another argument against developmental relief is that humanitarianism is under attack, so to speak from developmentalism, because funds have been diverted away from relief towards development. It could as Fox (2001:284) points out imply strengthening processes and institutions at the expense of saving lives.

Authors countering this argument dispute that developmentalism is diverting funds away from relief and hold that there are situations where developmental work is appropriate in complex emergencies and that it could in fact facilitate better relief provision. It should also be realised that there are certain methods that might serve both ends, in which case a rigid separation of the two concepts does not make sense (White and Cliffe, 2000:324). These authors also dispute that their approach is based on the assumption that relief work necessarily creates dependency. It has been stated that it can and has at times in the past fuelled dependency on relief aid, by for example hampering the functioning of the internal economy (White and Cliffe, 2000:321).

In light of the literature reviewed it is clear that analysing the use of developmental relief in this crisis has a lot of value. Most analyses of the concept have been done in relation to complex emergencies that fall into the narrower sense of the concept, in other words, emergencies, which relate to communal conflict, such as Somalia and Uganda (for example Bradbury, 1998; White and Cliffe, 2000). The idea of “normalising a crisis”, which is central to the notion of developmental relief, has a different meaning in this case. It has less to do with securing peace, than it has with mitigating the effects of other factors that might be undermining food security, such as HIV/AIDS and extreme climatic events.

2.6 Conclusion

HIV/AIDS’s impact on Southern Africa is expected to span decades. As such it is highly likely to impact on future food crises. The literature reviewed suggests that the NVF hypothesis seems to be somewhat exaggerated. Although it can explain a lot and the processes it describes are based on generally accepted facts, it does not as yet provide a comprehensive assessment of the crisis as the extent of its impact on food insecurity can be disputed.

Various authors have forecasted a likely increase in extreme climatic events in Southern Africa in the future, which is already prone to extreme rainfall variability. These authors however differ slightly in terms of the causal link they draw. However, it seems probable that global warming is driving this trend.

This chapter also provides a measure for the concept food security. In this regard three dimensions of food security are highlighted. They are availability, access, as well as the quality of the available and accessible food.

Developmental relief is the intervention strategy followed by certain humanitarian aid NGOs, which entails linking relief and development in order to address both the symptoms and underlying causes of emergencies. This strategy has been criticised for various reasons. The most important relates to its alleged assumption that emergencies are temporary events and that relief is being neglected in favour of development. The most important counter argument to this relates to the contention that in certain

contexts, development can facilitate more effective relief. The current Southern African Food Crisis is a useful case study for studying developmental relief in a protracted crisis, as it is not driven by communal conflict, as is the case in the literature reviewed above.



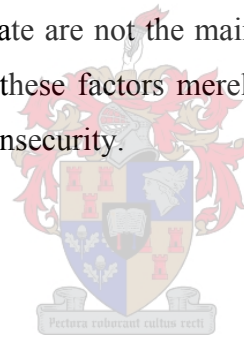
Chapter Three

Causes of and factors exacerbating food insecurity in

Southern Africa

3.1 Introduction

The Southern African Food Crisis has been labelled in various ways. These include it being complex as it is driven by various interacting factors. It has also been explained as a set of layers building on each other, “adding up” if you like (Wiggins, 2005). In this chapter the question is asked: what is driving food insecurity in the region? This chapter highlights the causes of the current crisis as well as factors that have been exacerbating it. The impacts of climate and HIV/AIDS are discussed separately. It is argued that HIV/AIDS and climate are not the main drivers of food insecurity in the region. For the most part, both these factors merely serve as a catalyst intensifying other underlying causes of food insecurity.



3.2 Causes

The causes of the Southern African Food Crisis can broadly be divided into two categories. The first comprises factors that made the region vulnerable to shocks to food production (underlying causes). The second category includes factors that triggered such shocks, such as government policies and actions (triggers).

3.2.1 Underlying causes

There have been many who have commented on development in the region as not only stagnating, but also regressing during the last three decades. Various countries in the Southern African region (and most of the continent for that matter), including all four included in this study, are extremely poor and thus vulnerable to shocks to food production. For example, Save the Children (2004) notes that development has stalled or even gone backwards over the last ten years. Since 1990 the average growth rates for the countries studied here have been disappointing. Lesotho has had very low

growth, while Malawi, Zambia and Zimbabwe have had negative growth. In the period 1989-2000 the Zambian GDP remained roughly static during this period and per capita income has fallen at a mean annual rate of 3% in accordance with population growth (Scott, 2002:406).

These countries lack the necessary resources to mitigate such shocks. The following section will briefly document the development of the four countries studied here since independence in order to identify underlying factors that might have impacted on the current crisis. It should however still be borne in mind that many of these issues still impact negatively on the region today.

As will become apparent the underlying vulnerability of the region relates to both the macro levels (national/regional) and micro levels (households/individuals). Thus, it relates to both the ability of households to look after themselves and the ability of the state to look after its citizens.

3.2.1.1 Macro level impacts

Southern Africa has historically had balance of payments problems. Specifically relevant to Zambia is the decline of mining. In the 1970's commodity prices started falling. This caused significant balance of payments problems, as imports were typically higher value added manufactured goods. The price of copper, which has been a major contributor the Zambian economy started declining in 1975 and by 1984 it had dropped by 57% in real terms (Clapham, 2000:165). Scott (2002:406) also notes that the last decade had seen declining copper and cotton (another key contributor to revenue) prices. In the case of Malawi dependence on agriculture has also led to similar problems. In the late 1970's to early 1980's the continent entered a so-called "foreign exchange crisis", triggered by the oil crisis of 1973. Thus, Africa's total debt expanded from US\$14 billion in 1973 to US\$125 billion in 1987. After debts were repeatedly rescheduled, private loans to the continent in general, dried up. Africa has since struggled to move up the value chain and dependence on commodities (often only one or two) has continued until this day.¹

¹ This phenomenon is very risky as dependence on one or two commodities as a means of earning foreign exchange, makes the entire economy vulnerable to fluctuations in the prices of these

In the 1980s the lending institutions the World Bank (WB) and the International Monetary Fund (IMF) demanded that their loans to African governments be accompanied by certain conditionalities as part of their SAPs. What this implies is that loans provided by these institutions for development purposes or to remedy balance of payments problems were accompanied by a set of requirements in terms of governance and how the economy may be regulated. In other words, nations indebted to institutions such as the WB and the IMF have had limited choice in terms of economic policy. According to Mbaya (2003:51) enforced privatisation under SAPs led to state bankruptcy as nationalised companies were sold off at extremely low prices. This was accompanied by a cut in public sector employment and reduced safety nets by the state. Furthermore, the deregulation of the banking industry led to high interest rates. According to Samatebele (2003:93) high interest rates, brought on by the SAPs made it impossible for commercial small-scale farmers to borrow money for food production in Zambia. Devereux (2002:77) reports that amongst other things, due to widespread poverty and a thin network of traders, it is highly unlikely that the private sector would be able to replace the state to steer agricultural production in Malawi. This position is however at odds with that of Rubey (2005) who blames the Agricultural Development and Marketing Corporation (ADMARC) for establishing maize prices at levels that dissuaded private importation of food once there was a crisis. He advocates less state intervention in the economy.

With the exception of Lesotho all of the countries being studied here did structurally adjust, be it to different degrees. Malawi was one of the first recipients of a SAP in 1980/81 and probably more compliant than many others, notably Zambia. Zambia's lack of compliance under Kaunda led to aid being cut and the country being forced into accepting a second SAP (Clapham, 2000:179). In the case of Lesotho, the fact that it was surrounded by apartheid South Africa, its poverty and its small size, meant that it did receive a lot of relatively unconditional aid from especially Britain after independence (Matlosa, 1999:17). In fact a lot of aid was in the form of grants. Since the late 1980's when it had a military coup and then in the 1990's when the global situation and that in South Africa changed and more aid went to former Eastern Bloc countries, aid to Lesotho however started drying up.

commodities. Other countries especially Lesotho, but also Malawi were to a large extent dependent on remittances from relatives who worked on South African mines.

An unfavourable international trade system has also been impacting on the region for years. Agricultural subsidies and other forms of help to farmers in developed countries, still in effect mean that Southern African agriculture is uncompetitive overseas and domestically. Mills (2002:86) notes that the 350 billion US dollars in subsidies provided by OECD countries to their agricultural sectors is higher than the collective GDP of all 48 countries in sub-Saharan Africa, which amounts to 300 billion US dollars. This has both macro level and micro level impacts. Organisation for Economic Co-operation and Development (OECD) members, most notably the EU and USA, subsidise their farmers, allowing them to undersell more efficient farmers in developing countries on world markets.² Stated differently, farmers in OECD countries are artificially being made more competitive relative to farmers in many developing countries (including Southern Africa) (Macdonald, 2002:2). The impacts of northern agricultural subsidies are exacerbated by the fact that the region is dependent on agriculture as a means of income, at national level especially in the cases of Zimbabwe and Malawi. Thus, tariffs on imports, which limit developing country imports, mean that farmers in developing countries do not gain the foreign market share they would have had in the absence of these factors.

Macroeconomic problems have also led to the skimping by states on necessary expenses. Poverty has led to a decline in the maintenance of roads. The decline of roads has been observed in Zambia in 1993 already (Mwansa, 1993:46). Institutions such as education and health care have also suffered under these conditions of fiscal hardship at national level and declining livelihoods at household level. Funding was and still is a problem. By 1993 fewer children were enrolled in school in Zambia, Malawi and Lesotho than at independence (Kennedy, 1993:215). Due to a lack of wealth in general, only a very fortunate few could study at tertiary level. One could argue that a lack of investment in education, especially at tertiary level reinforces dependence on low value commodities as too little appropriate social capital is created, to engage in for example the service sectors, especially the lucrative new knowledge economy. As Shaw and Parpart (2002:297) note, there is a knowledge scarcity on the continent and the new knowledge economy has not as yet been entered to any significant degree. A 2000 SADC Human Development Report mentioned that

² While the USA in principle agreed in 2004 to drop agricultural subsidies provided that everyone does it, the European Union is still reluctant to do the same.

manufacturing in the region was actually declining (Mbaya, 2003:44). This is no less true for the four countries included in this study, with the possible exception of Lesotho, which has recently seen the emergence of a small textile industry. Scott (2002:415) notes that disproportionate spending on amongst other things defence in the past has occurred at the expense of health and education in Zambia. For that country it was reported that macroeconomic pressure led to declining health spending and subsequent lower rural productivity (Mwansa, 1993:46).

It should be borne in mind that if the region was not so overly dependent on one or two low value added commodities (often crops) the impacts of agricultural subsidies would not have been so severe. This situation in fact spells even greater cause for concern for the future, as the relative purchasing power of relatively consistently priced primary goods to imported manufactured/value added goods) will only keep declining.

Quality production in agriculture has also started to wane in the 1990's. Samatebele (2003:94) notes that maize production in Zambia had been decreasing since 1993. Where Zambia used to be a net exporter of maize, it is now a net importer. This she attributes to policy failures. Mbaya (2003:44) also notes that maize production in the entire region has been declining since 1997. Viewed in light of the fact that maize is the staple food of most of the region this is even more significant.

High unemployment rates are another factor contributing to low levels of government revenue. All four countries studied here have very high unemployment rates. Table 3.1 indicates unemployment rates for the four countries included in this study.

Table 3.1: Unemployment rates for Lesotho, Malawi, Zambia and Zimbabwe (%).

Lesotho	Malawi	Zambia	Zimbabwe
45	NA	50	70

Source: CIA World Fact book. Figures represent 2002 estimates with the exception of Lesotho, which is a 2000 estimate.

Though these figures only represent formal unemployment and thus not necessarily a lack of sustainable livelihoods at household level, these figures are still an indication of the extent of national tax bases. Again the point is that the state needs revenue in order to provide public goods and effective safety nets in times of crisis. If such a large segment of the population is formally unemployed, the amount of revenue received by the state is significantly limited and thus also its capacity to avert or mitigate crises.

In Zimbabwe the issue of land reform had been simmering since independence in 1980. Initially bound by the Lancasterhouse agreement, Zimbabwe employed a willing buyer/willing seller strategy. The process proceeded relatively swiftly until 1983 as many farms abandoned during the civil war were redistributed (Lebert, 2003). However, the pace of land reform declined significantly, especially in the 1990's, while pressure on the government built up (COHRE Africa, 2001:18). Various reasons for the slow pace of land reform have been cited. These include a lack of funding, as donors who initially agreed to help fund the process did not provide the funds they promised (Lebert, 2003). Pressure from the IMF and World Bank on the government to keep to the willing buyer/willing seller formula, as well as policy implementation failures by the government have also been cited (COHRE Africa, 2002:221; Zhou, s.a.:1). Regardless of who is to blame, the sensitive issue of land led to increasing pressure on the government of Zimbabwe with the first land invasions already taking place in 1998 (COHRE Africa, 2001: 22).

3.2.1.2 Micro level impacts

For countries like Lesotho and Malawi the decline of commodity prices translated into mining becoming less labour intensive and thus jobs in the South African mining sector being shed. This fact coupled with new employment regulations in South Africa led to a significant decline in remittances, which had been a key driver of economic growth and household livelihoods in those countries. Employment in South African mining for Lesotho citizens declined from 116,129 in 1993 to 68, 827 in 1999, a decline of 47, 302 (Sechaba Consultants quoted by Turner, 2003:10).

The issue of land tenure has also facilitated the development of a system of stratification in the region. All four countries have both commercial farmers and peasant farmers. Traditional land tenure systems have increasingly been replaced by leasehold systems. In the case of Malawi this transition was equated to “development” and gave a comfortable excuse for people to be worked off their land. In that country peasants have often fallen into poverty cycles, which led to them losing their land. In cases where money is needed, they might lend from commercial farmers, offering their land as surety. When they fail to pay, they typically lose their land. In other cases labour is offered as in kind payment. Thus, peasant farmers might neglect their own land due to a lack of time, thus leading to an increased loss of productivity. Farmers who lose their land may get caught up in a form of piecework called ganyu, whereby they often work an entire day for merely a plate of food. From this poverty cycle there is little opportunity of escaping. Loss of land due to issues of land tenure has also been reported for Lesotho and Zambia (for example see Matlosa, 1993:22 and Scott, 2002:411). More recent impacts of land reform in Zimbabwe will be discussed below.

It has been argued that enforced liberalisation has undermined agricultural development. Practically what this meant was an end to fertilizer subsidies³ and stringent limitations on marketing boards such as those in Malawi and Zimbabwe who provided farmers with guaranteed markets. Tariffs were also dropped. The guaranteed market that peasant farmers had under various grain marketing boards, such as the GMB in Zimbabwe and ADMARC in Malawi was eliminated with privatisation. For example ADMARC used to travel to remote areas to buy “whatever the farmers had” (World Development Movement, 2002:30). In the case of Malawi the estate sector was historically favoured at the expense of smallholders under Banda, maintaining a high level of inequality.⁴ In that country market liberalisation, meant rural inequality increased in the 1980’s and 1990’s. Maize prices and the prices of inputs rose and subsidies were abolished in 1994-95 (Frankenberger et al, 2003: 20-21). In addition

³According to Patel and Delwiche (2002) fertilizers cost two to six times more in Africa than in Europe or the USA.

⁴ Estates were favoured for example with regards to access to extension services, markets and credit (Frankenberger et al, 2003:i).

the drought of 1992/93 meant that many smallholders' could not make payments on their loans and thus lost access to future credit (Frankenberger et al, 2003:14).

Vulnerability is also increased due to poor agricultural practices. Environmental degradation in Lesotho and Malawi has to a large extent been fuelled by rapid population growth. Although Zambia has a similar population growth rate, the country still has large areas of unused land. In 1993 Chidzonga (184) noted that environmental degradation has led to a loss of productivity. Plots in Malawi have been extensively split up since independence. According to Devereux (2002:76) Malawi has experienced decreased soil fertility throughout the 1990's. Soils have been overworked, leading to a loss of nutrients. In Lesotho large-scale soil erosion has remained relatively unchecked. Moreover this country only had a very small amount of arable land to start off with.

Dependence on agriculture has even more significant impacts at household level. Subsistence farming is still a very common practice in Southern Africa. For these households shocks to production are devastating. Just like commercial farmers, agriculture is the sole source of their livelihoods. However, these farmers are far more likely not to have sufficient savings to absorb shocks. Table 3.2 indicates the importance of agriculture at household level by country. This is also an indicator of vulnerability to shocks. Though these statistics also include commercial farmers, it still indicates the percentage of livelihoods impacted on by shocks to agricultural production.

Table 3.2: Percentage of labour force active in agriculture by country.

Country	Lesotho	Malawi	Zambia	Zimbabwe
Percentage of labour force active in agriculture	86	90	85	66

Source: CIA world fact book (2005). Note: Though it is indicated that 86% of the resident workforce of Lesotho is active in subsistence farming, this statistic does not include those living and working South Africa.

Finally, poverty rates for each of the four countries can be presented as indicators of vulnerability. Table 3.3 presents these statistics.

Table 3.3: Poverty rates by country (%).

Country	Lesotho	Malawi	Zambia	Zimbabwe
Poverty rate	56 (2002)	76.1 (2004)	87.4 (1993)	64 (2002)

Source: UNDP

As can be observed in table 3.3 according to the UNDP each of the four countries have a poverty rate of at least 56 %. When this is interpreted in conjunction with table 3.2, it could be inferred that due to extensive overlap between poverty and the percentage of the labour force active in agriculture, the amount of non-commercial farmers (with lesser livelihoods) are likely to be in the overwhelming majority, making the impacts of shocks or triggers discussed below even more significant.

3.2.2 Triggers

It is commonly understood that the current food crisis was triggered by erratic rainfall. The region experienced two consecutive years of drought while Malawi and Zambia also experienced floods. The impact of climate in this regard will be expanded on in

section 3.3. However, climate was not the only factor that triggered the food crisis. Government policies and actions also played a significant role.

In the case of Zimbabwe the fact that a lot of the country's agricultural land is not being used properly is a result of the "fast track" land reform programme initiated in 2000. Since the inception of this land reform programme the area of Zimbabwean agricultural land utilised, fell significantly. According to Wiggins (2005:11) at one point less than half the country's agricultural land was being utilised. The state set agricultural price via the GMB, the organisation that had been reintroduced by the Zimbabwean government despite objections from lending institutions, has also not provided a sufficient incentive for farmers to reinvest in agriculture. The country suffered a severe loss of labour when thousands of workers were displaced during the execution of this programme. Wages dropped significantly, leading to workers leaving farms. Since 2000 the unemployment rate in Zimbabwe has risen by between 100% and 500% (IRIN, 2004).

Government capacity is another key issue in this regard. In 2001 the IMF and World Bank, based on incorrect harvest forecasts, advised the Malawian government to sell off a significant part of its strategic grain reserve. The IMF and World Bank differed in terms of the amount of grain it advised Malawi to sell. The IMF proposed a reduction of 100 000 metric tons in the reserve from 160 000mt to 60 000mt, while the World Bank advised a reduction of 28 000metric tons (Zerbe, 2004:597). However, the Malawian government, following the advice of an EU consultant sold the entire reserve. Thus, when the crop failure occurred, new debts had to be made in order for the shortfall to be imported. According to Devereux (2002:71) the IMF and World Bank gave the correct advice based on the information provided to them.⁵ Corruption in this case has also been reported.

⁵ In 2001/02 Fewsnets reported a surplus in Malawi despite the fact that NGOs working at village level reported to the contrary (Devereux 2002:72).

Frankenberger et al (2003:33) note that private traders bought maize at approximately seven Malawian Kwacha/kg creating an artificial shortage and then selling it back to ADMARC for about 17MK/kg, once it became known at what price maize imported to remedy the shortfall would be sold at. Yet the consequence was that Malawi was without any public reserves for three months.

3.3 Exacerbating factors

Various factors exacerbated the food crisis once it had already started. In addition to inconsistent rainfall and the effects of HIV/AIDS on the region, many went hungry due to the late delivery of aid as well as poor governance.

3.3.1 Timely delivery of aid

In Zimbabwe NGOs warned in November of 2001 of impending food insecurity. However, the government only declared an emergency by April of 2002 (Wiggins, 2003:30). Mbaya (2003:45) also believes that governments did not respond in a timely manner, despite warnings from the UN Food and Agricultural Organisation (FAO) and the WFP, suggesting that food be imported.

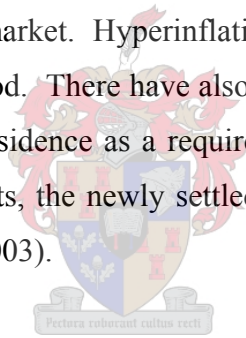
A lot of mistrust had been building up between Southern African governments and donors, due to the incomplete application of SAPs (Mousseau, 2004:20). Due to the apparent mismanagement of the strategic reserves the UK suspended its aid to Malawi in 2001 (Mills, 2002:31). This followed the suspension of aid by the EU and US as well as the suspension of balance of payments support by the IMF (Devereux, 2002:76). Developmental assistance in Malawi by Denmark was also completely closed down, due to corruption (Mills, 2002:30). It will be indicated in chapter four that various constraints experienced by NGOs also inhibited a quick and effective intervention. In addition donors believed initial reports that there was enough available food in Malawi. Only after extensive media reports on food shortages did donors respond (Devereux, 2002 cited in Frankenberger et al, 2003:35).

3.3.2 Government actions and issues of access

Mano et al (2003:19) refers to the crisis as a food access problem. In all six countries affected by the food crisis, the issue of the accessibility of food is extremely

important. This is to be distinguished from availability. Food may be available, however if people do not have the means of acquiring available food, then they are food insecure. To a large extent this relates to the underlying causes discussed above. Large sections of national populations have very weak livelihoods. Thus, when shocks occur, their underlying vulnerability is exposed. Nevertheless, specific government actions exacerbated the ability of vulnerable people to obtain food.

In Zimbabwe, the state run GMB is the sole buyer of grain and has a monopoly on grain sales. Prices are regulated by government and are generally lower than market value. It has however been widely reported that food was and is only made available to ZANU-PF supporters. At the same time the country has had absolute food shortages, which is compounded by the fact that many commercial farmers have abandoned maize for crops that are not price controlled (Iles, 2004). The only alternative available to non-ZANU-PF supporters was and is to buy food at extremely inflated prices on the black market. Hyperinflation in the country has severely exacerbated inaccessibility to food. There have also been some procedural barriers to food access, such as proof of residence as a requirement for obtaining food. This is especially a problem for migrants, the newly settled, orphan headed households and displaced people (Loewenson, 2003).



In Zambia in 2001/02 the government announced that they would import 200 000 metric tons of maize to help cover deficits and to sell that at below market prices directly to a small group of millers. This made the private sector hesitant to do the same for fear of oversupply leading to losses. However, the government only imported 130 000 metric tons, which led to prices increasing dramatically. In 2002/03 it arranged with the private sector to import 100 000 while it would import 300 000 metric tons. The private sector imported 100 000 metric tons, while the government only arranged for 100 000 metric tons of food aid. Thus, the same situation of escalating food prices as in the previous year was repeated.

According to Abbot (2003:117), in Lesotho the depreciation of the Rand also severely inflated food and transport prices, thus exacerbating the issue of food accessibility. For example, in 2000 a 50kg bag of maize cost R 65; in 2002 it cost R180.

3.4 Climate

Rainfall variability will always be a concern in a region overly dependent on rain fed agriculture, as a means of livelihoods. In addition to contributing to consistently declining levels of maize production over the last decade, most notably in Malawi and Zambia, erratic weather is widely regarded as the most important trigger of the crisis. The region had very heavy rains early on in 2001, which was followed by two years of drought (Zerbe, 2004:595).

Numerous dry years during the last decade have contributed to a reduction in the area harvested. Zambia had droughts in 1991/92, 94/95, 97/98, 2000/01 and 2001/2002. Malawi suffered droughts in 1981, 1992, and 1994. Lesotho had droughts in 1992 and 1995, and Zimbabwe had some of its most severe droughts from 1993-1995 and in 1998. In this regard droughts have served as an underlying cause contributing to vulnerability.

Consecutive droughts were experienced in various countries in the 2001/02 season. Five of Zambia's nine provinces were affected, sharply reducing the production of crops (Drimie, 2004:21). In Zambia the 2001/02 season the crops produced were 25% less than 2000/01 and 42% less than 1999/2000, which is considered to have been a relatively "normal" rain season. In the 2001/02 season, drought reduced harvests in the southern part of the country, the so-called grain basket, to 40% less than expected. Some small-scale farmers had little or no harvest at all (Samatebele, 2003:96). Prices of maize and maize meal shot up significantly between August and December 2002. Price increases varied from 6% to 50%. These price increases were however also geographically differentiated. In rural areas, which were more difficult to access by traders and where inhabitants typically did not have the means to pay for transport costs, prices rose more extensively, especially for maize. Zimbabwe suffered consecutive droughts from 2002-2003, declaring a national drought disaster in 2002. Thus, drought contributed to back to back years of below average production in various parts of the region (Tschirley et al, 2004:6).

According to Abbot (2003:115) rainfall in Lesotho in the period from 2001-2002 was above average. In fact some fields were waterlogged, limiting the area that could be

planted. Wiggins (2005:29) notes that planting was delayed due to these rains. In the first half of 2002, 7 000 households were affected by flooding. Malawi had floods in the 2001/02 season, which ruined crops (World Development Movement, 2002:10). Floods in Malawi also washed away railway lines and bridges, leading to logistical problems affecting maize imports via Mozambique (Frankenberger et al, 2003:36). In the first half of 2003, 82 000 households were affected by flooding in Malawi (Wiggins, 2005:27). In the first half of 2001 Zambia suffered excessive rains in the north and dry spells in the south. From January to June of 2002 the south experienced a dry spell, with heavy rains occurring in April. For that country poor rains delayed planting in the 2002/03 season.

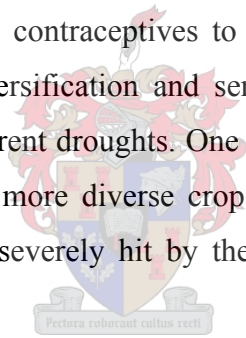
Rainfall variability is however not the only climatic factor to impact on food security in the region between 2001 and 2005. In March of 2002 Lesotho experienced frost. That country also had severe hailstorms in that same year, which destroyed crops. In April of 2002 a state of famine was declared (Wiggins, 2005:29).

Many consequences of droughts and floods (in this context specifically since 2001) can be cited. Failed crops translated into less food being produced in the region. In addition it also meant that there was less work on farms (Wiggins, 2003:28). In the case of Zimbabwe, based on previous discussions it seems safe to say that the impact of climate was severely exacerbated by political factors. The “fast track” land reform programme as well as the manner in which maize prices have been regulated led to extensive decreases in food production. Thus, it can be argued that food production would have been a problem in that country, even if climate did not enter into the equation. In previous years with or without drought, absolute food shortages were never a problem in Zimbabwe. The mismanagement of its strategic grain reserve was arguably at least an equally important trigger of food insecurity in Malawi in 2001.

The impact of drought on the region has been severely exacerbated by the extent to which the region is dependent on specifically white maize. Maize is relatively intolerant of drought. Nevertheless, many governments in the region focus their agricultural policies on maize. For example, Zambia concentrates its fertiliser

subsidies and price controls towards maize. In Zimbabwe, the GMB largely focuses its activities on maize.

Malawi in turn focuses its “starter packs” on maize.⁶ This can be contrasted with South Africa and Mozambique who have relatively commodity neutral agricultural policies (Tschirley et al, 2004), in other words agricultural policies that do not favour one crop over all others. A lot of this problem can probably be attributed to culture. According to Horstmeier (interview 2005a) humanitarian interventions in the current crisis have on occasions been confronted by recipients rejecting non-maize food aid. According to him many people consider a lack of maize to be synonymous with a lack of food. White maize is the staple food of the region. In the case of Malawi recipients found it hard to adjust to and accept yellow maize and cow peas. However, the same amount of attention was not given to sensitising communities to these crops in Malawi as was the case in Zimbabwe and Zambia.⁷ There were also rumours that the Ministry of Health were adding contraceptives to yellow maize (C-SAFE Malawi, 2004:11). However, clearly diversification and sensitisation to non-maize crops is necessary in the context of recurrent droughts. One interviewee noted that (at least in Zambia) households that had a more diverse crop base, including drought tolerant crops to draw on, were not as severely hit by the current crisis (Haahr, interview 2005a).



Previous food crises in the region were also triggered by extreme climatic events. However, as Drimie (interview, 2005) notes, the recovery process in this crisis has been much slower. He notes that the 1991/92 drought is widely considered to have been worse than the 2001/02 drought, however with less severe consequences. Thus, though important, drought could not have been the most important cause of the crisis. Wiggins' (2005:3) comments seem to support this position. According to him the

⁶ Starter packs consist of seeds and fertilisers distributed to subsistence farmers as a starting point for food security. Thus, people can grow their own food and replant seeds from the harvest for the next year. The Malawian government initiated this programme in 1998 and also provided starter packs in the 1999/2000 season. This initiative resulted in increased harvests, though it should be noted that these years were also accompanied by high rainfall (Frankenberger et al, 2003:31). CARE Malawi has also in the past distributed starter packs.

It should also be noted that Malawi had been growing increasingly dependent on imports for its staple food, maize. Thus, in light of this fact focusing starter packs on Maize seems somewhat justified.

⁷ This relates to C-SAFE interventions only.

1992 drought was arguably the worst of the twentieth century, with a fall in production on average of 66% in the six countries affected by the 2001 crisis. In 2001 production was only reduced by 22% (Wiggins, 2005:3). Clearly based on this, the above stated label of a food access (as opposed to availability) crisis seems apt. This insight indicates the extreme importance of underlying issues of declines in livelihoods and government capacity.

Holloway (2003:5) asserts that it is no longer reasonable to view drought as a disaster when it has become such a common phenomenon. Drinkwater (2003:10) based on decades of observation argues that there is no such a thing as a “normal rainfall season” in the region. Rainfall in Southern Africa has been inconsistent for so long, that the term “variable” seems to be inappropriate, as inconsistent rainfall it seems is the norm.

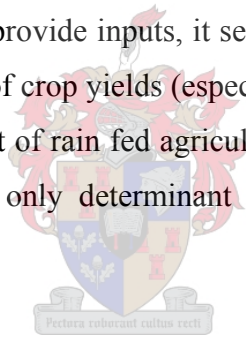
Beyond the 2002/03 season, climate to a limited extent delayed and stunted agricultural recovery in a limited amount of geographical areas. Fewsnets reported that rain in Malawi in the 2003/04 season was delayed, sporadic and unevenly distributed in the south as well as isolated areas in the central and northern parts of the country. In Zambia sections of the south received inadequate amounts of rain. The 2004/05 season saw inadequate rainfall in certain areas, resulting in crop failures (Fewsnets, 2005a; 2005b). These include the southern and eastern parts of Zimbabwe as well as adjacent parts of Malawi. In February and March of 2005 much of Zimbabwe, southern Zambia and central parts of Malawi experienced a dry spell during an important stage of crop development. Wiggins (2005:21) using the UN Food and Agricultural Organisation’s FAOSTAT database indicates that, in 2004 Zimbabwe was the only country to have maize yields fall significantly under the 1996-2000 average.⁸ This pattern is repeated for 2005, as can be seen when using the same source to calculate 2005 maize production as percentage of the 1996-2000 average.⁹

⁸ Wiggins (2005:21) summarises the 2004 yields as a percentage of the 1996-2000 average by country. They are as follows: Lesotho, 102%; Malawi, 89%; Zambia, 122% and Zimbabwe, 51%.

⁹ Repeating Wiggins’ calculation for the 2005 yield the following percentages are arrived at: Lesotho, 102%; Malawi, 90%; Zambia, 122%; Zimbabwe, 46%.

Thus, in Lesotho, Malawi and Zambia the impact of climate in this instance seems to be most significant on individual or household livelihoods as opposed to overall food supply. In fact Lesotho and Zambia had national surpluses. Food insecurity in Lesotho, Malawi and Zambia thus seems to have been driven by a lack of access from 2004, while a lack of availability of maize seems to have been a far greater problem in Zimbabwe than in any of the other countries.

Wiggins (2005:21) further models the potential maize yield of Zimbabwe in the absence of political matters. He approximates the possible yield Zimbabwe would have had in 2003 and 2004 by taking the lower percentage score of 1996-2000 maize yields between Zambia and South Africa for those two years. This is rationalised by the historic co-variance of harvests between these three countries.¹⁰ Thus, for 2003 he arrives at 102% and for 2004 at 88%. Both scores are those observed for South Africa obtained from FOASTAT. Notwithstanding other possible contributors to maize yields, such as state capacity to provide inputs, it seems logical that rainfall would be the most important determinant of crop yields (especially for a drought intolerant crop such as maize, within the context of rain fed agriculture). Thus, Wiggins' proposition that politics is the main, even only determinant of a lack of available maize in Zimbabwe seems logical.



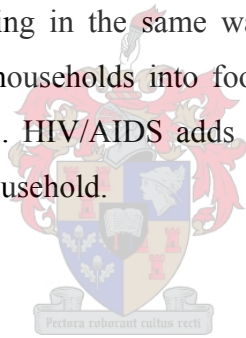
Thus, in conclusion if one is to relate climate to food security in Southern Africa it is clear that climate as defined in chapter one and more extensively in the case of Lesotho (including hail and frost) for the most part triggered food insecurity in Southern African Food Crisis in 2001/02, though political matters arguably played a significant role in Malawi and Zimbabwe. Climate also played a role in the decline of maize production in the decade preceding the crisis, constituting in this regard an underlying cause.

¹⁰ Tschirley et al (2003:3) also observes covariance between maize production in Zimbabwe, Zambia and South Africa for the period 1990-2003. The correlation coefficient between Zimbabwe and Zambia for 1990-2003 is observed as 0.63. Between South Africa and Zimbabwe a correlation coefficient of 0.93 is observed between 1990 and 2001. However this falls to 0.67 for the period between 1990 and 2003. This shows that covariance in maize production between these two country has significantly declined since the inception of fast track land reform.

3.5 HIV/AIDS

Various impacts of HIV/AIDS on the Southern African population, many of which relate to food security are highlighted in chapter two. HIV/AIDS it seems, is a key factor contributing to the vulnerability of the Southern African population. The purpose of this section is to indicate what role HIV/AIDS might have played in causing and exacerbating the food crisis. The processes discussed in chapter two should be kept in mind as ongoing processes. Some of these will be highlighted in a discussion on the relationship between HIV/AIDS and food security specifically.

HIV/AIDS is both a current crisis and a long-term developmental issue. It increases vulnerability to shocks to food production, by more rapidly making food insecure people ill, thus increasing the impact of triggers. In light of this, HIV/AIDS can be seen as an underlying cause, as it precipitates and exacerbates the impact of shocks to the food supply, just like chronic poverty does. At the same time it also exacerbates existing food insecurity, by acting in the same way. HIV/AIDS can also act as a trigger, by pushing vulnerable households into food insecurity, when one or more members become ill with AIDS. HIV/AIDS adds on to other problems at national level and can severely affect a household.



3.5.1 Household level impacts

The relationship between HIV/AIDS and food security is not merely unidirectional. HIV/AIDS and food security impact on one another. For example, while HIV/AIDS makes people more vulnerable to food insecurity by breaking down the immune system, a lack of food also hastens the transition from HIV to AIDS. As has been noted in chapter two, PLWHA need increased nutrition in order to stay healthy, while good nutrition is a necessary first step for other treatments such as ART to be effective (for example see, Loevinsohn and Gillespie, 2003: 23:2003; WFP, 2003a). Thus, HIV/AIDS and food security might be seen as two concurrent crises that mutually affect each other.

In accordance with the UN concept of a triple threat (HIV/AIDS, food security and government capacity) and other comments on multiple crises plaguing Southern

Africa (for example Drimie interview, 2005; Wiggins, 2005) this logic seems justified.¹¹

Figure 3.1 aims at explaining the relationship between HIV/AIDS and food insecurity at household level. It is a summary of Save The Children (2004). According to Save the Children (2004) HIV/AIDS can influence a household in three ways. It can cause the chronic illness or the death of a member (normally an adult) or it can increase the size of the household when relatives take in AIDS orphans.

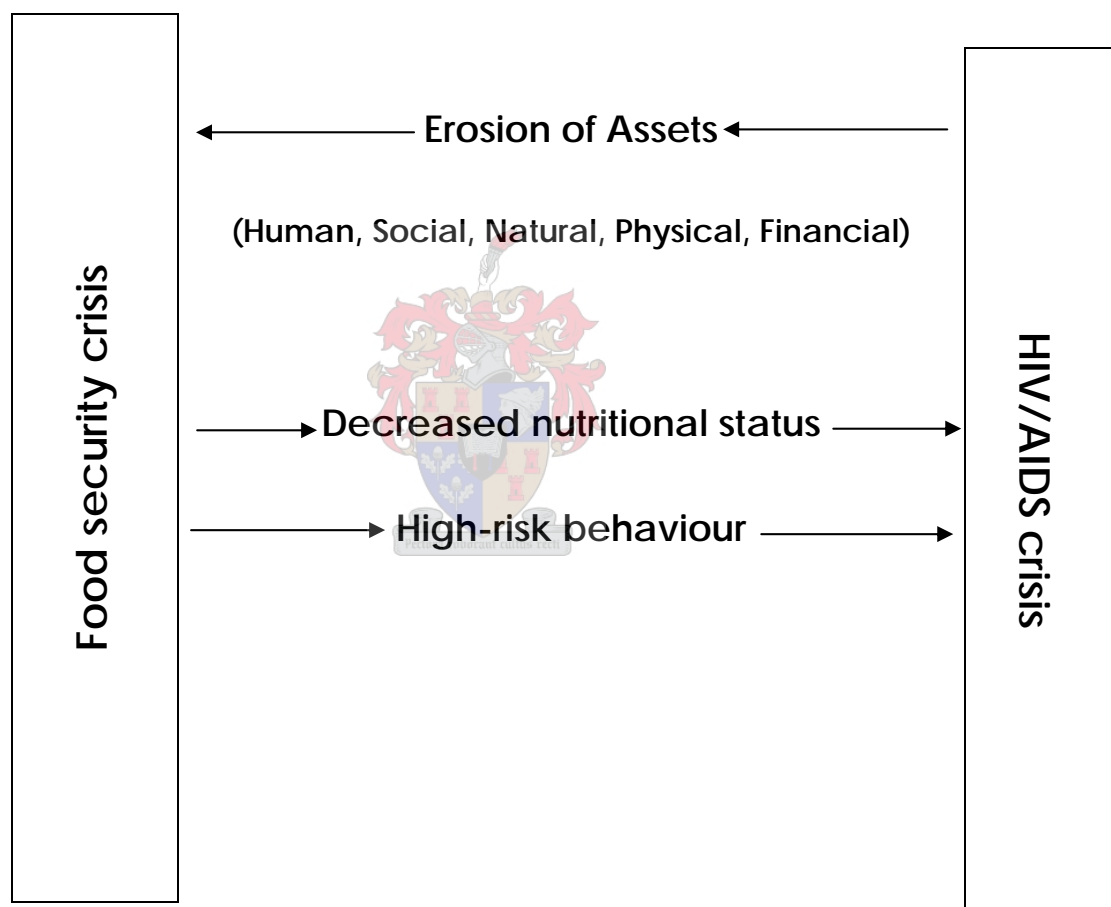


Figure 3.1: The relationship between two concurrent crises: Food insecurity and HIV/AIDS (Adapted from Save the Children, 2004)

¹¹ Drimie (interview 2005) and Wiggins (2005) respectively refer to the notion of multiple overlapping and layered crises. This thesis does not oppose these views. However, for the purposes of analysis, the crises of food insecurity and HIV/AIDS will be separated, as such an approach will facilitate an understanding of the mutual impacts of these two crises on one another and thus help to establish causality.

It is indicated here that the impact of HIV/AIDS on food security is both immediate and long-term. In terms of the impact of HIV/AIDS on food security Save the Children (2004:10-16) argue that HIV/AIDS erodes certain household assets. Distinction is made between five types of assets.

Human capital includes knowledge and ingenuity that people use to be productive and to pursue livelihood maintenance or enhancement strategies. There have been many reports on the loss of traditional knowledge (for example see De Waal and Whiteside, 2003 and UN, 2003). As parents die before they can pass this asset on to their children, the children are not taught how to deal with food insecurity. For example, methods of preparing wild foods are not passed on. Households with chronically ill members or that experience death may suffer a loss of labour.

Human capital by definition implies human resources, such as ingenuity and labour. In the context of this study it can potentially relate to both the ill person and those caring for that person, as carers might neglect their own productive duties in the process of providing care. Thus, there might be less time for income generating activities, such as agricultural production or searching for wild foods. Children may be taken out of school to make up some of the lost labour. This has obvious longer-term consequences. Orphans taken in by households may divert attention towards increased care and may thus reduce the productive labour of other household members. Extended families may however on the positive side offer another way of transferring traditional knowledge.

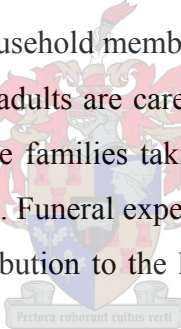
Social capital refers to relationships with others, such as networks that people draw on to secure their livelihoods. The death of adults leave many children orphaned. Social networks may be weakened when care needs to be taken of a sick person or when a household member dies. Family members may experience social exclusion due to stigma. Orphans can overextend traditional extended family networks, financially and otherwise. Often the elderly have to care for others instead of being cared for themselves. AIDS affected households also often due to a decline in livelihoods are unable to keep up providing remittances to others elsewhere.

Natural resources include water, trees and land. Gender imbalances in many instances (typically in patrilineal systems) lead to women unwilling to marry the brother of their

deceased husbands, to lose their access to land. Often orphans as well, do not have the right to inherit land. Natural resource usage may change when an adult dies or when care needs to be taken of a sick person. Land may be sold or rented out in all HIV/AIDS affected households (This can thus also increase household income). Furthermore, natural resources may be neglected, leading to a loss in productivity and income.

Physical capital includes the infrastructure needed to support livelihoods, such as roads and buildings. Chronic illness or death in the household can induce the sale of productive assets and/or livestock to cover health care or funeral costs. Widows and orphans may also in the case of an adult male dying, lose their land. The intake of orphans may increase or decrease the amount of assets in the household, depending on the contribution of the orphans.

Financial assets include money or other financial resources, such as savings and incomes. The illness or death of household members could lead to a loss of labour and thus income. Often however, sick adults are cared for by other adults, which lead to even more labour being lost. Large families taking care of AIDS orphans are often overextended and strapped for cash. Funeral expenses may also erode financial assets. Orphans depending on their contribution to the household may increase or decrease income.



Food insecurity however also impacts on HIV/AIDS. As it will be argued in the next chapter, the bi-directional nature of this relationship may hold certain implications for interventions in food crises in high HIV/AIDS prevalence areas. Food insecurity leads to risky behaviour. A lack of food facilitates the spread of HIV by pushing desperate people into transactional sex. Migratory work is another avenue for the spread of infection. As members from food insecure households move to work away from home they are more likely to have unprotected sex (Save The Children, 2004:9). A lack of nutrition can furthermore accelerate the transition from HIV to AIDS and make people more vulnerable to opportunistic infections. Though it is disputed there is also some evidence that good nutrition decreases the chances of infection even during unprotected sex (Save The Children, 2004:8).

From the above it should be clear that HIV/AIDS in terms of its impact on food insecurity is making the effects of food insecurity worse for households affected by the pandemic. There should also be distinguished between households based on the extent to which HIV/AIDS is affecting it. The erosion of assets as represented above occurs to various degrees between households. Certain households are left destitute while others have the necessary means of coping with infection to various degrees. Logic dictates that if HIV/AIDS impacts on food security, by way of the erosion of assets, that a household able to prevent this erosion process will be food secure despite the fact that it is HIV/AIDS affected. These households are also less likely to be food insecure due to other reasons, as the possession of assets would help it avert food insecurity in general. As has been stated above, HIV/AIDS deepens existing vulnerability to food insecurity. It is thus one more factor impacting negatively on food security. What is clear is that not all HIV/AIDS affected households are food insecure as Greenaway (interview, 2005a) notes. Thus, wealth/asset ownership and preservation to a large extent determines the extent to which HIV/AIDS impacts on food security.

3.5.2 Aggregate level impacts

There seems to be broad agreement that HIV/AIDS is not driving food insecurity in the region at aggregate level (for example Greenaway interview, 2005a; Wiggins, 2005, Harvey, 2005). At national level Wiggins (2005) argues that the impact of HIV/AIDS relative to other factors in the crisis is quite small. He agrees with the notion that HIV/AIDS is a crisis in its own right. He however asserts that the loss in productivity at national level attributed to HIV/AIDS would not be more than 10%. The example of Zimbabwe with an infection rate of 25% in 2003 is used. Given an eight-year progression on average from HIV infection to death, with about three years of to some extent being unproductive due to illness (one year for initial infection and recurring illness and two years for illness with aids), he arrives at 9% of the population being unproductive at any given point in time ($3 \div 8 \times 25$). Wiggins does not cite sources to justify the use of his figures for the time span from infection to death, or the period a person will be sick and thus unproductive. However, Whiteside (2002:314) does note a period of about five to eight years from infection to full blown AIDS and Dixon et al (s.a:8) note that the approximate time from HIV infection to

death in the developing world is eight to ten years. Thus, Wiggins's assumptions seem to be justified. He does note that the taking in of orphans or caring for ill family members would expand this figure. However this is shrunk again by the fact that labour is only one factor of production, which he argues will make up no more than 50% of production. Thus, a 9% loss of labour will not translate into a 9% loss of production. Nevertheless, according to Wiggins no more than 10% of production would have been lost at any given period of time.

Table 3.4: HIV infection rate for 15-49 year old age group by country (%).

Country	Lesotho	Malawi	Zambia	Zimbabwe
HIV Infection Rate	28.9	14.2	15.6	24.6

Source: World Development Indicators 2003.

Table 3.3 indicates the prevalence rates Wiggins worked from. These are not the highest prevalence rates that have ever been reported, but they are the most recent ones available for the countries studied here. According to Walker, et al (2004:2185) methodologies of calculating prevalence rates and processes of validation have improved in recent years. Thus, these statistics are considered to be the most accurate available.

The impact of HIV/AIDS will vary between households. In order to calculate the impact at national level the number of AIDS affected households need to be known. How many households carry orphans and how many have chronically ill patients? This has especially been contested in the case of Zambia (for example Wiggins himself, 2003:30; Bolton, 2003). These statistics are not available. Moreover, there would be some variability amongst these households. Certain households might only have one sick adult. Certain might have one sick adult and two orphans etc. Even then each of these cannot be seen as a loss of labour, as one healthy adult could look after two orphans with ease, while neighbours can share caring duties. The fact should however be kept in mind that certain households are doubly burdened in that they might have an HIV positive member or two, but also the burden of care, thus

eliminating the productivity of more than one member. For the purposes of such a calculation those unable to be productive due to caring responsibilities should also be “considered HIV positive”. Wiggins does note this, though the necessary statistics for such a calculation again are not available.

One aspect that Wiggins’s analysis does not take into account is the erosion of certain social assets, for example the impact of stigma on food security discussed in chapter two. By only measuring the impact of HIV/AIDS on food security by way of losses to productivity, certain social assets are overlooked. However, the additional effects at aggregate level of this erosion of social assets might very well be relatively small, as many of these assets (for example remittances) again relate to some type of production, be it by someone else. Still it must be borne in mind that the issue of stigma around HIV/AIDS is a significant one and may well impact significantly at aggregate level, for example through the social exclusion of an increasing amount of child headed, AIDS orphan households. Thus, what all of this suggests is that though there is merit in Wiggins’ logic and one might argue it is in fact plausible, there is however still a lot of uncertainty around it that is impossible to clarify. Furthermore, though a loss of productivity of 10% cannot be considered to be driving food insecurity, it is still a significant loss of productivity that will contribute to the erosion of the ability of the state to look after its citizens, by way of for example health care and food imports or food distribution to the food insecure.

3.6 Conclusions

It seems clear that the impacts of climate and HIV/AIDS are not the most important forces at work. There is a vulnerability and thus susceptibility to the adverse effects of erratic rainfall and HIV/AIDS that precedes the impacts of these two factors. In terms of climate it has been noted that the 1992 drought was far more severe than the 2001 drought. Yet the consequences of the latter have been far more extensive, indicating an increase in vulnerability. Development in Southern Africa has been failing for decades. Thus, it seems more people were in a position of vulnerability in 2001 than there were with previous climatic shocks. This is observable both at the macro (for

example the ability of the state to look after its citizens) and micro levels (for example household income).

The debate around the impact of HIV/AIDS on food security at national level is arguably still wide open. However, there seems to be broad agreement that it is not the primary driver of food insecurity at that level of analysis.

In the case of Lesotho the country is over populated taking into consideration its available arable land. This has led to large-scale environmental degradation and loss of agricultural productivity. Its economy has to a large extent been dependent on the neighbouring South African economy as well as substantial amounts of foreign aid, since independence. Though alternative employment opportunities (for example in the textile industry) exist in Maseru, the massive spate of retrenchments on South African mines has led to major losses of remittances and thus also purchasing power.

In the case of Malawi structural adjustment has eroded market access, by way of severely limiting the work of ADMARC. The lack of private sector capacity has meant that it has not been able to perform the market regulatory tasks required under structural adjustment. In addition the liberalisation, including the limitations on ADMARC, as well as environmental degradation has facilitated an increase in rural inequality. Also in southern Malawi the effect of jobs being shed in the South African mining industry was felt.

The Zambian economy has been paralysed by debt over the last two decades more than any of the other countries included in this study. This has meant a lack of necessary government spending on necessary expenses like rural road maintenance and education. To this should be added the decline of the copper industry.

Food insecurity in Zimbabwe at national level is a relatively new phenomenon. It can be deduced that the fast track land reform programme is to a large extent to blame for food insecurity, both as a cause and exacerbating factor. In addition the lack of available maize was exacerbated by the manner in which maize prices have been regulated, serving as a disincentive for maize production. Zimbabwe has not been consistently declining to nearly the same extent as the other countries.

Once the region experienced food shocks in 2001, it was exacerbated by a slow initial response from the international community. To this should be added an evident lack of government ability in Zambia to co-ordinate the importation of shortfalls. In all of the countries a continuation of the underlying causes to the crisis inhibited recovery.

Climatic shocks can be seen as the primary trigger of the food crisis in general. However, political factors seem to have been the primary trigger in Zimbabwe and a very important trigger in Malawi. In the case of Malawi the strategic grain reserve was mismanaged, while in the case of Zimbabwe the “fast track” land reform policy coupled with maize price regulation have been the most important causes of decreased agricultural production and thus the availability of food. Climatic shocks however only exposed an unhealthy dependence of the majority of households on (mostly rain-fed) agriculture. It has limited availability by way of a lack of adequate supply. It has also influenced access to food by directly taking away the only means of livelihood of peasant farmers and inflating the prices of the limited available stock.

The impact of HIV/AIDS on food security at household level can be devastating. It is however necessary to distinguish between households based on wealth. Certain households still have the ability to cope with food insecurity and specifically the eroding effect that HIV/AIDS has on household assets. It has also been indicated that the relationship between HIV/AIDS and food security is bi-directional as food insecurity also facilitates the spread of HIV and the transition from HIV to AIDS.

Table 3.5 Summary of more important underlying causes, triggers and exacerbating factors of the Southern African Food Crisis by country

Country	Lesotho	Malawi	Zambia	Zimbabwe
Underlying causes	<ul style="list-style-type: none"> • Loss of remittances. • Loss of foreign aid. • Lack of agricultural land, combined with environmental degradation. 	<ul style="list-style-type: none"> • Inequality fuelled by initial favouritism, issues of land tenure, liberalisation and the 1992/93 drought. • Lack of agricultural land, combined with environmental degradation and population growth. • Loss of remittances. 	<ul style="list-style-type: none"> • Decline in commodity prices. • State debt. • Loss of smallholder credit due to SAPs. 	<ul style="list-style-type: none"> • The unresolved issue of land reform.
Triggers	<ul style="list-style-type: none"> • Floods • Hail and frost 	<ul style="list-style-type: none"> • Mismanagement of strategic grain reserve. • Consecutive droughts. • Floods 	<ul style="list-style-type: none"> • Consecutive droughts. • Floods 	<ul style="list-style-type: none"> • Loss of agricultural production due to fast track land reform. • Consecutive droughts.
Exacerbating factors	<ul style="list-style-type: none"> • Weak livelihoods, inhibiting access to food. • Depreciation of the Rand (2000-2002), inhibiting access. 	<ul style="list-style-type: none"> • Weak livelihoods inhibiting access to food. • A lack of knowledge of the extent of the crisis amongst donors, delaying assistance 	<ul style="list-style-type: none"> • Weak livelihoods, inhibiting access to food. • Government failure to import the food it set out to. 	<ul style="list-style-type: none"> • Land reform/loss of production. • Maize price regulation as disincentive to producers.

Chapter four

INGO responses to the crisis 2002-2005

4.1 Introduction

This chapter discusses C-SAFE's response to the recent Southern African Food Crisis. The chapter has the following objectives. This specific intervention, especially with regards to how it has been influenced by HIV/AIDS and rainfall variability is documented. The chapter furthermore analyses the most effective ways of addressing HIV/AIDS and rainfall variability in a food crisis in Southern Africa. The question is asked to what extent and in which ways HIV/AIDS and rainfall variability should inform a humanitarian intervention within the context of a food crisis in the region. Key constraints to an effective intervention by C-SAFE are discussed, in order to ascertain what the boundaries of an effective intervention with regards to addressing HIV/AIDS and rainfall variability as suggested in this chapter are.

4.2 C-SAFE's response to the crisis

4.2.1 What is C-SAFE?

C-SAFE was set up in 2002 to distribute food in three Southern African countries, Malawi, Zambia and Zimbabwe. In 2005 Malawi was replaced by Lesotho as recipient of C-SAFE aid. C-SAFE activities have two facets. Firstly, Targeted Food Assistance (TFA) is provided to households classified as "vulnerable". Secondly, Food for Assets (FFA) activities are conducted in order to build up productive assets for "vulnerable" households and communities. The term productive assets, defines FFA as opposed to the broader concept Food for Work (FFW). In the latter food is given to needy recipients in exchange for work that does not necessarily entail creating productive assets.

C-SAFE's primary donor is the United States Institute for International Development's (USAID) office for Food for Peace (FFP). This is a food aid only donor, which in itself has clear implications for what C-SAFE operations can entail.

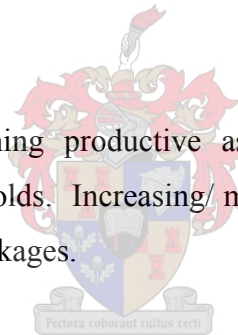
Other funding is obtained from member organisations and from the US Office for Foreign Disaster Alleviation (OFDA), since C-SAFE's third year (Goudswaard interview, 2005b).

HIV/AIDS is mainstreamed in the various C-SAFE interventions. Thus, programmes typically include an HIV/AIDS element. HIV/AIDS is an important targeting criterion throughout most C-SAFE countries.

C-SAFE operations are structured around the following three strategic objectives, generally referred to as SO's.

SO1: Improving and maintaining the health and nutritional status of vulnerable communities and households. Improving/maintaining the nutritional status of targeted vulnerable groups. Increasing support to chronically ill households affected by HIV/AIDS.

SO2: Increasing and maintaining productive assets among targeted vulnerable communities and households. Increasing/ maintaining agricultural production and improving market linkages.



SO3: Increasing resilience to food security shocks among vulnerable communities and households and strengthening community risk reduction strategies.

SO3 is not funded by FFP and is only addressed “through the backdoor” in the process of doing SO1 and SO2. Though there are similarities, the specifics of C-SAFE operations should be described separately for each country. This is due to how the consortium is set up. There is a Regional Programme Office (RPU) in Johannesburg, which only provides technical assistance to country consortia. Each country has a separate consortium, which decides on the specifics of operations. What this implies is that C-SAFE's intervention in each country has some unique features.

4.2.2 Country Responses

C-SAFE does not provide TFA in Lesotho. An agreement was made with the US government whereby the general response to the crisis in that country would be done

by the WFP, while C-SAFE would provide more value adding activities, such as FFA (Goudswaard interview, 2005b). In addition to the “trench garden”, which is used as a community productive asset in all C-SAFE countries, a new household asset called a keyhole garden has also been developed in Lesotho. This structure is a small garden raised from the ground consisting of various layers such as ash manure and gravel. The fact that it is raised from the ground means that old and sick people need not bend over to work in it. It requires very little water and can be irrigated with used water. C-SAFE Lesotho also provides training. This includes nutrition training, pest management and training with regards to intercropping. People are also trained to grow food all year round, by covering crops in winter. Community projects include water harvesting, erosion control and road rehabilitation. Soil rehabilitation is also implemented in parts (Moyo interview, 2005a).

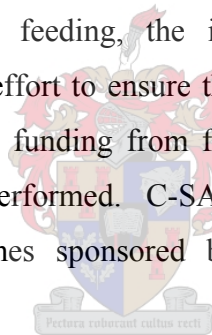
Figure 4.1: A keyhole garden



Source: www.c-safe.org

C-SAFE Malawi was in existence from 2003-2004. It was by far the largest country consortium. Besides CARE, WV and CRS, C-SAFE Malawi also included Emmanuel International, Save the children (US), Save the Children (UK), Africare, the American Red Cross and The Salvation Army. C-SAFE Malawi targeted chronically ill households, through home based care groups and Village AIDS Committees (VAC). Supplementary feeding of children under five as well as to pregnant and lactating women was provided from March to August 2004 (C-SAFE, 2004:12). Road rehabilitation, water harvesting and irrigation structures were the most common assets created. The communities chose the specific activities themselves, relating to

improved access to markets, hospitals and schools (TANGO International, 2004:29). Targeting for FFA for the most part was based on household food insecurity, vulnerability and the hosting of orphans (C-SAFE Malawi, 2004:16). C-SAFE Malawi also entered into a relationship with an already existing organisation, the Consortium to Cooperatively Guard Woman's, Infant's and Children's Nutrition Status through Emergency Supplementary Feeding in Malawi (Co-Guard). This consortium consists of Action Against Hunger and all of the C-SAFE NGOs. The UK Department of International Development (DFID) and OFDA are its financial backers. In accordance with this arrangement, C-SAFE Malawi provided the food commodities, while Co-Guard took the lead in screening, food distribution, nutrition and health education messages, as well as technical reporting. In addition to food aid, iron tablets, albendazole and vitamin A were also provided. These were contributed by the United Nations Children's Fund (UNICEF). C-SAFE and Co-Guard also trained health surveillance assistants and Growth Monitoring volunteers, on the management of supplementary feeding, the identification of beneficiaries and reporting. This was done in an effort to ensure the continuity of the programme (C-SAFE Malawi, 2004:10). With funding from faith-based organisations in the US, home-based care could be performed. C-SAFE Malawi also partnered with agricultural recovery programmes sponsored by OFDA (TANGO International, 2004:20).



C-SAFE Zambia has one additional member to the three core organisations, the Adventist Development and Relief Agency (ADRA). The Zambian consortium has engaged in activities such as talks and dramas about infection, prevention and treatment at FFA activities. Films have been shown at distribution sites and condoms have been distributed (Haahr interview, 2005a). Nutrition training for PLWHA as well as stigma training for staff have been conducted, along with regular workshops for both staff and their spouses on various elements of HIV/AIDS. In addition FFA activities have been linked with agricultural projects such as crop diversification, conservation farming and monitoring activities (TANGO International, 2004:20).

In year one of C-SAFE Zimbabwe, TFA was provided as well as supplementary feeding to children younger than five years. A limited FFA programme was also

implemented. In year two, general food assistance was reduced and FFA increased. The supplementary feeding for children was also ended. School feeding as well as hospital feeding was implemented with OFDA and the European Commission Humanitarian Affairs Office (ECHO) providing the funding. Irrigation and vegetable gardens were developed with those receiving supplementary feeding (TANGO International, 2004:20). Gardens are also created in schools. This is viewed as a “training ground” for young children in growing food. In year three FFA for PLWHA was launched. This entails the growing of non-labour intensive crops (Moyo interview, 2005a). C-SAFE Zimbabwe places emphasis on child headed households and large extended households in its targeting. Awareness is also spread as a component of the home based care system. This programme is executed by C-SAFE staff training primary care givers, who in turn then train secondary caregivers to take care of the sick. In addition talks are held at each distribution site or gathering in the community for thirty minutes.

One key intervention by C-SAFE in Zimbabwe has been the Marketing Assistance Pilot Project (MAPP). In accordance with this project, food aid has been distributed into the Zimbabwean economy, through the private sector. It was given to a selected amount of millers in the country who then sold it at below GMB set prices. Thus, those earning an income, but unable to pay the high GMB prices are given the opportunity to buy food at lower prices. At the same time market activity by entrepreneurs is encouraged (TANGO International, 2004:34).

4.3 HIV/AIDS in food crises

There seems to be a general agreement that HIV/AIDS does not drive food insecurity at aggregate level (for example, Wiggins, 2005; Greenaway interview, 2005a; Drimie interview, 2005). Thus, if this is the case, should HIV/AIDS really be taken into consideration in a food security emergency in Southern Africa? In this section it is argued that it might indeed. This argument implies addressing HIV/AIDS in itself and not as a means of curbing food insecurity. Thus, not using HIV/AIDS proxy indicators as indicators of HIV/AIDS and not as indicators of food insecurity, while making an effort to target HIV/AIDS affected households. In addition certain considerations for developing an intervention are provided.

4.3.1 Why consider HIV/AIDS in a food crisis

Southern Africa is a high HIV/AIDS prevalence area. It has a generalised epidemic, with high prevalence rates that are still rising. The impact of HIV/AIDS on this society extends far beyond short-term food insecurity. HIV/AIDS is a cross-cutting issue, which impacts on every segment of society (SADC Vulnerability Assessment Committee, 2003:20). Impacts on social change, pertaining to lower economic growth and social decay have been referred to above. Wiggins (2005:11) states that the HIV/AIDS crisis is far more devastating than the current food security crisis.

It can however be argued that special attention to this crisis is required in times of food insecurity. In spite of the fact that HIV/AIDS does not drive food insecurity at aggregate level, it still has a significant impact at that level. It also more importantly, has an even greater influence at the household level. Furthermore, as has been stated in the previous chapter, food insecurity also impacts on HIV/AIDS. Hunger drives people towards taking risks, such as engaging in transactional sex (WFP, 2003a). To this could be added the fact that food insecurity impacts on the transition from HIV to AIDS. Thus, a food security emergency response in Southern Africa might seek to hamper the transmission of HIV and the transition from HIV to AIDS.

In the literature reviewed for this study, the NVF hypothesis has been criticised extensively and at times dealt with quite harshly. The general consensus is that the NVF hypothesis is not an accurate reflection of the current situation in Southern Africa. This position is supported here. Though the processes described by De Waal and Whiteside seem to be substantiated by various other sources, cited in chapter two, the extent of these processes can be questioned. In other words HIV/AIDS is not driving food insecurity at national or regional level. The amount of HIV affected households and the extent to which they are affected seems to be the key disputed fact, with most arguing that it is not sufficient to validate a NVF scenario. One important aspect in this regard has however come to light in this thesis. That is the ongoing process of declining livelihoods and increased vulnerability. In conjunction with this should be considered the fact that the current epidemic in the region is yet to reach its peak. Prevalence rates are in fact still climbing. Thus, the question that needs to be answered is what are the possibilities of a NVF scenario ensuing at some point in the future, as infection rates increase and the ability of an increasing number

of households to cope with such a shock declines. Of course this will be determined by the extent to which the spread of HIV can be curbed as well as how the process of livelihoods degradation will pan out over time, taking into account the fact that the progress of the epidemic may also impact on the process of livelihoods degradation. In light of this an emergency response to food insecurity might look to consider HIV/AIDS in its programming.

4.3.2 Important considerations for an intervention

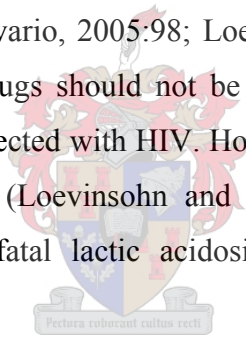
The provision of food aid does make sense in combating HIV/AIDS in a food crisis, as malnutrition facilitates the transition from HIV to AIDS and influences transmission by way of providing an incentive for risky behaviour. It could be argued that it is especially young women who need to be targeted in this regard. There are also various other virtues of providing food to help combat HIV/AIDS. A lack of food impacts on food security in other ways. Children might leave school, to help fill the gap in income for the household left by a sick parent. A child might also leave school to help care for a sick parent. The WFP (2003b) notes that the provision of food in schools can help keep children there. Furthermore, good nutrition helps combat opportunistic infections. According to the WFP (2003b) someone with HIV is twenty times more likely to develop TB than someone not infected, and an AIDS patient 100 times more likely. Nutrition in itself also helps to combat HIV/AIDS. Good nutrition limits mother to child transmission.

Following chapter three it is clear that the erosion of assets is a key concern when looking at the impact of HIV/AIDS on food security at household level. In this regard the fact that HIV/AIDS kills productive adults has to be taken into account. These households have to be helped back onto their feet. In other words the rebuilding or maintaining of livelihoods would inform an effective HIV/AIDS response from aid organisations. Thus, the concept of resilience building makes a lot of sense. However, food aid alone will not suffice.

According to the WFP (2003) it is also important where food aid is provided that it is of the correct nature and quality. The special nutritional requirements of HIV/AIDS patients should be taken into account. In households where a large amount of time is spent caring for the sick, it is useful for food aid to be easy and quick to prepare, as

well as being easy to eat and digest. Food security by definition implies that available and accessible food complies with certain minimum quality requirements. In addition as was stated in chapter two, HIV infected individuals need increased amounts of protein and energy as well. Various authors (Webb, 2003; Kadayala and Gillespie, 2003) however note that due to financial constraints, sometimes there is a trade off between quantity and quality food. It might be asked to what extent would this entail having to choose between fighting HIV/AIDS and fighting food insecurity, given that due to different nutritional requirements it will be possible to help more food insecure and not HIV affected people with inferior quality food, than PLWHA.

In addition, various authors (for example Loevinsohn and Gillespie, 2003:23; WFP, 2003a) note that ART when used is ineffective if a patient is malnourished. The WFP (2003a, 2003b) promotes the notion that good nutrition should be the first line of defence against HIV/AIDS. Various authors note that antiretroviral drugs are toxic (for example Anabwani and Navario, 2005:98; Loevinsohn and Gillespie, 2003:23). This is not to say that these drugs should not be taken. ART has been proven to increase the lifespan of those infected with HIV. However, ART might be harmful, to someone who is malnourished (Loevinsohn and Gillespie, 2003:23). Side-effects include diabetes, pancreatitis, fatal lactic acidosis and anaemia (Anabwani and Navario, 2005:98).

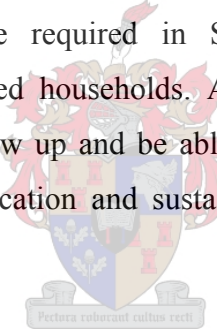


Webb (2003) states that food aid is a good basis for combating HIV/AIDS, but it should not be equated to medicine. This position it seems is the dominant one. Various authors (for example Griekspoor et al, 2004; Webb, 2003) advocate the use of services such as sanitation and health care including antiretroviral treatment (ART). C-SAFE has also to a limited extent supported people taking ART with food aid. Patients taking ART have however not been explicitly targeted by C-SAFE. The most significant initiative of this kind is co-operation with Presidents Emergency Plan for AIDS Relief (PEPFAR) initiatives in Zambia. Others obtained ARV's from government rollout, mission hospitals or family support (Greenaway, e-mail interview, 2005b). This seems to be an excellent way of treating HIV/AIDS in the context of a food crisis, given the type of resources C-SAFE had at its disposal. However, two C-SAFE countries, Zimbabwe and Lesotho are not PEPFAR beneficiaries (Fleshman, 2004). Thus, replicating such co-operation in other countries

would have been much more difficult in the absence of an ART rollout initiative of this magnitude. Nevertheless, it is clear that a useful tool for humanitarian aid INGOs who typically only have limited resources at their disposal, is to partner with complimentary (even purely developmental) services where possible. Greenaway (interview, 2005a) explicitly states that the provision of ART is the only way to bring down viral load (the extent of the infection). In terms of providing a comprehensive response to HIV/AIDS she also noted the following:

If there was food and no ART they're (HIV/AIDS patients) gonna fall. If there was ART and no food they're gonna fall down. If there was food and ART, but there's no livelihoods, there's no way to make an income, there's nothing to do once your food secure and you've got your health back, there's still nothing?, They're still gonna fall down.

Harvey (2005: 35) also supports the idea of livelihoods support to combat HIV/AIDS by humanitarian actors. Thus, it could be argued that food aid, AIDS medication and resilience-building activities are required in Southern Africa to preserve the livelihoods of HIV/AIDS affected households. Adults need to be kept alive long enough so their children can grow up and be able to look after themselves. This is done by way of access to medication and sustainable livelihoods, so that healthy lifestyles can be followed.



As the impact of HIV/AIDS varies between households a logical next question is how should these needy households be sifted? Save the Children (2004:6) warn against blanket HIV/AIDS (by way of demographic criteria/proxy indicators) targeting in a food crisis.¹

This is so because there are many HIV/AIDS affected households that are food secure and many food insecure households that are not HIV/AIDS affected. Another criticism against demographic targeting is the possibility that it might provide an incentive for households to take in orphans, in order to obtain food aid, without providing the necessary care to these children (Save the Children, 2004:27).

¹ To recap, proxy indicators for HIV/AIDS include households with chronically ill members, large households as well as elderly and child headed households.

Save the Children propose that cognisance be taken of the status of the assets of households. These comments are similar to the findings of the C-SAFE/WFP commissioned Community Household Survey (TANGO International, 2005), which suggested that an asset base indicates resilience to food insecurity. In other words households need to be able to access available food. If they are able to exchange assets for food in a non-erosive manner they will be food secure and their food security will be sustainable. With regards to combating HIV/AIDS in a food crisis Greenaway (interview, 2005a) notes a distinction should be made between households that are “going to get by in any case” and households that are not. Demographic targeting, in other words targeting HIV/AIDS affected households by itself will also not be enough in this regard. Thus, it seems clear that asset ownership is an important criterion for targeting assistance towards fighting food insecurity as well as HIV/AIDS. Accordingly figure 3.1 can be expanded to include this aspect.

Figure 4.1 (below) indicates that asset ownership is important for targeting various types of aid in both the food security and HIV/AIDS crises. In the case of food insecurity asset ownership has been proven to be the most reliable criteria for targeting aid (TANGO International, 2005). In the case of HIV/AIDS, asset ownership is still important, although HIV/AIDS affected households still need to be identified beforehand, after which an analysis of their asset base/livelihoods can be done.

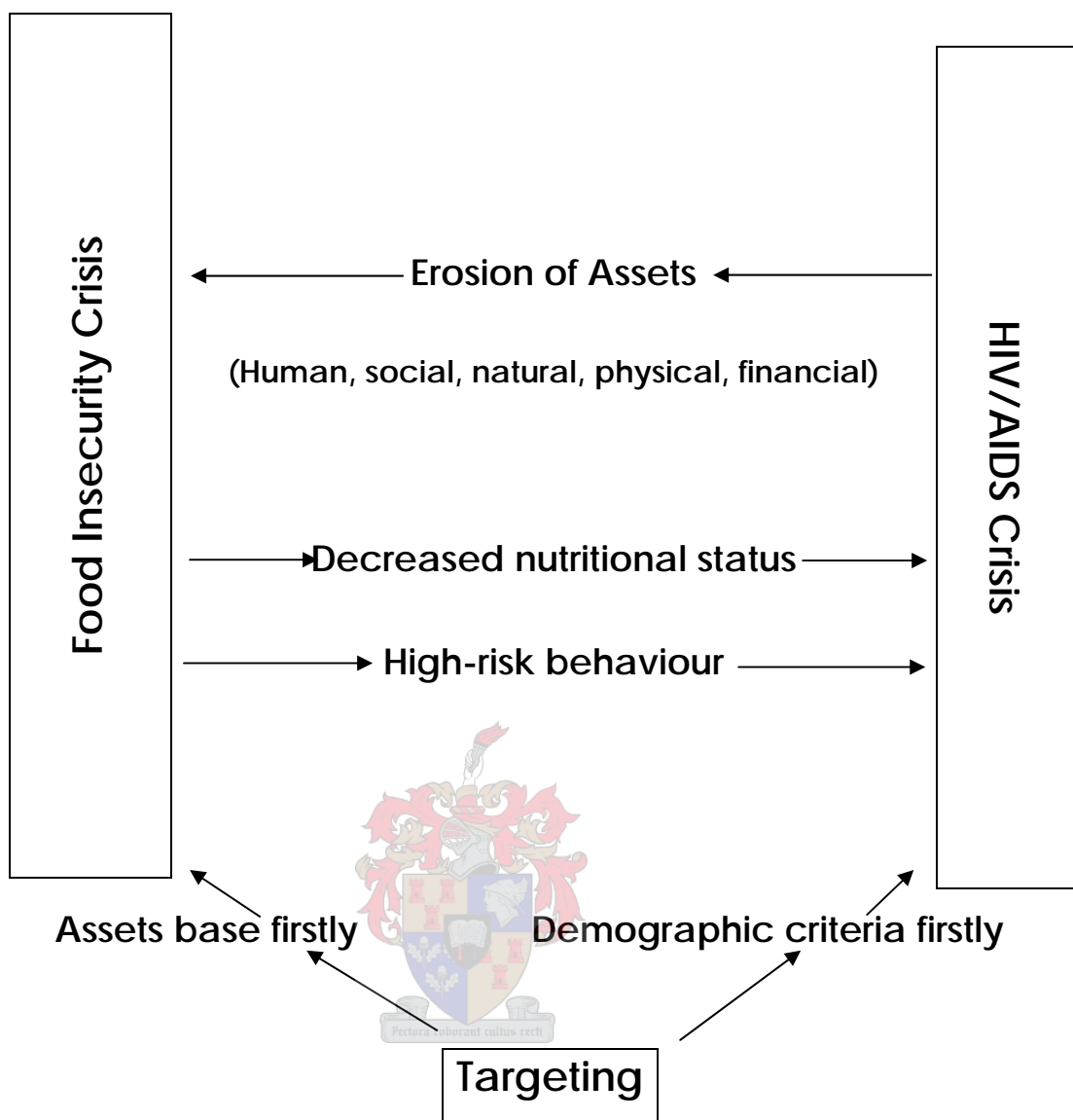


Figure 4.2: The relationship between two concurrent crises (Food insecurity and HIV/AIDS) and its implications for the targeting of interventions.

The above seems to indicate that coping with HIV/AIDS in the long-run is also an issue of livelihoods. Those households that are better endowed are more likely to cope. Thus, asset creation and in general the promotion of livelihoods is a key strategy not only in addressing food insecurity, but also in addressing the inability to cope with HIV/AIDS.

The process of building up livelihoods is potentially a very long-term endeavor. Various authors (for example Van Lierre, 2002:2; Loevinsohn and Gillespie, 2003:2)

note that HIV/AIDS is a long-term developmental problem. Thus, it only seems logical that a long-term response is required. Harvey (2004:23) notes that current humanitarian approaches may not be appropriate given this long-term nature of the epidemic. However, he also notes that HIV/AIDS is a humanitarian crisis, as the core of the humanitarian agenda relates to saving lives and alleviating suffering. Thus, essentially HIV/AIDS calls for relief and developmental assistance. The latter should ideally be a long-term intervention. This statement seems to provide some justification for following a developmental relief approach.

A few more issues need to be considered. Stigma leads to the marginalisation of HIV/AIDS affected households. Being discreet in targeting recipients of aid would therefore be a good idea in this regard (Harvey, 2004:3). C-SAFE performs various activities to address the issue of stigma. They include information dissemination at distribution points, messaging in schools, clinics and public gatherings, including headmen, local leaders and traditional healers in sensitisation, training of targeting aids, relief committees, and Home Based Care (HBC) workers, drama performances, persons living positively encouraged to address stigma issues, mobile video shows to introduce stigma reduction discussions as well as chronically ill exchange visits where people can see they are not the only ones affected (C-SAFE, 2004:5). The issue of stigma has also to some extent been addressed in FFA activities. According to C-SAFE (2005:7) working together between community members in FFA helps conquer stigma.

The gender element in HIV/AIDS has been highlighted throughout the literature and discussed in chapter two. As examples of interventions in this regard, C-SAFE did some programming to prevent mother to child transmission as well as with regards to livelihoods training and FFA activities (Greenaway interview, 2005a). However, one important issue that seems to be of critical concern, while at the same time not technically fitting in the humanitarian mandate, relates to the loss of land, of AIDS widows and children, including orphans, especially in patrilineal systems. Losing land, a productive asset, often compromises long-term food security and may facilitate the spread of the virus due to transactional sex. Other unseen effects often labelled as “the intergenerational loss of knowledge”, referred to above, may also

occur. However, attempting to address this issue without violating the notion of cultural relativity and evoking extensive criticism might be very hard (if not impossible) to do and would imply longer-term action.

Kadayala and Gillespie (2003:41) note that capacity building is a requirement in addressing HIV/AIDS. At local level NGOs can do this during an emergency response, as part of a strategy of addressing underlying causes of food insecurity. Such a strategy makes a lot of sense in the Southern African context where government capacity is a major constraint in many regards (as per for example UN, 2003). Thus, it is clear that an extremely broad set of skills is required to combat HIV/AIDS. A lot of it, it may be argued do not quite fall within the traditional humanitarian mandate.

4.4 Climate

As was stated in chapter two, long-term forecasts, based on modelling indicate a possible increase in the severity of droughts and floods in the region. Thus, it is something that arguably needs to be planned for and where possible addressed preemptively. As Vogel (2005:30) notes, agriculture (which is mostly rain fed) does not only play a major role in the formal economy, but is also responsible for maintaining local livelihoods. In addition rainfall in the region is highly unpredictable, complicating planning. Thus, though the crisis being studied here is arguably much more complex than merely being a climate induced crisis, it is also clear that this is not the first time food insecurity has accompanied periods of extreme rainfall variability. Vogel (2005:31) notes that agricultural losses associated with periods of climatic shock, for example in 1991/92 impact severely on GDP.

With regards to mitigating droughts and floods, various strategies have been proposed for minimising the effects of variable rainfall (for example Tumbare, 2004; Amor, 2004 and Koro, 2004). These include: planting drought resistant crops, saving rainwater in times of less than adequate rainfall, better forecasting, synchronising run-off management in various dams and reservoirs and promoting forestation also help protect watersheds.

Benson et al (2001:207) name various ways in which relief and development NGOs have in the past addressed natural disasters. These include training the public, helping build preparedness and to combat environmental degradation, providing micro finance as well as research and advocacy. These authors (2001:209) also state that there are certain key facts that need to be considered by NGOs in intervening in disasters in developing countries. The gender element of natural disasters, namely that women are more severely affected by disasters than men, due to their lower economic standing needs to be addressed. C-SAFE has partially addressed this by making female-headed households a targeting group (Horstmeier interview, 2005c). Due to the erosion of traditional knowledge, including with regards to natural disaster mitigation (which is eroded by AIDS as well), NGOs might help maintain those knowledge bases. Risk assessments regarding rainfall variability might also be conducted (Benson et al, 2001:209).

Benson and Twigg (2004:10) propose a strategy of mainstreaming disaster risk in areas where disasters are especially prevalent. To recap, the concept of mainstreaming relates to bearing the specific issue at hand in mind in all activities planned by a relief agency. With regards to the Southern African food security, clearly mainstreaming more than one issue (as it has also been proposed with regards to HIV/AIDS and is in fact mainstreamed by for example C-SAFE) might be problematic for any one agency. Limitations with regards to available resources would surely come into play and it might be hard for the specific aid agency to maintain focus.

As has been indicated in chapter two, variable rainfall in Southern Africa is likely to persist. The immediate impact of such shocks on the livelihoods of millions of people is devastating. This is not so, because the drought or flood is severe, but because of the underlying vulnerability of so many people. Of course there are water management related activities that can be employed, such as building water harvesting structures and planting trees in order to limit the effects of floods. However, dependence on rain fed agriculture is so widely spread that the above stated activities on their own will not be enough. As with HIV/AIDS, it seems the capacity of people to deal with such shocks has to be built up. However, unlike HIV/AIDS the extent of rainfall variability cannot be limited by an intervention. Thus, efforts might need to

focus on mitigating its effects. To a large extent this is how C-SAFE has approached the issue of variable rainfall, in as far as the resources it had at its disposal allowed.

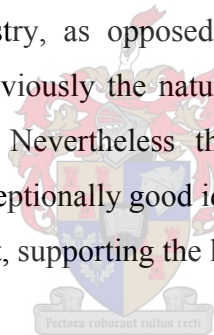
According to Goudswaard (interview, 2005a) recurrent shocks, such as drought, are addressed by building livelihoods and resilience. Thus, communities' and households' ability to deal with the consequences of these factors are built up. This strategy correlates broadly with facts presented in this thesis, relating to decreasing livelihoods as well as the fact that rainfall variability cannot be reduced, but merely managed. However, the approach by C-SAFE in this regard correlates with SO3, the one SO not directly funded by FFP. Thus, it has for the most part only been addressed indirectly, through FFA activities.

Some of the activities have however had direct relevance to drought mitigation. Water harvesting structures and irrigation both relate to increasing the supply of water to agricultural activities. Keyhole gardens help conserve water. In HIV/AIDS prevalent areas, activities need to compensate for a loss of labour. In light of the fact that it is clear that resilience building should be a key strategy in mitigating the effects of variable rainfall, both currently and in the future, it could be asked: to what extent do C-SAFE activities fall into the description of developmental relief, specifically the more development orientated objectives associated with this concept? C-SAFE typically provides training on cropping techniques, such as crop diversification. In addition activities such as conservation farming and water harvesting, clearly comply with the objective of contextuality. In a context of water scarcity and a lack of diversification in the crops grown, such activities are necessary. Gardens in schools also indicate an awareness of the context, in that many orphaned children need to be educated in contributing to their own food security. In Malawi the communities at times chose the activities to be performed. This keeps with the objective of strengthening local participation and ownership of projects by the communities. Road rehabilitation has been another common C-SAFE activity. Given the isolation of so many farmers from the market, such activities definitely have potential developmental impacts.

Crop diversification and specifically moving away from the dependence on maize also seems a logical tactic. C-SAFE does employ this. Haahr's (interview, 2005a)

comment that those who grew a more diverse set of crops were less severely affected by drought in Zambia comes to mind. Chapter three also highlights the fact that maize is not very drought resistant. Thus, moving away from such a heavy dependence on maize as a means of income and household food would be a logical tactic, though it is complicated by issues of culture noted above. Still where possible, even moving towards cash crops that can be used to buy maize, provided there is sufficient availability, might be worth considering.

With regards to building resilience, there have also been comments from various authors on the advisability of food aid as opposed to other types of aid, most notably cash. Mousseau (2004:8) reports that the extensive response in terms of food aid from the aid industry led to oversupply, which negatively affected national economies. The introduction of cash has the advantage of addressing the issue of a lack of access to available food, without distorting the local market. Recipients can buy local surpluses, thus supporting the local industry, as opposed to potentially undermining it, by consuming foreign food aid. Obviously the nature of C-SAFE's funding eliminated this option to a great extent. Nevertheless the MAPP project implemented in Zimbabwe can be seen as an exceptionally good idea, in addressing a lack of access to food, while be it to limited extent, supporting the local industry.



4.5 Constraints to effective intervention

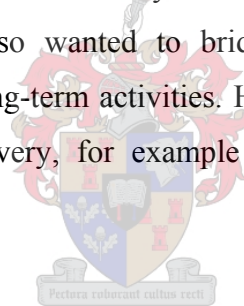
The purpose of this section is to document constraints to C-SAFE interventions in the recent Southern African Food Crisis. Reference is made to issues that made it more difficult for C-SAFE to implement the activities it wanted to. These include the limitation of humanitarian space by governments, the consortium structure, information dissemination and donor restrictions. All of these are related back to intervention strategies with regards to addressing HIV/AIDS and variable rainfall in a food crisis, highlighted immediately above. This chapter uses C-SAFE as a case study helping to provide insights into what an effective intervention in a food crisis in Southern Africa accompanied by variable rainfall and HIV/AIDS would entail. Thus, it makes sense to document constraints C-SAFE experienced some of which might be region/country specific. These would imply boundaries or limitations to what is possible in intervening in the region and constraints that might limit an effective

response with regards to HIV/AIDS and variable rainfall in a food crisis in the region. The reader should however not misinterpret this section necessarily, as a disagreement or agreement with the decisions made by all or any of the governments mentioned, the primary donor, specific C-SAFE agencies or C-SAFE in general.

4.5.1 Donor restrictions

Due to the nature of C-SAFE's primary donor it would have been predictable that the nature of its activities would be limited if significant additional funding was not obtained. To a large extent this is exactly what happened. There seems to be a general agreement within C-SAFE that broader funding would have enabled a more appropriate intervention.

C-SAFE initially wanted to work in all six countries in the region affected by food insecurity. The primary donor however only allowed operations in the three worse affected countries. C-SAFE also wanted to bridge the gap between relief and development, by doing more long-term activities. However, many such activities are not possible. Agricultural recovery, for example is hampered by an inability to provide starter packs.



In 2003 C-SAFE funding was only approved very late. This severely inhibited SO2 activities. The situation was exacerbated by the lack of funding for capital equipment such as tools and technical assistance. At times in Malawi C-SAFE had to rely on communities to provide tools for FFA projects. This did however have the advantage of an increased feeling of ownership of projects by communities. Malawi and Zimbabwe did acquire funds from the respective NGOs to purchase tools. Nevertheless, in Zimbabwe a lack of complementary funds still meant scaling back FFA activities (TANGO International 2004:34).

There have been complaints from within C-SAFE that more could have been done in the past and even now to obtain additional funding from elsewhere. This was however made more difficult by the perceived image of C-SAFE as a USAID programme (TANGO International, 2004:20; Goudswaard, interview 2005a). NGOs

that are not in the lead in a particular country have at times been reluctant to contribute funds to the consortium, as the consortium identity of the project would imply limited credit to the individual agencies.

What makes the limited amount of alternative funding difficult is its impact on the amount of development work that can be done with predominantly food aid (including resilience building to the shocks of variable rainfall and HIV/AIDS). One interviewee explicitly stated that the intervention (at least in Zambia) was too much skewed in favour of relief at the expense of development (Haahr, interview 2005a). In a project evaluation in 2004 TANGO International noted the following:

The USAID/FFP funding restrictions have placed significant restraints on the consortium's ability to implement program activities intended to achieve Strategic Objectives 2 and 3. This made it difficult for each of the country consortia to implement a true developmental relief program. Essentially the project operated as a relief intervention (TANGO International, 2004:5).

In Malawi many felt that the fact that SO3 was not funded by FFP inhibited the smooth exit of the C-SAFE programme and the transition to the Development Assistance Programme (DAP), which would have included greater resilience building activities. C-SAFE Malawi eventually decided to exit the programme earlier due to its predominant orientation towards relief. According to Kalonge (interview 2005) it was felt that:

...C-SAFE as it was funded, limited our response to relief while our collective knowledge and experience informed us that Malawi needed development strategies if lasting livelihood improvement were to be achieved.

In 2004 Zambia had a national surplus and requested that food be purchased in the north, which had a surplus, to be distributed to the south, where there was a shortage. This is however not possible with the primary donor C-SAFE has, as USAID food aid has to be purchased in the USA (Goudswaard, interview 2005b). This can be contrasted to the so-called "triangular aid" method practised by the EU, which entails purchasing food in the region it is needed. The latter has the advantage of not running the risk of undermining local food markets and producers, which in turn of course has

the potential opposite impact to resilience building, possibly increasing vulnerability to some of those who were not vulnerable initially.

Funding restrictions for C-SAFE severely inhibit SO2 and especially SO3 activities. As has been argued above activities falling within these two categories, i.e. building assets and resilience is required in the region in order to mitigate the effects of variable rainfall and limit the impact of HIV/AIDS.

4.5.2 Consortium structure

C-SAFE's consortium structure has had both positive and negative impacts on the intervention. Three different INGOs with different operating procedures and organisational cultures do provide for the combination of various strengths and best practices. For example, other organisations were exposed to and could learn from the lead organisation in Malawi (CARE)'s generic monitoring and evaluation tools, which they did not possess (C-SAFE Malawi, 2004:7). Similarly in Malawi most of the NGOs did not have their own civil engineers. However, CARE could provide training in basic road maintenance at no extra cost (C-SAFE Malawi, 2004:21).

There is however also an accompanying possibility of disagreement in such a consortium. Initially the formation of C-SAFE was a slow process. When it became clear that there would be one lead agency for the entire project, a debate emerged between the different organisations on what it meant to be in the lead. Interaction between the legal entities of the three lead agencies went on for months before an agreement was arrived at (TANGO International, 2004:17).

C-SAFE operates on the principle of consensus building. All three core agencies have an equal vote. Achieving this consensus can however take a very long time. There is no central authority. In an interview the RPU manager noted the following:

I can't say make this happen, because people have their own boss who gives them an agenda of what they should and shouldn't do (Goudswaard, interview, 2005b).

He also noted the following:

I think you know we can show limited success in some of our resilience building...
...Transfer of appropriate technologies, like conservation farming, keyhole gardens,

trench gardening, some of the water harvesting stuff, those kinds of things... Have we realized the potential that we could have?, No... to be caught up in our own consortium, trying to figure out how we are going to work together, yes that slowed us down... (Goudswaard interview, 2005b).

For NGOs having to change their operating procedures in order to comply with agreed upon procedures within the consortium, have at times been a point of irritation. For example, in Malawi FFA staff preferred the operating procedures they were used to, even though it did not comply with prior agreed upon procedures for the consortium (C-SAFE, 2004:15). The impression of country staff in the past that decisions need to be approved by the RPU has at times inhibited quick context specific action (TANGO International, 2004:18).

It has also been noted that the lead agencies in each country often neglected C-SAFE in relation to their country office, as technical staff often had to be shared between C-SAFE and individual agency offices. Furthermore, those in charge often lacked the authority to make decisions on behalf of the lead agency, thus operations were slow to progress (TANGO International, 2004:36).

It might be argued that increased co-operation of this type, combining an even more diverse set of organisations is needed if one is to effectively address all the complexities of HIV/AIDS and build real sustainable resilience while providing short-term relief. However, from the above it is clear that co-operation within a consortium can be difficult. The limited focus of individual INGOs however make the idea of working together between various partners offering complementary service appealing. As was indicated above, a food aid distribution INGO for example co-operating with a ARV roll-out initiative, at least theoretically makes a lot of sense in addressing HIV/AIDS in a food crisis. Similarly NGOs with more appropriate experience with development might work very well with a food aid distribution mechanism in times of crisis, when communities might need to be helped from a position of food insecurity to one of greater resilience. It might however be argued that more comprehensive agreement with regards to the functioning of such an organisation is needed. This

could however be difficult, as it seems that having one overall boss (as is arguably needed) might not be acceptable to partners that do not occupy this position.

4.5.3 Information dissemination

Arguably one of C-SAFE's biggest achievements has been its learning centre. A conscious effort is made to learn with regards to best practices in the settings interventions have taken place in. This information is then made available to all online.² However, more than one staff member interviewed for this study noted that both learning within the organisation as well as staff capacity is still a problem. Variations in targeting in Malawi have been explained in terms of staff members attending C-SAFE meetings, not disseminating information to the field level. Other reasons provided include the fact that staff members simply do not have the time to learn (Horstmeier interview, 2005c) as activities are typically done under significant time constraints. In addition the environment, funding constraints, attitudes regarding previous experience, the pressure of work, simply not applying knowledge as well as institutional structures at times constrained effective intervention. As Horstmeier (2005c, interview) notes, workers who only know relief, in general find it difficult to adapt to more developmental activities. In addition certain consortium partners have at times felt that they did not receive all the technical support from the RPU they needed. Due to reporting requirements to FFP, the RPU often has its attention divided (TANGO International, 2004:4). The problem in this regard is that treating HIV/AIDS is a very complex task, especially in a food crisis. Examples in this regard include the targeting of aid, the exact timing for when ART is started for a particular patient and providing the right quantities of food to AIDS affected households. Thus, staff competency and support to staff members would be of cardinal importance in order for an intervention to be effective.

4.5.4 Humanitarian space

The issue of humanitarian space relates to the extent to which governments of countries in which (I)NGOs intervene allow these organisations to perform their chosen activities. In the case of C-SAFE's operations in Southern Africa this relates to the following issues: Genetically Modified Organisms (GMO's) and the specific

² To access this information visit www.C-SAFE.org and click on the learning centre icon.

requirements of the Zimbabwean government. This issue might directly impact on the timely delivery of food to malnourished PLWHA.

Various countries in the region refused to accept genetically modified food aid. The reason for this is twofold. Zimbabwe and Malawi expressed its concern that this type of food aid might contaminate indigenous crops, a biodiversity issue. Tied to this was the fear that they might later not be allowed to export these contaminated agricultural products overseas, specifically the EU, even though the EU promised not to ban Southern African exports for this reason (Zerbe, 2004:599-600). Maize is an openly pollinated crop. If it grows somewhere it could pollinate with other maize crops growing nearby. Thus, there was the fear that GMO crops might pollinate with indigenous crops, should anyone plant it, something that was considered to be quite likely. Initially Zimbabwe went as far as to ban the moving of GMO aid across its territory by road or rail (Nevin, 2002). However, Malawi and Zimbabwe at a relatively early stage accepted this food on the condition that it was milled. USAID however refused to mill the maize. South Africa agreed to mill imports entering the region via its territory free of charge. However, food aid entering Malawi, via Mozambique provided a lot of problems, especially for C-SAFE, which has no means of acquiring food, other than through FFP. This led to extensive delays. The milling process also made crops more expensive (TANGO International, 2004:4).³

The GMO issue has proven to be a major constraint in the case of Zambia. In addition to contamination concerns, Zambia questioned whether GMO food was fit for human consumption. Zambia refused to accept any GMO maize, until a team of Zambian scientists studied its potential health consequences. It was finally refused based on concerns regarding safety aspects such as toxicity, allergenicity and antibiotic resistance. Thus, C-SAFE Zambia cannot use maize, oil and Corn Soy Blend (CSB). Instead bulgur wheat and commodities such as pinto beans and sorghum have been distributed. Bulgur wheat however poses some digestive problems for AIDS patients. Nevertheless, after some nutritional education and cooking demonstrations, it was widely accepted (TANGO International, 2004:37).

³ According to Food for Peace losses due to milling are between 30%-40% (TANGO International, 2004:42). However, it might be argued that milled food better facilitates fortification, which might be a very good idea within the context of HIV/AIDS.

In Zimbabwe the government has consistently constrained intervention by placing restrictions on NGOs. C-SAFE is prohibited from providing general food distributions in that country (Goudswaard interview, 2005a). Only school feedings and FFA activities are permitted. This again relates to issues of control over the national food supply referred to in chapter three. To this should be added the economic situation in Zimbabwe. Cash and fuel shortages have at times made it very difficult for C-SAFE to pay commodity labourers and to transport fuel and personnel (TANGO International, 2004:36).

If food is the basis for effective treatment of HIV and AIDS, the provision of food in a food crisis, in a high prevalence area is a logical action. However, if food aid from one of the largest food aid donors in the world is rejected by certain governments, effectively responding to food insecurity and HIV/AIDS becomes an even greater problem for (I)NGOs. Furthermore, in the case of Zimbabwe with restrictions on TFA and FFA activities, not only is nutrition impacted on, but also resilience building.

4.6 Conclusion

This chapter set out to study C-SAFE as an example of a humanitarian response to the Southern African Food Crisis. The following objectives were highlighted. The chapter discussed the manner in which C-SAFE addressed the issues of recurrent droughts and floods and HIV/AIDS. The question was asked to what extent and in which ways HIV/AIDS and variable rainfall should inform a humanitarian intervention within the context of a food crisis in the region. Constraints to interventions were highlighted so as to better facilitate future planning.

It was suggested that HIV/AIDS might be an appropriate consideration in interventions in food security emergencies in Southern Africa, as leaving it unchecked in a food crisis, might fuel an escalation in prevalence and mortality rates. It might also hamper sustainable household food security by way of creating more dependents. In this regard certain strategies/considerations were highlighted. New infections can be partially prevented by the delivery of food aid, as it offers mostly young girls less incentive to move into transactional sex. Similarly, food aid can stunt the transition

from HIV to AIDS and to help keep alive productive adults and thus help preserve livelihoods. However, it was also highlighted that ART is a necessary supplement to food aid if one is to effectively address HIV/AIDS and help avert future household food insecurity. ART is the only way to bring down viral load and thus, is essential in prolonging lives and household livelihoods. Thirdly, livelihoods need to be built up, so that HIV positive people can continue to live healthy lives once humanitarian interventions have ended. It has been stated that the targeting of interventions at household level need to take into account household assets/livelihoods in order to identify those in need. Households with sufficient productive assets will be able to absorb shocks to food production and would be more likely to deal with the longer-term effects of HIV/AIDS. An awareness of stigma and institutional incapacity was also suggested.

This chapter has also indicated that rainfall variability is a necessary consideration when intervening in a food crisis in Southern Africa, due to the large-scale dependence on rain-fed agriculture. However, rainfall variability cannot be limited, its effects have to be mitigated. Water management strategies and initiatives, such as crop diversification water harvesting and planting trees, the case of mitigating the effects of floods, may help mitigate the effects of variable rainfall. However, it has also become apparent that also this issue requires longer-term interventions, aimed at achieving some sort of sustainable livelihoods.

Four key constraints to interventions were highlighted, most importantly funding constraints. C-SAFE it could be argued was and is overly dependent on food aid in addressing its objectives. This has severely limited comprehensive intervention with regards to HIV/AIDS as sufficient partnering with complementary medical services could not be found. Secondly, the consortium structure and specifically, issues relating to decision making and operating procedures were highlighted. This has delayed effective action. Lessons with regards to operating in a consortium and consortium structure may be drawn from this experience. Thirdly, issues of information dissemination and staff competence were highlighted. HIV/AIDS is a very complex crisis to intervene in, even more so when it coincides with a food crisis. Time constraints make learning very difficult. A solution to this problem however seems still quite far off. The fourth constraint is one of limited humanitarian space.

The GMO issue is especially important in this regard. Though Malawi and Zimbabwe accepted milled maize, it added costs that might have been spent more effectively. In the case Zambia C-SAFE are still not allowed to deliver any GMO food. Only limited evidence of obstacles in this regard have been reported, though not being allowed to use GMO food in Zambia at all and only in milled form in other countries should be a consideration when planning an intervention encompassing distributing the primary tool in combating HIV/AIDS. Limitations with regards to activities allowed by the Zimbabwean government were also highlighted. Again this not only applies to TFA, but also to FFA.

The building of resilience as it has been argued is required both in terms of addressing HIV/AIDS and rainfall variability seems to require broader expertise than purely humanitarian. C-SAFE was used as a case study of an intervention into the Southern African Food Crisis. As an example of applying developmental relief in a CHE that fits the broader definition of the word, it can be argued that it is not a very good one, as it for the most part purely functions as a relief intervention. Thus, though conceptually it can very well be argued that developmental relief might be applied to humanitarian interventions in food crises in Southern Africa, due the type of (both relief and development at the same time) needs that exist, notwithstanding complications pertaining to the absence of a “normal state” highlighted in chapter two, its practical use is yet to be proven.

Chapter five

Conclusions

5.1 Introduction

This study was an exploratory investigation of the Southern African Food Crisis in the period 2001 to 2005. This timeframe was defined in terms of a specific humanitarian intervention. The intervention by C-SAFE has however subsequently been extended one more year. The study specifically considered the importance of HIV/AIDS and climate in causing food insecurity as well as the extent to and manner in which these two factors ought to inform humanitarian interventions in food crises in Southern Africa. Constraints to an effective intervention within this context were also considered.

5.2 HIV/AIDS

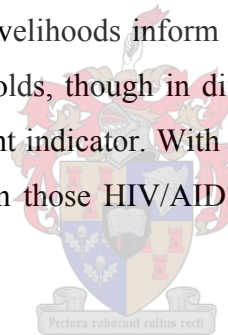
5.2.1 Impact

The impact of HIV/AIDS on food insecurity can, depending on the context, be viewed as that of an underlying cause, trigger or exacerbating factor. HIV/AIDS increases vulnerability to food insecurity. As chapter three indicates HIV/AIDS has a significant impact on food insecurity in Southern Africa, without being the key driver behind it. In this regard issues of underlying vulnerability are an important consideration. The impact of HIV/AIDS on food insecurity can however be devastating at household level.

The relationship between food security and HIV/AIDS is a bi-directional one. At household level, the main impact of HIV/AIDS on food insecurity is by way of eroding household assets. At the same time food insecurity facilitates the spread of HIV and the transition of HIV to AIDS. The former occurs by way of transactional sex and increased mobility of those seeking employment. The latter occurs due to a decline in the resistance of malnourished immune systems to infections.

5.2.2 Response

In terms of responding to a food crisis in a high HIV/AIDS prevalence region, it is suggested that it is a necessary consideration, in order to avert escalations in prevalence and mortality rates as well as promoting sustainable food security. Food insecurity facilitates the spread of HIV. Thus, a humanitarian response to a food crisis might take into consideration certain vulnerable groups, such as young women, who might revert to transactional sex as a coping mechanism. Helping to keep HIV positive adults alive, long enough for their children to grow up, might limit the unseen, social impacts of HIV/AIDS, mostly relating to social decay. It will also prevent food insecurity brought on by a lack of the transition of knowledge to cope with food insecurity, to orphans, as well as keeping children in school. Children often leave school, in order to look after dying adults or siblings. Lastly, livelihoods need to be improved, in order to provide people with a means of sustaining a healthy lifestyle. These facts clearly have certain implications for the targeting of households. It is proposed that asset ownership/livelihoods inform both the targeting of food insecure and HIV/AIDS affected households, though in different ways. With regards to food insecurity it is the most important indicator. With regards to HIV/AIDS it serves as a means of distinguishing between those HIV/AIDS affected households in need and those that are not.



It is also suggested that resource constraints of individual organisations might be negated by way of co-operation between organisations offering complementary services, for example food aid mechanisms, ARV roll-out initiatives and developmental initiatives. Preferably all of these will be co-ordinated. However, co-operation between various organisations may produce its own complications, for example with regards to decision-making and organisational prestige, as was observed. Thus, great care would have to be taken in organising such co-operation.

Comments have been made on staff quality being a constraint experienced by C-SAFE. Clearly HIV/AIDS is a very complex matter and the quality of staff knowledge should be a key consideration when it comes to addressing HIV/AIDS in a food crisis. HIV/AIDS requires more than merely getting the food out quickly. A lot of thinking on the spot seems to be required, in order to customize strategies for individual communities and households. Though this might arguably be a challenge for even the

most knowledgeable individuals, extensive training by NGOs and even hiring staff with much greater competencies than had previously been required might need to become the new (much more expensive) norm.

5.3 Climate

5.3.1 Impact

The historical approach taken in section 3.1 indicates that the Southern African Food Crisis can hardly be seen as a once-off event. The 1991/92 drought caused far greater declines in food production in the region, yet the consequences of the 2001 and subsequent droughts and periods of erratic rainfall have been far more extensive, which suggests a decline in the ability to cope with such shocks. Vulnerability in the region has been increasing for decades. Therefore, though there is a need for relief aid, the crisis should also be viewed as a symptom of extreme underdevelopment. The impact of climate can only be understood when the underlying issues of existing poverty and vulnerability are taken into account. Furthermore, widespread dependence on rain fed agriculture in a region prone to droughts will necessarily leave people vulnerable and can thus be seen a key contributing factor to this vulnerability.

The most significant impact of climate in the crisis has been that of a trigger. For example, in 2001 both Malawi and Zambia had crop-destroying floods and planting was delayed in Lesotho. The region then had two successive years of drought. These shocks led to decreases in food supply and contributed to rising food prices. However, climate was not the most significant trigger in Zimbabwe and possibly in Malawi. In Malawi initial food shortages were to a significant extent brought on by the mismanagement of the country's strategic grain reserves. In Zimbabwe the negative consequences of "fast track" land reform seems to outweigh the effects of climate. Productivity in that country declined significantly as a result of land reform. By using food as a political tool via its GMB the Zimbabwean government also limited access to food for a significant segment of the population.

5.3.2 Response

It is also contended by more than one author that variable rainfall is a natural phenomenon or a norm in the region. In other words, there is no such a thing as a

“normal” rain season. This clearly underlines the need for greater resilience to such relatively unpredictable shocks. C-SAFE has tried to address the impacts of erratic rainfall by way of resilience building. However, donor constraints have implied that SO3 the SO relating to this objective has not been funded. In this regard it is clear that developmental relief has not been fully implemented by C-SAFE in the recent crisis in Southern Africa. This implies that the practical application of this concept within this context of a food crisis, in part induced by climatic shocks and characterised by high HIV/AIDS prevalence and extreme underdevelopment, still needs to be tested further. It is also clear that NGOs might have to take greater care in insuring that they are funded in a way that facilitates their chosen approach. Greater effectiveness might be achieved if a more limited focus is executed more efficiently.

5.4 What is driving food insecurity?

It has been established that neither erratic weather nor HIV/AIDS are driving food insecurity in Southern Africa. Chapter three highlights a decline in government capacity and household livelihoods over the past three decades. It seems safe to argue that Southern African development for the most part has failed. Vulnerability has been increasing for decades. Though there are certain common characteristics across national borders, there are also many country specific issues that need to be taken into account in answering this complicated question.

Of the countries included in this study all four structurally adjusted and with the exception of Lesotho were forced to privatise and disband grain-marketing boards, hurting a significant proportion of its populations. In the case of Lesotho, the failure of its agricultural marketing organisation was the result of corruption. Foreign debt has especially crippled the Zambian state. All four countries also have to endure unfavourable international trade regimes, specifically with regards to agriculture. However, the structure of these national economies has to be questioned. The region is dependent on low value goods as exports. Terms of trade keep declining as the relative purchasing power of commodity exports to imports decline. Added to this are massive unemployment rates. These governments simply do not have the funds to put in place sufficient safety nets to remedy food insecurity nor to undertake actual development and ensure sustainable livelihoods for most, if not all of its citizens.

Chapter three also documents that there are not even sufficient funds to maintain roads, adequate health care and education in these countries. Of course this is a vicious cycle. Which came first underdevelopment (as an outcome) or underdevelopment (as a process)?

At the household level HIV/AIDS can be the most salient driver of food insecurity, though even then it is accompanied by a certain level of underlying vulnerability. This underlying vulnerability at household level again seems to be a function of available economic opportunities. Declining commodity prices have impacted on the livelihoods of mineworkers from Zambia, Malawi and Lesotho, working in South Africa and Zambia. The loss of remittances due to job losses could be seen as an important factor in between the 1991/02 droughts and the current crisis, especially for Lesotho. Agriculture, the main source of income for most households has also been yielding increasingly lower harvests over the last decade. In the cases of Lesotho and Malawi, this has been exacerbated by environmental degradation, brought on by overworked lands, in turn a result of overpopulation. It is suggested here that this pattern of underdevelopment has various implications for how responses (humanitarian or otherwise) are approached.

The case of Zimbabwe however requires special mention, as it is very much distinct. It seems that food insecurity in that country is almost entirely driven by political factors. Food insecurity at national level in Zimbabwe is only a relatively recent phenomenon. “Fast track” land reform as well as maize price regulation by the GMB has resulted in production declining rapidly. Access to food is severely limited by government control of food reserves, adding on to rapidly increased unemployment of farm workers, hyperinflation and lower absolute levels of production.

Chapter four investigates one case study of a humanitarian intervention in the Southern African Food Crisis. It is argued that the maintenance and improvement of livelihoods is a key strategy in addressing vulnerability to shocks such as erratic weather as well as the longer-term effects of HIV/AIDS. At this point it is however clear that something fundamental is missing with regards to alleviating vulnerability, regardless of the quality of humanitarian interventions.

An analysis of Sen's seminal text (1981) indicates that macro level interventions are not sufficient to address issues of food security in a famine. This he states is the case due to a failure of entitlements, which implies a failure of local food markets. Stratification in the economy has taken away the "right" of many to obtain food due to their marginalisation. This also holds true in Southern Africa. For example, in Malawi peasants are forced into ganyu labour due to an uneven economic system that has developed due to initial favouritism in decades gone by. These peasants are trapped in a poverty/destitution cycle.

Save the Children UK (2004:1) note the fact that food insecurity in Southern Africa is not just a short-term phenomenon. The absence of safety nets, health care and education is noted. Another comment made by Save the Children UK is that national economies should generate opportunities for people to earn an income. In light of this, issues like the extreme dependence of the Southern African population on rain fed agriculture is worth noting. Thus, it is argued by Save the children UK (2004:3) that responses to the crisis have been relatively successful in averting malnutrition and death. However, the underlying causes of food insecurity remain, which means that there is no real sustainability as "the poverty cycle continues".

Thus, it is suggested here that much more than humanitarian aid is needed for vulnerability to be adequately addressed. The question may be asked: What is happening at national level to co-ordinate development and end cycles of vulnerability? The answer is clearly "not much". Aid organisations, fulfilling their mandate continue to merely place a band-aid over a gaping wound. This is however becoming increasingly more difficult, as vulnerability is increasing. The crisis of government capacity has the implications of the increasing marginalisation of national economies due to worsening terms of trade and subsequent government inability to provide safety nets to its people and to initiate the development of key industries, which will provide alternative means of employment to predominantly rain fed agriculture.

Thus, it seems that in the Southern African context it is not sufficient anymore to only focus on the household and community levels. Disparities in local economies are still very important. However, the make up of those economies it seems is at least of equal

importance, if not more important, if sustainable development and food security is to be achieved. Clearly such action falls outside of the humanitarian mandate. However, this seems to be what is needed if the underlying problems and not merely the symptoms of such problems are to be addressed adequately.

5.5 Unresolved issues and areas of future research

It seems clear that a lot more research is required on how best to address HIV/AIDS in food crises. There is some agreement on the basic considerations that should inform such a response. However, the specifics of interventions in this regard is still very uncertain. Of course due to the complex nature of HIV/AIDS, for example the different ways in which various affected households are affected, standardized strategies will never be possible. However, procedures for deciding on the appropriate response in a given context still need to be refined. For example, exactly how should food, medicine, condoms etc be targeted in order to achieve the best possible result? Also within the context of limited supplies, how should the special nutritional requirements of PLWHA be taken into account? There are various similar questions around the specifics of interventions that need to be answered, or are only in the early stages of being answered in the so-called “grey” or non-peer reviewed literature.

The issue of loss of land of AIDS widows and children, including orphans especially in patrilineal systems is also highlighted above as being a challenge to humanitarian responses in Southern Africa. How does one address this problem and yet respect cultural relativity? It is suggested here that research in this regard is required in order to affectively address the vulnerability of women and children.

It is suggested that questions surrounding how to effectively combine development and relief in Southern Africa still needs to be researched further. It also needs to be established who the appropriate actors would be to include in such a response. Furthermore, how does HIV/AIDS fit into this? How may short-term food security, long term livelihoods erosion and HIV/AIDS as a short-term crisis as well as a long-term developmental issue be linked in a co-ordinated manner in a multi faceted intervention by various actors.

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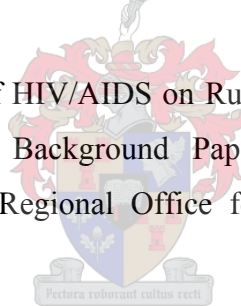
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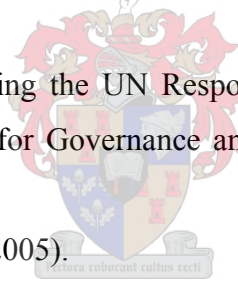
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Appendix A:
List of interviewees

Name	Position	Affiliation	Type and number of interviews	
			Face to face interview	E-mail interview
Scott Drimie	Independent consultant	NA	1	
Steve Goudswaard	C-SAFE RPU Manager	WV	1	1
Kate Greenaway	C-SAFE RPU HIV/AIDS expert	CRS	1	1
John Service	C-SAFE Country director Zambia	CRS	1	
Marcelius Moyo	WV Programme Manager Lesotho (2005-) Operational in Zimbabwe 2003-2004.	WV	1	1
Marrienne Haahr	Junior programme manager Zambia	CARE		2
Steffen Horstmeier	WV steering committee member	WV	2	1
Chockwa Kudukwashe	C-SAFE Zimbabwe	CARE	1	
Sylvestor Kalonge	C-SAFE Malawi country co-ordinator			1

Appendix B:

Interview questions

C-SAFE e-mail questionnaire

E-mail questionnaire: Southern African Food Crisis

- Thank you for taking the time to complete this questionnaire.
 - My name is Gideon van Riet. I am currently doing master's thesis at Stellenbosch University in South Africa. My objectives are, to gauge the importance of the impacts of HIV/AIDS and rainfall variability in the current Southern African Food Crisis, relative to other factors and to understand in what way(s) these two factors are being addressed by C-SAFE.
 - Please save this questionnaire and complete it in your own time.
 - Send the completed questionnaire as an attachment to 13489046@sun.ac.za
 - Please also include the following information
 - Your name _____
 - Your position in C-SAFE _____
 - Which C-SAFE partner are you affiliated to? _____
 - Would you be willing to complete one more questionnaire, containing more specific questions based on your response? _____
 - If you choose to exercise your right to anonymity, please state so here _____ (anonymity is assured to anyone preferring to remain anonymous)
 - You need only answer the questions that are applicable to your field of expertise.
-

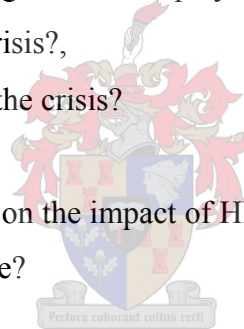
1. Please give broad overview of the intervention you were/are involved in. Which country(ies), region(s)? The timeframe of the intervention? The objectives of the intervention? What did the intervention entail?
 -
2. To what extent has HIV/AIDS influenced the nature of your intervention? Explain

-
- 3. What lessons have you learned with regards to addressing HIV/AIDS in the context of a food crisis?
-
- 4. What have you learned with regards to helping communities cope with recurrent droughts, in the region?
-
- 5. In your opinion which factors play(ed) the most significant role in:
 - Exacerbating the crisis, why?
 - Constraining interventions, why?



Additional questions for face to face interviews

- There have been a few attempts at explaining the crisis. Most merely refer to it as being complex, with various factors impacting on food security. De Waal and Whiteside refer to it as a “New Variant Famine”. There is also evidence of entitlement failure and Wiggins (Overseas Development Institute) explains the crisis as various layers building on each other (initial economic vulnerability, shocks to production, HIV/AIDS and food policy failures by governments). How would you conceptualise the crisis?
- What impact do you think drought and floods had on the crisis?
 - Causing the crisis?,
 - Exacerbating the crisis?
- What role do you think HIV/AIDS played in
 - Causing the crisis?,
 - Exacerbating the crisis?
- What is your opinion on the impact of HIV/AIDS on the food crisis. Is this a New Variant Famine?
- With regards to developmental relief, there is more than one interpretation. On the one hand there is the development continuum and on the other the practise of from the inception of an intervention doing both developmental and relief work. What are your thoughts on linking these related fields and if anyone, which interpretation do you favour?
- HIV/AIDS is mainstreamed by C-SAFE. From what I can gather this basically implies tailoring conventional activities, TFA and FFA to the HIV/AIDS context. Could you elaborate a little on the targeting?
- Could you elaborate on the specifics of FFA initiatives? Besides household and community gardens and infrastructure what types of assets are built?



- How much discretion are given to local workers in organising FFA and targeted Food?
- From the literature available on the C-SAFE website staff inexperience and the nutritional value of food aid are mentioned as constraints encountered in mainstreaming HIV/AIDS. What other types of constraints did you encounter in mainstreaming HIV/AIDS?
- Given the fact that HIV/AIDS is very likely to impact on the region for decades, what role do you see humanitarian aid playing in addressing it?
- Did the possession of assets or other means of acquiring wealth at any point influence the targeting of TFA? If yes, since when and how extensively was it used?
- Who's decision was it for Malawi to move onto a DAP at the end of 2004? Why?
- In terms of your food targeting, how are you taking into account HIV/AIDS?
- There are various tools and guidelines on the C-SAFE website, like the timeline tool and the FFA manual and checklist. How often and since when have you been using it?
- What types of actions were taken to address climate-induced shocks to food production such as droughts and floods?
- What if any specific actions were taken to prepare communities for future climatic shocks?
- How successful do you think you were in helping people cope with recurrent droughts and floods?



- Do you feel that any one of the two aspects relief and development are wrongly being promoted above the other?
- How successful do you think you were with regards to resilience building?
- To what extent has the nature of your donors influenced C-SAFE operations?
- Does C-SAFE have any other sources of funding, besides FFP?
- What are C-SAFE's exit strategies?

