

## HIV/AIDS and the Food Crisis in Lesotho



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## Millennium Development Goals (MDGs)

- World Food Summit (1996) and Millennium Declaration (2000)
  - Pledges by Africa and industrialized countries
  - Target: Halve the proportion of people who suffer from hunger between 1990 and 2015.
  - Indicator:
    - Prevalence of underweight children (under 5 years of age)
- The challenge of reducing poverty and hunger in Sub-Saharan Africa is formidable.
- Despite pledges, little progress has been made
- Poverty and hunger problems have been worsening

## Status and Trends: Food Crisis in Six SSA Countries

- ☀ Estimated needs US\$507 million to feed the millions people at risk of starvation until the main harvest in March 2003



Country	Pop in need of food aid	Percent in need
Zimbabwe	6,700,000	49
Malawi	3,300,000	29
Zambia	2,900,000	26
Mozambique	590,000	3
Lesotho	650,000	30
Swaziland	270,000	24
<b>Region</b>	<b>14,410,000</b>	<b>25</b>
Angola	1,900,000	16
Ethiopia	16,000,000 (est.)	25

- ☀ WFP has launched a massive regional appeal to feed millions of hungry people in six countries.

## Status and Trends: Causes of the Food Crisis In Lesotho

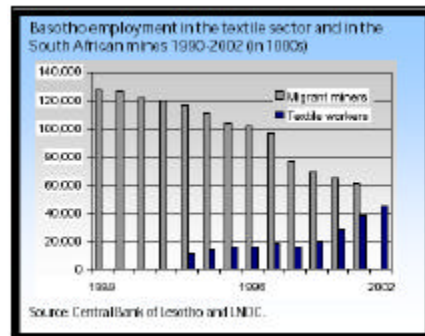
- ☀ A combination of factors are responsible.
- ☀ The immediate cause of the current crisis is **climatic** in nature
  - ☀ Lesotho has suffered from **severe weather variability** over the past two seasons
  - ☀ Heavy rainfall, frost, hailstorms.
  - ☀ Delaying/preventing planting of crops; adverse effect on harvests.
  - ☀ Falls in production (low levels of crop planting).
- ☀ However, there is a perspective, most recently articulated by Turner (2003) that need to view climatic variability and drought conditions as normal rather than exceptional.

## Status and Trends: Causes of the Food Crisis In Lesotho

- ☀ **Structural factors** underlying the crisis:
  - **Human mismanagement:** overstocking and overgrazing of rangelands; unsustainable agricultural practices.
  - **Population growth:** putting pressure on arable land, reducing average land holdings, and increasing landlessness.
  - **Urbanisation:** illegal sale of agricultural land for unplanned residential settlements.
  - **Poor macro-economic performance** in all countries in the region.

## A Compounding Factor: Changing Basotho Livelihoods

- **African Growth and Opportunity Act (2000) reduced duties and quotas on thousands of African-produced goods for export to USA.**
- **Trade initiative turned Lesotho into largest African supplier of clothing to USA.**
- **Progress has come at a price. As investment has rushed in, so too have challenges to the society.**



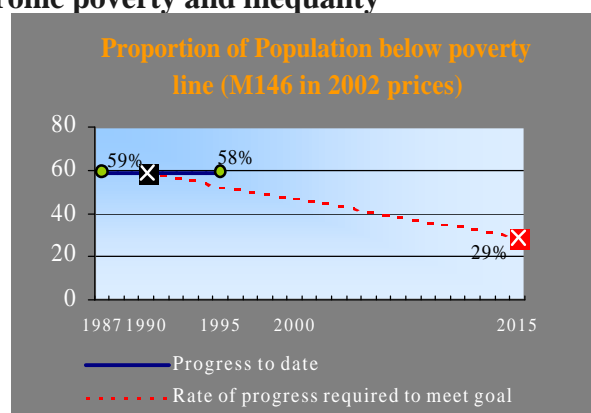
## A Compounding Factor: Changing Basotho Livelihoods

- Family disruption Textile factories almost exclusively hiring women , making many women family breadwinners.
  - Often paid fraction of what male mineworkers earned, but enough to keep the family afloat.
- Away from home for protracted periods, returning once a month or on a less regular basis.
  - Violence against women is rising as husbands become dependent on wives as feel increasingly displaced.
- As thousands of rural dwellers migrate to Maseru with often unfulfilled dreams of finding work:
  - Increasingly crowded living conditions
  - Burgeoning sex trade, representing a potentially new source of HIV/AIDS transmission
  - Low wages and poor working conditions in the factories.



## Status and Trends: Causes of the Current Crisis

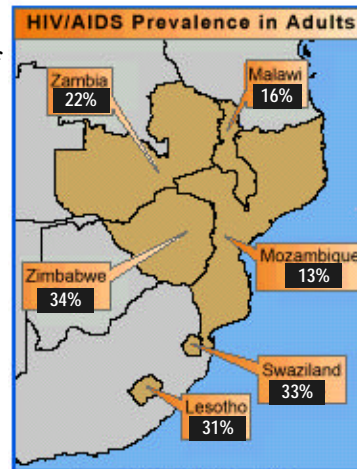
### • Chronic poverty and inequality



## Status and Trends: Causes of the Current Crisis

### ☀ HIV/AIDS pandemic.

- An estimated 31% (UNAIDS) of the adult population aged 15-49 in Lesotho currently infected.
- Fourth highest in the world.

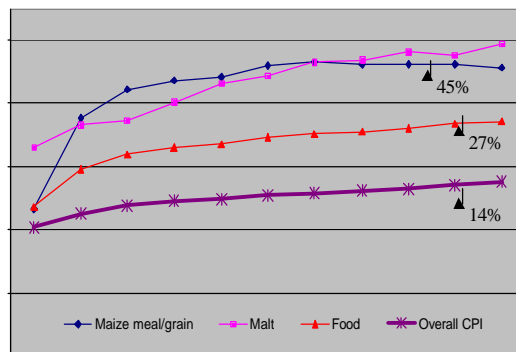


Source: UNAIDS (2002)

## Status and Trends: Causes of the Current Crisis

- ☀ The natural and structural conditions have combined to result in **severe shortfalls in food production**

- ☀ In turn, steep **increase in food prices**, esp. maize. Where food is available, prices have increased beyond HH reach.



## Impacts of HIV/AIDS on Food Security: Labour shortages

- ☀ Food crisis coping strategies depend on labour availability, skill and experience. (incl. labouring for money and collecting wild foods)
- ☀ Labour scarcity: increasing **morbidity and mortality** means that many coping strategies are becoming unviable.
  - Infected household members with regular employment are **stopping work** because they cannot cope, or because they are retrenched due to illness.
- ☀ **Unemployment** in the 1990s, especially amongst the youth is serving to exacerbate the effects of the crisis. Wage labour is crucial component of overcoming food insecurity.

## Impacts of HIV/AIDS on Food Security: Asset Depletion

- ☀ With rising labour shortages, many households are using the bulk of cash savings to pay for **medical and ultimately funeral expenses**.
- ☀ Similarly, **livestock assets** are also being eroded by by the dual impacts of HIV/AIDS and the food crisis.
  - Salient form of cash to purchase food during periods of low crop production and provide draught power for cultivation
  - Livestock are sold to meet **medical expenses**, school fees and other recurrent expenditure.
  - Depriving HH of **draught power** to cultivate fields.
  - Compounded by rising **stock theft** in and between villages, districts and across borders.

## **Impacts of HIV/AIDS on Food Security: Declining Agricultural Production**

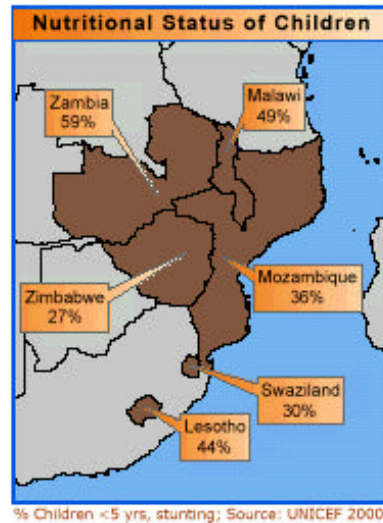
- ☀ AIDS-related illness is having a significant impact on **agricultural yields**.
- ☀ Due to loss of labour, some farming activities are having to be postponed or abandoned.
- ☀ **Home gardens (Lirapa)**: easier to manage in the context of HIV/AIDS, especially due to their small size.
- ☀ However, HH reported declining productivity even in home gardens:
  - HH stopped working on gardens or labour input declined due to episodic illness and the burden of care.
  - Activities such as weeding or harvesting could not be performed.

## **Impacts of HIV/AIDS on Food Security: Burden of Care**

- ☀ The burden of care of providing for **orphans and sick adults** is a major expenditure and diversion of labour.
- ☀ Given gender inequality and sexual division of labour, women carry primary responsibility for care.
  - Mounting pressure on women, incl. elderly and adolescent girls.
  - Reduced labour in farming activities to take care of ill family members.
- ☀ The preferred and most resilient livelihood coping strategy, of relying on **kinship networks for assistance**, is increasingly inoperable.

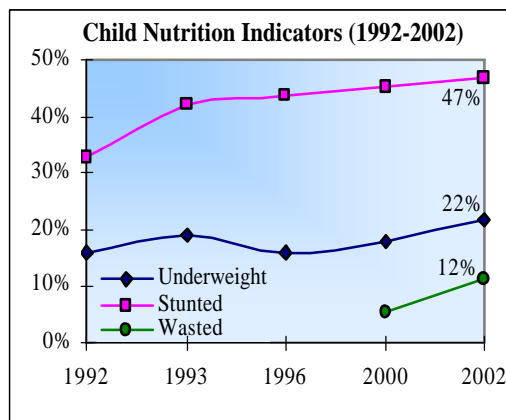
## Impacts of HIV/AIDS on Food Security: Impact on Children

- The food and HIV/AIDS crises have enormous implications for children
- HH Coping responses:
  - Child labour: searching for wild foods or working to boost household earnings in order to buy more food.
  - Absence/withdrawal from school.
  - Cutting back on meals.



## Impacts of HIV/AIDS on Food Security: Impact on Children

- 22% of children under age five in Lesotho are **underweight**
- Trend: firmly on the increase.
- 47% of children are **stunted** or too short for their age
- 12% are **wasted** or too thin for their height.





## Impacts of HIV/AIDS on Food Security: Impact on Children

- ✦ Rapid growth in the **number of children orphaned by AIDS**.
- ✦ In Lesotho, the number of AIDS orphans, defined as children under 15 years of age who have either lost their mother or father, or both, due to AIDS is estimated at **73,000**.
- ✦ This is equivalent to **nearly 10 percent** of all children aged 15 or younger.
- ✦ Do not know the cumulative effect of food shortages, social disruption and coping strategies on these unfortunate children.



Lintle Mokhethi sits among sacks of WFP maize and beans distributed at Mohale's Hoek

(WFP/R Lee, 2002)

## Impacts of HIV/AIDS on Food Security: : Vicious interactions between malnutrition and HIV

- ✦ Coping strategy to food crisis: adults **reduce consumption** and go hungry.
- ✦ Current food crisis: adults cannot be neglected, because HIV/AIDS means that malnutrition has very different implications.
- ✦ Undernourished individuals more susceptible to being infected.
- ✦ Adults with HIV endanger their health by going hungry. People with HIV have **higher nutritional needs** than normal. Therefore, malnutrition inhibits the immune system and speeds up the progression from HIV to AIDS.
- ✦ Good nutrition is also essential for effective **anti-retroviral treatment**, as the medication needs to be taken on a full stomach.

## Responses to the Crisis

- ☀ GOL: Declaration of **state of famine** (Apr 2002)
- ☀ **Famine Relief Programme:**
  - Targeting most vulnerable HH
  - Immediate intervention: food assistance, supplementary feeding to children <5, subsidies to vulnerable HH.
- ☀ **Official appeal** to international community for assistance with food & non-food items
  - Covers needs for immediate emergency food relief & addresses problems w.r.t. health and nutrition, agriculture, water and sanitation
  - To date only 45% of budget of appeal been covered.
  - **54% - food component**
  - **9% - non-food component** (dietary and therapeutic feeding for children; relief in access to safe water & sanitation; direct support to people living with HIV/AIDS)

## Priorities for Development Assistance

- ☀ **Food aid:** direct distribution of food as an immediate relief strategy. Short term: continued need for the FAO and WFP to provide emergency food aid
- ☀ Policies for mitigating effects of crisis lie on a spectrum ranging from immediate relief to recovery to initiating development.
- ☀ **No single type of intervention** sufficient to attain relief, recovery and longer-term development.
- ☀ Requires a more **coordinated, holistic** and **sequenced** approach.

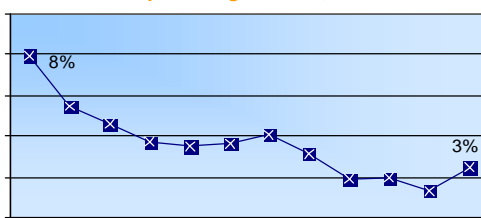


Food aid in Mokhotlong district. (WFP, 2003)

## Priorities for Development Assistance

- Scaled-up, long-term effort.
- Food aid needs to be increasingly adapted to dietary requirements of people living with HIV/AIDS
- Increase funding for non-food needs (health, nutrition, water, sanitation)
- Technical assistance in support of monitoring and targeting
- Support for securing livelihoods and assets.
- Problem: declining trend in ODA.

ODA as a percentage of GNP, 1990-2001



## Priorities for Development Assistance

- **Government:**
  - Need to focus on effective use of 2% that each ministry dedicates from its budget to HIV/AIDS and improve access to essential medicines
  - Need to more fully integrate HIV/AIDS into humanitarian operations.
  - Implementation of sound policies and programmes to address food security of the most vulnerable (PRSP).
- **Implementing agents:**
  - Aim to effectively target those affected by and infected with HIV/AIDS (esp. children)
  - Ensure that programmes are responsive to needs to those affected by and infected with HIV/AIDS



WFP is providing monthly rations of food aid to some 9,000 families in the villages of Mokhotlong district, who have been hard hit by widespread food shortages. Heavy rain and frost have led to a succession of poor harvests across Lesotho, where the population has already been weakened by the world's fourth highest HIV/AIDS rate.

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As part of his Jan 22-23 visit to Lesotho, the UN Secretary-General's Special Envoy for Humanitarian Needs to Southern Africa, James Morris, flew to a WFP food distribution site in the remote mountainous area of Mokhotlong district.

Lesotho is the first leg of the Special Envoy's week-long regional tour, which includes Zimbabwe, Malawi and Zambia.

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The Mokhotlong beneficiaries are among 330,000 people in Lesotho, who are relying on WFP food aid for survival.

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At this food distribution site in Mokhotlong, the Red Cross are distributing WFP rations of vegetable oil, maize and split peas - donated by the UK and US governments - to 440 families.

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In total some 650,000 people live on the edge of hunger in Lesotho.

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Local farmer arrives at the food distribution site ready to collect his family's rations.

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**Lesotho, 4th September:**

As part of an investigation into health needs, other members of the Special Envoy's team - from WHO and UNICEF - went to Ha Raphiri, where they visited households managed by children whose parents have died of AIDS.

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**Lesotho, 4th September:**

In Thaba-Putsoa village, WFP rations were given to a smaller group. The team heard the villagers' worries about the next harvest - in March 2003. Rains have begun already, raising fears that current planting will be affected again.

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