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Household Livelihood Security Assessment For World Vision - Zimbabwe

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and

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Executive Summary

Hyperinflation and failed land reform, coupled with political instability, drought, and one of the highest incidences of HIV and AIDS in the world have created a protracted humanitarian crisis in Zimbabwe. The crisis has eroded the livelihoods of millions of households country-wide. To address the needs of the population under these conditions, World Vision in Zimbabwe provides targeted food assistance and other support in the areas of agriculture and health to communal populations across 11 districts in Mashonaland Central, Matebeleland South, and Matebeleland North provinces. In order to address current acute needs while also addressing underlying vulnerabilities, WV uses an integrated programming approach combining interventions in the areas of food security, livelihoods promotion and disaster prevention.

WV conducts periodic Household Livelihood Security Assessments (HLSAs) to update its understanding of the household and community situations in the districts in which it operates, to highlight needs, and to generate new programming ideas. This report presents the findings from the most recent HLSA, conducted in May 2009. In order to track how the livelihood security status of households has changed over time, data from the 2007 HLSA is also used, where available.

The objectives of the report are to use the HLSA data to provide insight into:

- The current livelihood security status of households;
- How households’ livelihood security status has changed over time;
- The impact of WV’s interventions on households, including the impact of
  - different types of interventions, in particular Agricultural and Natural Resources (ANR) interventions and Targeted Food Assistance (TFA) interventions;
  - interventions falling under WV’s three program components, that is, food security, livelihoods promotion and social protection;
  - household participation in multiple intervention types (i.e., both ANR and TFA); and
  - household participation in interventions that fall within overlapping (multiple) program components.

Livelihood context

The context in which households live and manage resources—including their living environment, livelihood strategies, assets, and social support—has a fundamental influence on their livelihood security.

Analysis of the data on demographic characteristics of households reveals a very young population: the average age of household members was 23, and over 44 percent of household members were under 15 years old at the time of the 2009 survey. The dependency ratio among sample households was relatively high, meaning households are supporting a large number of members who are generally not as productive as adult workers or are otherwise unable to contribute to
household livelihood security. The high dependency ratio may be due in part to the fact that over 50 percent of households are caring for an orphan. Forty-five percent of all sample households are headed by women. The data show that half of female household heads are widowed, a stark contrast to male household heads, of whom only five percent are widowers.

While in the past, educational attainment levels in the Zimbabwean population were quite high relative to other countries in the region, the survey revealed that the educational profile of both adults and school-aged children is changing. While 87 percent of adult household members in the sample have completed some schooling, less than half have completed any secondary education and over 12 percent of the adult population has had no formal education. Meanwhile, over 45 percent of the current population of school-age children are not enrolled in school at all. Financial constraints were by far the most common reason for non-enrollment, and nearly all respondents with attending children stated that they could not afford school supplies.

Despite the enormous social, economic and environmental challenges to small-holder agriculture in Zimbabwe, agricultural production is a nearly universal practice among sample households. The vast majority, 83 percent, also practice livestock rearing as part of their household livelihood strategy, down from 91 percent in 2007. Given widespread dependence on agriculture and livestock rearing, limited access to land and the necessary inputs to cultivate it poses serious constraints to livelihood security throughout the sample area. Fifty-nine percent cultivated two acres of land or less during the most recent agricultural season, and only a very small minority of households (five percent) planted six acres of land or more.

While the vast majority of sample households rely on agricultural production for at least part of their subsistence, the survey revealed that 70 percent also earn cash income. Crop and livestock sales were the most commonly cited primary sources of cash income, and a significant portion of sampled households rely on remittances as their primary source of income. Since 2007, there have been significant declines in the importance of crop sales, trading and self-employment, and on-farm casual labor as sources of income for the population of WV’s operational area. Conversely, there has been a substantial increase in the importance of livestock sales. The survey found that only 16 percent of 17 year olds are engaged in or have the skills to practice their self-selected trade, suggesting further constraints to earning cash income for the youngest generation of workers.

A sure sign of the negative effect that the crisis has had on households, over 70 percent reported that they had relied on food aid as their primary source of cereals during the lean period in 2009 (January to April), up from only 7 percent in 2007. Reliance on own production and market purchases have seen major declines, and there have also been declines in reliance on maraicho (payments for casual labor). The vegetable crops grown in gardens provide a source of food for a large proportion of households, with over half having access to household or community gardens.
Cash income is important to households’ ability to pay for essential expenses. The most commonly reported major expenditure category by far is food, followed by school expenses, health and transport. The percentage of households citing food as a major expenditure category increased over the 2007-2009 period while that citing schooling, health and agricultural inputs declined. The 2009 survey showed that 31 percent of all households in the sample had borrowed money in the previous four months. The single greatest reason given for borrowing money, cited by over three-fourths of all borrowing households, was to purchase food. This is a sure sign of a population in crisis. Other reasons were to meet health and schooling expenses.

Information collected on households’ ownership of assets reveals the degree of poverty within WV’s operational area. Only 26 percent of households own a TV or radio and one-third do not even own a bed. Ownership of productive assets that increase agricultural productivity and of livestock are also quite low. For some important productive assets (cattle and sheep/goats), the percentage of households that sold them was far higher than the percent that purchased them. The most common reason given for productive assets sales, by far, was to enable food purchases. Between 2007 and 2009 there have been slight increases in the percentage of households owning some agricultural implements (oxcarts and wheelbarrows) but there has been a decline in the percent owning poultry, a possible indication that poverty is deepening.

In 2009, nearly all households reported having access to arable land, however over half reported leaving land uncultivated that they would normally cultivate. The most commonly cited reasons for leaving land uncultivated were lack of seed on the market and lack of draught power. Difficulty in access to seed is a major constraint to agricultural production, and was a very widely reported problem for maize and groundnuts.

With respect to agricultural production, in 2009 maize was by far the most commonly grown crop, and sorghum was second-most common. Groundnut and millet were also important crops throughout the survey area. Cotton and sunflower, both cash crops, were grown by relatively few households throughout the sample, though Mt. Darwin and Rushinga districts are notable exceptions. The area planted in maize and sorghum using conservation farming techniques accounts for approximately 26 percent of all area planted. Average production of the three most important field crops, maize, sorghum and millet, has increased dramatically over the 2007-2009 period, likely due to improved rains.

Vegetable crops grown in home gardens provide a source of food or livelihood for a large proportion of households, however cultivation for every major garden group has declined substantially since 2007. There was substantial variation across districts and considerably less accessibility to community (as opposed to home) gardens in the sample. Rivers, streams and dams were by far the most common sources of water for gardening.

In terms of households’ health environments, the 2009 HLSA data reveal that about 33 percent of households relied on unsafe water sources (surface water and unprotected wells). On average
it takes about one hour for households to gather water, including walking to the water source, queuing and filling containers. The average amount of time taken to fetch water is thus double the World Health Organization recommended maximum standard. The average amount of water collected is also below recommended levels for maintaining adequate health and hygiene. The low quality of the health environment for many households in WV’s operational area is also revealed by the fact that over half of households had no latrine available at all. Despite the fact that malaria is endemic throughout Zimbabwe and the use of mosquito nets a key malaria prevention measure, only 19 percent of households reported members having slept under a mosquito net the previous night.

With respect to illness treatment, about three quarters of households sought treatment when someone was ill. Financial constraints were reported as the primary reasons for not seeking treatment in over half of cases.

While almost all respondents had heard of HIV and AIDS, only 43 percent knew the difference between HIV and AIDS. A large majority of respondents correctly identified various means of HIV transmission. Nevertheless, misconceptions were also widely held. Respondents’ knowledge of many appropriate HIV prevention techniques was fairly high. Certain forms of discrimination based on HIV and AIDS infection were widely reported.

About six percent of sample households in both 2007 and 2009 were found to have chronically ill family members. The 2009 survey indicates that of the households that lost someone to chronic illness, in 38 percent of cases, it was the breadwinner who died. Of those chronically ill household members tested for HIV, 78 percent tested positive. This finding suggests that the large majority of chronic illness is due to HIV and AIDS. Community members play a significant role in caring for the chronically ill, with almost half of sample households reporting receiving community support for this purpose.

Finally, with respect to social support, the main sources of support relied on by households are community members and extended family. Only 12 percent reported relying on support from community based groups. The most common forms of support received were assistance with cereal, agricultural inputs, funeral support, and draught power.

Livelihood security and its recent evolution
In addition to livelihood security itself, the HLSA looks at four important sub-components of livelihood security: food security, health security, education security and income security. In both the 2007 and 2009 surveys, data were collected on a number of indicators that are used to assess how households are doing in each of these areas. For an overall assessment of how households are faring, the indicators are combined into an index with weights chosen using factor analysis.
**Food Security**
At the time of the 2009 survey, the number of months for which households had adequate food for all of their members from all sources, including home production and purchases, was very low (3.5 months out of 12). The average household was eating only two meals a day. The dietary diversity score is 2.9 out of the seven food groups, indicating that the majority of households have a low quality diet. Households employed multiple coping strategies in response to food insecurity, the most common among them limiting portion sizes at meal times and reducing the number of meals eaten daily. One out of ten of respondents reported skipping meals for the entire day more than twice, which is cause for concern. Overall, analysis of the four indicators used to assess food security suggests that households throughout WVs operational area are highly food insecure.

**Health Security**
Health security is measured using indicators of illness, sanitation of water sources and toilet facilities, household possession of soap, and the quantity of water used on a daily basis. Examination of each of these indicators shows that health security is somewhat low in the area. While over 77 percent of all households reportedly had no illnesses among household members in the two months preceding the survey, access to sanitary latrines and protected water sources were low. Health security is highest in Bubi district and lowest in Nkayi and Lupane districts.

**Education Security**
Education security is measured using indicators of both adult and children’s educational attainment and of school-aged children’s access to education. The average adult in the sample has completed four years of primary education. With respect to the current generation of school-aged children, most are not achieving the level of education that would be expected given their age.

**Income Security**
Household ownership of various types of assets is used to assess income security, including consumption assets and productive assets. Households in Rushinga district were found to have the lowest average ownership of most types of assets. Those in Gwanda reported relatively high levels of asset ownership. There is wide variation across the districts in the percent of households owning each asset as well as in the value of livestock owned.

**Changes in Livelihood Security between 2007 and 2009**
The data show a slight decline in the number of meals consumed in the previous day but nevertheless an increase in average household dietary diversity scores between 2007 and 2009. While comparable education security data were unavailable for both 2007 and 2009, health security (as indicated by access to sanitary toilets) changed relatively little over the two-year period. In terms of income security, there was an increase in the percentages of households owning wheelbarrows, oxcarts, and donkeys. Meanwhile, data suggest a decrease in the percentage of households owning poultry over the same period.
Impact of WV’s Interventions

WV’s current portfolio of activities includes 21 different types of interventions. From 2005 to 2009 the percentage of households participating in WV interventions has steadily increased. Participation in targeted food assistance (TFA) interventions has been most common and has increased as food access and availability in Zimbabwe have declined over the last five years. Participation in ANR activities was greatest during 2007, but has declined slightly over the past two years. Very few households participated in any small enterprise development activity provided by WV between 2005 and 2009, and participation in food-for-work activities became less common over the same period.

Analysis of the 2009 HLSA data shows that the greater the number of WV interventions a household participates in, the more food secure the household is. WV interventions are without doubt having a positive influence on both the quantity of food households have access to as well as the quality of that food. Further investigation of the specific types of interventions confirms that ANR interventions lead to statistically significant improvement in households’ food and livelihood security, likely as a result of improved crop diversity and maize yields.

In contrast to ANR interventions, TFA interventions are focused mainly on addressing current acute needs rather than long standing underlying vulnerabilities. Although the regression results failed to detect a positive impact of WV’s TFA activities on household food, health, and livelihood security, they demonstrate a positive impact of school feeding intervention on households’ education security, including school attendance and provision of school supplies for the current generation of school-aged children. The regression results give no evidence on whether combining ANR and TFA interventions has any added benefit to households than they do separately.

Examination of the impacts on households of interventions falling within WV’s three program components—food security, livelihoods promotion and social protection—suggests that its livelihood promotion activities are having a positive impact on households’ education security and that its food security and social protection activities are having a positive impact on households’ overall livelihood security. The results give no evidence as to whether activities falling into multiple program components has any added benefit to households than they do separately.

In summary, activities implemented by WV have provided essential support to participating households by providing improved access to food, improving the quality of their diets, and improving the education security of households.
Conclusions and Recommendations

Analysis of 2009 HLSA suggest that WV programs have had a direct and beneficial impact on household food security among targeted households, particularly for those that participate in multiple interventions. This finding attests to the effectiveness of WV programs amid an array of challenges to household food security and underscores the need for WV to continue to promote integrated programming and participation of beneficiary households in multiple interventions. Participation in ANR interventions has had a particularly positive impact on household food security, partly by raising the diversity of crops cultivated and maize yields. Similarly, school feeding activities carried out under the TFA component have had a positive impact on access to education among participating households. Accordingly, these types of interventions should be expanded, particularly in those areas that have yet to participate in them. In light of the very poor, and likely deteriorating, food security situation in its operational area, WV should continue to meet current acute food needs through its TFA interventions.

Specific recommendations in the areas of food security, health security, education security, income security and program monitoring and evaluation follow.

Food security

- In light of declining food availability, the increase in maize crop yields brought about by conservation farming techniques is promising. Accordingly, WV should seek ways of expanding CF activities among participating households. Uptake of CF techniques for maize and sorghum cultivation is relatively low in Mt. Darwin and Rushinga districts suggesting they might be possible areas for expanded CF interventions.

- Lack of seed (especially for maize and groundnuts), lack of draught power, and lack of money to purchase inputs were each commonly cited by households as a reason for not cultivating available land. WV should design and target interventions to address each of these specific constraints.

- Over one half of all households in the sample rely on home gardens or community gardens as the most important source of vegetables during the lean period. Still, less than 4 percent of households participated in home and/or community garden activities implemented by WV in 2009. In order to support adequate nutrition, WV should seek ways of improving access to seed and water for vegetable gardening.

Health Security

- Per capita water collection is below internationally recognized standards for maintaining adequate health and hygiene. WV can address the need for greater access to potable water by supporting construction and rehabilitation of protected water sources.

- Over one half of households surveyed do not have access to a latrine. Given recent outbreaks of cholera and the threat of other water-borne diseases, WV can help to improve the health of beneficiary households by providing materials and training for construction of sanitary toilet...
facilities. Continued attention should also be paid to the provision of materials and education in support of handwashing.

- The HLSA data show that among all households with a chronically ill member, nearly half rely on community members as a primary source of care and support. Accordingly, WV should continue to strengthen the capacity of home-based care volunteers to support HIV-positive individuals through proper nutrition and treatment of symptoms.

- Despite general knowledge regarding prevention of HIV, respondents continue to have common misconceptions regarding potential forms of transmission. In order to dispel misunderstanding and contribute to effective prevention, WV should continue to implement HIV awareness campaigns in target communities.

**Access to education**

- In light of relatively high household dependency ratios, and the inability of households to meet educational expenses, WV should seek ways of increasing access to affordable education among beneficiary households.

- According to 2009 HLSA data, only 16 percent of 17 year olds are currently engaged in or have the skills to pursue their self-selected trade. WV should partner with interested stakeholders in expanding vocational skills training to out-of-school youth in support of their longer-term livelihood security.

**Access to income**

- In the wake of rising unemployment and hyper-inflation, informal trade/self-employment and livestock sales have become increasingly important sources of cash income for vulnerable households. WV should consider supporting the resilience of beneficiary households by extending support for home and community gardens, including provision of seeds, training in agricultural marketing and development of micro-enterprise skills.

- Within the faltering Zimbabwean economy, just over 3 percent of households currently have access to credit through informal moneylenders, saving groups, micro-finance organizations or banks. WV should consider improving access to credit among beneficiary households by offering targeted support for community-based savings and loan schemes.

- In order to meet household expenses (especially food and education) a significant percentage of households have chosen to sell productive assets, including livestock. WV can strengthen a critical safety net for vulnerable households by helping them acquire and care for livestock.

**Program monitoring and evaluation**

- Sample size and household selection for future HLSA surveys should take into account the data needs necessary to detect impacts of WV’s interventions on households.