HIV/AIDS: what are the implications for humanitarian action?

Summary

The humanitarian crisis in southern Africa highlights the complex interactions between food insecurity, famine, or the threat of it, humanitarian action and the HIV/AIDS pandemic. James Morris, the UN Special Envoy, argues that:

the HIV/AIDS situation in Southern Africa is challenging the paradigm of humanitarian assistance.

Analysts are warning of the possibility that the HIV/AIDS epidemic will lead to ‘new variant famine’ which De Waal and Whiteside (2002) argue is, ‘characterised by heightened vulnerability, a breakdown in coping strategies, rapid descent into starvation and inability to recover’. The extent, however, to which the humanitarian system is actually changing in response to the HIV/AIDS pandemic remains unclear; both in terms of concrete action already taken at field level, and the extent to which it needs to adapt its ways of working in future.

This study will critically review the existing literature on AIDS, food security and famine. It will map how the humanitarian system is currently dealing with the issue of HIV/AIDS in the southern Africa crisis and consider how aid agencies should deal with the HIV/AIDS epidemic in future crises. It will have two main objectives:

Objective 1: To provide humanitarian practitioners and policy makers with a critical review of existing literature on HIV/AIDS and food security and a framework for understanding the interactions between HIV/AIDS, food security and famine.
Objective 2: To summarise and disseminate the lessons learnt by the humanitarian community from the crisis in southern Africa, in dealing with the links between HIV/AIDS and acute food insecurity, and suggest possible avenues for future good practice.

The project will tackle key conceptual issues raised by the southern Africa crisis such as definitions of famine and the impact of HIV/AIDS on triggering crises and recovering from them. It will examine where humanitarian assistance should be situated in the overall response to the epidemic.

The focus of the second objective will be on specific, practical findings and recommendations for humanitarian actors. It will ask, what areas need to be developed in applying a ‘HIV lens’ to humanitarian programming? This will encompass questions around how to incorporate AIDS issues in early warning, assessment and targeting, how food and nutrition programmes should adapt and whether broader responses are needed, encompassing other sectors.

The research methods used will include a literature review and two months field work in southern Africa, where interviews would be conducted with key actors in the humanitarian system. It will investigate the grey literature of assessments, project proposals and reports to look into questions such as assessment and targeting methodologies, nutrition and mortality data.

The Humanitarian Policy Group at ODI brings to this issue a proven track record in conducting field research and expertise in state of the art reviews in key areas of humanitarian policy. One of the core strengths of the Humanitarian Policy Group in ODI is its ability to disseminate findings widely to key humanitarian practitioners, policy makers and researchers. ODI will develop a collaboration with the Department of International Health and Development at Tulane University, which will be involved in supporting the literature review, interviewing key US agencies and participating in the field-work. Tulane’s existing areas of
expertise in public health, nutrition and HIV/AIDS will complement ODI’s strengths in humanitarian policy.
HIV/AIDS: what are the implications for humanitarian action?

1. Introduction

The current humanitarian crisis in southern Africa has highlighted the complex interactions between food insecurity, famine, or the threat of it, humanitarian action and the HIV/AIDS pandemic. James Morris, the UN Special Envoy argues that:

‘The HIV/AIDS situation in Southern Africa is challenging the paradigm of humanitarian assistance.’ (World Food Programme 2002)

Analysts are warning of the possibility that the HIV/AIDS epidemic will lead to ‘new variant famine’ which De Waal and Whiteside (2002) argue is, ‘characterised by heightened vulnerability, a breakdown in coping strategies, rapid descent into starvation and inability to recover’. The extent, however, to which the humanitarian system is actually changing, in response to the HIV/AIDS pandemic remains unclear; both in terms of concrete action already taken at field level, and the extent to which it needs to adapt its ways of working in future.

This study will critically review the existing literature on AIDS, food security and famine. It will map how the humanitarian system is currently dealing with the issue of HIV/AIDS in the southern Africa crisis and consider how it should be dealt with in future. It will have two main objectives:

Research Objective 1: To provide humanitarian practitioners and policy makers with a critical review of existing literature on HIV/AIDS and food security and a
framework for understanding the interactions between HIV/AIDS, food security and famine.

*Research Objective 2*: To summarise and disseminate the lessons learnt by the humanitarian community from the crisis in southern Africa, in dealing with the links between HIV/AIDS and acute food insecurity, and suggest possible avenues for future good practice.

2. HIV/AIDS, humanitarian action and food security: a review of the main issues

A. HIV/AIDS and Food Security

The impact of HIV/AIDS in sub-Saharan Africa is already devastating and will continue to be so for decades to come. UNAIDS/WHO (2002) estimate that 28.5 million adults and children live with HIV/AIDS in Africa, with 2.4 million Africans having died of AIDS in 2002 alone.

An increasing body of research has demonstrated the profound effect that HIV/AIDS is having on livelihoods in sub-Saharan African. This literature on HIV/AIDS and food security has been developing rapidly in the last few years. Several useful summaries of it exist (White and Robinson 2000; Barnett and Whiteside 2002; Baylies 2002; Haddad and Gillsepie 2001).

The key impacts are seen in terms of declining household labour availability leading to lowered agricultural productivity, the threat to household incomes due to increased expenditures on health care and funerals, the sale of assets needed to cope with sickness and death and the increasing strain on social capital as communities struggle to absorb the impact of increasing numbers of orphans and destitute households. There is also an important literature on the gender dimensions of the AIDS epidemic (Baylies and Bujra 2000) that highlights the
importance of placing gender relations at the heart of understanding, and responding to, the epidemic.

Different theoretical and conceptual frameworks and literatures are being used to understand the impact of HIV/AIDS on livelihoods and food security. The most commonly used are the sustainable livelihoods framework (Stokes 2003) and the coping strategies literature (Corbett 1988, Davies 1996). The sustainable livelihoods framework models the impact of HIV/AIDS on livelihoods in terms of the five sources of household capital (human, financial, natural, physical and social) and sees HIV/AIDS as a shock to both individual households and communities. The adaptations and responses made by households to these impacts are being described in similar terms to the literature on coping strategies in response to drought and famine. However, the term ‘coping’ has been criticised on the grounds that many households are ‘not coping but struggling’ (Rugalema 2000). Save the Children are working on an updated version of the household economy approach, a Labour Assets Allocation Model, that can be used to model the impact of HIV/AIDS on the economy of individual households (Petty 2003; Save the Children 2000).

The majority of the existing literature has focused on the impact of HIV/AIDS in ‘normal’ or ‘development’ situations. The question of the interaction between HIV/AIDS and other shocks and its impact on livelihoods and food security during periods of extreme stress remains relatively unexplored. As De Waal and Tumushabe (2003) argue, ‘concerning HIV/AIDS and acute food insecurity and famine, there is a dearth of systematic information’.

**B. HIV/AIDS and Humanitarian Action**

The humanitarian literature, where it considers HIV/AIDS, has largely focused on the links between HIV/AIDS and emergencies in conflict and refugee situations (Smith 2002; UNAIDS 1997; CAFOD 2001). The focus has largely been on the increased risk of infection among affected populations caused by the destruction
and disruption caused by emergencies and ways in which humanitarian responses can reduce vulnerabilities to infection.

The southern Africa crisis forced the issue of HIV/AIDS in non-conflict situations to the top of the humanitarian agenda. The argument that HIV/AIDS was a central component to the southern Africa crisis came about gradually. Initially defined as a food crisis caused by a combination of bad weather, bad governance and underlying poverty, AIDS was moved to the forefront of the agenda following the visit of the Special Envoy to southern Africa in 2002 (Darcy et al 2002, WFP 2002). Certainly, Southern Africa has some of the world’s highest rates of HIV/AIDS infection. Rates of sero-prevalence among adults are estimated to range from a low of 12% in Mozambique to a high of 34% in Zimbabwe (UNAIDS 2002).

The southern Africa crisis also raises a series of more practical questions around the programming of humanitarian aid in the context of an HIV/AIDS epidemic. Do areas such as assessment, targeting and service delivery need to be adapted and should a wider response beyond the focus on food delivery be considered? (Darcy et al 2002) The ongoing relief operation in southern Africa has left humanitarian agencies grappling at the field level with these questions. This has started to produce a body of practice in terms of responding to widespread food insecurity in the context of an HIV/AIDS epidemic (UNAIDS and RIASCO 2002; World Food Programme 2003, FANTA 2002). Practitioners on the ground have had to forge ahead with developing tools such as assessment and targeting methodologies but this practice remains largely within a grey literature of project documents and reports. There is therefore a need for research and policy to catch up with practice on the ground and clearly document what has already been achieved.

As the southern Africa crisis developed, Alex De Waal published a series of articles (De Waal and Tumushabe 2003; De Waal and Whiteside 2002; De Waal 2002) in which he argued that:
HIV/AIDS has such far reaching adverse implications that we are witnessing a ‘new variant famine’ (De Waal and Whiteside 2002).

De Waal argues that the models which have been developed for understanding peacetime famine in Africa depend on assumptions about household labour supply, skills endowments and long-term viability, which no longer necessarily apply in an HIV/AIDS epidemic. De Waal and Whiteside (2002) highlight four new factors, which characterise those affected by the HIV/AIDS epidemic; household labour shortages, loss of assets and skills due to adult mortality, the burden of care for sick adults and orphans and the vicious interactions between malnutrition and HIV. The impact of these new factors is that the effectiveness of traditional strategies used to cope with famine are reduced and in some cases rendered impossible or dangerous. For example, reducing food consumption is particularly dangerous for HIV positive individuals who have higher than normal nutritional needs. They conclude that in ‘new variant famine’ the prospects for a sharp decline into famine are increased, and the possibilities for recovery are reduced.

‘New variant famine’ is presented as a hypothesis that has not yet been validated by research; ‘the hypothesis cannot be considered proven, but it provides a framework for policy-making, relief provision, monitoring and research’ (De Waal and Whiteside 2002).

It is important to stress this point because the power and plausibility of the argument has led to it being widely quoted and adopted as fact rather than hypothesis, for example;

Unlike previous emergencies in Africa, the ‘new variant’ famine arising from HIV/AIDS impacts the core productive cohort of adults, rather than the marginal producers’ (USAID 2002).
The risk here is that a hypothesis about the possible future impact of HIV/AIDS gets transformed into an explanation of the current crisis. As De Waal and Whiteside (2003) point out with respect to the food crisis in southern Africa, “despite the large numbers of people ‘in need’, there is as yet no evidence of rampant malnutrition and starvation.” The emphasis on HIV/AIDS also risks marginalising other factors, particularly political ones, and, therefore, could be used as a new and convenient way of depoliticising food crises. Whilst not proposing to test the ‘new variant famine’ hypothesis this study will critically review both its usefulness as a framework for research and action and the ways in which it is being adopted by various stakeholders as a useful narrative (Roe 1991).

As the new variant famine hypothesis suggests, the current southern Africa crisis is challenging conceptions of what defines famine and crisis. Even the terms famine and crisis themselves rely, in part, on a consensus about what is normal and the notion that crises are transitory. Just as some long running conflicts in Africa have introduced the concept of permanent crisis or the ‘normalisation of crisis’, the HIV/AIDS pandemic and levels of poverty in large parts of Africa raises the spectre of chronic crisis in countries at peace (Bradbury 2000).

The epidemic requires us to re-examine fundamental definitions of famine, vulnerability and risk. The devastating impact of the HIV/AIDS epidemic will be felt for decades and there is clearly likely to be a need for both humanitarian and development assistance in mitigating its impact. As emergency relief is frequently portrayed as a short-term response to immediate needs there have been calls to adopt a development rather than a relief response; ‘the donor community therefore needs to adopt a more developmental approach rather than a disaster relief approach’ (USAID 2002). Others, however, have called for the HIV/AIDS epidemic to be seen, in its own right, as a humanitarian emergency; ‘the representative of the FAO .. suggested that the meeting identify HIV/AIDS as an emergency requiring an emergency response’ (UNAIDS and RIASCO 2002).
There is, therefore, a need for clarity in understanding where humanitarian aid should be situated within the wider response to the HIV/AIDS epidemic. At the moment, there appears to be growing confusion between different arguments being made about the relationship between HIV/AIDS and food insecurity and what should be done in mitigation. In the literature it is possible to distinguish between the following main approaches:

1. The argument that HIV/AIDS in and of itself should be seen as an emergency issue worthy of an emergency response due to the devastating impact it is having on mortality, morbidity and livelihoods.

2. The argument that the impact of HIV/AIDS on livelihoods means that some form of safety net or welfare system will be needed for those worst affected. At the same time development processes will need to mainstream HIV/AIDS issues in devising appropriate mitigation strategies. Relief will be needed as a long-term safety net in conjunction with other, more development orientated, interventions.

3. The argument that the HIV/AIDS epidemic has greatly increased the food insecurity of people and that this has increased their vulnerability to other shocks. There is therefore a possibility that natural and complex disasters will start earlier, last longer and be triggered more easily. The humanitarian community will need to adjust its way of doing business to take this hugely increased vulnerability to shocks into account.

4. The De Waal argument that the HIV/AIDS epidemic is causing and will cause ‘new variant famines’. The impacts of HIV/AIDS are so devastating that we are facing, ‘a new kind of acute food crisis in which there is no expectation of a return to either sustainable livelihoods or a demographic equilibrium’.
In fact, none of these positions seem to be mutually exclusive. One can argue the need for long-term safety nets for those worst affected by HIV/AIDS at the same time as needing to analyse the likely impact of the epidemic on other types of shocks and what this means for humanitarian action. A worst case scenario for the impact of the epidemic is outlined in the new variant famine hypothesis.

The first two points show the need for a clear conceptual framework situating humanitarian aid in the overall response to the HIV/AIDS epidemic. This study will consider what this framework might look like and what this would mean for the architecture of the humanitarian system. The main focus of this proposed study, however, will be on the third point of this typology and the ways in which humanitarian aid needs to be re-thought to take the HIV/AIDS epidemic into account. In responding to a crisis in the context of an HIV/AIDS epidemic, humanitarian agencies clearly need to take HIV/AIDS into account, both in terms of policy and practical programming approaches. As Haddad and Gillespie (2001) argue, a HIV/AIDS ‘lens’ is needed. The study will make a start in holding this ‘HIV lens’ up to humanitarian programming (Gillespie and Loevinsohn 2003).

3. The Project

This study will aim to analyse the implications of the HIV/AIDS pandemic for humanitarian response. It will set out to map the ways in which the humanitarian community is currently addressing the links between HIV / AIDS and famine in southern Africa and aim to provide recommendations for good practice in addressing HIV / AIDS issues in emergencies. The main focus of the project will be on the links between HIV/AIDS and humanitarian programming in non-conflict situations. Issues of AIDS and conflict are also crucially important but are beyond the scope of this project.

The project will divide into two main areas. Firstly, it will address how the HIV/AIDS epidemic challenges conceptual issues around definitions of famine,
humanitarianism, relief and development. The study will attempt to provide practitioners with a critical review of the issues and literature and suggest possible conceptual frameworks for understanding the debate.

The second area, and main focus of the field research, will be on the implications of the HIV/AIDS epidemic for humanitarian programming approaches. It will aim to document what is currently happening in southern Africa, in relation to the links between humanitarian response and HIV/AIDS and provide practical guidance to practitioners on possible good practice.

The Humanitarian Policy Group at ODI brings to this issue a proven track record in conducting field research and expertise in state of the art reviews in key areas of humanitarian policy. Through the Humanitarian Policy Network, ODI also has the capacity to disseminate research findings widely to key stakeholders in the humanitarian community.

ODI will develop a collaboration with the Department of International Health and Development at Tulane University, which will be involved in supporting the literature review, interviewing key US agencies, and participating in the fieldwork. Tulane’s existing areas of expertise in public health, nutrition and HIV/AIDS will complement ODI’s strengths in humanitarian policy.

The project will aim to build links with other institutions and research efforts that are underway in this area. It is anticipated that this initial piece of work will lead to further more detailed research, particularly at a community and household level on the impact of HIV/AIDS in acute crisis situations. The project will aim to identify relevant collaborations to take this forward, including with potential southern partners.
4. Research Objectives and Key Research Questions

**Research Objective 1:** To provide humanitarian practitioners with a critical review of existing literature on HIV/AIDS and food security and a framework for understanding the interactions between HIV/AIDS, food security and famine.

**Research Questions:**

a. What are the key messages from the existing literature on HIV/AIDS and food security in relation to humanitarian aid? What conceptual frameworks and theoretical approaches are most useful for clearly mapping the relationship between HIV/AIDS and food security in crisis situations?

b. Does the impact of HIV/AIDS mean that earlier humanitarian interventions are likely to be needed in future crises and that smaller shocks are likely to trigger crises?

c. Does increased vulnerability to shocks due to HIV/AIDS imply that humanitarian aid will need to be sustained for longer periods?

d. Does the devastating impact of the HIV/AIDS epidemic imply that some countries are likely to enter into permanent crisis and need humanitarian aid in the long-term?

e. Any adequate response to HIV/AIDS clearly needs to encompass both relief and development activities. What should the role of the humanitarian community be and where does it fit within the wider response?

**Research Objective 2:** To summarise the lessons learnt by the humanitarian community from the crisis in southern Africa in dealing with the links between
HIV/AIDS and acute food insecurity and suggest possible avenues for future good practice.

*Research Questions:*

The two over-arching questions guiding this part of the project will be:

a. How has the humanitarian community incorporated the impact of the HIV/AIDS epidemic into its programming in response to the current crisis?

b. What areas need to be developed in applying a HIV/AIDS lens to humanitarian programming in order to develop recommendations for good practice?

Within these broad questions, the study will focus on specific and practical findings and recommendations for humanitarian practitioners working at all stages of the programme cycle. Possible examples are described below:

- Early warning – what new indicators are being developed and are needed? How can these be integrated into existing systems?
- Assessment – what new tools have already been developed? How can HIV/AIDS issues best be incorporated into existing assessment methodologies?
- Targeting – are different targeting criteria being used or needed and what implications does this have?
- Food Programming – what adaptations are being made or should be made to food aid programming. For example, are different rations sizes needed, do the number and frequency of distributions have to be increased, do adjustments have to be made to nutrition programmes?
- Other sectors – does the HIV/AIDS epidemic suggest that a wider response to need is required? If so, what other interventions are priorities? What additional interventions have been tried and how have they worked?
in southern Africa? How should health service provision in emergencies incorporate HIV/AIDS issues?

- Partners – who are the most appropriate deliverers of humanitarian assistance in the context of what will possibly become a longer term crisis?
- Monitoring and evaluation – what M&E systems have been established and how do they incorporate HIV/AIDS issues?
- Linking relief and development – how is the humanitarian community linking with the development one and vice versa?
- Long term welfare – as the humanitarian community plans to phase out its current emergency operations, what contribution is the humanitarian community planning to make to address the need for long term welfare safety nets?

Some of these questions may prove beyond the scope of this initial study. It is envisaged that this study will identify key issues for further more detailed field research and relevant collaborations to take this forward.

5. Methodology

Overview: Desk-based and field interview methods will be used to gather data to address the research questions. A desk-based review of literature will be the principal method to address research objective one, the critical review of existing literature; while telephone, email, and in-depth personal interviews will be used to address research objective two, focusing on lessons learned and good practice in humanitarian programming. The overall aim is to gather quantitative and qualitative data for a judgement sample of agencies and persons within the Southern African ‘humanitarian community.’ While representing distinct activities and approaches, these methods (desk/literature and field/interview methods) work iteratively and interactively, as the desk-based literature review will help reveal the appropriate agencies (and persons within agencies) to interview as well as the specific formulation of questions; while the actual interviews will in
turn generate pertinent new field reports, for example, to review and incorporate into final products. The research will be designed and led by the Humanitarian Policy Group at ODI with support from Tulane University's Department of International Health and Development

**Phase One: Critical review of literature**

This desk based research involves gathering, reviewing, and summarizing relevant literature from published and 'grey' literature. Published sources include standard relief, development and other journals, as well as internet publications; unpublished ‘grey’ literature comes from conference proceedings, internal agency or consultant reports, program descriptions, project websites, newsletters. The literature will represent empirical research, projects, and the organizational and policy context for humanitarian aid in Southern Africa. It will be reviewed and summarized according to the larger themes (introduced above) and key research questions with the specific aim of providing information useful to the humanitarian community as it attempts to respond to the HIV/AIDS pandemic. The literature review will also be used to develop an annotated bibliography and training materials as well as journal articles. This component of the project will be jointly conducted by the Humanitarian Policy Group at ODI and researchers from the Department of International Health and Development at Tulane University.

**Phase Two: Lessons learned and good practice in humanitarian programming**

Phase two involves visits to, and interviews with, agencies and key informants in headquarters (UK, US) and the field (various countries in southern Africa, to be determined) to gather data, and the compilation and analysis of agency and individual responses. Different instruments will be developed and tested, including (1) interview guidelines for in-depth, semi-structured interviews targeted to specific key informants in humanitarian relief, and (2) structured formal questionnaires to be administered (in person, by phone, or electronically) to additional managerial, technical, planning, operational and other relevant staff
of humanitarian agencies in the Europe and the US, as well as field offices in southern Africa, where possible and appropriate. A judgement sample of agencies will be used to capture, given limited time and funds, the range of key criteria needed to effectively address the research questions.

<table>
<thead>
<tr>
<th>Possible criteria in selection of a sample of agencies</th>
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<tr>
<td>Government, non-government, UN, community-based, church-based, applied research</td>
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<td>Type of programs: whether food aid, health, child focused, nutrition, home-based care</td>
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<td>Location of operations: urban, peri-urban, rural</td>
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<td>Local, community, national, international</td>
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Judgement sample: Generally, ‘quality not quantity’ of responses is needed, as the goal is to generate accurate, meaningful information from informed persons in relevant agencies that can contribute to planning, training and thus improved response. Thus we envision interviewing about 30 persons in-depth from about 15 agencies in the field in 2-4 Southern African countries, while structured questionnaires (administered through email, paper, in-person or by phone) qcan quickly and effectively reach a much larger number,, perhaps over 100 persons from about 30-40 agencies in the US, UK and in southern Africa.

Analysis

Data from the field interviews and questionnaires will be analysed both quantitatively and qualitatively. Quantitative analysis will be used to represent important issues in the status and trends in programming and knowledge for the southern African humanitarian relief community (i.e., % addressing HIV issues in programming, % agencies with clear policies on HIV/AIDS). Qualitative analysis will be used to develop a case study on the ways in which the humanitarian system incorporated issues of HIV/AIDS into policy and programming in responding to the southern Africa crisis.
Variation in interviewees and agencies will allow analysis of different agency policies and programming in relation to key criteria expected to differentiate agency responses, such as funding sources, agency mandate, type and scale of program, and methods of implementation. Specific responses relating to (individual) roles and functions can be compared across agencies, for example; while agency responses can be compiled into representative ‘patterns of response’ by type of agency (see below) and other factors.

Data from all sources can be compiled and analysed using mixed-methods to provide an in-depth, qualitative and rich case study of the response of the humanitarian community, and specific actors within this heterogeneous community, to the HIV/AIDS crisis. Findings in turn will help identify new research gaps and hypotheses, and perhaps most importantly, help promote dialogue and social learning within the humanitarian community about effective responses humanitarian programming in the context of the HIV/AIDS epidemic.

<table>
<thead>
<tr>
<th>Location</th>
<th>Agencies targeted</th>
<th>Themes</th>
<th>Individual interviewees</th>
<th>Research methods</th>
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<tr>
<td>In Southern Africa&lt;br&gt;2-4 countries, e.g. Malawi, Zambia, Zimbabwe</td>
<td>International &amp; national relief agencies; Government relief boards; Donor/aid agencies; Community-based delivery organizations</td>
<td>Operations and implementation; micro-level policies and practice</td>
<td>Field staff in a range of managerial, logistic, medical, program design, other specialty areas</td>
<td>In-depth interviews with key informants in selected agencies using semi-structured format Paper, email or phone structured questionnaire to selected other field staff Document review (reports, assessments, budgets, new program proposals)</td>
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<td>In UK (and Europe)</td>
<td>UK-based (European) HQs of international NGO relief agencies, donors</td>
<td>Macro policies of agencies; programming priorities and intentions</td>
<td>Program officers for southern Africa</td>
<td>Phone and email interviews with key informants Document review (internal reports, policies, new programs)</td>
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<tr>
<td>In US (by Tulane)</td>
<td>US based HQ Donors (USAID, WB) Applied research (IFPRI)</td>
<td>Macro policies of agencies; programming priorities and intentions</td>
<td>Program officers for southern Africa</td>
<td>Phone and email interviews with key informants Document review</td>
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6. Communication/Dissemination Strategy

One of the core strengths of the Humanitarian Policy Group in ODI is its ability to disseminate findings widely to key audiences. The HPG mailing list and HPN membership network enables findings to be sent directly to over five thousand key humanitarian practitioners, policy makers and researchers. Further discussion of the findings would be ensured by holding workshops in both the UK and Southern Africa and 1-2 electronic seminars using the internet, to discuss, debate and advance the findings from the literature review and field-work.

The widely used HPN website (45,000 hits per month) ensures that all research is freely available to those with web access and the reports will be posted on other heavily used humanitarian websites such as ReliefWeb. In addition, a CD Rom containing all of the research will be produced and disseminated to key stakeholders in southern Africa to reach those without web access.

The findings of the study will be communicated through a series of publications, electronic media and briefings including:

- An HPG Briefing Paper summarising key findings.
- An HPG Report
- Articles in a peer reviewed journal
- UK and southern Africa workshops to present findings to key audiences.
- A series of linked web-pages
- Electronic seminars to discuss, debate and advance findings from the literature review and field-work
- An article in Humanitarian Exchange (the Humanitarian Practice Network newsletter)
- A CD Rom for dissemination to field staff in southern Africa without web access.
7. Timeline

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<th>Activity</th>
<th>Apr</th>
<th>May</th>
<th>June</th>
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<td>Initial report – literature review / conceptual framework, draft review report</td>
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<td>Instrument design, testing and identification of sample agencies and field work planning.</td>
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<td>Field work, southern Africa workshop, preliminary analysis and draft report</td>
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<td>Structured questionnaire administration</td>
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<td>Report writing</td>
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<td>London and field workshops, electronic seminar, CD ROM dissemination</td>
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8. References


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