Food Security and HIV/AIDS - UGANDA -

PROJECT TITLE
“Protect and Promote Food Security, Nutrition and Livelihoods of the households and communities affected by HIV/AIDS (OSRO/RAF/707/SWE)”

PROJECT OBJECTIVE
Strengthen the food security, nutrition and livelihood of households and communities affected by HIV/AIDS through small-scale interventions and enhance the capacity and knowledge of local institutions on strategies to protect and promote food security.

CONTEXT
Northern Uganda has the country's highest adult HIV-prevalence rates, as a consequence of conflict, poverty, lack of medical services, lack of knowledge and harmful traditional practices. Moreover, food insecurity persists because of conflicts and unpredictable weather. Sustainable livelihoods and food security are essential to ensure that HIV/AIDS-affected households can face the nutritional needs of affected/infected persons (to face the HIV infection and delay the development of fully-blown AIDS, as they grow weaker and less productive), as well as the needs of the other household members (malnourished individuals are more at risk of infection).

VULNERABLE POPULATIONS TARGETED
The project was carried out in IDP camps, targeting both infected and affected individuals within:
- households with chronically sick individuals;
- households with productive adults who had died during the previous year;
- female-headed households and mono-parental households;
- orphan-headed households and orphan-hosting households.

N.B. The beneficiaries declared their HIV/AIDS status prior to the beginning of the programme.

THE PROJECT
The project is part of a regional HIV project funded by the Swedish International Development Cooperation Agency (SIDA) and implemented in the Democratic Republic of the Congo, the Republic of Burundi and the Republic of Rwanda. Interventions in Uganda were implemented by World Vision and attempted to address malnutrition, insecurity, and displacement, by improving the diet of 3,890 households affected by HIV/AIDS.

In 2004, seeds (beans, maize, and soybeans), tools and agronomy and nutrition training were provided to HIV/AIDS-affected households in the Gulu district, to produce food to meet their nutritional needs. Beneficiaries were trained in the production of soya milk, among others.

In 2005, beneficiaries chose to switch from soybeans to groundnuts for their high market value, having saved soybeans seeds from the previous season. They also received 807 goats and 69 piglets.

During 2006-2007, staple food crops (maize beans, groundnuts and finger millet), vegetables and 700 goats were distributed to the beneficiaries in the Kitgum district.

In 2008, a needs assessment underlined that Kitgum beneficiaries again ranked groundnuts and other vegetables that do not require large tracts of land, as a priority. This was because there was a view to generating income and being able to hire labour for preparing the land as people slowly returned to their homes. In addition, the project provided one grinding mill, 21 ox-ploughs, 700 hoes and 700 pieces of pangas (machetes).

STAKEHOLDERS
At National level, FAO coordinated the project with the Office of the Prime Minister, Department of Disaster Preparedness and Refugees (OPM-DDPR), WFP, UNICEF, UNAIDS and World Vision.

At district level, the implementation of the project was carried out through Project Implementation Committees (PIC) and distribution committees which included representatives of the government (social services, health and agriculture: AIDS Support Organization (TASO), District Directors of Health Services (DDHS), regional hospitals, department of production), NGOs and UN agencies. WFP collaborated on food aid distribution; World Vision and TASO on counselling, identification,
treatment and social support; DDHHS and departments of production on the coordination of the various efforts. The stakeholders were involved through a parish-based approach and participated in regular progress review meetings of the PICs and joint monitoring visits. The Chief Administrative Officer (CAO), head of the district civil services and chair of the District Disaster Management Committee (DDMC), also participated in the PIC, reinforcing the network by liaising with the OPM-DDPR and the various stakeholders to ensure that policies were implemented at grassroots’ level.

**CAPACITY BUILDING**

At community level, a distribution committee was created to coordinate all efforts, composed of the sub-county local leaders and counsellors who were trained on the importance of good nutrition for HIV/AIDS-affected people’s care and support.

At district level, the programme sensitized the PICs on the global and local concerns raised by HIV/AIDS, as well as on the possibility to mitigate the pandemic through food security and nutrition interventions. In turn, the PIC members, from health and production departments, raised awareness throughout the overall health information system in the country.

No training material was developed but material from various sources was used, including the FAO/WHO manual on nutritional care and support for people living with HIV/AIDS.

**ASSESSMENT, MONITORING AND EVALUATION**

Household surveys were conducted, including indicators on household social economic status and performance of the inputs provided. However, the assessment suffered from the lack of a control group and was limited to seed and tools distribution.

Results of the project were: increased production leading to better nutrition through auto-consumption and sale of surplus; increased knowledge of agricultural techniques, nutrition and HIV/AIDS; improvement of the intersectoral coordination mechanisms between health and agriculture local authorities; decrease of stigma linked to HIV/AIDS.

**CHALLENGES AND CONSTRAINTS**

- FAO’s projects are designed to run for a maximum of one year, while food security interventions in HIV/AIDS-affected households require at least 3-5 years in order to reach the expected impact.
- There were delays in disbursement of funds, causing a mismatch between the project’s timing and the agricultural calendar.
- Provision of livestock was problematic because of the inadequacy of the context (difficulties in raising livestock in IDP camps) and lack of veterinary support.
- The M&E system had to be adapted to HIV projects and implemented systematically.
- There was a great need to raise donor awareness on the need to upscale the project to meet the growing needs in the field.
- HIV technical knowledge at the level of FAO national offices could and should be raised.

**UPSCALING/REPLICABILITY OF THE PROJECT**

The experience described here can be successfully up-scaled/replicated in similar contexts, if the following conditions are applied:

- Carry out participatory needs assessment and monitoring and evaluation activities involving beneficiaries.
- Collaborate with local institutions (Government, NGOs) already working with beneficiaries.
- Involve national and local authorities throughout the project cycle.
- Ensure that procedures are flexible and rapid enough to guarantee the timely implementation of activities (i.e. delivery of agricultural inputs in the right season).
- Ensure that seeds and livestock are purchased locally and delivered with adequate technical support (training, veterinary services, etc).
- Incorporate the project in an integrated and long-term approach to support HIV/AIDS-affected households.
- Ensure that counselling support is provided for the infected/affected beneficiaries.
- Avoid creating or emphasizing discrimination against HIV-affected and infected households within their community (avoid social tensions and pay attention to integration).
- Address access to land and property right issues, particularly concerning women’s and children’s inheritance.
- Link with related initiatives such as Farmer Field Schools (FFS) and Junior Farmer Field and Life Schools (JFFLS).

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