



Case Study Seven

Nutrition Intervention (Sweet Potatoes), Manhica District, Maputo Province, Mozambique ¹⁶

Who

ActionAid has worked in Mozambique since 1987, initially providing emergency relief to over 200 000 people who had been displaced by war. At a local level ActionAid staff helped bring both sides of the conflict together at a critical stage in the peace negotiations, and with the 1992 ceasefire, began a long-term programme to help communities recover and rebuild. ActionAid now works with 94 000 people, mainly through community groups, to ensure appropriate and lasting change.

ActionAid has a presence in Zambézia, Maputo and Manica provinces and has developed participatory approaches to address the HIV and AIDS pandemic and to alleviate risk and the consequences of natural disasters. Progress has been made from emergency action to integrated development action, including prevention through addressing community needs, and development of skills in co-ordination from local to international level. A primary aim is to break the taboos to ensure that women receive care and protection and avoid spreading HIV. This project will assist in improving community health care and is combined with a nutrition project. While the sweet potato and seed fair interventions are not directly addressing HIV and AIDS, they have an important impact by reinforcing local capacities to respond to a food crisis; both were developed in Manhica

and Marracuene Districts in Maputo Province, in the south of Mozambique.

Who?

This initiative took place through co-operation between INIA (*Instituto Nacional de Investigações in Agronomia*, National Institute for Agronomic Research), ActionAid, the Ministry of Health, local authorities and community-based organisations.

Why?

To increase production capacity in local communities; to improve and increase consumption of nutritious foods and ensure a better diet that can strengthen health in the fight against HIV and AIDS. Difficulties with food production lead to poor nutrition, both protein-energy malnutrition and deficiencies in micronutrients such as iron, zinc and vitamins (Barnett & Whiteside, 2002). Poor nutrition leads to compromised immune systems, making individuals more susceptible to infection in general.

What?

Sweet potatoes rich in Vitamin A are suitable for reinforcing the immune system. Sweet potato is the main subsistence crop in the area, and new varieties are more resistant to drought and floods.

With whom?

The Southern Africa Root Crops Research Network (SARRNET <http://www.iita.org/sarrnet/>) is the main partner. ActionAid funded the project and in 2004 SARRNET contributed US\$5 000 towards school feeding.

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How?

The sweet potato was initially distributed in 2001 to 189 families in areas surrounding Maputo. ActionAid entered into agreements with district extension personnel to disseminate information and assist with free seed distribution. In 2002, in collaboration with the Department of Health, a campaign was run to raise awareness of the nutritional and health value of the sweet potato.

Time Line

Initially intended as a two-year project, it is still ongoing in 2005.

Gaps in evidence

No gaps were found relating to the farming systems. According to farmers, the “orange pulp” sweet potatoes are resistant in the lowlands and grow well, without disease or pest. The interest of international networks has been awakened as to the potential of the sweet potato in alleviating food insecurity. It contains dietary fibre, natural sugars and complex carbohydrates, protein, vitamins A and C, iron and calcium like all other sweet potatoes. This particular type of sweet potato, apparently the same as all other varieties, has been targeted as having unusual properties, and how and why this happened is

unclear. There is also a gap around marketing possibilities. If this sweet potato is really helpful for strengthening immune deficiency, the question must be posed as to why it has not been commercialised already, and why it is not available in urban markets. There is also the matter of the gaps in the agro-processing project. Unfortunately income in the community is too low, and many of the products need input from the market such as eggs, sugar, oil and wheat flour. The average family is therefore not using its new knowledge at a household level.

Enabling factors

The new variety is introduced in traditional farming systems that are already based on sweet potatoes, and is thus easier to incorporate. Sweet potatoes are harvested three times a year and require steady harvests if they are to provide against food insecurity. The agro-processing component provides opportunities for improving nutrition and building economic capacity within a community.

Constraining factors

There is a huge demand for sweet potatoes and the market is open, but the focus of the project is to ensure food security and good nutrition at community level, which limits the possibilities for developing and marketing a supply chain and supplying urban areas with a nutritional product that could also increase income generation for communities. If combined with an emergency saving scheme it could assist members of the community to deal with natural disasters better.

Additional ideas or potential improvements

There are hundreds of sweet potato varieties, and introducing several types rather than only one will better provide for food security. While drought and floods are not easy to predict, farmers could, depending on the season, cultivate different kinds of sweet potatoes. The ActionAid project is not focussed on only one product but also considers the diversity and complementarities of food production. Better utilising indigenous knowledge will enable local farmers to participate more strongly and contribute to their empowerment. It is, however, difficult to properly assess the value of the project or its potential due to the limited information available. While market supply may not be assured initially, the project can be organised incrementally, as were the seed fairs.

Implications of scaling up/scaling out

ActionAid has a strong networking and co-ordination capacity, and is thus well-placed to expand its successful interventions and share good practices. Use of the new variety is expanding slowly through the seed exchange practices of subsistence farmers, and the marketing of the product could be strengthened with the objective of addressing food insecurity and impact of HIV and AIDS. The involvement of the national authorities in supporting such initiatives would be useful. Based on the success and expansion of the seed fairs, it is possible that 'sweet potatoes' seed fairs could also be implemented at provincial level.

Better utilising indigenous knowledge will enable local farmers to participate more strongly and contribute to their empowerment

5. Concluding comments

While ensuring local political support for projects may be beyond the control of project staff, but where positive relationships are developed this can make a critical difference



A number of general lessons have emerged from these studies, which provide a starting point for organisations working with food security and HIV and AIDS. The success factors underpinning these promising developments are highlighted below, followed by key recommendations that have emerged from the paper in general.

In many of these cases, the use of participatory methods to design interventions is highlighted, as is working with existing local structures to enhance community involvement. While ensuring local political support for projects may be beyond the control of project staff, but where positive relationships are developed this can make a critical difference. Traditional support groups and structures are often under strain as a result of HIV and AIDS, and there is often the need for capacity-building to help strengthen these groups or even to establish complementary new groups in order to achieve impact. The importance of allocating resources for the development of a sustainable cadre of staff and for building training capacity has also been indirectly raised.

A number of projects, which have become successful at a local level, are now at a stage where they are widening their response to cover a larger population and geographical area. This scaling up has significant resource and support implications and also raises the question as to how effectively projects can be replicated from one region to another. Careful adaptation to the local context and the establishment of effective monitoring systems are critical.

For many community-based organisations, responses to the local impacts of HIV and AIDS have evolved to include a range of activities which are not tied to one sector or discipline. There may be instances where trust has been built from a positive engagement between communities and NGOs in the area of livelihood activities (for example agriculture, credit and loan systems), using participatory processes, and this trust is built upon with discussions and new interventions emerging in more sensitive areas, for example, relating to sexual behaviour. For example, farmers' groups that have emerged as a result of new agricultural training are used as entry points for education and training in 'life skills', and HIV prevention. There are likely to be some vulnerable groups, which are severely affected by the HIV

and AIDS epidemic but due to their lack of access to some of the most basic resources (for example land, labour, capital), are not able to benefit from certain interventions. In such cases targeted welfare support will be necessary to ensure that these groups do not fall further into poverty.

From this general discussion of the case studies, and building on discussions from the “Mitigation Workshop” discussed in the introduction, six general recommendations can be identified:

Development, relief and rehabilitation must be addressed together

Standard development practice focuses on social and economic development, punctuated by occasional emergencies that require short-term relief until people get “back on track.” However, increasing rates of poverty and the collapse of services show that development work has not been successful in the past. Given the reality of HIV and AIDS, the entire approach to development requires a vigorous re-conceptualisation, and interventions in any community should always combine aspects of development, relief and rehabilitation.

Policy should encourage, and be influenced by, local implementation

National and international policies provide important direction for the fight against HIV and AIDS. However, efforts are always implemented locally. Too often, policy-makers do not understand the practical problems in communities, or the specific factors that lead to success or failure. Ministries, organisations, and international bodies should make stronger efforts to learn from the successes and difficulties encountered during project implementation, and these lessons should be continually applied to review and improve advocacy, and eventually policy. Use of a standard, systematic format for writing up case studies allows experiences to be compared, and makes assessment and evaluation easier.

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Better targeting and participation helps affected people take charge

Practitioners must be clear about their areas of work and their target groups. It is not enough to target “people affected by AIDS”. Impacts of illness and premature death vary widely across families; even the situation of a single family changes dramatically over time. Agricultural support can, for example, help one family, but be meaningless for its neighbour. Young girls at high risk of HIV may not benefit from programmes that are successful with older women. Service organisations should use participatory approaches, through which they seek out and work with affected men, women, boys and girls who often are unintentionally excluded. Efforts to work with “the vulnerable” as a broad group must be replaced by a more sensitive approach that is responsive to people with different types of vulnerability.

Focus on multi-sectoral partnerships at district and village level

No single intervention can work for everyone in a community, so there must be a range of services and responses. It is recognised that HIV and AIDS is not a health issue alone: a single family may need a mix of services across sectors. However, no one organisation or department can address all the needs and it is therefore crucial to forge strong local partnerships among organisations with complementary skills that span agriculture, health, education, social protection, and others. For example, an integrated approach by home-based care-givers, orphan

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committees, agricultural extension agents and health workers can ensure that food, school fees relief, home gardens and health care go directly to families that most need them. This is a broad version of the AIDS “continuum of care”. Partnerships have been discussed for decades, but are not easy to implement. There are examples of strong partnerships among specific organisations and departments in some districts or communities, but stronger efforts are needed to encourage the expansion of such local partnerships.

Beyond ‘labour saving’ technologies and practices

People affected by AIDS tend to have multiple burdens, with minimal time to address them. One common response is to encourage “labour-saving technologies and practices”. While these can be useful in some situations, the focus on labour-saving should be broadened to “labour management.” In addition to saving labour, labour management can include spreading labour demands over time to minimise work needed at peak periods (such as different approaches to land preparation); enabling quick returns to labour (through fast-maturing varieties or animal breeds); or increasing returns to labour (through adding value to any goods that are marketed). Development of a range of technologies and practices should include active involvement of the people who could benefit, taking indigenous knowledge and cultural aspects into consideration. As Jayne *et al* (2004) have argued, the loss of family labour due to a death in the household does not mean that labour necessarily becomes the limiting input in agricultural production, and hence it does not necessarily follow that the appropriate policy response for

agricultural research and extension systems is to focus unduly on labour-saving agricultural technology. Labour-saving technology may be appropriate for many households, such as those who already face high land/labour ratios and lack other resources that could be substituted for labour, such as cash for hiring labour. The main implication of this argument is that a broad range of agricultural production technologies need to be established, which are appropriate for the wide range of land/labour/capital ratios found among small-scale farm households, and which are needed to respond to the HIV and AIDS pandemic.

Base policy and practice on experimentation and evidence of success

Good development practice should be based upon evidence of what works, not merely on seemingly good ideas.

The situation created by HIV and AIDS requires more experimentation and creative approaches, backed by evidence of successful interventions. These can then influence policy and practice more widely. Action research provides one way of assessing such interventions in order to understand what works and what needs improving in specific situations, for different types of people.

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