Impact of HIV and AIDS on Agriculture and Food Security in ZIMBABWE

About 70 percent of SADC citizens derive their household food security from crops and livestock. The adverse effects of HIV and AIDS in the region have resulted in labour deficits and the sale of agricultural produce to meet costs incurred by the disease. In Zimbabwe, HIV and AIDS is now the leading cause of deaths among adults in the prime of their working and parenting lives. At least 1.8 million people are infected with the disease, 70% of hospital admissions are HIV and AIDS related and 3200 people die each week of AIDS related illness. Though the official data shows that the rate of infections has declined from 38 percent to about 24.6 percent, the impact of the disease on the economic and social fabric of Zimbabwe has been astounding.
OVERVIEW OF SCOPE
OF THE REGIONAL STUDY

In view of the negative impact of HIV and AIDS on families and institutions in southern Africa, FANRPAN sought to carry out comprehensive policy research studies to assess the situation on the ground. The aim was to advise SADC policy makers and practitioners on the HIV and AIDS dimension in the agricultural sector. This was in recognition of the fact that: a) a large percentage of the population live and work in rural areas; b) the agricultural workforce is large; and c) the economies are anchored on agriculture. FANRPAN commissioned a two year regional study on the impact of HIV and AIDS on agriculture in seven SADC countries through support from the European Union.

*The objectives of the study were to:*
- Investigate how the farming communities have been affected by HIV and AIDS and their coping strategies;
- Assess the impact of HIV and AIDS on the farming community with respect to access to farm resources;
- Investigate the impact of the HIV and AIDS pandemic on the farming community’s ability to receive support facilities;
- Predict the anticipated future performance scenario of agriculture.

THE OBJECTIVES
OF THE STUDY WERE TO

- Characterize the dynamic ways in which HIV and AIDS is affecting performance of agriculture.
- Demonstrate the net benefits of early preventative interventions that pre-empt social, economic and psychological costs.
- Recommend effective strategies for rendering sustainable assistance to HIV and AIDS afflicted agricultural families.

The study took on a multisectoral approach involving the University of Zimbabwe, Sociologists from NGOs dealing with HIV and AIDS such as Girl Child Network, Deseret, Africare, Action Aid and World Vision, Ministry of Agriculture, Ministry of Health, National AIDS Council and the National Economic Consultative Forum. The study was conducted in two districts namely Goromonzi (Mashonaland East Province), Makoni (Manicaland Province) A total of 350 households from the communal areas were interviewed for this study.

STUDY APPROACH

The Impact study in Zimbabwe took on a quantitative approach and combined macro and microeconomic adaptive behavioral studies of agricultural households and organizations. A modeling of cross effects between the agricultural sector and macro economy was carried out.

EMERGING RESULTS

The main findings based on the two districts show that HIV and AIDS has had a negative impact on agricultural activities in the country. The following issues are of major concern:
- HIV and AIDS has significantly contributed to the decrease in maize hectarage. This change in cropping system has significant negative impacts on food self sufficiency and security in families who lose one or more adults.
The recurrent droughts have compounded the impact of HIV and AIDS on farming families as they have to depend on state and NGOs assistance for food provision.

Agricultural production knowledge has been lost when adults die leaving a huge knowledge gap and inexperienced individuals to manage the farms.

HIV and AIDS affected households changed expenditure patterns with most spending income on medicines, hospital care and funeral expenses. There was a major reduction on education and agriculture expenditures in affected households.

HIV and AIDS affected female headed households earned significantly less income from farming compared to affected males as females took on multiple tasks and spent less time and effort in the fields.

Family structures in rural communities have been affected with rural families being transformed to being single parent or child headed and some families being overburdened with orphans. This has led to a reduction in agricultural production and incomes.

Rural health institutions and social welfare systems cannot cope with the impact of the disease.

**POLICY RECOMMENDATIONS**

- There is need to address key poverty indicators such as poor incomes, hunger and malnutrition, homelessness, etc to help cushion impact of epidemic on affected households.
- Develop affordable labour saving technologies such as fast high yielding varieties, alternative nutritious food crops such as soyabees for communities so as to cope with decreased labour in rural areas.
- Promote other food security crops such as root tubers to lessen impact of the reduction in maize hectarage.
- Introduce mass training of para professional in rural communities to work in extension as a way of reducing the knowledge gap when households lose adults.
- Revamp social welfare programmes so that child headed households can cope with farming activities when adults die.
- Prioritise Anti-Retrovial Drug treatment in farming communities as a public health service as rarely do people in rural areas have the information or financial ability to acquire such drugs on the market.
- Resuscitate the extended family system by promoting income generating programmes and businesses to create family wealth. Such an approach has potential to lessen the social welfare burden on the state, which has inadequate resources to cater for all HIV and AIDS affected families.

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The Food, Agriculture and Policy Analysis Network (FANRPAN) is an autonomous stakeholder driven policy research, analysis and implementation network that was formally established in the Southern African Development Community (SADC) in 1997. FANRPAN was borne out of the need by SADC governments for comprehensive policies and strategies that were required to resuscitate agriculture. FANRPAN is mandated to work in all SADC countries and currently has activities in 11 SADC countries namely Botswana, Lesotho, Malawi, Mauritius, Mozambique, Namibia, South Africa, Swaziland, Tanzania, Zambia and Zimbabwe.

FANRPAN works through an inter-sectoral platform designated as country nodes. Each country node has members comprising stakeholders from government, farming unions, private sector, policy research institutes and non governmental organizations. The main objectives of FANRPAN are to promote appropriate agricultural policies in order to reduce poverty, increase food security and enhance sustainable agricultural development in the SADC region; improve policy analysis, research and formulation of priority SADC and national agricultural research themes; develop human and institutional capacity for co-ordinated dialogue among all stakeholders; improve policy decision making through the generation, exchange and use of policy related knowledge and information. FANRPAN achieves these objectives through commissioned policy research, networking, capacity building and generation of information for the benefit of all stakeholders in the SADC region.

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