Flyer 5: Researching HIV/AIDS at the Local Level

Purpose

The HIV/AIDS pandemic in sub-Saharan Africa has reached such crisis proportions that it affects every aspect of life. The goal of “mainstreaming HIV/AIDS” is to ensure that the impacts of HIV/AIDS are addressed and reduced in communities and within organizations, in all sectors. Many development and humanitarian organizations want to mainstream HIV/AIDS, but do not know where to start.

This flyer is part of a series that explains the process of mainstreaming used by about twenty organisations in Malawi. This flyer overviews research on the epidemic at community and district level in Mulanje; the next flyer outlines main findings. This research looked at how HIV/AIDS affects different people, how it undermines organisations, and how people and organisations respond. It set the scene for participating organisations to design or modify programmes to better account for HIV/AIDS. This flyer provides some ideas that other organisations can build upon to help them undertake research on the epidemic where they work.

Overview: Oxfam Malawi

Oxfam Malawi is funded by Novib, Oxfam GB, Oxfam Hong Kong, and Oxfam Ireland. The Shire Highlands Sustainable Livelihoods Programme operates in Mulanje and Thyolo Districts. The Partner Support Programme includes organisations in southern Malawi, and two national coalitions.

Research in Malawi

Oxfam Malawi and several partners conducted qualitative research in Mulanje District to go beyond statistics, and to better understand the reality of HIV/AIDS. They sought to understand the impacts of the illness and death, and to learn about the responses of people and organisations. Much attention focused on how HIV/AIDS changes peoples’ daily lives: in productive activities like agriculture, trading, or holding a job; in household tasks such as raising children and caring for relatives; and in community involvement. Work operated in two communities where the Shire Highlands Sustainable Livelihoods Programme operates, with interviews with managers and staff of district government, NGOs, CBOs, and private business.

Oxfam’s Nellie Nyang’wa summarised a main benefit for her as “...linking a theory that I had learned earlier, to a practical situation in the village, and to discover that the practical situation is much more intense than the information that I had.” This sort of hands-on experience among all participants in the research is now invaluable, as Oxfam and partners continually reassess and improve their programmes.

The team used qualitative research, in a few areas, to understand a variety of issues. It was the start of an ongoing process to help development and government staff to become sensitive to real issues about AIDS, to understand how the issues affect their daily work, and to gain confidence and simple skills they can continue to use. In the process, they developed relationships with people infected and affected by HIV/AIDS, who are normally excluded from development interventions. Agriculture and youth development specialists worked side by side with home-based care providers and nurses, providing a foundation for future collaboration.

The next flyer in this series, number 6, outlines some of the main findings from this research.

This is one of a series of flyers designed to assist organizations in mainstreaming the issue of HIV/AIDS into their core work and internal policies, without losing their primary focus. This is Flyer 5 (29 October 2001).
**Process Used in Malawi: Research into the Local Epidemic**

In March 2001, Oxfam Malawi ran a 3-day training / refresher in HIV/AIDS issues and in basic qualitative research (PRA). This was followed by 5 days field work, analysis, and community feedback in Mulanje.

- The focus was on small scale qualitative work, looking for a range of responses and important issues and themes. It was not a quantitative survey, so statistical extrapolations are not appropriate.
- Seven teams of two to three people performed the research; three worked in each of the two communities, to cross-check results. One team interviewed other organizations and government offices.
- In community meetings, teams introduced themselves, and raised the issue of health and development. They did not start by mentioning HIV/AIDS, as they thought the issue might be sensitive. Instead, teams asked about patterns over recent years of chronic illnesses and death of younger people. In response, people (even the elderly) quickly raised the issue of HIV/AIDS in their communities.
- After large meetings, participants split into smaller groups of 8 to 15 each, divided along gender and age lines (boys and girls around 15 to 25; men and women between 25 and 45; older men and women). Younger people said they seldom participate in community discussions, unless specifically invited.
- Following small groups, they did a series of in-depth interviews with 1-3 people affected by HIV/AIDS.
- The broad focus in all discussions was on how chronic ill-health and early death affect different people in households, and different types of households. Attention was on how impacts and responses change over time (at onset of illness; during chronic or repeated illness; in the months and years after death).
- One team interviewed managers and staff using focus groups and some individual interviews. The emphasis was on how HIV/AIDS among staff, communities, and others affects ability to achieve goals.
- At the end, researchers discussed and confirmed findings in community meetings in each village.

**Follow-up Actions Taken in Malawi**

- Oxfam produced a short report of research findings, which has been shared with several organisations and government departments (6-page Word document available via e-mail at contact addresses below).
- Oxfam performed follow-up focus groups and individual interviews with affected families in several communities in April through June, on key issues arising during the research.
- Information from research and follow-up consultations formed basis of intensive three day workshop in June, during which Oxfam and partners began modifying programme objectives, indicators, and work plan to be more relevant to families affected by HIV/AIDS.

**Key Points to Consider**

- Are workshop facilitators knowledgeable on HIV/AIDS, and do they have qualitative research skills?
- Do participants need training in both qualitative research (e.g. PRA) and in basics of HIV/AIDS?
- Is there a good mix of participants? In Malawi, there were managers and staff of nine organisations (government, NGO, CBO, church, private sector), working in the development field, hospitals, AIDS counselling services, and home care provision.
- Special focus on youth is vital. Would it be useful to have focus groups with children under 15?
- How can the research balance the need to understand the impacts within communities and impacts within organisations? In Malawi, most participants learned more about community impacts.
- How does health, and the situations of HIV/AIDS affected people, influence broader development?
- How can the research process be simple, so researchers are comfortable using the tools and methods? Can these tools be easily integrated into a programme’s on-going monitoring system?