A STUDY OF HIV/AIDS, AND LIVELIHOODS IN RURAL SWAZILAND.

ELLEN BERG-MOE NDLELA
Declaration

I, (Ellen Berg-Moe Ndlela), declare that this thesis is a result of my research investigations and findings. Sources of information other than my own have been acknowledged and a reference list has been appended. This work has not been previously submitted to any other university for award of any type of academic degree.

Signature...Ellen Berg-Moe Ndlela
Date 02.04.2008
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ABSTRACT

A STUDY OF HIV/AIDS, AND LIVELIHOODS IN RURAL SWAZILAND

Ellen Berg-Moe Ndlela

This study analyses the impact of HIV/AIDS on rural livelihoods in Swaziland, with specific focus on women. The HIV/AIDS epidemic has become the major threat to rural livelihoods and human security, and more particularly to the livelihoods of women. Therefore, this study was undertaken with the objective of exploring the implications of HIV/AIDS on rural livelihoods in the context of the existing gender disparities in Swaziland. The study also examines the role of cultural norms and practices in relation to the spread of HIV/AIDS and the impact of these norms on the livelihoods of women, individuals, families and the community.

The study adopted the livelihood approach as a framework for understanding the linkages between HIV/AIDS and livelihoods. The livelihood approach is people-centred and focuses on the idea that people construct livelihoods by drawing on a range of assets and entitlements. This places the analysis on an individual (household) level, building from the micro to the macro level. Incorporating a gender dimension to it helped capture the power dynamics that determined livelihood outcomes and vulnerabilities of women in rural Swaziland. The study shows that HIV/AIDS is undermining all the pillars of the livelihoods indicated in the livelihood framework thereby undermining the sustainability of livelihoods. Gender disparities imposed by cultural and traditional practices keep women in subordinate positions in all areas of life in the Swazi society. Cultural practices contribute to undermining women’s livelihoods. It increases their vulnerability to HIV/AIDS, and impacts negatively on livelihood resources such as natural capital, economic capital, human capital, social capital and physical capital. The thesis argues that the gender vulnerability issue should be taken into consideration when discussing development issues in relation to HIV/AIDS.
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CHAPTER 1

Introduction

1.1 Introduction

The aim of this study is to analyse the impact of HIV/AIDS on rural livelihoods in Swaziland, with specific focus on women. I have understood HIV/AIDS to be the most devastating threat to mankind in the 21st century. HIV/AIDS has become the greatest challenge to human development in every aspect. It remains a major threat to many countries in the Sub-Saharan Africa. According to the 2007 UNAIDS AIDS Epidemic Update, an estimated 33.2 million people are living with HIV in the world, of which women constitute 15.4 million (UNAIDS 2007). These estimates are lower than those projected in the 2006 UNAIDS Report on the Global AIDS Epidemic where it was estimated that across the world 40 million people were living with HIV (UNDP 2006). However ‘Sub-Saharan Africa remains the most seriously affected region, with AIDS remaining the leading cause of death’ (UNAIDS 2007). This makes the Sub-Saharan region the epicentre of the disease.

In the Sub-Saharan Africa the ratio of women living with HIV is relatively high in terms of both the numbers of new infections and those living with HIV AIDS. According to the UNAIDS Update Report almost 61% of adults living with HIV in 2007 were women. In addition nearly 90% of all HIV-positive children live in sub-Saharan Africa. This means that women bear the burden of caring for their sick children.

Southern Africa is described in the report as the most seriously affected in sub-Saharan Africa of which Swaziland is one of the most affected countries in the region. As a result of high prevalence of HIV/AIDS His Majesty the King of Swaziland declared HIV/AIDS a national crisis in 1999. The country has been facing a deep HIV/AIDS epidemic crisis ever since. The overall national adult prevalence of the disease is estimated to be about 33.4% in 2006 down from 38.8 in 2004. An estimated 220000 adults and children, that is, about one-fifth of the population are living with HIV/AIDS (USAIDS REPORT 2006; UNAIDS Report 2007).
One of the main features of the epidemic is that women are the most affected (Ministry of Health and Social Welfare, Swaziland, 2007). In Swaziland, women have the highest HIV/AIDS percentage of about 47.3% (USAID 2005). Women are doubly affected by the epidemic, because of their biological and physiological make up and are easily infected (SHDR 2000). Several studies have indicated that the proportion of women infected with HIV/AIDS is increasing throughout the world. Physiologically, HIV transmission from men to women seems to be more effective than from women to men. Biological vulnerability and the lower status of women in society and in sexual relationships contribute to this (SHDR 2000). The overall level of infection is constantly increasing amongst women from the ages of 15-24 with an overall prevalence of 41.1% and this group is used as an impact assessment indicator for establishing infection rates among young population (Beckmann & Rai 2005). However, a slight decrease in HIV/AIDS prevalence trends has been recorded amongst women those aged 15-19years (UNGASS 2003-2004).

HIV AIDS is also affecting the most productive age groups (15-50 years) in society. Young adults are more vulnerable to HIV infection. According to the International Labour Organization (ILO), the age group most severely impacted by the virus are 25-35years for females and 30-40years for males (ILO 2005). These are the most productive years in a person’s lifetime. The potential to produce and reproduce declines as the epidemic decimates young adults who would otherwise be key contributors to household and national production. This has significant implications for the labour force especially in the agricultural sector because it is labour intensive.

A UNAIDS study (2000) shows that in other African countries, labour shortages caused by HIV/AIDS have led to a range of farm changes, including a reduction in land under cultivation, a decline in crop yield and a shift from cash crops to subsistence crops (UNAIDS 2000). The epidemic affects both the quality and quantity of labour supply in the economy as a whole.

There are other issues which have been brought by HIV/AIDS concerning the well-being of women. HIV/AIDS opens up questions about the status of women in family and society as well as their sexuality. In Swaziland, like in many other African countries, women have a subordinate status under both the customary and civil law. Most often sexual politics keep women in subordinate role where they are unable to negotiate their sexual relationships. For
instance, domestic violence makes women unable to question their husbands or partners about extramarital encounters and thus negotiate safer means of protection. This partly explains the high prevalence of HIV AIDS among women.

The HIV/AIDS epidemic has become the major threat to rural livelihoods and human security, and more particularly to the livelihoods of women. Therefore, this study was undertaken with the broad objective of exploring the implications of HIV/AIDS on rural livelihoods in the context of the existing gender disparities in Swaziland.

1.2 Objectives of the study and research questions

The specific objectives of the study and the research questions are stated below:

1. To study the impact of HIV/AIDS on rural livelihoods in Swaziland
   - How is the HIV/AIDS epidemic impacting on rural livelihoods?
   - What is its specific impact on rural women’s livelihoods?

2. To examine the role of cultural norms and practices in relation to the spread of HIV/AIDS, and specific impacts on women’s livelihoods.
   - How do cultural norms and practices affect the power structures and gender relations in rural Swaziland?
   - What impact has socio-cultural norms on the livelihoods of women, individuals, families and the community?

3. To examine the effects of gender relations on the HIV/AIDS epidemic.
   - How does the subordinate position of women make them more vulnerable vis-à-vis HIV/AIDS and livelihoods?
   - How does the absence of men from their families challenge the family structure?
   - How do women cope with this situation?
1.3 Organization of the thesis

This thesis is organized into five chapters. Chapter 1 gives an introduction to the whole thesis, outlining the main objectives of the thesis and research questions. It also gives brief background information of Swaziland and the status of HIV/AIDS in the country. Chapter 2 outlines the theoretical approaches used in the study. The study employs the livelihood approaches to development. It also incorporates gender perspectives to HIV/AIDS implications on livelihoods. Chapter 3 outlines the methods used in the study. The study was mainly qualitative, using questionnaires, focus group discussions and in-depth interviews. Chapter 4 presents the findings of study and analysis the implications of HIV/AIDS on rural livelihoods in Swaziland. Chapter 5 gives a summary and conclusion to the study.

1.4 Background Information

Swaziland is a small Kingdom in south eastern part of Southern Africa. It is a landlocked country embedded between South Africa and Mozambique. The country is estimated to be 17000 square kilometres in area. Swaziland is divided into four geographic regions; Hhohho, Lubombo, Manzini and Shiselweni. In this study I particularly focus on the Manzini region.

The estimated population of Swaziland is 1.1 million people constituted largely of indigenous Swazis and a small population of foreign nationals. Fifty three percent (53%) are estimated to be female and forty seven percent (47 %) to be male. The population is about 76% rural and 24% urban (Hlanze & Mkhabela 1998).

Since 1986 the monarch has been King Mswati the III who has continued ruling in much the same way as his father. King Mswati is an absolute monarch with absolute powers vested in him. Although he reigns along with his mother the Indlovukati side-by side, her powers are limited as long as the son is still in power. Her powers are usually recognised only in case of the death of the king that is when she takes over administrative powers. This role of the Indlovukati is another factor that gives an overview and position of the Swazi women in general. King Mswati III has executive, legislative and judicial powers. He plays dual roles: that of being head of state and the traditional leader Ingwenyama In his role as the Ingwenyama, the king is regarded as the custodian and embodiment of Swazi culture (Whiteside & el 2006).
The country maintains a dual system of government, with a modern government led by the prime minister on the one hand, and the traditional system of governance run by chiefs who report to the king as Ingwenyama. Only men can hold the position of chiefs. The dual system extends even to the judicial system where cases are tried through established western court system as well as traditional system. In the western court system there are magistrate’s courts, the high court and the court of appeal. The King appoints court personnel like judges, magistrates and national court presidents. On the other hand is the traditional system of trying cases, most of which are presided by chiefs who are often seen as custodians of culture and traditions. Chiefs are answerable to the king, who also appoints them and they report to him. In addition, there is very little female representation in most areas of government. The two systems of government may seem separate; they are in fact, symbiotic with one feeding into the other and ultimate power remaining with the monarchy.

Swaziland has four administrative regions, under regional administrators, and 55 political constituencies (tinkhundla). The tinkhundla are made up of chiefdoms of varying numbers. City and towns councils and boards also exist to administer the affairs of the cities and towns. The Tinkhundla is the first entity for the co-ordination of development. An Inkhundla is essentially the second level of government, with local council, which administers its affairs.

1.5 Swazi culture and gender relations

In order to gain a full understanding of the AIDS epidemic in Swaziland and the factors contributing to the rapid spread of HIV/AIDS infection and its impacts, one needs to unravel the complexities of the Swazi society, particularly the cultural aspects, beliefs and practices. The relatively strong adherence to cultural beliefs and practices are reflected in the system of governance which places the King and Queen mother as the rulers of the country.

In order to capture the dynamics of gender relations which I explain in detail in the analysis chapter (see chapter 4) one would also have to identify the Swazi woman’s position politically, economically and socially. What puts her in the most vulnerable state in the spread of the virus? I maintain the fact that Swazi women appear to have the highest rate of infection because of their subordinate position in society. As I will demonstrate in my study, women are mostly affected by the negative impacts of HIV/AIDS in every aspect of their well-being. The study assumes that the vulnerability of the Swazi women is embedded in strong cultural norms that have existed for many years in the patriarchal system. In the rapid spread of
HIV/AIDS women have been easier victims because of less purchasing power socially economically, politically and culturally. On the other hand, Swaziland is still trying to address the issue of gender, but still have a long way to go because the country has been it the last few years addressing equality in development and decision-making. Past developments have empowered males with women left behind developmentally and their efforts unrecognised. Thus HIV/AIDS remains the most important barrier to human development in Swaziland because 53% of the population remains the most disadvantaged group socially, economically and politically, due to cultural norms that suppress women’s decision making positions politically, domestically and publicly at the work place.

Swaziland is a patriarchal society where power is vested mainly in men. In a patriarchal society there is a high level of male dominance over women and children in the family, institutionally and in society as general. Patriarchy as a framework will help understand the gendered relations of power in the Swazi society. Women are deprived of all the power, to own property, to take decisions, access and control over resources.

Ownership of land for instance is vested in the Ngwanyama (the king as head of state) who holds it in trust for the Swazi nation. There is no individual ownership. The (SNL) Swazi national land is divided into small chiefdoms which have been delegated authority to allocate land to individuals for cultivation, residence and communal grazing. The chiefs may also evict those who fail to conform to set community laws and social obligations. This Swazi national land is only accessible to men (Hlanze & Mkhabela 1998)

Understanding the cultural biases and gender disparities this study, clearly explain the high level of HIV/AIDS prevalence amongst women and the enormous spread of the epidemic amongst females particularly in rural households. In the analysis section I clarify the vulnerability and subordination of women, and show how they remain in a critical situation due to high levels of HIV infections than their male partners.

HIV/AIDS has multiple impacts on human lives especially on rural livelihoods in the country at all levels. In Swaziland there is little difference between rural and urban areas and between districts in the rate of infections. Rural areas that are near urban places turn to have higher prevalence’s. Urban places had always higher cases of HIV/AIDS prevalence’s. Moreover, women in urban areas have high HIV/AIDS prevalence’s than rural women. Literature has
revealed that HIV/AIDS has gradually destroyed many rural households in many different ways. (Swazi VAC 2004).

At the household level there is a growing number of uncertainty in terms of drastic reduction in income, and a growing number of orphaned children left alone and a large number of senior citizens who are forced to takeover the harvest and looking after orphaned grandchildren. The epidemic has negative impacts on production and creating an alarming continuous food crisis. Natural environmental shocks like drought contribute to destitute and food shortages. Rural areas are specially hit hard as much of Swaziland’s economy is largely based on agriculture. The 70% of the population living in the rural areas derive their livelihoods from agricultural produce. HIV/AIDS poses a development problem and it challenges long term strategy for poverty reduction and food security in the country. This is also recognised on the national economy as a whole. Economic growth rates are affected by the negative impacts of the epidemic on capital accumulation and productivity. Decline in GDP growth is ranges from 1% to 2.8% due to HIV/AIDS (NERCHA 2005).

Furthermore, HIV/AIDS related mortalities are leading to a decrease in productivity. Consequences include an increase in morbidity and mortality. The rate of the population growth is projected to decline in the years to come because of the increase in mortality and reduction in fertility brought about the AIDS epidemic. HIV/AIDS continues to be an overwhelming crisis, rapidly spreading and impacting deeply on social, cultural and economic aspect of the nation.

The HIV/AIDS situation continues to be not only a public health issue, but also a significant socio-economic and development problem in the country. The human development index has been falling primarily due to the 17 year plunge in life expectancy between 1997 and 2003. Life expectancy has declined from 65 years in 1991 to 37.4 years in 2005. It is expected to decline further in the near future to 32.5yrs in 2015 (UNGASS 2003-2005). The most productive part of the labour force is living with the virus which challenges the Swazi government to respond in mitigation strategies that are effectively and efficiently.

AS HIV/AIDS continues to grow, becoming one of the major development challenges of the Swazi nation, the country is putting up massive efforts to meet the challenges. Some of the challenges will be mentioned in the final chapter of the study.
In this study I seek to explore the fact that HIV/AIDS is much more than just a health issue but most of all a development problem that has undermined development in Swaziland. The UNDP report clearly shows that the Aids epidemic in Swaziland and Sub-Sahara Africa in general, is a major threat to development as evidenced by the huge amount of resources spent in trying to cope with the epidemic and the huge loss of human capital. (UNDP 2006)

The epidemic is having a negative impact on the development processes and has therefore severely undermined the millennium development goals. The Millennium Development Goals (MDGs), which were adopted in 2015, set a number of development goals to be achieved by the year 2015. These goals are now used as benchmarks to measure progress in individual countries (UNAIDS Report 2005).

Swaziland has faced major setbacks in its attempt to achieve these goals. According to UNDP Human Development Report, Swaziland is one of the countries, which have experienced reversal in their human development indexes. The index is a barometer for changes in human well-being and health is one of the key elements of this index. The AIDS epidemic is one of the major causes of this reversal.

HIV/AIDS also account for decline in life expectancy, decline in domestic household income and on labour. Health has serious implications on the social and economic progress in the development process. Institutional capacity to deliver essential social services is being compromised by HIV/AIDS related staff attrition. In Swaziland agricultural production is estimated to fall on average by more than 50% following the death of an adult from HIV/AIDS.

These figures are very high for an agrarian country like Swaziland where 70% of the population lives in the countryside and the agricultural sector is still the main source of livelihood. Rural populations generate their income mostly from the agricultural sector.

1.6 Rural-urban migration

In Swaziland the situation is compounded by the fact that most of the labour in rural areas is left for the women and the elderly whilst men seek paid jobs in the mines in neighbouring South Africa or in urban areas.

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1 UNDP Human Development Report 2005
2 UNDP Human Development Report 2005
Migration is another factor of importance I specifically elaborate about this in the analysis chapter. Mobility has a major impact on the household level and the spread of HIV/AIDS in the country. Formal employment has been a long –time preserve of men. During the colonial period men were forced into employment and when the mines opened in South Africa, men left their homes to go and work in the mines. Migration has been a causal factor in the spread of HIV infection in many countries in Africa. According to census in Swaziland, there were 51000 absentees mainly men working in South Africa in the late 1990s (ILO 2004).

In the rural areas, more and more women have had to take up activities that were traditionally in the male domain, for example, looking after livestock and ploughing the fields because of the migration of male rembers of the family either to towns or Mines. Thus the outbreak of the HIV/AIDS pandemic has worsened women’s situation. As a result, more than a third of the rural households are headed by women. A high level of promiscuity among men has been another problem in spreading the HIV/AIDS virus affecting women who die in large numbers leaving the children to the care of older women (Hlane & Mkhabela 1998).

For many years South African mines have relied on cheap labour from neighbouring countries including Swaziland. Swaziland enjoys well-developed infrastructure such as roads links with its neighbouring countries particularly its largest trading partner South Africa.

The main implication of the separation of couples is that for most of the year men leave their wives alone in charge of the agricultural fields and children, whilst they stay in mining compounds sometimes with ‘girl friends’ or second wives. Research has shown that mine workers are a high-risk group and that there is a high rate of infection by HIV/AIDS in South African mine compounds. When they return to their homes during holidays these men infect their spouses and sometimes return home already sick from the disease (WIDSAA 2000).

The absence of men working in the mines of South Africa is very essential to explore in accordance of the high rates of infection. Women are of special interest because they have the highest rate of infection.

1.7 Study Area: Manzini Region and trends

This section thus explores the HIV/AIDS prevalence trends and the corresponding demographic impact on rural livelihoods particularly in the Manzini region. My interest in the Manzini region is due to the fact that since the early outbreak of the epidemic Manzini has continued to have the highest rate of 41% prevalence over the last twelve years after the first
incidence in 1986. Hhohho was recorded to have the lowest with a 36% prevalence rate (SNAP 2004).

Manzini has continued to be the most devastated region with high HIV/AIDS prevalence in the country. The first HIV/AIDS case in Swaziland was identified around 1986 (NERCHA 2003). Since then HIV/AIDS prevalence has been staggering. The government responded by setting up the National AIDS prevention and control programme, that later became the Swaziland National AIDS Programme (SNAP 2000).

Manzini is a town located in the Middleveld in the Manzini region. Manzini is one of Swaziland’s four geographic administrative regions. Manzini town is the most populous urban centre. The region has fertile valleys and warm climate, which is ideal for agricultural produce and thus significant for the country’s economy and the people’s livelihood. It also contains Swaziland’s industrial site which is situated at Matsapha. Matsapha has employed many Swazi workers from all regions in the factories. There are a huge number of internal migrants from within the country into the Manzini industrial site area. Census data (1997) showed that the Shiselweni region has the highest levels of migration, with over 90% of people migrating to the Manzini region (ILO AIDS 2005).

However, the dynamics of the epidemic are not different from the regional picture. In all four regions the spread of HIV/AIDS is at an alarming state. This is also due to the country’s good road and communication infrastructure. A study on subsistence agriculture farms showed close correlation between migration and HIV/AIDS prevalence and deaths. It showed that the Shiselweni region has the highest number of AIDS-related deaths followed by the Manzini region, but the Shiselweni region has the lowest prevalence’s of HIV/AIDS (27%) and the Manzini region the highest (41%) (ILO AIDS 2005). However, rural areas have had slightly lower HIV/AIDS prevalence trends compared to urban areas (UNAIDS 2005). This is perhaps due to the migration pattern within the Shiselweni and the lower socio-economic status of the region.

The study of subsistence agriculture also revealed the correlation between those who migrated from the Manzini region could have acquired the infection elsewhere and only returned home to die. The final conclusion of the study revealed that many households reported family members returning home in the terminal stages of the disease (Bechmann & Rai 2005).
Within the Manzini region I specifically chose Mankayane which was my rural research site. This is a rural site just half an hour from Manzini. Most rural inhabitants of Mankayana commute daily to Manzini in search of labour or are currently employed in Manzini. In Swaziland the urban-rural differences is smaller because of the relatively small size of the country and the frequent commuting between rural and urban areas for work. Most Swazis are attached to their rural homesteads and they make frequent visits. Mankayane has relatively good public transport connection with the Manzini town. The population of Mankayane depend on farming combined with travelling to the town markets of Manzini to sell their produce and handcrafts for their livelihood.

1.8 Conclusion

According to recent data Swaziland is considered among the countries worst affected by the AIDS epidemic and the overall level of infection is still increasing. There are many challenges faced by the Swazi society in fighting against the epidemic. It is evident that the country’s development goals will be undermined by the rapid spread of the HIV/AIDS virus.
CHAPTER 2

Theoretical Approaches

2.1 Introduction

The main theoretical approach used in the study is the livelihood approach. The chapter describes the livelihood concept in the context of gender, and impacts of HIV/AIDS on rural livelihoods. I also incorporate discussions on the gender dimensions of this theory. By incorporating a gender perspective in the livelihood approach I believe that development issues can be addressed in a gender sensitive manner, which will be clear from the discussions in chapter 4.

2.2 Approaches to development: An overview

The study of development, as Elliot (1999) has noted has a relatively short history dating back as far as the 1950s. Since the end of the Second World War the world economy was in disarray, caused first by the economic crisis of the 1930s and then by the war (Allen & Thomas 2000). As a result scholars from different fields have examined the challenges of development in the developing world, such as the role of the state, market mechanisms and cultural factors that influence the development process. Different theorists emerged from various disciplines such as development economics, sociology and political science. Different approaches to development have become the popular way of addressing destitution and unevenness in the world economy.

In the 1950s to the 1960s development thinking was dominated by modernisation theories. These prioritised economic growth and the application of modern scientific and technical knowledge as the route to prosperity in the underdeveloped world at that time (Elliot, 2006:15). Development was explained or defined in terms of economic growth. Modernization thinking characterised societies as underdeveloped and these had to be modernised.
The emphasis was on capital accumulation, the primacy of investment and GNP growth rates as the indicator of development. Theorists argued that developed countries were distinguished by their economic, social, cultural and political modernity, which was totally opposite that of the underdeveloped economies. The thought was “development by imitation”, meaning modernisation is westernisation: following the western industrialisation capitalist model (Corbridge 1995). In this line of thought development and growth were considered to be synonymous.

Theorists such as Rostow (1960) wrote about the five stages of development, he explains development in terms of five stages as a common structural pattern of change. He mentions a country’s progressive stages from:
1. Traditional society; little knowledge and technologically not advanced.
2. The pre take-off stage; preparation for take –off, technology development, agriculture productivity increase, infrastructure development, entrepreneurial class develops.
3. Take –off: higher levels of savings and investment, industrialisation with modern technology; industrial expansion; economic structure changes continuously.
4. The round to maturity: the trend continues towards maturity.
5. The society of mass consumption: basic needs satisfied; consumption shift towards durable goods and services (Rostow, 1960).

Even with this optimism of the economic growth model, which was said to transform societies especially in the least developed countries, many countries in the developing world remained in the original stage without any economic progress.

In the 1970s there was a shift from the idea of economic growth. Some scholars of development criticised modernisation theorists for being responsible for intensifying and perpetuating the economic conditions of the developing countries. Most of the criticism came from the dependency school; these were the radical Latin American thinkers. The argument was that developing economies were increasingly being manipulated in the global market in terms of trade.

André Gunder Frank (1966) is one of the dependency school thinkers who, argued that there existed unequal power relations between the centre (developed countries) and the periphery (developing countries). He stated that the periphery (south) was being exploited by the
Metropole (north) in the capitalist mode of production. Economic surplus is being sucked out from the periphery to the metropole. The idea was that there is a constant increase in global inequalities and the marginalization of developing countries.

The main idea of the 1970s emphasised on employment and redistribution with growth with the aim that it would lead to equitable income distribution, reducing poverty and minimizing the potential for political unrest. From the 70s onwards focus was mainly on urbanisation, rural-urban migration that was to promote more industrialisation and eventually create more employment. Basic needs of the rural people were not really considered at this time.

By 1980s it became evident that these development approaches were not achieving the described results. However countries in East Asia were an exception, they were experiencing economic growth. These were the newly industrialised countries (NIC) countries that followed a totally different model of economic growth. Many of those countries that followed the economic model of the 80s were in huge debts and were unable to sustain themselves due to high interest rates in debt repayment. This as Elliot (1999) argues illustrated the limitations of past development strategies to promote and spread the benefits of growth. Observers called it the lost decade for developing countries (Allen & Thomas 2000).

The 1980s presented a different paradigm shift in development. In the 1980s the link between environment and development opened a new scope of interest in theoretical thinking or work. This also provided an opportunity to broaden and redefine the scope of development studies including new approaches like self-reliance, participatory, alternative development. Development was thus seen as a “multidimensional concept encapsulating widespread improvements in the social as well as the material well-being of all in society” (Elliot, 2006:20).

It was recognised that there was no single model for development but that various models could be used in different contexts. This was a more productive actor-oriented perspective. It recognized inequalities in the distribution of assets and power but above all stressed that people make their own history. The micro world of family network and community, and a micro-orientation with a focus on local actors, often household came into focus. The household become a scope of study, as well as a convenient unit for empirical data collection. At the same time a new generation of more optimistic household studies was conducted in
livelihood studies, mainly showing how people were able to survive. It was a direct response to the disappointing results of former approaches in devising effective policies to eradicate poverty (Elliot 2006). This was the era of structural adjustment programmes, a macroeconomic procedure for reducing debt and eliminating poverty. However the macroeconomic procedure alone was not sufficient enough to propose adjustment measures for the poor.

In the 1990s neo-liberalism grew strong. This is an approach to development that considers the free market to be the best way to initiate and sustain economic development, and eventually bring economic growth and prosperity. This could be achieved through tariffs deregulations on imports, limited involvement of the state in markets and minimize subsidies on exports goods. This was to make it possible for developing countries to be integrated into the world market. Most of the policies were defined by the neo-liberal policies of the World Bank (WB). The World Bank has addressed the problem of poverty systematically from its own global point of view. Since 1980, poverty has been the special theme of the World Development Report every ten years. The World Bank is a major source of funds for national poverty reduction programmes and research publications on poverty and related issues. However still most of the countries in the Third World were struggling to repaying huge debts of the WB and IMF.

2.3 Livelihood Approach to Development

In the 1990s development scholars began looking for a new way of addressing vulnerability, deprivation and poverty. It had become more evident that new concepts and approaches were needed. A more people sensitive approach was needed to address the growing global inequalities. International organisations such as the UNDP have consistently highlighted the impact of globalisation and contributed to the renewed debate on poverty with its annual Human Development Reports. The UNDP has constantly showed major concern with the growing inequalities and has called for “globalisation with a human face” (Shanmugaratnam, 2003). With the persistence of poverty and inequality and the increased of globalisation intensified uneven distribution of resources. The gap between the rich and the poor is persistently increasing. The dimensions of poverty are wide and complex and the realities of poverty vary between regions, countries, communities and individuals.
As a response to the complexity and challenges in the development process Chambers and Conway (1992) came up with the livelihood approach to development. The original livelihood concept derives from the work of Chambers and Conway (1992), which elaborate on the basic concepts of capability, equity and sustainability, each of which is both an end and means to sustainable livelihoods (Chambers & Conway, 1992). They focus on the idea that people construct livelihoods by drawing on a range of assets and entitlements. They suggest the need to understand the livelihood strategies and vulnerability of the poor as the starting point for intervention. This places the analysis on an individual (household) level, building from the micro to the macro level.

The concept of sustainable livelihoods was put forward in a report to an Advisory Panel of the World Commission on Environment and Development (WCED). The sustainable livelihood analysis defined by the WCED (1992) starts with people, factors that shape peoples livelihoods. It also includes the environment within a holistic framework, building a policy and institutional environment that supports poor people’s livelihoods. The approach also includes an analysis of vulnerability context, in which assets exist and aims to develop an understanding of the structures and organizations both governmental and private. This also supports the development that builds on the strength of poor people and provides them with opportunities to improve them.

Chambers and Conway modified the WCED definition and proposed the following definition:

“A livelihood comprises the capabilities, assets (stores, resources, claims and access) and activities required for a means of living: a livelihood is sustainable which can cope with and recover from stress and shocks, maintain or enhance its capabilities and assets, and provide sustainable livelihood opportunities for the next generation; and which contributes net benefits to other livelihoods at the local and global levels and in the short and long term (Chambers & Conway, 1992: 8).

According to Chambers and Conway the definition of livelihood can be at different hierarchical levels, the most common being at the household level. The household level is very important for this study because it positions the women in Swaziland within a family structure, their position within the family, their relation to other members of the family, especially men, their position in the traditional extended family and their communities.
The main components of the livelihood are illustrated as follows:

**Figure 1. Components and Flows in a Livelihood (Chambers & Conway, 1992:10)**

As illustrated in the diagram the livelihood approach is **people centred**. It is said to be a people-centred approach to development. This is very important in gender and health issues in the context of Swaziland. It promotes equal opportunities and choices for all, so that everyone involved can develop their unique potential and have a chance to contribute to society.

Thus it builds on people’s strengths, rather than their needs. It puts people at the centre of development, rather than the resources they use. It brings together all aspects of peoples lives and livelihoods into development planning, implementation and evaluation. It provides an interdisciplinary approach towards a common framework. It provides an understanding between the inequality that exists between men and women in the development process. As a people centred approach the livelihood approach can assist in showing the impacts of the AIDS epidemic on individuals, household and food production. It captures the historical life of the HIV/AIDS person from past, present and future coping mechanisms.

This approach offers a holistic way of addressing the HIV/AIDS epidemic, which emphasis on the participatory and coping adaptive strategies by both men and women in the
development process. Alan & Roger (2000) add that a livelihood approach is built on a set of core principles that emphasise people centred response and multi-level approach to development. In the people centred approach the livelihoods are located in social and institutional context that shape the process of livelihood construction and its outcome in particular biophysical environment. This process is inclusive of production, distribution and consumption as well as other individual and collective pursuits. Actors seek opportunities, information and knowledge in realising their livelihoods. In addition actors form a coalition to deal with uncertainty and adversity. This thus takes place in social environment characterised by unequal power relations embodied or reflected in the formal and informal institutional arrangements; that enable or constrain access to resources and the ways in which the actors act individually and collectively and by the operations of government’s policies (Carney 2002).

Government policies impact on the social context of livelihood construction through the incentives and disincentives that affect the actor’s decision regarding allocation of resources and choices of activities. The incentives and disincentives relate to factors such as price policy, access to information, market and social services, subsidies, restrictions on particular practices, obstacles to people’s physical mobility, and displacement due to appropriation of land for new projects (Carney 2002).

### 2.3.1 The Capability Concept

Another concept, which is central in the livelihood approach, is the livelihood capabilities. The capability concept derives from Amartya Sen, (1984). Sen defines capabilities in terms of functioning’s;

> Functioning’s represent parts of the state of a person- in particular the various things he or she manages to do or be in leading a life. The capability of a person reflects the alternative combinations of functioning’s the person can achieve and from which he or she can choose one collection. The approach is based on a view of living as a combination of various ‘doings and beings,’ with quality of life to be assessed in terms of the capability to achieve valuable functioning’s (Sen, 1993:31)

Functioning can vary from such elementary matters as being well nourished, disease- free, safely sheltered and free from illiteracy (Sen 1992).
Drawing on the capability concept is to capture clearly the social and the cultural understanding of the intangible assets. Sen argues that development could be seen as a process of capability expansion. It has also been inspired by the West European debates on exclusion. The UNDP, towards the end of 1990s made “sustainable” livelihoods a focus area for poverty reduction UNDP (1999). With the exacerbation of poverty in the world the theme of the 21st century is to address poverty and any form of vulnerability in development as a new challenging face. So the livelihood approach has been many times used as a framework for mapping vulnerability and poverty at the local level.

The human capabilities are thus explored from all dimensions be it in material assets, economical, social, cultural and political. Literally individuals have multiple choices, which can be expanded and utilised to give the individual freedom of choices and increasing capabilities to fulfil choices by its own capacity and initiative. People become more aware of their own creative potentials and taking initiative to realize those potentials. Such capabilities include gaining access to and using services and information exercising foresight, experimenting with others and exploiting new conditions and resources.

Chambers & Conway (1992) define Capabilities as both an end and means of a livelihood. Capabilities are what people can be and are able to do and achieve. A person’s capability refers to the freedom to achieve various lifestyles. The word capability in this context has a wide multidimensional understanding. In this study the capability concept has value as a tool in mapping vulnerability and interpreting social change and recognizing the power structures that exist in different societies and the political empowerment of individual and achieving sustainable livelihood.

2.3.2 The livelihood framework

Livelihood approach has also been conceptualised as a framework. The livelihood framework views livelihoods as being the outcome of choices people make based on a various number of capital assets. The livelihood framework recognises five categories of these assets.

(1) Human capital: knowledge, skills, ability to labour, good health and aptitudes.
(2) Natural capital: land water, biodiversity and services derived from these
(3) Financial capital: savings, credits
(4) Physical capital: transport, shelter, water, energy and communications
(5) Social capital: networks, groups, trust, shared values and access to institutions (DFID 1999). Quoted in Toner 2003

Figure 2: The Sustainable Livelihoods Framework

An analysis of assets is a review of what people have and recognition of what people don’t have rather than an analysis of need (Helmore, 1998 quoted in Moore). The assets analysis also considers how access to assets has changed over time, what changes are predicted, what the causes of changes are and how access and control of assets differs between social groups (Carney, 1998).

Using the livelihoods framework as an analytic tool offers policies, institutions and intervention designers to shape the extent to which people are able to draw on or develop and expand on particular assets in order to sustain a livelihood. It is important to understand the structures or organisations, and the processes such as laws, policies, societal norms, and
incentives. This intervention seeks to recognise and respond to the complexity of both the productive and reproductive aspects of livelihoods, which seek to connect the realities of poverty at the micro-level (individual, household and community), with the macro level (regional, government, powerful private enterprise). Such an understanding helps to identify areas where restrictions, barriers or constraints occur and explain processes that could ensure that development can demonstrate sustainable impacts (Carney 2002).

The fact that the livelihood approach encompasses and acknowledges different conceptual frameworks have attracted attention amongst development planners, including the WB, UNDP and many other development agencies. Especially employing gender issues in health and rural livelihoods, and giving a holistic approach as to how these issues can be addressed in consideration of gender related issues. In its holistic appraisal of Poverty, Scoones (2001) argues that the SL approach does not necessarily aim to address all aspects of the livelihoods of the poor rather to employ a holistic perspective in the analysis of the livelihoods to identify those issues of subject areas where an intervention could be strategically important for effective poverty reduction, either at the local level or at the policy level.

The livelihood approach seemed suitable as a conceptual framework within which we seek to explain behaviour of risk of overlooking gender equity. The framework is useful analytical structure to help development practices in understanding the reality of the poor and the complexity of rural life. It is suitable in the sense that it can provide the knowledge needed to tackle inadequacies. The fact that it employs multiple disciplines it helps to discover the underlying principles common to the development process in different fields. It also provides a framework for understanding the relationships between the knowledge generated from different disciplines

2.3.3 The livelihood Principles

As a set of principles for action Toner (2003) notes the claims that sustainable livelihood approaches have implications for how development intervention are designed, implemented and evaluated. The livelihood principles are to guide the practical application of the theoretical concepts of livelihoods. These sustainable livelihoods principles have their foundations in “learning process approaches” (Carney 2002). Toner identifies two principles for action, firstly the normative principle such as people-centred, participatory and responsive, sustainable and empowering. Secondly, are the operational principle conducted in partnership,
multi-level and holistic, disaggregated, long term and flexible. In this context it helps to organize the factors that constrain or enhance livelihood opportunities and shows how they relate to one another. It aims to build on strengths. The main focus starts with the complex understanding of poverty and individual livelihoods and ensures that the poor are the central focus.

2.3.4 Livelihood Strategies

Livelihood strategies aim to achieve livelihood outcomes through the active involvement of people in responding to and enforcing change. The aim is to make people aware of their situation and then playing an active role in achieving their livelihood by continuously exploiting opportunities. Livelihood strategies are an appropriate methodology for examining individual behaviour. This is embedded in power relations and institutional processes. Depending on the assets people have the structure and process that impact on them, tradition, and the vulnerability context under which they operate, people choose livelihood strategies that will best provide them with livelihood outcomes. “Livelihood strategies are composed of activities that generate the means of household survival” (Ellis, 2000:40)

Livelihood strategies change as the external environment over which people have little control changes. At times unsustainable and unproductive livelihood strategies continue because of tradition and habit. At other times livelihood activities are introduced as coping strategies in difficult times (Chambers & Conway 1992).

Scoones (1998) identifies three types of rural livelihood strategies: agricultural intensification or extensification, livelihood diversification including both paid employment and rural enterprises and migration (including income generation and remittances). Carney (1998) lists the categories of livelihood strategies as natural resource based, non natural resource based and migration, while Ellis (2000) in his framework, categorises livelihood strategies as natural resource based activities (including remittances and other transfers). Understanding the diverse and dynamic livelihood strategies is important so that interventions are appropriate. Farrington states that introducing new livelihood strategies is an option in rural development but people often favour tradition and security over higher but more risky income (Farrington 1999).
2.3.5 Livelihood Outcomes

A focus on outcomes leads to a focus on achievements, indicators and progress. An understanding of livelihood outcomes is intended to provide, through a participatory enquiry, a range of outcomes that will improve well-being and reduce poverty in its broadest sense (DFID, 1999). Potential livelihood outcomes can include, improved food security, higher income, reduced vulnerability, increased well-being, protected rights of access and recovered human dignity (Chambers & Conway 1992).

2.3.6 Vulnerability context

An understanding of the complexity and integrated nature of the livelihoods of the poor allows for a better understanding of their vulnerability to external shocks and stresses. People’s livelihoods and their access and control of resources can be affected by events largely beyond their control. Vulnerability is characterized as insecurity in the well being of individuals, households, and communities in the face of changes in the external environment. “The vulnerability context firstly frames the external environment in which people exist” (DFID, 1999:13).

Vulnerability has two facets, firstly, an external side of risks such as sudden shocks or events such as health problems, earthquakes, floods, droughts, conflicts, and agricultural problems such as pests and diseases, economic shocks and seasonal vulnerability of prices, production, employment opportunities or health can impact on livelihoods (DFID, 1999, Chambers & Conway, 1992). Culture including gender and household dynamics can also cause risk and vulnerability.

Secondly, the vulnerability context is about internal side of defencelessness caused by lack of ability and means to cope with damaging losses. Over longer periods or several generations, more substantial shifts in combinations may occur, as internal and external conditions change. It is this dynamic element, evident in the context of assessing the sustainability of different options (Chambers & Conway 1992).
2.4 Gender Approaches to livelihood framework

In any development processes gender awareness is necessary in order to eliminate any gender blindness. In most developing countries there exist discrimination in opportunities and the allocation of resources or benefits and in access to services on the basis of gender. This is so very important when dealing with health issues in general and HIV/AIDS in particular. Development theorists agree that the gender issue should be taken into consideration when discussing development issues. Without strategically addressing gender needs in any given development intervention, the development goals would be undermined. In my understanding of gender in this thesis I will be referring to both women and men. However, I will be focusing particularly on women’s needs. The women’s situation is not considered independently of, but in relation to that of men.

A gender dimension will examine the differences and disparities in the roles that women and men play, the power imbalances in their relations, their needs, constraints and opportunities and the impact of these differences on their livelihoods. Especially in health, a gender perspective examines as to how these differences determine differential exposure to risk and access to the benefits in health related issues in order to improve rural livelihoods.

2.4.1 Integrating the Gender approach to livelihood analysis

The livelihood approach directly and indirectly encompasses the gender analysis in development processes. Gender analysis provides information about the relationship between women and men. These differences can be further understood in its relationship with race, ethnicity, culture, class, and status. Former concepts of gender referred to biological differences between male and female, which are universal. Townsend (1993), states that gender differences are socially constructed and widely differing according to time and place.

It is thus further important in understanding the different patterns of involvement, behaviour and activities that women and men have in economic, social and legal structures. The livelihood approach encompasses gender analysis that offers information to understand women’s and men’s access to and control over resources that can be used to address disparities, challenge systemic inequalities and build efficient and equitable solutions. In this thesis, women’s struggles are seen in the relevant cultural context.
The gender approach identifies the various roles played by both women and men in the household, community, workplace and political processes. History has shown that these different roles between women and men usually result in women having less access than men to resources and decision-making processes, and less control over available resources (Momsen, 2004).

Thus integrating gender mainstreaming approach to livelihood gives considerations to both men and women’s needs. This also limits the discrimination that usually exists against women. The framework focuses also on the equity, efficiency and empowerment of women in the development process, which in turn gives women autonomy and increase their purchasing power and equality. The implication of approach is that women are provided with resources and opportunities on the same start point as men in society. This contributes to change of attitudes by making women more visible.

2.4.2 Gender Equity

Conway and Chambers (1992) explain the word equity in a broader understanding. It is used to imply a less unequal distribution of assets, capabilities and opportunities. This includes an end to discrimination against women, against minorities, and against all who are weak. In gender mainstreaming equity and economic efficiency are thus synergistic. In gender analysis equity is defined in terms of individual access to and control over resources; women’s (actual and potential) productive contributions provide the rationale for allocating resources to them (Razavi & Miller 1995).

Bringing forth equity in a gender analysis perspective makes it possible to identify gender differences in access to and control over income and resources. This thus makes it possible to understand the implications that put women in a subordinate situation and further makes it possible to work on the differences for further exist. Gender equity emphasise the fairness and justice in the distribution of benefits and responsibilities between women and men. The concept of equity recognises that women and men have different needs and power and that the differences should be identified and addressed in a manner that rectifies the imbalance between the sexes (Moore 1999).
The livelihood concept thus has the superior ability to identify the factors influencing risks of vulnerability, deprivation within development amongst individuals which will in turn lead to more efficacious interventions and application of improving people’s well-being. Integrating gender equity, in to the development discourse, enables policy makers to adopt a broader perspective to outline vulnerability. Gender equity in turn leads to gender equality. Chambers & Conway (1992) explain equity in terms of equal distribution of assets, capabilities and opportunities, and an end to discrimination. This provides an understanding of the different gender roles that exist between men and women, which has also been mentioned earlier.

2.4.3 Gender Equality

Gender equality implies that women and men enjoy the same status. WID (2005) argues that Women and men have equal conditions for realizing their full human rights and potential to contribute to national political, economic, social and cultural development, and to benefit from the results.

Originally, it was believed that equality could be achieved by giving women and men the opportunities, on the assumption that this would bring sameness of results (Lindsey 1990 in WID). However, same treatment was found not necessarily to yield results. Today, the concept of equality acknowledges that different treatment of women and men may sometimes be required to achieve sameness of results, because of different life conditions or to compensate for past discrimination. Equality has been later replaced by the anti-poverty approach. Which mainly focuses on the economic inequality between women and men not linked to their subordination, but to poverty? (Moser 1993).

Moser (1993) argues that the anti-poverty policy approach to women focuses on their productive role, on the basis that poverty alleviation and the promotion of balanced economic growth requires the increased productivity of women in low income household. She argues that the assumption is that the origins of women’s poverty and inequality vis-à-vis men are attributable to their lack of access to private ownership of land and capital, and to gender discrimination in the labour market.

Anti-poverty approach has been helping in reducing the power imbalance between men and women within the household by supporting projects that give women employment which in
turn meet practical gender needs. The end result is that women through employment would gain autonomy.

2.4.4 Empowerment

The emphasis on the empowerment of women is a recent phenomenon in theories of development. Modernization approaches to development did not consider gender differences. The assumption was that as economic growth took place, the benefits of such development would trickle down to benefit all sections of society (Willies 2005). The empowerment approach has become most popular amongst governments and multilateral agencies. This approach is seen as a valuable policy approach for women in development and originates from feminist writings and grassroots organisations (Moser 1993). In development empowerment focuses on development activities such as economic participation, political participation, education, health and livelihood.

According to Alan & Thomas (2002), empowerment is a desired process by which individuals, typically including the “poorest of the poor”, are to take direct control over their lives. Once empowered to do so, poor people will then be able to be the agents of their own development. This thesis puts emphasis on empowerment used as an analytical tool to be used in development processes to achieve change for both men and women.

I understand empowerment is a process of emancipation of the individual to expand choices, in order to fulfil a satisfactory livelihood.

Jorawlands (1997) explains that in development empowerment is a complex process, which involves complex inter-relation of different elements, and those interrelations and interactions are dynamic. Jorawlands (1997) expands on this point and argues that the various aspects of empowerment can be categorised into three groups, (1) contextual or material being part of environment in some way; (2) structural in terms of the nature of the organisations and their activity and (3) inner the psychological or psycho-social processes. The core significant of empowerment process involves the psychological and psychosocial processes. Central to these are the development of self-confidence and self-esteem and a sense of agency of being an individual who can interact with her surroundings and cause things to happen.

The process of empowerment is both experienced as a feeling of personal change and development and also manifested or demonstrated in changed behaviour. Every individual
experiences this process related to one circumstances and history as well as actions. Empowerment in the context of gender and development is mostly defined as a process rather than an end product; it is dynamic and changing and varies widely according to circumstances.

Empowerment as a gender issue is about transforming social relations. Empowerment as gender and development issue enable women who become empowered to act to meet their own needs and this can in the long run contribute to development for the wider society. Empowerment in development becomes a useful tool for analysis and planning, having a sense of empowerment in relation to other people is associated with self–confidence, self-esteem and sense of agency. It also depends on the development of the individual’s abilities to negotiate, communicate and defend his or her rights. Such skills represent changes and leads to greater personal empowerment. The main purpose of adopting the empowerment framework in addressing issues of gender and HIV/AIDS opens a gateway for women mostly to be acknowledged in all participatory activities in society. The empowerment approach can raise awareness to decision makers and politicians to recognize the existence of women’s needs.

Rowland (1995) argues that empowerment is a bottom-up process that cannot be formulated from top-down. Rowland further argues that empowerment does not only mean to have access to decision making but also being able and entitled to occupy the decision-making space. The word empowerment is used in many different contexts and by different organizations. Its meaning is mainly understood from the context it is being used. The process of empowerment is whereby communities or women are encouraged to become increasingly self-reliant in improving their livelihoods. This is a bottom up strategy, which challenges women to use their voice to spell their needs. Large empowerment implies redistributing power and transforming institutions with aspects of democracy embedded.

### 2.5 Approaches to studying HIV/AIDS

The livelihood approach provides a useful tool in attempting to understand impacts of HIV/AIDS and its consequences on rural livelihood. The issue of HIV/AIDS has implications on a number of diverse factors such as individual health, capabilities, household incomes and access to resources, cultural practices and understanding these diverse and complex factors
inevitable require a multidisciplinary approach. An interdisciplinary approach gives a bigger picture of the HIV/AIDS and livelihoods in rural populations, how the epidemic is developing, how it can be dealt with, and what strategies and development practices can be employed to address the problem, and future challenges in development. Using this interdisciplinary approach one can analyse the impact of HIV/AIDS on women’s capabilities and as a means of working out interventions that will reach the most vulnerable and improve their lives. In the coming years, as (UNAIDS, 2004) has shown, rural inhabitants, like those in Swaziland, will continually be the most devastated because of the vulnerability which they already face.

The new dimension and concepts offered by the livelihood approach provides new research tools for understanding of the vulnerability of the rural women.

2.6 Conclusion

This chapter has presented the main theoretical approach used in this study to analyse HIV/AIDS and rural livelihoods in Swaziland. The livelihood approach is a framework that encompasses an interdisciplinary approach to development analysis. The interdisciplinary analysis gives a broader understanding and the strength of locating development in practice and embraces gender sensitivity. It is a key point that a development concept in the 21st century recognises that both women and men are both equally visible in the determination of priority in development.

There has been a growing interest in the livelihood concept since it was popularised in the early 1990s. Many organisations such as World Bank (WB), United Nations Development Programme (UNDP), Department for International Development (DFID) and many others adopted this concept in development implementation to address multidimensional issues in development practices. The interest in livelihood derives from many quarters. Also from studies of coping in arid and semiarid environment, form studies emphasizing income diversification in rural communities (Preston 1992, Ellis 1998) and from studies of change in gender roles (Francis 1998).

Referring to Sen’s capability approach the 1994 Human Development Report states that “such a paradigm of development enables all individuals to enlarge their human capabilities to the full and to put those capabilities to their best use in all fields-economic, social, cultural and
political” (UNDP, 1994:4 quoted in Shanmugaratnam, 2004). The livelihood approach represents a good starting point in the understanding of rural women in Swaziland and a leading path towards a sustainable livelihood because this approach captures a realistic view of livelihood systems. The livelihood framework is a useful analytical tool that can help to understand the reality of the poor and the complexity of their lives. Clearly the approach is sensitive to contexts and situations.
CHAPTER 3

Methodology

3.1 Introduction

The main objective of this chapter is to outline the methods of data collection, and analysis used in this study. In this study I mainly used qualitative methods of data collection analysis. This is widely accepted as suitable method when conducting social science research. Qualitative research takes many forms. I have used the interview method using questionnaires and thereafter followed them up with in-depth interviews. I also consider the issues of ethics in general, since these are very important in this research, especially when dealing with sensitive issues such as HIV/AIDS.

3.2 Field Research

The field work experience was an eye opener for me in the sense that what I had leaned in theory as to how to conduct research was very much put to the test. However, the study context was not new for me because I was born in Swaziland and grew up there. I speak the language and I am familiar with the culture of the Swazi people which gave me an advantage in my field research. What helped me the most was having a local supervisor who knew the society very well and particularly the specific region I studied? Moreover, she works for a NGO as a HIV/AIDS coordinator. Her knowledge of the issue was indeed helpful for me.

In spite of my familiarity with the society and the region it was not always easy to gather information from government offices and other places. I was faced with various challenges. In some cases we were directed to different offices before we could get information. When I went alone nobody would pay that much attention to me. The next day when I went with my supervisor they wanted to help. It was obviously helpful to go with someone from area who knows her way around.
It was difficult to get information from the elderly, as I was a younger woman. They would rather talk to elderly women, or preferably a male figure. Other challenges were related to time and transport. There were specific times for buses travelling to remote rural areas. A lot of time was spent waiting for transport and people. There is even a saying which goes like this: ‘there is no hurry in Swaziland’. The Swazis are very traditional and respectful and it helps a lot if one knows the cultural codes. This is especially important, when it comes to senior citizens and dress codes. A woman is not supposed to wear pants if she is to be taken seriously in government offices.

3.3 Qualitative Research

There are two main methods of doing research, the quantitative and the qualitative. The main research method used in this study is the qualitative method. The choice of this method was influenced by the nature of the topic and the main objectives of the study.

According to Patton (1990) qualitative methods consist of three kinds of data collection.
1) In-depth, open-ended interviews; this data from interviews consist of direct quotations from people about their experiences, opinions, feelings, and knowledge.
2) Direct observation; data from observations consist of detailed descriptions of people’s activities, behaviours, actions, and a full range of interpersonal interactions and organizational processes that are part of observable human experience.
3) Written documents; this data yields excerpts, quotations, or entire passages from organizational, clinical, or program records; memoranda and correspondence; official publications and reports; personal diaries; and open-ended written responses to questionnaires and surveys.

This study uses mainly interviews and written records. The observation method is also employed and derives mainly from my previous stays in Swaziland and general views about the society and culture

3.3.1 Qualitative Interviews

As Kvale (1996:29) explains, “If you want to know how people understand their world and their life, why not talk to them? In an interview conversation, the researcher listens to what people themselves tell about their lived world, hears them express their views and opinions in
their own words, and learns about their work situation and family life, their dreams.” This perspective captures the main concerns in the livelihood approach, where one has to examine among other things, the whole being of an individual, historical life, the social and economic context, family relations, and access to resources. In order to get this information from informants qualitative interviews were used.

According to Patton (1990) there are three variations in qualitative interviewing and these are; (1) informal conversational interview, (2) general interview guide approach and (3) standardised open-ended interview, these types were used in the interviews. Patton (1990: 282) argues that in informal conversation approach, “the conversational interviewer wants to maintain maximum flexibility to be able to pursue information in whatever direction appears to be appropriate, depending on what emerges from observing a particular setting or from talking to one or more individuals in that setting”. He further argues that the strength of the informal conversational approach is that it allows the interview to be highly responsive to individual differences and situational change (ibid.). The use of this method enabled me to individualise questions in order to get in-depth communication with the interviewee. The interview guide is a list of questions that are to be explored in the course of the interview (Patton, 1990). The guide was used in order to guide the conversation and in some cases to bring the informants back to the key issues. This method was used in focus group dissensions in order to keep the conversations focused and at the same time allowing individual perspectives.

The main categories in the qualitative interviews were (i) women, (iii) elderly, mostly men (iii) representatives from non-governmental organisations, and (IV) government officials who were both men and women.

Focus groups included mainly rural women. The main informants were from Mankayane, a village in the Lubombo region. Questionnaires were distributed given to 30 randomly selected women in Mankayane. Due to the high rate of illiteracy in the region, a research assistant recruited from the local area helped the women to complete the questionnaire. The questionnaires were meant to capture the demographic factors and status of these women. The questionnaires were later followed by individual interviews. The interviews were conducted in local Swazi language and this enabled me to have a deep conversation of various aspects of their lives, which they would normally not tell others. After gaining their confidence I was
able to conduct in-depth interviews. A research guide was used to make sure that all the important questions were covered. Women were interviewed individually, each interview lasted for an hour, and this enabled these women to narrate their life histories, family life situations, their source of income etc. In some instance spontaneous questions were asked in order to gain more information. Valuable information was obtained through these interviews. My ability to hold the interviews in Swazi language was of great help in these interviews. These I can confidently state that interviews would not have been possible if I were dependent on an interpreter.

Informal conversations were also held with several women I came across in different locations such as the markets, shops and towns. The purpose of the informal conversations was to get a general overview of the situation of women in Swaziland, and the extent and impact of HIV/AIDS in the country. These women also included rural teachers and nurses.

Elders, mostly men, were also interviewed. However it was not easy to get informants in this category, as most were not willing to speak about sex related matters with a young woman. They were however willing to talk about general development issues. Another method was thus devised to get information from this group by focusing more on general development issues such as poverty, agriculture, and labour thereafter health issues such as availability of medicines, access to clinics, hospitals and traditional healers. Through this method I was more able to get more information concerning general cultural norms and the role of women in Swazi culture, how women are perceived, what is their cultural status and position in the home and so on. The elderly were willing to share more information if I were with another male figure or an elderly woman respected by the community. I was therefore not able to ask in depth questions. Elderly citizens are much respected and their wisdom is important for the community. Many people look up to them.

Officials of a number of NGOs were interviewed. They were drawn from organisations actively working on women’s development issues such as health, agriculture, law, and economics. These include, (a) Family Life Association of Swaziland, an association that provides technical leadership in innovative, effective, sustainable services delivery models gand market oriented information, and education interventions that are based on research and strategic gender based needs; (b) Swaziland Positive Living (SWAPOL), whose main
objective is to improve the quality of life of the infected and affected people in rural communities in an effective and efficient manner; (c) Women and Law in Southern Africa (WILSA), whose mission is to contribute to the sustained well-being of women within families and societies, specifically within the Southern Africa countries - Botswana, Lesotho, Malawi, Mozambique, Swaziland, Zambia, and Zimbabwe. They deal with the legal status of women because some of the laws that keep women in their subordinate position date from the colonial times and fail to protect HIV positive women or Swazi women in general and recognise their needs. They also provide legal advice, and challenge laws that suppress women; (d) the Swaziland Women's Action Group Against Abuse (SWAGAA), an organisation dealing with counselling services for victims of domestic violence and sexual abuse; (e) Women in Development, which deals with development issues in general from a gender perspective; and finally (f) NATICC, an organisation which provides HIV/ AIDS counselling services.

I also conducted interviews with officials from government departments, mainly the Ministry of Health. The main objectives of the interviews are to obtain statistical information, policy documents and other government publications. The other objective was to get an overview of the impact of HIV/AIDS in the country.

3.3.2 Focus Groups

Focus group in general is a method of interviewing that involves more than one, usually at least four interviewees. It may be classified as a group interview; but focus group emphasizes a specific theme or topic that is explored in depth. The focus group practitioner is invariably interested in the way in which individuals discuss a certain issue as members of a group, rather than simply as individuals (Kvale 1996). In a focus group the researcher is interested in such things as how people respond to each others views and build up a view out of the interaction that takes place within the group. Most focus groups undertake their work within the traditions of qualitative research. They are explicitly concerned to reveal how participants view the issues with which they are confronted; therefore the researcher usually aims to provide an unstructured setting for obtaining views and perspectives (Kvale 1996).

Normally the focus group method allows the researcher to develop an understanding about why people feel the way they do (Patton, 1990). The approach offers the opportunity of allowing people to probe each other’s reasons for holding a certain view. Focus group is
advantageous because the group members get to listen to each others’ point of view and can be helpful in the elicitation of a wide variety of different views in relation to a particular issue. Participants are able to bring to the fore issues in relation to a topic that they deem to be important and significant, since everybody’s viewpoint is particularly important. Individuals are given the opportunity to argue and challenge each other’s point of view. The focus group offers the researcher the opportunity to study the ways in which individuals collectively make sense of a phenomenon and construct meanings around it (Patton 1990).

However focus groups can be difficult to organize, especially when doing research in developing countries. There are usually many challenges one faces. Public transport is a huge challenge especially when carrying out research in rural areas. People travel long distances on foot, it may take them time to show up at the agreed location for the meeting. I faced all these challenges in the field. Time is another factor that did not work very well. One spends hours waiting for informants or transport. People were willing to give information but they asked if they would get anything in return. I was straight forward from the start that each person will contribute in giving information out of his/her concern. There would be no benefits or payments of any kind. However, in the focus groups that took place with the women, I was able to offer them something to drink and snack while conducting in-depth interviews. Some had walked long distances to get to the meeting location.

In the focus groups I carried out there were altogether 27 women who came to the meeting on the interview day. Three other women who had completed the questionnaires could not come. 27 are however representative enough. I tried to divide the women in groups of five. However when I was in the process the level of participation and willingness was not enthusiastically embraced. Many were not comfortable to talk about health issues, especially HIV/AIDS in front of others. Many participants felt that too much intimate details of their private lives would be exposed and were uneasy. I respected their privacy and I then had to abandon this method and interview each person individually and all seemed relieved.

3.3.3 Ethical Considerations

I abandoned focus group method due to ethical considerations. When conducting social research the issue of ethics is very important. The researcher should consider the ethical codes that come with social research. Ethics involves serious problems and challenges. So it is
important that me as a researcher is aware and well prepared about the issues involved and consequences that might arise in misconduct. The consequences of a study need to be addressed with respect to possible harm to participants in the study. HIV/AIDS is indeed a very sensitive issue due to the stigma it carries in countries like Swaziland and most victims did prefer anonymity. Many could not bear the shame of all neighbours knowing about their illness status.

Kvale (1996) and Bryman (2004) outline a number of ethical issues, which should be taken into consideration when carrying out research, and these include:

**Voluntary participation:** participants should not be by any means misled into taking part in research, or forced to get involved without their willingness. All the participants in my study were well informed about the research and were willing participants.

**Informed consent:** participants should be informed about the nature of the research and its implications, procedures and risks involved in research. Ethical standards also require that researchers not put participants in any risk situation where they might be harmed as a result of their participation. This could be either physical or psychological harm.

**Confidentiality:** this implies that data identifying the participants will not be reported. If information to be reported is recognizable to others the participant need to agree to the release of identifiable information.

**Protection of participants:** this involves the issue of anonymity. Anonymity is a strong guarantee of participant’s privacy. Participants will remain anonymous through out the study by changing their names and identifying features that might expose participants.

These ethical guidelines were used in this study in relation to interviews with women affected by the AIDS epidemic. The challenges in using the focus group method were in this study the level of unwillingness amongst informants. Especially when dealing with sensitive issues like people’s personal health issues and HIV/AIDS, many want to keep their family affair within their own personal space.

### 3.4 Observation

The observation methods give detailed descriptions of people’s activities, behaviours, actions and the full of range interpersonal interactions and organizational process that are part of observable human experience. According to Judd et al (1990) there are two types of observation.
(1) Structured Observation, often called systematic observation; a technique in which the researcher employs explicitly formulated rules for the observation and recording of behaviour

(2) Participant observation is the process of immersing yourself in the study of people you are not too different from. It is almost always done covertly, with the researcher never revealing their true purpose or identity. If it is a group you already know a lot about, you need to step back and take the perspective of a "Martian", as if you were from a different planet and seeing things in a fresh light (Judd, C. et al 1990).

I relied mainly on the second type of participant observation because I already knew much about the Swazi society since I am born and raised there. I was able to draw from my past experiences, stories I have heard, school, church and other settings where women’s positions in the Swazi society were reflected.

3.5 Document Analysis

Documents on statistics were analysed. Most of these documents were from NGOs. It was much easier to get documents from NGOs than government departments. Government documents were largely outdated referring to several years back and was difficult to get them from the people in charge. When looking for government documents I was sent from office to office without any results. It helps to take somebody who knows people in these offices and my supervisor was helpful concerning this. The main documents collected from the offices were statistical documents. Unfortunately some of the statistical documents were not updated. They do not have good records of reliable statistics documents. UNAIDS and UNDP documents to give an overview of the HIV/AIDS on human development and the impact of the epidemic on livelihoods at large and what strategic plan is being implemented to target faster coping management for dealing with the crisis. A number of law documents were gathered to look for issues, factors that influence maintenance and decision of law applicable to issues in relation to women’s legal rights. I also gathered Documents regarding customary laws, which are much influenced by customary beliefs.

I obtained various documents from the ministry of health and welfare, ministry of agriculture on food security and the economic overview. Swaziland is very much dependent on agriculture to sustain itself. At the ministry of health I got a number of HIV/Aids documents that gave clues about the HIV/AIDS situation in the country in general. Also a number of
documents from different NGOs about HIV/AIDS and its impact in different communities were obtained.

### 3.6 Conclusion

This chapter has presented the main methods that were used in the study of HIV/AIDS and rural livelihoods in Swaziland. I have used the qualitative method because it is perhaps the most suitable methods in social science research, and also applicable for this study. The research has been an eye opener for me as well. Even though having the advantage of knowing the culture and social structure of the Swazi I was faced with different challenges. Having the background of being born and raised in Swaziland made my research less problematic. I learnt a lot in the field, many things which I did not know before. My curiosity was stimulated.
CHAPTER 4

Implications of HIV/AIDS on Rural Livelihood

4.1 Introduction

The main purpose of this chapter is to present the empirical findings from field research in Swaziland, focusing on certain elements of the sustainable rural livelihood framework of analysis, especially the context and the livelihood resources (different types of capital) (Scoones 1988). This framework sets out key questions which can be used as a guide in any analysis of sustainable livelihood. Important elements of the Swazi context are used in the analysis. Focus is primarily on the social differentiation (gender dimension) and socio-cultural context. The chapter demonstrates the seriousness of the HIV/AIDS pandemic on rural women’s livelihoods and it also reveals the gender disparities that keep women in a subordinate position in all areas of life in the Swazi society. The power of the cultural practices and their consequences for women are brought out in this chapter. This chapter revisits the cultural practices mentioned in previous chapters because these affect every aspect of rural livelihoods. The chapter also shows how HIV/AIDS has been influenced by the context and how it impacts on livelihood resources such as natural capital, economic capital, human capital, social capital and physical capital. In conclusion the chapter presents institutional/organisational influences on access to livelihood. As Scoones (1988) states, of particular interest in the analysis of sustainable livelihoods are the institutional processes (embedded in a matrix of formal and informal institutions and organisations) which mediate the ability to carry out strategies.

4.2 Contextual Analysis: The Impact of cultural practices on rural women’s livelihoods

The sustainable livelihoods framework, as an analytical tool, places attention on the context (policies, history, politics, macro-economic conditions, climate, demography, social differentiation and so on (Scoones 1998; DFID, 1999). While all these factors are important in defining the livelihoods of rural women, I restricted my research to the social differentiation
and cultural context. The cultural context is very important in gender analysis. Given that Swaziland is a patriarchal society, the institution of patriarchy is used here as a framework for understanding gender relations. Patriarchy influences all the components and flows in a livelihood as described by Chambers & Conway, (1992), that is, (a) people (livelihood capabilities), (b) Tangible Resources (stores and resources) and (c) Intangible Assets (claims and access). Information on these factors was obtained through document analysis, interviews and personal experience and knowledge.

In order to understand fully the impact of AIDS epidemic in Swaziland, the factors contributing to the rapid spread of HIV/AIDS infection, and its implication for women’s livelihoods, one needs to unravel the complexities of the Swazi society, in particular the cultural beliefs and practices, especially those connected to marriage and sexuality. The institution of marriage and family are central to rural women’s livelihoods in Swaziland. In the focus group discussions a number of cultural beliefs and practices related to marriage and sex life were identified by informants and these factors can be assessed in relation to Chambers and Conway (1992) as the main components of livelihood. Firstly, some of these cultural practices contribute to the spread of HIV/AIDS in the country, thereby affecting their good health. With the spread of the HIV/AIDS virus rural women’s position has become more vulnerable. Research has shown that HIV/AIDS is indeed higher amongst women in the society, and women’s subordinate position is increasing their vulnerability of being infected or stigmatised. Secondly, the prevalence of HIV/AIDS in their families reduces their capabilities in agricultural activities. Thirdly, it reduces their economic well-being, since they lose income from either agricultural activities or formal employment (HEARD 2006). The cultural practices further constrain their access to resources, especially when their husbands die. The strong cultural practices also limit their choices. Women’s health, access to resources, capital and other assets are clearly affected by their marital status and other practices related to family. The major cultural practices that aggravate women’s vulnerability are discussed below.

(a) *Sitsembu (polygamy)*

The practice of polygamy is common and accepted in Swaziland, especially in rural areas amongst the older generation. Polygamy has traditionally had inherent checks and balances to ensure fidelity within the sexual unions. As noted by Dlamini (2005), polygamy should safeguard a man from engaging in casual sex. However, this has changed with time; for
example instead of locating his wives within one homestead many modern-day polygamists maintain several homesteads with each of the wives geographically spread across the country. Dlamini argues that the current practices of polygamy, and the mobility associated with it, opens up room for additional partners among the spouses and the living arrangements may lead to increased number of sexual partners, which may increase the risk of exposure (Dlamini 2005).

Several of my informants were much concerned about the practice of polygamy especially with the spread of HIV/AIDS. In defining their marital status in the questionnaires some women mentioned that their husbands had more than one wife. Even those women whose husbands had literally abandoned them still regarded themselves as married (even though the husbands were no longer coming to them). As long as the husband had paid bride price (lobola), the women were considered married (olotjoliweyo). This tends to limit women in terms of their sexuality. In Swazi culture women are expected to suppress their sexuality which is also sanctified in the religious and national ceremonies and rituals. Women are unable to exert control over their sexuality and the male is given ultimate decision-making in this matter. Married men are traditionally allowed to find lovers whom they can eventually marry as second and third wives because marriage does not mean control of their sexuality in anyway. This practice is known as Kushenda (having extramarital relationships). This practice of spouse engaging in extramarital relationships with lovers, who may or may not be married, is a common phenomenon in the country. Dlamini (2005) argues that kushenda is a version of the traditional practice that allowed a married man to have a young unmarried woman (concubine), usually with the intention to marry her at some later stage. A married woman is therefore not expected to complain about the husbands new lovers because it is through that process that he can eventually marry them. With the growing prevalence of HIV/AIDS and STDs and male refusal to use condoms, women are increasingly in a vulnerable position. This is made worse by the fact that in matters of sexual negotiation, communication between partners is severely limited by their social positions and roles Hlanze & Mkhabela (2005). Hlanze & Mkhabela further argue that married women surrender their sexuality to their husbands. The relative inabilitys of women to control their sexual lives clearly increase their vulnerability to diseases and unwanted pregnancy.

Marriage does not seem to give women security. Customarily, as Dlamini (2005) points out, even though women marry into families, they remain foreigners to those family lineages; at
the same time they are unable to access their natal family lineages. Women are socialised to believe that their value is dependent on the men around them, their fathers, husbands, brothers and sons. As a result their own self-esteem is linked to the ability to satisfy men’s needs and wants, and they view themselves as inadequate if men express displeasure with their ability (WLSA 2005).

(b) Kungena (wife inheritance)
It is customary practice in Swaziland for the widow to be handed over to another male within the extended family in order to ensure that she and her children are provided for. Although the widow is under no obligation to have sexual relations with the male to whom she is attached, it is expected and almost unavoidable. The widow is not consulted in the most cases, the family council decides for her.

All my informants argued that this is the most extreme expression of lack of respect for the women in the Swazi society. This just emphasizes the low status and total lack of negotiating power. For some it is a question of where they will go if they refuse because they cannot access resources in their own right and the patriarchal system has no place for them in their natal homes. One of my informant said she refused to kungenwa. In her case she had an alternative to defy the system and moved to the city of Manzini to work as a housekeeper and never returned to the in-laws homestead. However in her case the bridal price (lobola) was not fully paid for her. If bridal price has been fully paid for a woman and she undergoes customary marriage she still belongs with her husband. Customary marriages come with vast and ranging marital power for men. Husbands have the power to control their wives and any property that women acquire of their own, as well as the cattle given according to custom.

(c) Kuhlanta (a younger sister having children with her infertile sister’s husband)
Often when a married woman is unable to have children, a younger sister or at times another younger female relative is attached to the husband to have children on behalf of the infertile wife. This is usually practiced when the husband has paid lobola (bride price). Culturally lobola is used as surety for reproduction of offspring. Some of my informants argued that the practice of lobola is degrading to the barren wife because it means she is being replaced because of her failure in the reproductive functions. All this is done for the benefit of the male who is not under pressure if the infertility is his. Even in cases where there is evidence that he is infertile, a secret arrangement with the wife is made so that a brother can conceive children
for him. Moreover, the case of the substitute women is more public, the male situation is secret.

(d) **Bunganwa** *(having multiple female partners)*

Traditionally, *bunganwa* was a practice of having multiple female partners without necessarily engaging in sexual relation with them. This has changed now; the common practice now is that they are treated as sexual partners and this increase the risk of exposure to HIV/AIDS. This situation applies even to married persons, who often maintain sexual relationships with secret partners. The belief that for young males multiple sexual partners provide a pool of choice for a good future spouse is also prevalent.

(e) **Kujuma** *(occasional short-term or overnight visits between unmarried lovers)*

In Swazi culture it is expected and even encouraged that boyfriends and girlfriends visit each others homesteads and spend one or more nights there. During such visits the couple is expected to avoid penetrative sex (Dlamini 2005). They also meet their prospective in-laws, which may results in the formation of a relationship between the two families as well as between the suitor and the community in question. The practice of *kujuma* is intended to prevent the accumulation of multiple sexual partners and casual sex. The current practice however is that penetrative sex is usually part of the visit and the visits also tend to take place without the knowledge of the families of the young persons (HEARD 2006).

(f) **Kulamuta** *(having sexual relations with the younger sisters of ones wife).*

Traditionally it is not taboo for a husband to initiate a relationship with the younger sister of the wife, sometimes with the wife’s knowledge and cooperation. However, the relationship does not involve sexual activities between the partners. It is expected that the sisters would at some later stage also be married by the husband. The present practice can involve sexual practice with *umlamu* which can increase the risk of HIV/AIDS (HEARD 2006).

The above cultural practices have contributed to the prevalence of HIV/AIDS in Swaziland. The current cultural practices may make a significant contribution in the spread of the epidemic and these directly or indirectly impact on the rural livelihoods. Gender relations and inequality between men and women is glaring. My informants were concern about how women are perceived in the Swazi culture. They argued that Swazi culture and tradition gives males absolute power of control over the family. This argument is clearly explain by Masuku (2004) who notes that male power is embedded in the maintenance of patriarchal social
relations and institutions which are underpinned by an ideology which defines the adult male as the ultimate decision maker, controller of material resources and controller/user of women and children’s productive and reproductive capacities (WIDSAA 1998).

4.3 Situational Analysis of informants

As stated in an earlier chapter my informants were drawn from Mankayana, a rural area close to the city of Manzini. The age of my informants is between 21 and 62, with an average age of 43.9. In Swaziland this is an active category in reproduction, labour and family. Information presented in this section was collected through questionnaires followed by in-depth interviews and focus groups discussions. The analysis is presented within a gender framework, looking at factors such as gender equality, equity and empowerment. In gender relations, a woman’s marital status is important because, with a cultural context like that in Swaziland, it determine power relations, access to resources, and therefore women’s livelihoods. The marital status of my informants is shown in the table below:

<table>
<thead>
<tr>
<th>Marital Status</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Married</td>
<td>12</td>
</tr>
<tr>
<td>Single</td>
<td>6</td>
</tr>
<tr>
<td>Widowed</td>
<td>6</td>
</tr>
<tr>
<td>Divorced</td>
<td>1</td>
</tr>
</tbody>
</table>

**Figure 3:** Marital Status of the respondents. The vertical X represents the number of women.

All my informants, except one, had children ranging from one to eight. The average number of children per informant is 4.44. This implies that they have the responsibility burden of
looking after their own children and sometimes looking after relative’s children. I found that women in Mankanyana are affected differently according to their marital status.

*Married women:* From those married (13) only seven indicated that they were staying with their husbands, even though they were not clear on whether the husbands were physically staying with them or were working and staying in other places. Five of the married women were however explicit that even though they were married they were not staying with their husbands. One informant chose ‘not applicable’, indicating that although she regarded herself as being married, she could not describe the husband’s permanent home. As already discussed in the above section, traditionally women remain married as long as bride prices were paid for them. Marriage institution on its own therefore sets boundaries on women’s choices and freedom as regards their livelihoods. All married women had children ranging from one to 8 years, and were in addition caring for relative’s and other’s children. One informant aged 49, with 6 children of her own, not staying with the husband, was in addition caring for 7 orphans. Therefore, women have a huge burden in caring for their relatives and orphans in addition to their own families.

*Single women:* Five of my informants were single, but with the exception of only one, all had between two and six children. The burden of being a single mother is illustrated by two cases of single mothers aged 34 and 44 who have six children each. In addition some of these are taking care of relatives / or other’s children.

*Widowed women:* Seven of my informants were widowed, and some of them indicated that their husbands died of HIV/AIDS related diseases. Some mentioned that they were also carrying the disease, while others did not know their status and some others were lucky not to have the disease. What is more striking is that these women were relatively young between 39 and 51, five of them in their forties. Another important observation is that all had between 5 and 8 children each. And like other women, were also taking care of other relatives and children.

*Divorced women:* Only one informant mentioned that she was divorced with 4 children and in addition taking care of relatives. The husband now stays in South Africa. Out of all the 26 informants she was the only one divorced. Perhaps the reason can be that if one has undergone customary marriage and a bridal price has been paid for being divorced is not
applicable. Most women in rural areas undergo customary marriages and a number of my informants were in this category. There are strong cultural bindings that limit women’s freedom to choose. In the literal sense she is not divorced. In customary marriage there are no written laws. Customary marriages are subject to different interpretations. Customary marriages are potentially polygamous.

The pictures of the marital status of my informants tell us more about the situation faced by women in Swaziland. What is common between the marital status categories is that most if not all households were headed by women, or that women had the greatest responsibility in the everyday life of the family due to husbands’ absence, either working in towns, divorced, or deceased. Incidences of HIV/AIDS related deaths or illness exerts extreme pressure on families leaving mostly women as heads of households. Studies by UNDP (2002) have shown that poverty is high among female-headed households.

4.3.1 Educational Level

The livelihood approach places emphasis on education amongst other things. In order to expand one’s capabilities and choices which lead to a better livelihood, a good education is a necessity. Sen (1984) has argued that in order to live a better life one must have valuable functioning’s including being free from illiteracy. An education is one of the vital elements which enhance livelihood capabilities. Education gives individuals more choices in their lives which can be expanded and utilized to give individual freedom of choices and increasing capabilities.

My informants, like most women in the villages, have very low education and some have no education at all. It may be mentioned that not all those who mentioned primary education have actually completed the primary level, some dropped at early stages. The same applies to those who have some secondary education. In Swaziland there is also a high dropout rate of girls from schools, most due to through pregnancy and marriage. Jourbet and Akinnusi (1992) have argued that the lack of sufficient and appropriate education for women has affected their choice of formal work and general performance. From the interviews it was clear that my informants had little or no chance of getting formal employment because of their lack of education. Given that adult education in not common in Swaziland, women in situations like these have less chances of doing well in life. The table below shows the education levels of my informants.
Figure 4: The Informants Level of education. The vertical X represents the number of women while the horizontal axis represents the education level.

4.4 Agriculture: The backbone of rural livelihoods (*Natural Capital*)

Agriculture is the main factor in rural women’s livelihoods and it forms the basis of natural capital. As already mentioned in the above chapters Swaziland is an agrarian country. Rural people in Mankayane are directly or indirectly dependent on agriculture. Assets like farming land, land to build a homestead, livestock, and access to water are central in determining rural livelihoods. All my 26 informants stayed in a rural area and mentioned agriculture as the backbone of their livelihoods. Therefore, land is the major means of production and in most cases women have the responsibility for food production, while their partners are in search of work in towns or husbands have simply abandoned the family (WIDSAA 1998). Women have no access to ownership of land except through their husbands or sons in any given land.

Swaziland, with its colonial past is governed by a plurality of laws. There is common law, based on Roman-Dutch law administered by magistrates and higher courts. There is also Swazi customary law which is provided for in the Swazi courts act and is enforced. The king rules according to unwritten Swazi Law and custom and the power rest with the king and his circle of traditional advisors. WLSA (1998) states that peoples living practices which operate
through a semi-autonomous social field, sometimes outside the formal legal structures but with the capacity to formulate rules and regulations and to ensure compliance form its members. Customary law places women at a disadvantage. It was not created in consultation with women. Its custodians are chiefs and other traditional leaders who are mainly men.

Given the centrality of land in rural livelihoods, I analysed government agricultural land documents and Documents from Women and Law in Southern Africa (WLSA) related to land ownership, use and access in order to understand the position and rights of rural women. In explaining the land tenure system one needs to understand the legal and political arrangements regarding the ownership and management of agricultural land. There are basically three forms of land tenure in Swaziland and these are the Crown land, the individual or freehold on private land called title deed land (TDL) and the traditional system of communal property rights on Swazi National Land (SNL) (Hlanze & Mkhabela 1998).

Crown land belongs to the monarchy. In the urban areas it can be sub-divided and sold to individuals at a reasonable price. Some crown land however is normally not surveyed but is allocated to individuals on temporary basis to build housing structures. Crown land is also found in rural areas, mainly occupied by families displaced by government development projects.

In the title deed land system (TDL) there is individual ownership, characterised by small to medium sized plots in the urban areas and large farms. Any one who is a Swazi national and has a registered company is allowed to purchase this kind of land, whose use ranges from residential, business and commercial farming. On medium to large farms, cash-cropping includes sugar cane, cotton, and citrus fruits and cattle production. On TDL, crops grown are mainly sugar cane, cotton and citrus and are export-oriented (Hlanze & Mkhabela 1998)

The community property system of Swazi National Land (SNL) is divided into small chiefdoms which have been delegated authority to allocate land to individuals for cultivation, residence and communal grazing. In Mankayane, the dominant form of land tenure is the SNL, which gives traditional leaders more powers in the allocation of farming land and its usage. This land is only accessible to men. However due to the commercialisation of agriculture, chiefs may also set aside communal land for this purpose and it can be found in different parts of the country. There are some irrigation schemes on (SNL) which are funded
by the International Fund for Agriculture for Development (IFAD). As part of the conditionalities of donors women are also allocated land in these schemes. Crop production on SNL is mainly carried out by women because it is culturally female work and also because of shortage of young males who are away working in the mines and other areas of employment (HEARD 2006).

Hlanze and Mkhabela (2001) argue that the SNL yields continue to decline because of low investment, low productivity and unfavourable climate. This thus affects many rural communities negatively in terms of nutrition for those who can not supplement their crops with food purchase. Food self-sufficiency in terms of maize production is unattainable.

4.4.1 Assets: Access to land

Agriculture continues to be the major sectoral activity in the country as a whole and for rural livelihoods in Mankanyak. As Scoones (1988) have stated, rural livelihoods strategies are often heavily reliant on the natural resource base. He further argues that given that different people have different access to different livelihood resources, a socially differentiated view to analysing livelihoods is crucial. Using this approach I looked at how gender dimensions affect the distribution of control over resources (land) in Mankanyak. Institutional arrangements, organisational issues, power and politics affect access to resources (Scoones, 1988).

Access to farming land is a problematic area for women, not just in Mankanyak, but also throughout Swaziland. In Swaziland women have no direct access to SNL. Access to SNL land for women is mediated through their fathers, husbands or sons. The customary land system SNL is originally based on the concept of *kukhota*. This is whereby subjects are given use of land by a chief and they in turn pay allegiance through certain obligation (Hlanze & Mkhabela 2005). A woman cannot obtain *khonta* in her own rights without a man, either a husband or son, and in turn a man cannot get *khonta* without a wife. However, the gender disparity is that a man will almost always have a wife, whereas a woman sometimes may or may not have a husband. Single women on the other hand are forced to resort to using their male children for *kukhonta*, meaning that the homestead which they develop single-handed belongs to the son used for *kukhonta*.

In general women lack security of land tenure whether married or single. Women are subject to their husband’s marital power to register title to land. According to research conducted by
the Women and Law in Southern Africa (WILSA) many women have had their matrimonial homes sold, donated or mortgaged without their knowledge or consent, leading to their destitution (WILSA 2001). Moreover women who cannot register title to land have limited access to loans since they do not have the acceptable security.

Since women have had no or less control over land and resources, this has always put the Swazi women in a vulnerable situation. In most cases this has revealed the inability of formal law to ensure women’s rights to land, when the laws contradict the customary laws. Law is also tied to culture. Fundamental regulations found in land tenure are sanctioned by culture. Women are disadvantaged when it comes to ownership of land since the chiefs may also evict those women who fail to conform to set community laws and social obligations.

Out of 26 informants, 16 felt insecure in terms of property ownership (see table below). There is no specific category of women who felt secure include married women, widows, and single mothers. In focus group discussions the issue was also taken up and many women said that they feel powerless when it comes to access to land. Most of my informants pointed out tradition as a major barrier to women’s access to land. They argued that in the customary context women have no direct relationships with land except through the mediation of their husbands or sons. It can be argued that those who felt secure in property did so because their husbands were still alive or they have not yet come to a situation where the law or traditional law is invoked to decide their claim to the land they use. The diagram below shows the responses to the question; do you feel secure in terms of property ownership?

Security in property ownership

[Diagram showing security in property ownership with categories of Yes and No]

Figure 5: Security in Property Ownership
Access and security of ownership is vital for rural livelihoods. Non governmental organisations working on development issues have noted the implications of access to land on women’s livelihoods in Swaziland. My interviews with advisers at WLSA in Mbabane show that the organisation has over the years been campaigning for change of laws to give women more access to farming land and more protection in Southern Africa. Conducting research on legal issues in Southern Africa, particularly those related to legal rights, WILSA tries to influence policy and legal reforms in different Southern African countries. WILSA projects in Swaziland combines legal research with legal activism for women’s rights. Their projects aim in involving Swazi women more in women’s legal rights. WLSA (2005) has produced a number of legal publications over the years which revealed areas of law that act as barriers to women’s access to land and other rights.

4.4.2 Sources of Income and other forms of ‘Economic Capital’

Theorists in the livelihood framework argue that the ability to pursue different livelihood strategies is dependent on the basic material and social, tangible and intangible assets that people have in their possession (Scoones, 1988). These livelihood resources may be seen as the capital base and include cash, credit, savings, production equipment and technologies. These are essential in any livelihood strategy (ibid.). I have already mentioned above how women’s access to natural capital is restricted.

The capital base of my informants seems to be extremely weak as none of them were formally employed. My informants stressed the fact that unemployment is very high in Swaziland and women are the most affected. As a result most of my informants were self-employed and the common area of informal employment was selling fruits, vegetable vending, hair dressing salons and occasionally selling livestock, chicken, clothes and so on. In my focus group discussions, some of the women were helped by NGOs and the government to come together and grow vegetables to sell at the local markets or in the towns like Manzini.

Some of the women indicated that they have no source of income at all; they normally get help from their neighbours or relatives. Another point to stress is that there are no social welfare and social security services in Swaziland. The table below shows the sources of income for most women in Makanyane. The proportion of women who have no income source is too big; it is quite likely that they exaggerated their despair thinking that this would qualify them for help from non-governmental organisations. In recent year’s non-
governmental organisations provide monthly food handouts to families in despair and children get food from supplementary feeding schemes in schools and churches. In cases where women have no fixed source of income, they sometimes get help from neighbours, or sell some of their belongings. Selling their belongings further reduces their economic capital. It emerged from the interviews that social capital is one of the few survival means in Makanyane. Social relations in the villages, affiliations to organisations like churches ensure that those most affected get help.

In social capital theory social networks are valuable assets. Putnam (1993) defines social capital as connections amongst individuals. The idea is that the interactions among individuals enable people to build communities to commit themselves to each other and to knit the social fabric. A sense of belonging and the concrete experience of social networks and the relationships of trust and tolerance that can be involved bring benefits to people (Putnam 1993; 2000).

The World Bank has also adopted the notion of social capital and defines it as follows; ‘social capital refers to the institutions, relationships and norms that shape the quality and quantity of a society’s social interactions’. The World Bank argues that social capital holds institutions together (World Bank 1999). Thus people in Mankayane form a social fabric especially when institutions seemed to have failed or have no capacity to deliver necessary services, social networks become of great importance in the community.

![Figure 6: Sources of Income](image-url)
Married women were often left behind in their homes while their husbands sought income in towns and in neighbouring countries, mostly South Africa. Some men failed to support their families left behind in the rural places and some simply abandoned their women and went to the urban areas to look for employment. As one informant said; “my husband had left for South Africa for the past five years and I was left with my six children and one grandchild. During the five years I could not do any farming as there was no money”. The husband later came back to her. Such stories are obviously repeated across Swaziland, where men traditionally migrated to mines and factories in South Africa. The absence spouses have been noted to be one of the major causes of the spread of HIV/AIDS (ILO 2004).

The women were thus burdened with the responsibility of taking care of the families when their husbands are away or have died. As their burdens increased, some women moved to the urban areas. They argued that in the urban areas there is too much gender discrimination in the men’s world, and education plays a major role in formal employment. Amongst my informants many had primary education which is the lowest form of education in Swaziland. Illiteracy is higher among women, and this would mean most women remain unemployed. As a result, more women feature widely in the informal sector.

4.5 HIV/AIDS, Well-being and capabilities (Human Capital)

According to theorists such as Scoones (1998) and Sen (1993) human capital comprises of skills, knowledge, the ability to labour and good health. In my fieldwork I tried to understand how HIV/Aids is impacting on human capital in the study area. The focus groups discussions revealed several the multidimensional nature of this impact of the disease. These are discussed below.

Reduction of labour: Perhaps the biggest effect of HIV/AIDS in Makanyane is loss of labour and time to work the fields. HIV/AIDS weakens individual heath and reduces the strength to work in the fields. The effect becomes enormous when people become unable to work through illness. The spread of HIV/AIDS has reduced the number of family members who could work in the fields. The loss of labour is severe because of the demography of HIV/AIDS. It affects prime-age, economically active adults far more than other groups, leaving the elderly and children to replace the labour lost from agriculture. I found that in
most cases the men were the ones who would die first from AIDS-associated illnesses while the women continued to live with the virus a while longer.

The loss of labour has also affected other government farming projects. As the informants mentioned some of the projects introduced by government had to be abandoned because of high absenteeism. They explained that a year ago the government started a project that would help them to cope with this situation by supporting women to come together in crop farming. One explained that the project was later abandoned because people became too ill to show up and contribute to the work. The women were organised to grow crops and later sell them to local markets. Profits that were made were invested to continue produce and the rest to benefit their families to help them with household income. Several of them used their household income to pay for school fees for their children.

Reduction of work time: All my informants have been in one way or other, affected by HIV/AIDS directly or indirectly. The stories they recounted include the numbers of people in the village who had died from the disease, some who were sick, sick relatives, looking after the sick, being HIV positive, or suspecting to be positive. A number of those I spoke with were also HIV positive or suspected that they were. A lot of time is spent caring for the sick, who in most cases are unable cannot afford to do anything by themselves. Time is also spent helping them to travel to health centres for medicine. Some of my informants who were already carrying the virus felt hopeless and helpless as to who would take care of their children if they are unable to work and support the family. Others stated that when their husbands returned home they were already ill and it became an extra burden because they would have to work less on the fields to take care of him instead. At times of sickness and death in household members living in urban areas became an additional cost if the person returns to the village for the final stage of their illness. Most Swazis, do not view the urban areas as a home but as a place to make money for their real homes in rural areas.

One informant explained that two of her sons came home as well while the father was lying ill and after they passed away so did her daughter in-laws. She explained as to how difficult it was for her and her children to cope as the fields were uncultivated. She could not engage in agricultural activities because she was attending to the ill. She became worried that her children would have to drop out of school because of in ability to pay the fees. There was no one to buy farm inputs as bread winners and family members had passed away. Strangely
enough she explained that she was not HIV positive. However she had the burden of looking after her kids and other relative’s children. She became more concerned about what would happen to her children if anything happened to her. A number of my informants were taking care of other children who were either relatives or neighbours’ children since there is no social welfare system in Swaziland that takes care of orphans.

A number of them spent most of their time caring for family members who were critically ill. 10 of those in my focus group were concerned about some of their field lying idle with no one to plough because people are ill and have no energy and physical capacity. Even though they had the responsibility of taking care of the family fields and engage in agricultural activities; they still felt very much insecure about their position and in terms of ownership and inheritance because they are women.

*Reduction of family income and other resources:* As a result of death of husbands, or illness, some households are forced to sell off assets which they assets such as farming tools, draught animals and some had to rent out their land to community members to cultivate since they were unable to undertake agricultural activities, households are thus having less working capital to finance their farming. As a result, may well also see their fixed capital eroded. Researchers like Gillespie and Loevinsohn (2003) have found that households may sell off large livestock, such as cattle, and use smaller stock units, such as goats or chickens, that can be reared closer to the homestead, and that can be sold off in small quantities to release cash for purchase of medicines for the sick or for basic needs where regular sources of income are lost.

Most of my informants were the bread winners of their family. They felt that farming was hard with the spread of HIV/AIDS in the community. The loss of husbands often leads to loss of family income and income from agriculture. Due to the heavy loss of labour and loss of knowledge and skilled people as adults die before passing on their adequate knowledge to their children. In some instances they have sold off tools and livestock. Their farming method has also changed due to environmental causes such as drought or floods in addition to consequences of HIV/AIDS. Cropping patterns had switched towards food crops to assure survival, and towards crops for which there are lower peak demands for labour. Some of my informants had started ploughing more sweet potatoes to replace maize. Maize is the staple food in Swaziland and it requires good rains and much more heavy labour in the fields. In
addition unfavourable weather conditions worsened agricultural output. An ILO study (2004) recorded a 30% reduction in maize production. Dlamini (2005) states that cash crops are particularly likely to be abandoned when adult males fall ill.

The loss of income led to the deepening of poverty in the household. This occurs due to the long duration of illness associated with the disease, which often lead to additional expenditure. For example additional cost of medicine, fees to doctors or traditional healers, transport to health facilities and other expenses for the care of the sick. A number of my informants who were HIV positive and depended on medicine were very much troubled by the fact that the clinics that provide them with medicine were so far away from the village. There were minibuses that transported people who needed to travel to the clinics but were not regular. A number of them stated that they did not have the money to travel to the clinics.

Some of my informants stated that when their husband passed away they were forced to leave the fields to the late husband’s family, and some were obliged to return to their home village.

A study by UNDP (2005) found a number of child-headed households as a result of both parents having died from HIV/AIDS. Such homes experience extreme difficulties in trying to survive and their poverty levels are a serious cause for concern. Mainly relatives had to take upon that responsibility. In some instances some get assistance from the community, but this seemed not enough in the long term. Whiteside & al) (2006) states that several studies from countries in Sub-Saharan Africa have documented the impoverishing effects of HIV/AIDS on households due to the loss of a primary income-earners salary. Savings and financial assets are usually the first to be depleted after the onset of Aids. After this, non productive assets, such as furniture, cooking utensils and clothes may be sold. One expense that is not accounted for is the cost of memorial services, a cost which can be substantial in Swaziland. In addition to that is the increased absenteeism from work for attending funerals, which results in lost labour incomes. Vulnerability Assessment Committee VAC study (2004) argues that in a country like Swaziland (hard hit by the HIV/AIDS epidemic), this cost is likely to be significant. This is perhaps because funerals may be held on several days a week, due to the increased number of deaths.

*Reduction of nutritional foods:* People living with HIV/AIDS have special nutritional needs to assist them in remaining active and productive workers. In order to prolong their life they
need medication which is easily assessable and information aimed at infants, children adults and the elderly. Many children at Mankayane were undernourished due to increasing poverty. Some women in my informant group gained more support from the nutritional gardens funded by local NGOs. This provided nutritious diets which helped to strengthen the immune systems of healthy persons and assist them in warding off other infections that render them more vulnerable to HIV/AIDS. These nutrition gardens also provided nutrients which added variety to the staple foods consumed by household to a certain extent.

4.6 Institutional/Organisational Influences on access to livelihood resources

Another level in the sustainable livelihood framework concerns an analysis of policies, institutional and organisational influences on access to livelihood resources (Scoones, 1998). In the above sections I showed how rural women’s livelihoods are affected by their status in society and how HIV/AIDS is impacting on their livelihoods. This section seeks to look at the institutional processes and responses within the general gender and development framework. Swaziland, as the SARDIC and WILSA (1998) reports have shown, is still trying to address the issue of gender but the road is slow as the country is just beginning to address equality in development and decision-making. As a result two institutional actors can be observed, that is, the government and the non-governmental organisation (NGOs). NGOs have been trying to lobby the government to address the gender imbalances. Material presented in this section is from interviews with governmental officials, officials in non-governmental organisations, and traditional leaders. The material is supported by government document analysis from the ministry of health, agriculture and documents from United Nations Children’s Fund directed by in ministry of health in Swaziland. Got more HIV/AIDS documents from World Vision International they are based in Mbabane.

4.7 Responding to HIV/AIDS

The government has through a number of programs tried to engage the HIV/AIDS situation. The government has had a National AIDS programme since 1987. The initiative has included both governmental, Non-governmental, community based organisations (CBOs) and business sector. With the increasing levels of AIDS, His Majesty, King Swati III, declared HIV/AIDS a national crisis in 1999 and established a new structure for responding to the epidemic with the formation of an HIV/AIDS Cabinet Committee and an intersectoral HIV/AIDS Crisis Management and Technical Committee (CMTC). After consultations with other sectors
CMTC developed the National Strategic Plan for HIV/AIDS, 2000-2005. The goal of the plan has been to reduce the incidences of AIDS, to mitigate the impact of the epidemic on those already infected as well as on the affected individuals, families and communities who are close to them. The strategic plan also aimed at providing a guiding framework for a multisectoral, national response (UNAIDS 2000). A Swaziland National Strategic Plan For HIV/AIDS 2000-2005 prepared by HIV/AIDS Crisis Management and Technical Committee.

While the plan, under the impact mitigation, sought to identify and change laws and policies that among other things endangered the welfare of widows and orphans, and enact laws to protect vulnerable groups, very little has been done to reform cultural practices, especially in the villages. While the government has been determined to promote better health, it has admitted that the health system of the country is facing tremendous challenges concerning HIV/AIDS. Government officials argued that HIV/AIDS is the nation’s collective concern and all must work together to address the threat it poses to the society (SNAP 2000-2005).

From government policy documents several strategies include; breaking the silence, mitigating the impact of AIDS on children, prevention of mother-to-child transmission of HIV, and prevention of new infections among young people. Key strategies include a human rights approach to programmes and community capacity development. Programmes included community initiatives, national sectoral capacity building to strengthen sectors abilities to support communities, and national policy/advocacy and communication initiatives.

Government officials stated that the silence is being broken and strong political commitments emerge. Issues of access to education, to health care, and to protection from exploitation and abuse have been or being made aware through the media and are on the agenda of the Cabinet and often in public statements by the leadership, reflecting widespread concern and commitment (VAC 2004).

Another government and civil society program is the 2006-2010 National Plan of Action for Orphaned and Vulnerable children. Stakeholders collectively agreed on a coordinated response to mitigate the impact, and provide care and support for Orphaned and Vulnerable Children (OVC) infected by the HIV and AIDS pandemic. This plan will serve to mobilise government and donor resources to scale up the national response to address the rights of
(OVCs) to food, protection (including psychosocial support), education, and basic social services (including health).

It is obvious that the government is committed in trying to do something about the HIV/AIDS situation. There are many challenges in the process. People in the rural community did not feel that the government is doing enough for them to cope with the situation. Many people, especially, the marginalized and disempowered children and women, especially those affected by HIV/AIDS remain impoverished and without hope.

4.8 Conclusion

The aim of this chapter was to present the findings from the field work as to how the impact of HIV/AIDS is affecting the Swazi society. How cultural practices contribute in undermining women’s livelihoods. How women continue to suffer and remain vulnerable in such situations. The Swazi government will continually face the challenges of strengthening its health services and changing laws that will give every Swazi citizen a better livelihood regardless of gender. This is also a challenge to the whole society to work together both male and female in fighting against stigma and sexual discrimination that puts other social groups in a vulnerable situation. It is a way forward that the Swazi government is committed in providing complimentary services like areas of privation and care and many more.
CHAPTER 5

Summary and Conclusion

Sub-Saharan Africa has been described as the epicentre of HIV/AIDS. The 2006 UN AIDS Report on the Global AIDS Epidemic estimates that across the world approximately 40 million people are living with HIV, of which 25 million of them are in the sub-Saharan Africa. This makes the Sub-Saharan Africa one of the most affected areas. Swaziland, like any other country in Africa, has been severely affected by HIV/AIDS, which since 1999 has been declared a national disaster the King of Swaziland. As shown in the first chapters an estimated one fifth of the population is living with HIV/AIDS. One of the main features of the epidemic is that it is affecting the most productive groups in society between the ages 15 and 50. Women are the most affected group and they have the highest HIV/AIDS percentage in Swaziland.

The effects of HIV/AIDS in Swaziland are felt in all levels of society; many deaths in families, increased numbers of orphans, loss of labour, and a huge strain on resources. Therefore HIV/AIDS has been noted as one of the major hindrances to development goals, affecting the Millennium Goals. The Millennium Goals include; reducing extreme poverty and hunger within 2015 and gender equality and empowerment for women. These goals seem to be undermined by the prevalence of HIV/AIDS which is rapidly spreading, and impacting deeply on social, cultural and economic spheres. In other words HIV/AIDS is affecting every sphere of human livelihoods. HIV/AIDS has become the greatest most challenge to human development in every aspect.

With this as the background, the present study sought to analyse the impact of HIV/AIDS on rural women’s livelihoods in Swaziland. It explored the implications of HIV/AIDS in relation to rural livelihoods in the context of existing gender disparities in Swaziland.

In order to answer the research questions (stated in section 1.2), I used the livelihood approach to development as an analytical framework. The approach draws on the works of Chambers and Conway (1992) as a response to the complexity and challenges in the
development process. The approach has since then been used by a number of international organisations including the World Bank as an approach to development practices. The livelihood approach comprises of capabilities, assets and activities required for a means of living. The main component of the livelihood framework is: (a) the people, (b) tangible assets and (c) intangible assets. The importance of the framework is that it is people centred and focuses on those factors that shape peoples livelihoods. It also focuses on the idea that people construct livelihoods by drawing on a range of assets and entitlements. The whole environment is taken into account by the framework.

Using the rural outpost of Mankayana, outside Manzini the livelihood framework was used in the analysis of rural livelihoods with special emphasis to women. A gendered approach was thus adopted to analyse the situation of women at both society and household levels. The household level is very important for this study because it positions the women in Swaziland within a family structure, their position within the family, their relation to other members of the family, especially men, their position in the traditional extended family and their communities.

The highlights of the findings of the study include the following:

*Impact of HIV/AIDS on rural livelihood:* Rural inhabitants are generally more vulnerable because they are more dependent on agriculture as means of living. In the past few years Swaziland has been experiencing severe drought which has made things worse for many rural people. The spread of the HIV/AIDS has indeed created additional burden for the rural poor, who are already in most cases suffering in making ends meet.

In this thesis I emphasise agriculture, since 70% of the Swazi population live in the countryside and are supported by subsistence farming. Agriculture has become the most severely affected area of rural livelihoods. It is evident that the ways in which livelihood strategies relate to natural resource potentials at the sub-community level are important in explaining agricultural and environmental change. HIV/AIDS has multiple impacts on agricultural households, individuals and community. These impacts may be direct or indirect. This again puts heavy stress on the government and development planners to mitigate the impacts of the epidemic.
Impacts on household and community; Households and communities experience the negative socio-economic impact of HIV/AIDS more directly than any other units. On the household level it affects household income and expenditure severely. Many households have to spend the little income they have on medical expenses. Several household members become ill and need attention. Less work is thus dedicated to working in the fields. Many household experience labour shortages as household members fall ill and eventually pass away. Agricultural patterns are changed to less labour demanding agricultural crops. Some of the families I spoke to were no longer focusing on growing maize because it needed more attention and takes longer periods to grow. Maize is the staple food of the Swazi. This has created huge impact on food security not just for rural people of Mankayane but for the whole Swazi nation. Vegetables are now more suitable to grow especially those that do not require much water and heavy cultivation operations.

Many households were responding to a number of coping strategies to face the challenges of the epidemic. These strategies include rationing their food supplies and reducing the number of meals. This in turn increases the vulnerability of HIV/AIDS affected households and individuals in the longer term as it may lead to malnutrition. Malnutrition in turn speeds the progress of HIV/AIDS infection to AIDS as it lowers the resistance of immune system, thereby making the body more vulnerable to opportunistic infection (HEARD 2006).

As a result of HIV/AIDS some households experienced a reduction in family income; either because the bread winner has died, migrated, and abandoned the family or weak due to sickness. Caring for the sick in turn takes away production time. Many are forced to sell their household assets to increase household expenditure. This also affects children who are taken out of school to help in taking care of the sick and help in the fields. Their future skill base is undermined. This has long term effects on the household and community. It is evident that when a household is hit with HIV/AIDS it experiences increased pressure on all available resources, including everything from labour to income. HIV/AIDS damages the livelihood outcomes of households and leave many households in destitution. HIV/AIDS is a long-term crisis that continues to impoverish the community.

Swaziland is thus challenged to meet the needs of the people. It will require emergency safety nets and long-term welfare to respond to poverty. The garden projects which were supported by different local and external NGOs were indeed a plus to the people of Mankayane, because it made it possible for them to survive from the produce of the projects. Such schemes seem to
be working when people are healthy and strong enough to contribute to the produce but when illness became severe it became hard. This is where Putnam’s (1993, see section 4) theory of social capital becomes relevant as social capital plays a vital role for people’s survival. Social networks become, for many, a valuable asset. This would also be related to what Dukheim (1933) calls social solidarity which he explains as a bond between all individuals within a society.

The Role of cultural norms and practices and gender disparities: Swaziland remains a strong cultural society where traditional values are strongly entrenched. The traditional system disadvantages women in a number of areas. Several practices mentioned in the thesis, such as those pertaining to polygamy and inheritance affects women the most. Women remain the most vulnerable because of their inferior position in the society. They have less negotiation power in the home to make any decision about their well-being. Many Swazi women do feel that many customary laws need to be re-examined because they undermine women and worsen their situation. Women and Law in Southern Africa (WLSA) have worked hard over the years to influence changes in legal structures to better women’s position in the Swazi society. Women need to be empowered to support organisations like these which seek to advance the needs of women and their legal rights concerning marriage, land and inheritance. Women would also need education or information before committing themselves to customary marriages. Marriages in court and churches provide better security than customary marriages which has no written law and is bound to be interpreted differently.

However due to the strong patriarchal system, Swaziland has no policy to ensure that women’s concerns are integrated into overall policy formulation and planning. In the last part of chapter 2, section 2.8.3 I mention empowerment. I understand empowerment in this thesis as a process of transforming social relations. Women are to be empowered to meet their own needs and better their livelihoods. I argue that this could be an approach to use to achieve change for both men and women. In many cases cultural factors therefore have offered constraint to women’s participation in decision making and power to influence decisions. There is a need for creation of awareness among Swazi women and men about the negative impacts of some cultural practices through education and how their discontinuation can bring positive results.

Gender sensitivity: With the spread of HIV/AIDS both men and women at equal levels are to be educated and made aware as to what HIV/AIDS mean for their community. Radical change
in social relations is needed in order to achieve changes also in male sexual behaviour. A gender mainstreaming approach in development planning through all government sectors is gradually gaining appraisal. Gender sensitivity in government sectoral programmes and projects are necessary to target women’s vulnerability. Women remain and continue to be the highest hit by the epidemic. Cultural practices that can be contributing to women’s destitution and spread of HIV/AIDS are to be cross examined. A systematic research on the effect of cultural practices and gender disparities on HIV/AIDS would be necessary. This area needs further exploration.

**Mobility and implications on rural livelihoods**: Another area of challenge for HIV/AIDS is the issue of mobility. People move from place to place in search of work and leave their families behind. Evidently many found it hard to cope without their partners. Many engage in inappropriate and unsafe sexual practices.

In conclusion, the livelihood approach offers a different way or ideas of thinking about development, since it is holistic and people centred. It enables us to see how a number of elements are dependent and influences each other. It shows for example, how different components like people and assets systematically relate to each other. Individual well-being, in the form of good health is required in order to achieve a better livelihood. Once good health is affected by diseases such as HIV/AIDS it affects virtually everything else; one cannot work, and the well-being of the individual is undermined.

As such the livelihood approach enables us to understand the impacts of the AIDS epidemic on individual’s, household’s and community’s livelihoods. The livelihoods framework recognises that all aspects of people’s lives will impact on the livelihoods choices that people make. In the people centred approach the livelihoods are located in social and institutional contexts.

At the same time, I must also acknowledge that the livelihood framework has its weakness by simplifying and measuring people’s livelihoods into assets. Assets in this case are hard to simplify and modify. The livelihoods approach assumes that capital assets can be expanded in general. However, in some societies to own assets is not an option.

The livelihood approach does not pay enough attention to inequalities of power, for instance in the Swazi culture power structure is important. Most power lies in the hands of men and such societies can be rigid to change. The livelihood approach underestimates the
vulnerability context, which characterise the insecurity of the well-being of the individual and household to cope with external forces such as floods, droughts and so on. Awareness of such weaknesses is important when one uses the livelihood approach as a research framework.

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