

EXCLUSION OR INCLUSION! WHERE DO WE STAND?

Impacts of HIV/AIDS on Participation of HIV/AIDS Affected Households in Group Labour  
Exchange Activities  
The Case of Uganda Oil Seed Producers and Processors' Association (UOSPA)

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## ACRONYMS

AIC	AIDS Information Centre
AIDS	Acquired Immune Deficiency Syndrome
CBO	Community Base Organization
CHAI	Community HIV/AIDS Initiative
FAO	Food and Agricultural Organizations
FFS	Farmers' Field School
FLS	Farmers' Life School
HIV	Human Immune Virus
IDPC	Internally Displace Peoples' Camp
LICODA	Lira Community Development Association
LSTs	Labour Saving Technologies
MFPEd	Ministry of Finance Planning and Economic Development
MoD	Management of Development
NGO	Non Governmental Organization
PESTEC	Political, economical, social, Technical, Environmental and cultural
TB	Tuberculosis
TASO	The Aids Support Organization
UAC	Uganda Aids Commissioner
UBOS	Uganda Bureau of Statistic
UNAIDS	Joint United Nations Programmes on HIV/AIDS
UNDP	United Nation Development Programme
UOSPA	Uganda Oil Seed Producers and Processors Association
URA	Uganda Revenue Authority
USHS	Uganda shillings
VDC	Village Development Council
VODP	Vegetable Oil Development Project

## **Abstract**

This study seeks to identify the impacts of HIV/AIDS on participation of HIV/AIDS affected households in UOSPA group base labour exchange activities in Lira Apac Districts, a case of Uganda Oilseed Producers and Processors Association (UOSPA). The study focuses on small scale oilseed producing households affected by HIV/AIDS but working in labour exchange groups. The respondents were purposively selected basing on the nature of information required in the study. The respondents include members from female and male headed households affected by HIV/AIDS. In total 16 household members and 8 farmer groups were interviewed.

Generally the study revealed that group labour exchange activities are valuable as a form of collective action to farmers, providing resources such as credit, labour and information. However, HIV/AIDS undermines group effort through direct loss of labour for the group farm labour exchange activities and time available for both farms and household task. Morbidity due to frequent illness from opportunistic diseases reduces participation of household members while increasing absenteeism of members in group labour exchange activities, thus reducing production and productivity of the group.

From the study it was apparent that there is high HIV/AIDS related morbidity and mortality among the households in the labour exchange groups talked to. All the groups that participated in focus group discussion had experience illness and death of its members from HIV/AIDS related and reported high cost in labour exchange groups in terms of expenditure and time spent on funerals and support of affected households or group members.

The study further shows that reduced numbers in group labour exchange activities due to HIV/AIDS related morbidity and mortality resulted to shift from block farming to individual household reciprocity type of labour exchange activities, low savings from the group saving and credit scheme and poor adoption of introduced technologies

The study showed that the poor household members in the group especially female headed household have high dependency ratio and experiencing much labour shortage. The option is reallocation of the remaining household labour. This means that the remaining members of the household undertake extra activities and being women this means an addition to their working hours, this was given as main reason of members pulling out of group labour exchange. Children are either temporarily or permanently withdrawn from school to replace the household adults in labour exchange activities.

Coping strategies varied between households in the labour groups, mainly as a reflection of pull out from group labour exchange activities. However the study revealed that labour exchange groups were the most important source of support for households under critical farm labour pressure.

## **1.0 CHAPTER ONE: INTRODUCTION AND BACKGROUND INFORMATION**

This thesis describes the results of a study on the impact of HIV/AIDS on UOSPA's group based labour exchange activities. It is as part of the professional master etc.etc. The study was conducted in rural Uganda, among small scale oilseed producers in the high HIV prevalence area of Apac and Lira Districts. .

The document is build up as follows. In section one the situation is described that lead to proposing this study and its objective and research questions that the study is trying to answer. In section 2 important concepts and related literatures to the subject to be study is outlined. In Section 3 an explanation is given of how the study was conducted. Findings and discussion is presented in section 4 and finally the paper end by giving conclusion and recommendations for actions.

### **1.1 Impacts of HIV/AIDS on Agricultural sector**

HIV/AIDS is not just another problem of health and under-development. It is a unique disease because of its devastating, systemic and cumulative impact. It stands apart from diseases like malaria due to the scale of morbidity and mortality among persons aged between 15 and 50 years, as well as its pattern of contagion (du Guerny, 2002). The effects of long illness and premature death amongst these age groups have profound implications for the agricultural sector, causing acute labour shortages at household and community levels; altering established technical relations between labour, land and capital; causing irreversible depletion of rural household assets; triggering the adoption of adverse, hard-to-reverse response strategies; weakening community structure and straining community safety nets; diminishing the resilience of farming and livelihood systems; reducing the capacity of household and communities to recover; and intensifying their vulnerability to food shortages (FAO, 2003)

In aggregate terms, the epidemic produces new mechanisms of impoverishment and thus creates new patterns of poverty and livelihood insecurity among the rural poor farming community. The outcome is the emergence of a new category of poor people. The 'AIDS-poor' include: households with chronically ill young adults and those that have suffered a young adult death during the last two to five years; households headed by single parents, the elderly or orphans; and households fostering orphans. Women are amongst the most affected: not only are they more vulnerable to HIV infection biologically but they also bear the brunt of the social and economic costs of the disease. (FAO, 2004)

### **1.2 Impacts of HIV/AIDS on Agriculture in Uganda**

Agriculture is the main stay of Ugandan's economy. It accounts for approximately 40percent of the national Gross Domestic Product (GDP), 85 percent of the export earnings and provide employment to over 80 percent of the rural dwellers (MAAIF, 2004).

One of the constraints in increasing the productivity of agricultural sector in Uganda is prevalence of health hazards, such as AIDS scourge. Its effect has been in the reduction

of the labour efficiency, since it is most prevalence in the active productive age brackets In addition resources, time and money needed for Agricultural investment are spent on care and treatment of patients as well as dependants (MAAIF, 2001)

Uganda has been affected by HIV /AIDS epidemic for almost twenty years now. The epidemic started on the shore of lake Victoria in Rakai District (located in South Western part of the country), the initial epicentre of the illness. There after the HIV spread quickly in major urban areas and along highways. By 1986, HIV had reached all districts in the country, resulting to what is classified as the generalized epidemic. Like in other countries of Sub – Saharan Africa, unprotected sex with an infected person was and is still the most common mode of transmission of the virus (84%), although mother to child transmission has become an important route as evidenced by the number of children with AIDS at the end of 2002 (UAC, 2003).

HIV/AIDS is the major cause of death among individual aged 15 – 50 years (MAAIF, 2003). It is estimated that about two million people were infected by the epidemic in the country in the twenty years of the epidemic above you talk about 15 years, be consequent!!, of which one million have died (UNAIDS, 2006). Results from 2004 Uganda Household Sero-Baseline Survey (UHSBS) indicates that just over 6 percent of Uganda adults are infected with HIV and the prevalence among women is higher, eight percent than among men, five percent. Rephrase this sentence. Moreover people living in the rural areas have had higher prevalence relative to those in urban areas (Ministry of Health and ORC Macro, 2006). Nearly 80 percent of those infected with the disease are between 15 and 45 years this is a repetition! old, the most economic class groups and fenders of families (UCA, 2003a). Currently you can not say currently if the information is almost 10 years old. AIDS is responsible for up to 12 percent of annual deaths in the country and has surpassed malaria and other conditions as a leading cause of death among the 15 – 45 year age groups (WHO, 1999 this is very old information). This, needless to mention is the most productive age group as per Uganda standard

A number of studies in Uganda have shown that HIV/AIDS has an adverse impact on agriculture. The impacts of the scourge on human resources in the sector, on the farming communities and productivity of the sector at large, can not be over emphasized. There is evidence that in Uganda Agriculture is being disproportionately affected by the scourge, compared to other sectors such as industries and services (MAAIF, 2003, World Bank, 1999). The impacts of AIDS on agriculture stem from a combination of reductions in the quality and quantity of labour, loss of skills and experience laborers, lack of adoption of high input and labour demanding technologies and sales or confiscation of productive assets.

HIV/AIDS affect household food security by reducing the household ability to maintain a diverse portfolio of activities and to produce and buy food. It results into loss of assets and a severe decline in insurance value of social networks. It has been argued that food insecurity which is a clear indicator of household poverty at rural household level is one of the major factors increasing household's susceptibility to HIV infection, as some of its members usually women and girls have to turn to survival sex to secure basic needs. A farming household's first response is to adopt downshifting measure, changes to the number and ranges of crops grown. Observed choices have been to sacrifice cash crops for food crops and leafy crops and fruits for starchy root crops(Tony Barnett& Alan Whiteside, 2006). A practical example is where coffee farmers in Uganda in 1980s reduce their work in coffee plantation that require much labour for pruning and

marketing, first in favour of their staple banana, then eventually cut down on the banana and vegetables and concentrated on easily cultivated, easily stored starch cassava (Karuhanga, 2008). This is a classic survival change in cropping system where high value and nutritious crops are progressively substituted for poor value and less nutritious root crops. Moreover, household adults who are infected die before they can pass crucial farming knowledge or expertise to the next generation, a situation that has lasting effect on agricultural production.

Part of the loss of labour is due to women spending less time on farming while they are caring for someone with AIDS. Productive labour time may be lost through attendance at funerals and observing mourning customs. In the worst-affected parts of Uganda, research in 2000 found that farmers were sometimes losing more than a quarter of the time available for critical production tasks such as sowing and weeding (FAO, 2005). Where farming systems need certain tasks to be done at certain particular time, production may be vulnerable to the effects of AIDS. The bulk of labour loss, however, is due to deaths from AIDS. The FAO estimates that Uganda had, by the year 2000, already lost twelve per cent of its Agriculture labour force to AIDS leading to increased affected household labour shortage and decreased food production and income.

### **1.3 Poverty in Uganda**

In Uganda, the majority of the population lives in rural areas, over 80 percent are engaged in subsistence agriculture for their livelihood and lives in poverty. Poverty is defined by poor people as more than just the lack of income: it is also the lack to satisfy basic and social needs as well as feeling of powerlessness to break out of cycle of poverty (Karuhanga, 2007). Common futures of poor household in Uganda include; few assets for production, insufficient foods, inadequate income to health care and education costs and to obtain basic household necessities; many dependants, vulnerability to HIV/AIDS impacts, poor health or lack of social support (MAAIF & MFPED 2000)

According to household poverty survey data of 2002, 44 percent of Ugandans are unable to meet their basic needs and are living below the absolute poverty line, while 27 percent of the population can not even meet their daily food requirements and live below the food poverty line (UBOS, 2002)

Regional household survey of 2000 indicated that the Eastern region, which has the greatest population, had 54% of the population living in absolute poverty, compared to 28% in the central whereas, northern region which has poverty level at 53% is found to be the poorest in terms of poverty indicators this has been attributed to many factors like: insecurity both from the cattle rustler and LRA rebels and high HIV/AIDS prevalence leading to increased morbidity and mortality of the work force. The survey also showed that in the North and East, poverty had declined by only 18% and 13% respectively since 1992 compared to decrease of 39% and 32% in the central and western respectively (MAAIF & MFPED, 2000).

Poverty in Uganda like any other African country is a rural phenomenon as 48 percent of the rural population is below the absolute poverty line (MFPED, 2000) compared with 16 percent of the urban dwellers. Since more than 85 percent of the population in the country lives in rural areas, any intervention aimed at reduction of poverty in the country need to be directed to the rural population. Poverty, increases vulnerability to HIV/AIDS

and HIV/AIDS exacerbates poverty the latter increases social exclusion of already poor groups. (Parker et al 2002).

Poverty of household determines which labour exchange farming group the household would be accepted and/or is willing to join. During formation labour exchange group, the initiators of group formation contact people of their economic and social status (field observation). Furthermore, HIV/AIDS related stigma and discrimination are fuel by the practicalities of limited resources and narrow option (UNAIDS 2003).

#### **1.4 Oilseed sub-sector in Uganda**

In the 1970s, Uganda was among the leading producers of a variety of oil-bearing crops, namely; sunflower, groundnuts, sesame, soybeans, cotton, oil palm and shea-nut. These crops and their oils satisfied national demand and even drew export earnings from regional markets in Eastern and Southern Africa. Due to political problem of the 1970s and 1980s, the once vibrant sector stagnated and slumped to the extent that in early 1990s demands for edible oils and fats were satisfied by imports, primarily palm oils from Malaysia which was costing the country 80 million US dollars each year ( UBOS, 1996)

Data from Uganda Revenue Authority (URA) shows that the sunflower oil imports, one of the oilseed grown in the country in 2001 stood at 112,000 tons, fell to 42,000 tons in 2002, rose again to 71,000 tons in 2003 and fell to 69,000 tons in 2004 (VODP, 2007). According to the "Oilseed crop farm figures and facts from UOSPA" national demand for oil increased from 41,000 tons in 1999 to 44,153 in 2002 and 81,000 tons in 2005. While domestic vegetable oil contribution to total national demand rose from 35 percent in 1999 to 46 percent in 2000 and dropped again back to 30 percent during the period from 2003 to 2007. This is attributed, among other things, to decrease in oilseed crop production due to HIV/AIDS related mortality and morbidity on farming beneficiaries in the above mentioned regions and civil conflict in the main producing region of the crops (UOSPA, 2006; VODP, 2007). Oilseed stakeholders' interventions in the sector have contributed to improved food security condition of the oilseed farmers in the production area, as farmers now sell off oilseed crops and its products instead of food in order to cater for household needs.

A number of income generating activities have cropped up alongside oilseed crop production and processing, for example apiary, production of animal feeds from oilseed cakes, farmer groups soap making from sunflower and Shea-nuts oils, auxiliary support services and small kiosks that buy and resale oil (VODP, 2007; FAO 2007; UOSPA, 2006). This has lead to diversification of agriculture hence spreading of risk in oilseed farming The number of traders engaged in buying and selling edible vegetable oils (especially sunflower oil) has increased. Further, the growing of oil crops has increasingly become a source of income to households rising from 43 percent before UOSPA and other stakeholders to 58 percent in 2007. Overall, 83 percent of the farmers reported that they have realized benefits in growing and processing oilseeds with the proceeds being spend on education, food, medical care, purchase of assets, constructing of permanent and semi- permanent buildings, domestic up keep and buying of animals ( UOSPA, 2006; VODP ,2007).

### 1.5.0 Group based approach of UOSPA

UOSPA was formed in 1995 by Association of oil seed millers and oilseed farmers in Uganda. It is a non governmental and non profit making organization with the mission to contribute to increased domestic vegetable oil production through increased raw material production, processing, quality seed multiplication and distribution and domestic vegetable oils utilization and with the objective to increase households income, food and nutrition security.

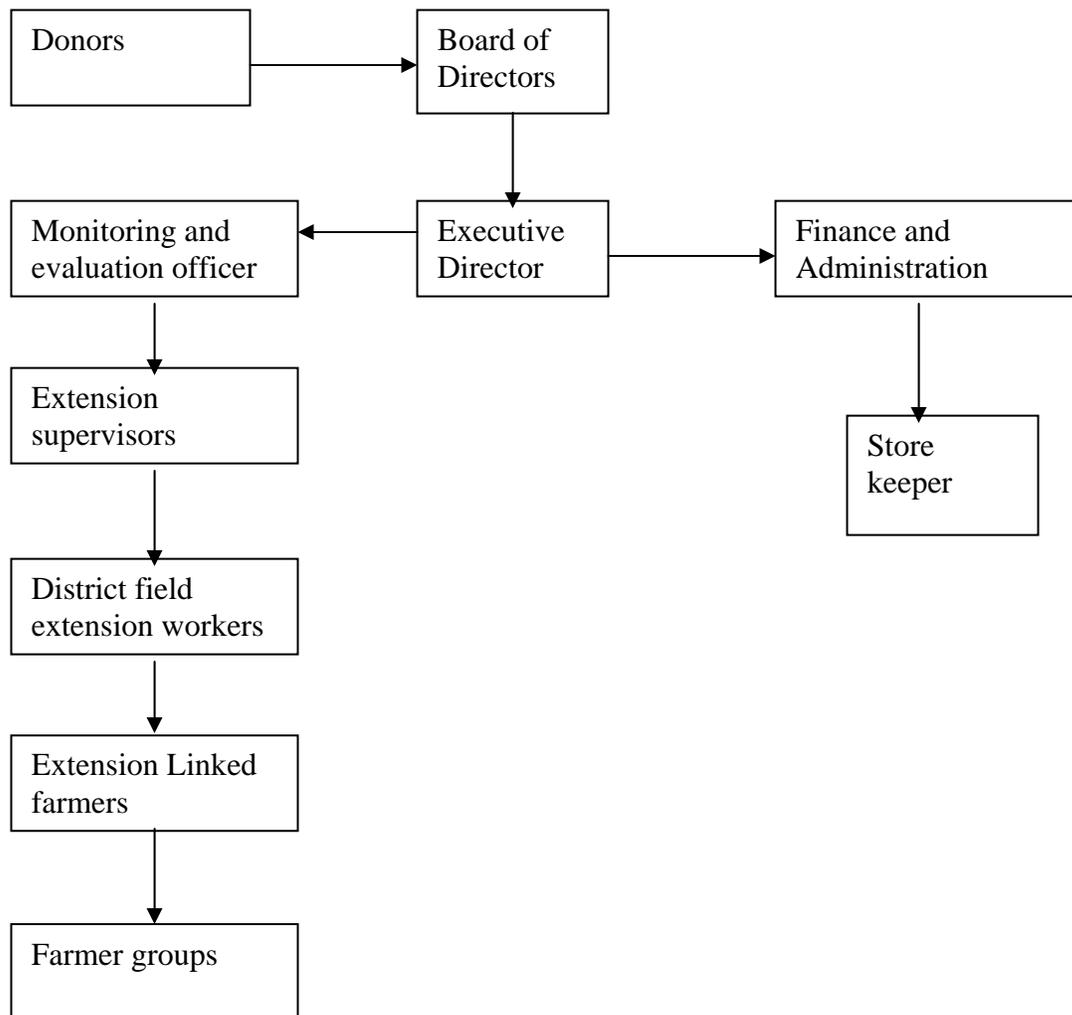


Figure 1.1 Organizational structure of UOSPA

UOSPA is aware of the multitudes of the rural population that are poor and have thus designed programmes to respond to the challenges of poverty traps in rural areas. A key approach to programme delivery is working through groups or community based organisations. Group organization in UOSPA is that farmers are sensitized on the importance of being in groups and they are facilitated to form oilseed farming groups. It is through the formally formed groups that most of the UOSPA training and advisory services are delivered. However, people form or join groups for various reasons. What brings people together is the desire to solve common problems thereby satisfying individual needs and interests. Individuals have different expectations as to what the group will do for them. The motivation to form a group may be external to the community as in the case of groups formed through the intervention of UOSPA or internal where the idea to form a group is conceived by members of the community. In both instances, a group will only be formed when two or more people establish a relationship such that they begin to value one another's input towards the achievement of set goals. In a situation where community looks at HIV/AIDS as death, horror, punishment, as guilt, as shame and as disease the value and input of members infected with AIDS will be considered negatively resulting to their exclusion in the group during group initiation (Parker.R. & Aggelton P, 2002)

#### **1.5.1 UOSPA group category and composition**

UOSPA group composition is categorized by sex and age as bellow;

- Pure labour exchange group of adult male (especially married adults) which is called men's labour exchange group. This category constitutes 30% of the total UOSPA groups
- Pure labour exchange group of women (especially married women) which is referred to as women's labour exchange group. This category constitutes 10 percent of the total UOSPA groups.
- Men and women found in the same labour exchange group this is called mixed labour exchange group. This category constitutes 60 percent of the total UOSPA groups.

Where there is mixed group, a man and a woman or women from the same household usually join the same labour exchange group. This type of composition is preferred because one household would be reaping the benefit of the group labour or loan support from both sources, that is when group come to help a man and the woman in the farm it would still be the same household and may be the same farm. This also reduces the number of households composing of the group but increasing the frequency of support provided by the group in terms of labour to the household involved as the labour rotation in the group to the household take shorter time before it is back in the same household. Also through observation, it is a common practice that a man can sometimes plough or weed his task plus that of the wife hence sparing woman's to remain doing some domestic work at home. However, during the training and group planning meetings men tend to dominate as women would shy away to give their opinion in the present of their husbands.

#### **1.5.2 UOSPA recommended group size**

The advisable group size recommended by UOSPA is a group membership of 15 to 35. This is a size that is manageable and when ploughing can complete one acre a day.

This is because if the size is larger, like 50 members and above, then there is limited opportunity for all members to fully express their opinions and limited interaction among members. This may lead to situations where more active members may strongly influence the group that is a small vocal minority deciding for the majority. Some members may feel their opinions are left out. In some situations, the group may be further subdivided to enhance interaction due to time constraints. The degree of participation by individuals is also a function of group size. For instance, a group of 5–6 people every one speaks, that of 7-10 people almost everyone speaks, with 11-18 people one or two may not speak at all 19–30 people quieter people say less and that with 30 people and above women and quieter people may not contribute at all. However, it should be noted that there is no single ideal group size. The specific environment, purpose and available resources may largely influence the size. For instance if the group is for credit and saving scheme the more the number of members the greater the savings the group would accumulate within a short time.

### **1.5.3 Labour exchange activities in UOSPA groups**

The labour exchange activities carried by UOSPA groups are mainly of agriculture in nature like; land opening, planting weeding harvesting and post harvest handling of crops. This is done through reciprocal type of arrangement where members rotate labour among themselves from one household to another. This is similar to 'Alea' type of labour exchange but with much strict rules and regulation than 'Alea' to see that members comply. Members agree on which measurement of task should be measured for each member to accomplish every day there is farm activities and this is maintained throughout the labour rotation in the season. For instance if it is agreed that a task of one meter by twenty meter is what a member should work on each day every body has to weed or plough that size irrespective of one's physical or health status.

When a new technology that needs planting demonstration is introduced the groups plan labour exchange activities to carry out joint field operations in one block farm provided by a member in the group from ploughing of the garden up to harvesting of such technology. Fields where the demonstrations are planted are offered freely by one of the group members. Whatever knowledge and skills are learnt from the group demonstration is transferred to the individual household oilseed production practices. However all the demonstration trainings and any other training would be carry at the demonstration site for that season.

It is important to note that UOSPA's believe that through formal groups formed in community the needs and interests of poorer people are directly or indirectly represented (direct and indirect beneficiaries). Direct beneficiaries are households in the group whose formation is facilitated by UOSPA and the group have paid registration fee (50,000ush) to UOSPA. Indirect beneficiaries are informal or individual households who have got the skill and knowledge on oilseed production from neighbouring farmers trained by UOSPA, method of transfer of such knowledge is termed 'spread effect'. Practically the latter (indirect beneficiaries) are in general not normally directly considered during delivery of UOSPA programmes in rural areas. This act leaves the unorganized groups trapped in poverty simply not because they are not in groups, but because they cannot meet the rules of formal groups formation procedures like; group contribution, focus on particular commercial crop(s), membership fees and regular meeting adherence and/or UOSPA policy in group formation. Yet, despite their informal status and absence of legal documents, informal groups tend to be beneficial to the

poorer sections of the community especially the women and youth who mainly comprises of such informal groups (Pusku.R. 2008). Thus UOSPA misses out an opportunity to reach the poorer who lack production resources like land or the needy like the sick.

In addition, the exclusion of the poor from formal groups is not only from outside but also from within labour exchange groups members. The spatially trapped poor individuals and the chronically sick are sometimes dodged during group initiation or themselves fear to join and enjoying the benefits of being in labour exchange group. Consequently integration in UOSPA rural poverty reduction programmes due to lack of supportive attitudes by members of externally formed groups; class barriers in villages; lack of empowerment and room for voicing their concerns and interest. The village “middle class” perceives the poor as being naturally lazy, uncooperative and have no initiative to engage in group activities. This generates fear and resentment from others, preventing any meaningful interaction, including group membership (UNAIDS 2003). People in rural areas are sometimes aware of what the better off think about them eroding their esteem and confidence, which keeps them away from groups and gatherings. This leaves some of the poor in an information shadow thus re-enforcing the self exclusion in labour exchange groups.

#### **1.5.4 Benefits of group approach**

Nethertheless, whether formal or informal, groups are increasingly being acknowledged as essential building blocks for rural development (MAAIF, 2000), this is because of the following advantages;

- They offer the rural poor an opportunity to collectively develop their skills, mobilize resources and influence the nature and direction of development activities in order to improve production, incomes and hence their livelihood; Parents belonged to the group and so children are expected to join in future thus building opportunity for endless development skills in the community.
- Working with groups offers development agencies an opportunity to efficiently and effectively, utilize limited resources to reach a larger audience as compared to working with individuals;
- Groups are also seen as a basis for economic ‘take-off’ as they have the potential to mobilize resources that will enhance the prospects of rural people’s participation in development and make people have sense of belonging and security
- Groups can act as collateral substitute for members to access credit. In addition, groups have the potential to increase the sustainability and outreach of the credit program. Further, groups have the advantage of reducing the transaction costs and improving credit management among members;
- Groups enhance the bargaining power of the rural poor. For example, an individual may not be able to procure inputs for his/her operations due to high input and transaction costs. This can be achieved through joining an input group. Through bulk buying, the group may get a discount. Members can also share transport costs

Currently Uganda Oilseed Producers and Processors Association (UOSPA) have coordinated the formation of hundreds of formal oilseed farmers’ organizations (groups). Through the group base approach and spread effect, the oilseed sector has become one of the engines for rural economic transformation. Presently it contributes to the livelihood of over 12 million Ugandans mainly in the Northern and North-eastern regions

of the country. These regions account for well over 70% of the Vegetable Oil seed production in

### **1.6 Farming in Districts of Lira and Apac**

People living in the districts of Lira and Apac are primarily agro-pastoralists, keeping cattle and goats, and growing crops like millet, sorghum, and cassava, sesame, beans, groundnuts (peanuts), maize and sweet potatoes as major food crops and sunflower, cotton and soybeans as major cash crops. Land preparation, planting and weeding are done jointly by men and women while in most crops apart from cotton, sunflower and maize weeding and harvesting and post harvest handling are done by women. The average size of land holding per household is 10 acres (4 Hectares) and average number of livestock per household is 5 cows, mostly oxen for animal traction and 10 chickens on average. Unlike in other districts of Uganda where there are plantations (of Sugar and tea) own by multinationals, in Lira and Apac Districts this is not there, so most of the agriculture is done by small holder farmers planting on average 4 acres of crops per year. There are no large scale farmers except few, less than 10% of progressive farmers (between small scale and large scale farmers) who grow 4-5 acres in block and can afford to employ casual labour to help in their farm.

The traditional economic/cash crop is cotton which, in recent years had been on decline but has picked up slightly in the recent past mainly due to the liberalization and privatization policy of government. However, non-traditional economic crops have taken over the role of cotton in the region. These are sunflower, simsim (sesame), groundnuts (peanut), rice, maize, beans and millet. These crops are in high demand and they do not only play their traditional role as food crops, but are nowadays cash crops as well. Rapidly coming up as a major economic cash crop in the region is sunflower. Reason is that it has established available markets within the growing regions (oil industries/mills are allocated within the growing region), stable price, is less labour intensive compared to cotton crops (weeds once not three time as cotton) and can be planted three times a year. Also it suppresses weeds making management of crops that follow it immediately in rotation easy to manage.

Cattle used to be a big source of wealth in the region up to early 80s, but this has totally been eroded by cattle rustling of 1987/88 which virtually depleted the stock of animals from 316,000 in 1983 to about 3,700 in 2002 (DDP, 2005 ). Agriculture is the main stay in the region. Its contribution to economy of the region comes almost exclusively from about 6.3 million smallholder subsistence farmers, 80 percent of whom have less than two hectares of land<sup>a</sup> (NPC, 2001). Rudimentary hand hoes and animal traction are the predominant technologies for cultivation.

### **1.7 Traditional group labour exchange activities among communities of Lira and Apac districts**

Farmers have been working in traditional groups ever since farming started, varying from cooperation in harvesting and threshing, joint storage of produce and collaborative grazing and management of animals. Community of 5-6 household would have one

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<sup>a</sup> One hectares of land is an area of 10,000 square meters and is equivalent to 2.5 acres.

particular kraal for keeping animal and one gazetted large area to graze these animals (Pusku.R. et al 2008). However, the latter practice has been under pressure due to land fragmentation resulting to most households now keeping the animals alone on their own land.

Groups are valuable as a form of collective action to farmers, providing resources such as credit, labour and information. Groups allow farmers to obtain new technologies, benefit from economies of scale, enter into stable relationships with suppliers, and set rules for natural resource management (Pusku.R. et al. 2008). Lira and Apac districts have been singled out as an example because they have same traditional labour exchange practices way back since colonial period.

Traditional group activities based on the 'beer party system' was very popular among the community in the colonial era. People call it '*puro Kongo*' (literally: work for beer). As late as the 1980s '*puro Kongo*' was the basic means of recruiting workers for major tasks, and beer parties were the regular social gathering of the community. When household want to organize major task of field operation, local brew beer call '*kongoting*' is prepared and the date of work is organized by community farming group leader call '*Adwong pour*' (literally meaning leader of farming community group) through the word of mouth, the community farming leader would mobilize neighbours to dig for the household who has brewed. This exchange is rotated throughout the season so that in the long term, the labour exchange through the medium of beer involves and supports every household in the community. Since every household would be host and guest the system reinforces the mutual obligations among community. This type of labour exchange is not just a way of saving labour or filling a gap in the family labour, but also encourages exchange of farming skills knowledge; ease of diffusion of introduced input technology like seeds among the farming community and it renders work less irksome.

'*Puro Kongo*' type of labour exchange is where the group members are paid in terms of booze the same day after work. However, there is another form of labour exchange to help households in time of critical labour demand called '*Dira*' literally meaning that groups carry out labour task and be rewarded (by beer) after sometimes 6 to 12 months by the household(s) helped – 'loan' form of labour exchange. It is meant to help households under labour pressure especially at harvest of crops to avoid it being spoiled by rains or eaten away by birds. There is nothing paid during the assistance but the helped household after harvest season prepares booze and called those who helped to come and feast The '*puro kongo*' and '*Dira*' type of labour exchange however started to decline towards the late 1990s. The reasons being; coming in of HIV/AIDS and its stigmatization that excluded majority of chronically ill members and affected households in the community from participating due to social stigma whether perceived or real, and the time needed to participate in the group labour exchange due to related morbidity nature of PLWA. Secondly it declined due to spread of religions like; Born Again Christian and Pentecostalism that started converting many people as their believers and preaching against drinking alcohol. Those who joined the Pentecostal and Born Again Churches declined to drink alcohol and refused to participate in labour exchange for beer and thirdly due to war that interrupted agricultural production and broke the social ties as people lived in camps.

Many rural farming households basically depend on the labour of their own children and less often on their relatives which is called here as family labour. Apart from family

labour, there are other ways community organize their labour exchange. This is a form of labour exchange called 'Alea'. Meaning is a rotational group exchange of labour. Each 'Alea' group has its fixed members for the season, varying in size usually averaging from fifteen to thirty adult work forces. The group of Alea is initiated and formed voluntarily by the people who are living within the same village but with someone to act as a leader of the group. Procedure to democratically establish whose garden will be dug first in most cases is through small meeting. Say if they are fifteen in the formed group, pieces of papers are written with numbers from one up to fifteen and random picking by each member is done to determine whose field would be ploughed or planted or weeded first at that particular time. To avoid cheating during the field operation, there is always agreed uniform task each day field activity is taking place to be accomplished by each member in the group irrespective of sex, health status or age. Assumption here is that all will always be available throughout the labour exchange operation and is able to finish the task meant for each to do at each others field/garden. This procedure is repeated for very many rounds in the season. The groups have very simple rules in that if Mr. Z does not participate in the field of Mr. X then the day they are going to work in Mr. Z's field Mr. X will not also participate. In the case of HIV/AIDS infected member whose energy and regular attendance is questionable. This would mean falling off or not receiving labour support from many as he / she irregularly participates in other's fields operation. This is currently leading to the sick trying to form their own group from the one whom they feel are 'healthy', hence resulting to increased stigmatization and exclusion of sick people from reliable group labour exchange.

'Alea' type of group labour exchange is good in that it can also be a source of wage for the households in the group that are in need of money for other household requirements. Members in the group have different acreage to be prepared and planted with crops in a season. This would mean some members' labour work in their own field would be completed earlier than others. When this happens, members with no labour work in their own fields/farms do not fall off the labour exchange group but continue. In this case he or she contracts the group labour exchange activities out to earn money when her/his turn to be helped comes. In the rural community a task for one person in the group is paid 1500 Uganda shilling (1US dollar), that would mean a group of 15 members would earn for the household some 22,500 Uganda shillings (15 US dollars) in a day. This type of benefit increases participation of a member in the group and also tends to motivate household to remain in group labour exchange activities for long since such a day earnings can not be got if it was an individual labour.

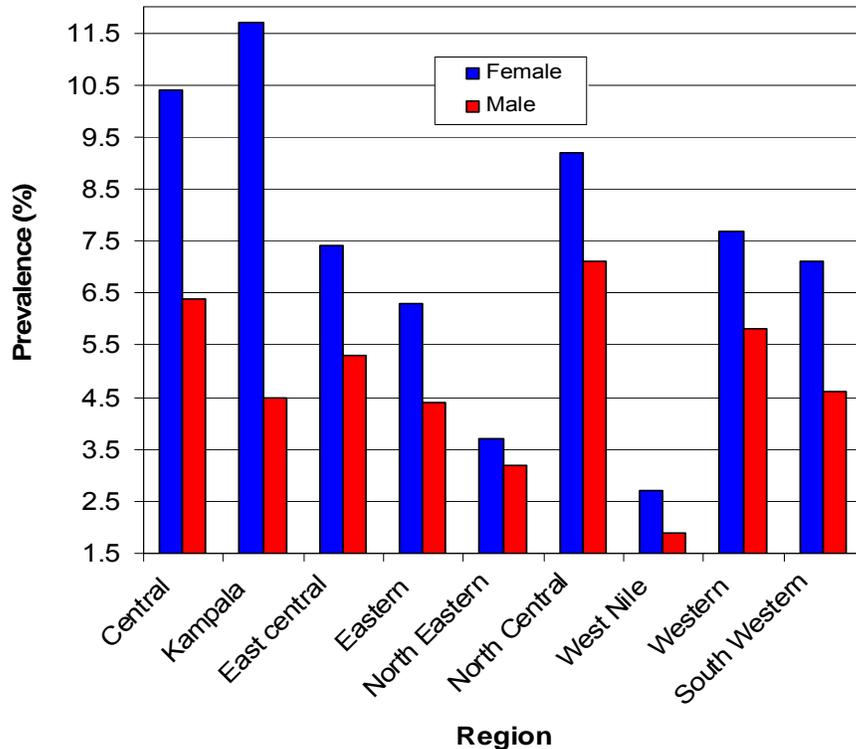
## **1.8 Rationale of the study**

Although the national HIV/AIDS prevalence indicates just over 6%, this is not the case in particular for Lango sub- region of the country<sup>b</sup>. This sub-region, which is the major producer of oilseed crops in the country, is seen to be very susceptible to the rapid spread of HIV due to the risky environment they have been in for the last 15 years (NUMAT, 2008). During the conflict in the northern Uganda, Lord Resistance Army (LRA) rebels abducted thousands of innocent people, mainly children from north and North-eastern region of the country. A recent regional and sub-region study of HIV

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<sup>b</sup> Lango sub-region until recently is composed of Apac and Lira Districts. From 2004 up to 2006, more three districts have been created from them. The inhabitants are of the same ethnic tribe and are engaged in same livelihood strategies.

prevalence indicates that Lango sub-region which had the lowest HIV/AIDS prevalence in the country during late 1980s (less than 5%), is the third highest after Kampala with HIV prevalence at 9.4 percent (figure 1 below). These are productive men and women of 15 to 49 years of age (UAC, 2005).

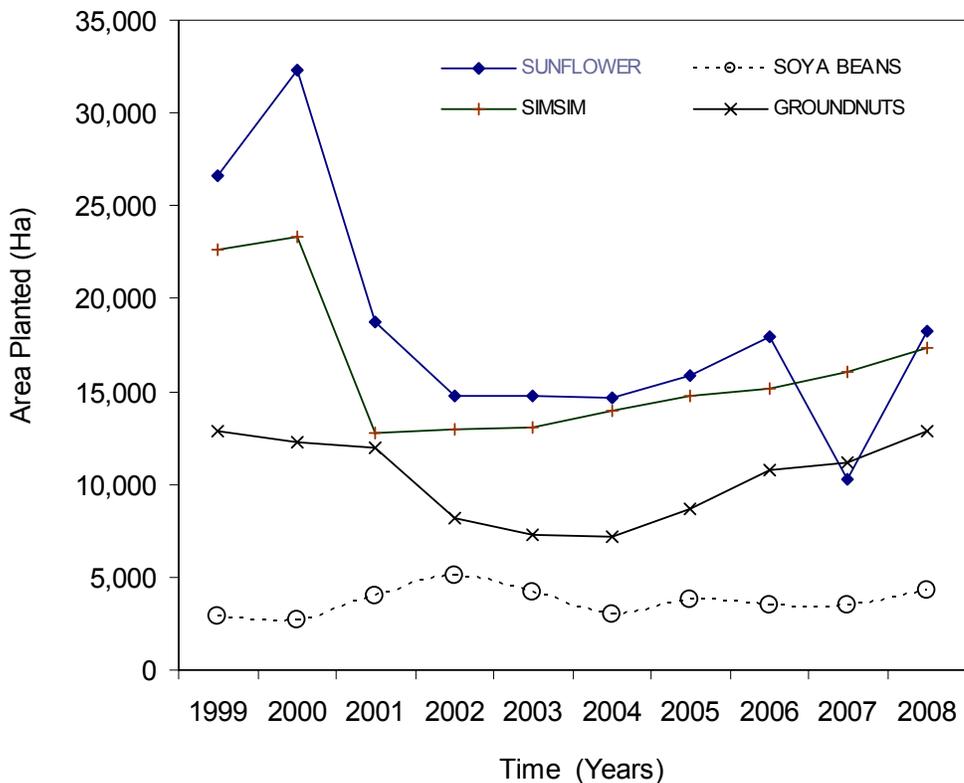


**Figure 1.2: HIV/AIDS prevalence in Uganda by region and Sex**  
(Source: UAC/AIC report 2007).

Conservative estimates place the number of people abducted from overall north and eastern Uganda by Lord Resistance Rebels at minimum of 20,000. About 20% of these are girls who were forced into 'marriages' or given to senior commanders as reward and incentive. Rehabilitation centres for abductees have been offering HIV testing to returnees in their centres. The results showed that on average 13 out of 83 returnees tested are HIV positive and about 50% have some types of STI (AIC, 2005). HIV prevalence among the people living in the Northern and North-eastern region of Uganda are worrying for the reason that there is and has been many reports of abject poverty, mass-rapes, and deliberate HIV infection, often use against civilian population by the two warring parties. That notwithstanding, there are thousands of people gathering together in city centres every night to sleep in 'safety of numbers', this further makes them vulnerable to sexual exploitation enhancing spread of HIV. People in the region, due to war are in situation of risky environment as many were raped, abducted to serve as sex slaves by rebel soldiers and survivors concentrated in Internally Displaced Peoples' Camps (IDPC) by government. Nevertheless, many of the abductees have returned and formerly displaced households who have been leaving in IDPCs have resettled back in their homes.

### Impact of the epidemic on households collaborating with UOSPA

However, the impacts of HIV/AIDS on oilseed farming households' members has resulted into household labour shortage; increasing adult death in the group, gradual changes in household composition in the group; more households having dependants and caring for orphans, observed fall back by some HIV/AIDS affected households from planting of crops in line and good management to broadcasting and poor management that is leading to decreasing productivity (Figure 1.2 below) (the fact that HIV/AIDS affected households can still broadcast means that they are interested in oilseed production, but only limited by labour due to illness or death of prominent productive member of the house).



**The figure 1:3 Trend in production of oil seed crop in the districts of Lira/ Apac for the period starting from 1999 to the end of first season, 2008.**

The fall in production is corresponds to time of increasing HIV/AIDS prevalent in the region. War which started sometimes back in 1996 is blame for increasing HIV/AIDS prevalent in the reason so when war came down the impacts of HIV/AIDS remains leading to the trend of production being seen in figure 1.2 above.

## **Impact of the epidemic on UOSPA groups**

There is decreasing group production of oilseed crops in blocks to individual production by the household in group. Block farming by the UOSPA group is intended to shift the groups from subsistence farming to commercial production. More time being spend on funeral than before hence affecting planned group labour exchange activities and scheduled UOSPA farmer training programmes. There is decreasing adoption of introduced technology by these HIV/AIDS affected groups and infected members. Group numbers and group membership are decreasing with time as was recorded by field officers in their report of March, 2007. Incentives for coordinated group action, is gradually diminishing among the group members as a result of heavy discounting of the future benefits of such action, a good example being group base lending, which UOSPA has been promoting as an alternative source of credits for its group members may now be challenged as the group members see the sick as a liability to the group.

The above problems is likely to affect pure women groups more, women being the major contributors of labour in oilseed crop production and household oilseed processing. Women do land clearing, planting and weeding together with their husbands, while harvesting, threshing and processing into vegetable oils (post harvest handling) is mainly the work of woman. Although both men and women are actively engaged in oilseed crop production, women also are responsible for a range of other household activities, including family care and nutrition. So when a household member becomes ill due to AIDS, a women's time is increasingly diverted to care and support, and away from participation in crop (especially cash crop) production and community development activities. This usually results into serious decline in food and nutrition security of the affected households (UOSPA, 2006).

Furthermore, field observation is showing that groups that have it members experiencing more cases of HIV/AIDS related illness are shifting away from oilseed crop production to less nutritious and less labour intensive food crops. A shift away from cash crop production to food production only, would lead to low income in the group as the group would not have cash crops to market and save money. Lack of cash income would subsequently lead to sale of the food crop grown to meet the group cash requirements. Poverty and lack of food or poor nutrition of households' members in the group would increase vulnerability of the infected members and affected household to AIDS and susceptibility of the household member to HIV causing cyclic situation of HIV/AIDS and poverty in the vulnerable households. Further more decrease in raw material of traditional oilseed crops would mean collapse of the 27 traditional UOSPA oilseed member millers who are 100 percent dependant on processing vegetable edible oils from these crops (traditional oilseed crops). This would serve as a disincentive to farmer groups of UOSPA depending on sale of oilseed crops for income thus abandoning production of such crops, a scenario which would have a lasting impact on the northern region's development as taxes which the traditional oil industries (27 big oil mills) had been paying to the districts ceases.

To prevent this degenerating process from affecting UOSPA'S out put and its members' income and food security threatened now and in future, The study is to explore how far the problems above is caused by HIV/AIDS related morbidity and mortality and its magnitude on group labour exchange activities.

## **1.9 Problem definition**

UOSPA is concerned with the decreasing participation of some of its members in its group labour exchange activities. It wants to explore in how far this is due to HIV/AIDS related morbidity and mortality.

## **1.10 Research Objective**

The aim of this study is to assess whether modifications in UOSPA's group approach programmes are necessary so as to increase participation of HIV/AIDS infected members and affected households in UOSPA group base activities by identifying factors that hinders HIV/AIDS affected members from participation in group base activities. The outcome of the study would make UOSPA takes HIV and AIDS households' participation into account.

## **1.12 Research questions**

The above stated objective leads to the formulation of two (2) main research questions as below

### **Main Q. what is the impact of HIV/AIDS on existing labour exchange partners?**

Sub Q 1.1 What is the impacts of HIV/AIDS on household farming labour exchange practice?

1.2 What is the Impacts of HIV/AIDS morbidity and mortality on group farming labour exchange activities?

1.3 How do HIV/AIDS affected households cope with the impacts of HIV/AIDS on labour exchange activities?

### **Sub Q 2. What are the labour exchange mechanisms being used by the oilseed farming groups?**

2.1 What types of traditional labour exchange activities exist among UOSPA oilseed farming groups?

2.2 What makes members of a group stay in group labour exchange activities for long?

2.3 What type of group supports are there to assist HIV/AIDS affected households to cope up with shortage of farm labour?

2. 4 how is the labour exchange practices among households organized?

## **2.0 CHAPTER TWO: CONCEPTUAL FRAMEWORK AND LITERATURE REVIEW**

In the previous chapter the background of the study, problem definition and objective of the study was highlighted.

This chapter starts with a literature review on theoretical approaches that explain the concept of; participation that is related to group activities, vulnerability related to HIV/AIDS impacts on groups and household members in groups and the concept of group labour exchange activities.

### **2.1 Participation**

The current common approach of delivering of developmental programmes to targeted beneficiaries is through participation. Participation of members in a programmes leads to 'owning' of such a programme by the targeted beneficiaries or members that would lead to effectiveness, efficiency, reliability and sustainability of such developmental programme. The idea is that all the five levels of participation; information, consultation, joint decision making, taking action together with members are of key importance for the targeted people to benefit (IAP2, 2005).

In this study participation is looked at as involvement of group members in group farming labour exchange activities. Labour affects factors of production such as choice of technology to be used in production and what type of crops to grow and how

Households and individual in the rural setting mainly use family labour and few employ hired labour if they have the means to do so. Most women do not own land but at times given access to field by their spouse to cultivate their own crops besides working on family field.

When HIV strikes it is the domestic farm livelihood labour interface which experiences the stress of the impacts, particularly in small scale African Agriculture that relies almost exclusively on family labour. By attacking the able-bodied and active adolescents and adults, HIV/AIDS undermines the farm-household through the direct loss of labour for the farm and of time available for both farms and household task. Gillespie et al, (2001) proposes that the impacts of AIDS on group labour activities may be felt a long different time scales. Morbidity due to frequent illness from opportunistic diseases reduces labour productivity. HIV/AIDS also has indirect effects on adult household labour as some of the adult labour is withdrawn or diverted to caring for the sick and attending funerals. This has several implications; the initial response is what they call the 'importation' of labour. It involves bring relatives or other members of the household previously living somewhere. Poor household may not have the cash to hire labour and even where the household has resources to hire labour this may not be available due to labour migration (Nguthi, 2007). The second option is reallocation of the remaining household labour. This means that the remaining members of the household undertake extra activities and if they are women this means an addition to their working hours. Children are also withdrawn from school to help in the household activities girls being the first to withdrawn.

As well as HIV/AIDS impacts on reduction of labour, there is also loss of farm specific knowledge as a result of change in the age structure and quality of skilled and unskilled Agricultural labour (Mullar, 2004) .As a result of mortality there is a greater number of

elderly and children who assume greater role in farming. Premature death does not allow transfer of knowledge and skills to the younger and older generation that are faced with challenges of farming in changing agricultural environment.

In subsistence agriculture all is dependent on timely available competent labour. Illness and death due to HIV/AIDS related illness. Illness and death brings down shifting in cropping system and livestock management: smaller area is put under crop and husbandry is less punctilious and animals are less protected from, pests, predators, straying and theft (T. Barnett and A. Whiteside, 2006)

Participation in labour exchange activities by household depend on the size and age of the household composition, this is a good indicator of household labour availability and productivity (Karuhanga, 2008). However this may vary depending on whether a household is caring for an HIV infected person or is coping with the loss of a dead member of the family. Households with large number of productive prime age may hope to use family labour than household who have single adult productive age who may wish to pool labour together to ease his or are field operation.

## **2.2 Vulnerability**

Vulnerability is defined generally as inability to cope with stress or adversity (Karuhanga, 2008), Vulnerability encompasses the factors that lead to variation in the impacts disease between different communities and individuals (FANRPAN, 2007).

For this study vulnerability is looked at in the line of social and economic position of the target groups (small scale rural farmers) in the face of HIV/AIDS. It regards the ability of households to cope with the effects produced by HIV/AIDS. The ability to cope depends on the household's or individual's capacity to deal with the crisis as well as the existence and magnitude of other shocks at the time of the new crisis in this case HIV/AIDS. Karuhanga (2008) relates the level of vulnerability to HIV/AIDS impacts to household characteristics like; household size, age of household member infected, household asset base, nature of support net work engaged, community characteristics (that is socio-economic and socio-political factors). Therefore, it can be said that household resource-based status, existing social support networks, prevailing socio-economic and political environment as well as government and private institutional support are important determinants of capacity respond to a given crisis and consequently the ability to recover (bounce back from shock). And thus this is a framework for me to determine the position of households in relation to this research question and to use this to select different groups of households

While the concept of vulnerability is often used as synonym for poverty, the two are not the same, for example livelihood vulnerability is just one of the causes of poverty and not its symptoms. However due to resource constraints the poor are among the most vulnerable, but there are also rich households that may be vulnerable. For example in case of AIDS related mortality of the key breadwinner. HIV epidemic has led to increased vulnerability by making household members shift labour and other resources from productive activities to those related to HIV/AIDS support and care. Thereby they are jeopardizing short and long term survival.

HIV/AIDS vulnerability is more gendered because of the gender hierarchies in the development processes that result in a differential ways in which women experience marginalization and discrimination compared to men. Furthermore, HIV/AIDS causes breakdown in social ties, lack of protection against hardship created by divorce, desertion, widowhood (World Bank, 2000; Karuhanga, 2007) HIV/AIDS induced changes by creating large number of orphans, child and female headed households and inter-household labour system are of particular importance since this influence household labour availability for agricultural production and other income generating activities to generate sustainable livelihoods.

In Sub Saharan Africa, eighty percent of economically active women work in agricultural sector and the share of female agricultural labour is increasing rapidly (World Bank, 2002; Karuhanga, 2008). In Uganda, women produce over 70% of the country food products (MAAIF, 2000) and provide 68% of the labour force for food crop cultivation and 53% of the labour needed for cash crop cultivation (MAAIF, 2000; World Bank, 1993 Karuhanga, 2008).

Traditional (stereotype) gender roles have resulted into HIV/AIDS producing differential impacts with women experiencing the heavier burnt. Because women are traditional care providers, the burden of care for AIDS patients and AIDS orphans automatically fall on them (Karuhanga, 2008). In a study carry out by UNDP, 2002; showed that 85% of single parents' orphan households were headed by female. Time spent in care provision also means time foregone in participating in income generating activities with consequences of increased household poverty, food insecurity and possibly of engagement in risky behaviour hence vicious cycle of HIV/AIDS and poverty.

### **2.3 Labour exchange**

Labour exchange is defined by Greyling (2005) as "Process leading to joint effort by stakeholders to produce better decision than if they had acted independently" Labour exchange as a source of social safety and good neighbourliness in village life has been one of major study of 'moral economy' or 'economy of affection' of peasant societies. Peasants in rural Africa pool their labour when they need intensive work on their fields such as clearing, weeding, and harvesting. They gather people not only from their own family or kin-group but from their neighbours too. Such kinds of co-operative labour often take the form of 'exchange labour' based on various degree of reciprocity and this co-operation lays the foundation for their sense of neighbourliness. In many cases, as among the Lango of Northern Uganda it is common practice to boost this spirit of cooperation among households by sharing meals and especially drinking beer after they have finished and mainly as a way of saving labour or filling a gap in the family labour. It also rendered work less easy than if you had to do it individually. This form of labour exchange reinforced generalized reciprocity among the villagers. Moreover, after work, they would sit and drink together while sharing farming skills or information or skills with each others.

The rural communities always invest in social networks, these include things like; giving gifts, participating in cultural ceremonies and fulfilling social obligation, participating in community activities, paying school fees for relative's child, visiting relatives or neighbours when they are in problems (taking food for the sickness) or helping neighbours with some labour intensive agricultural tasks such as land preparation, weeding or harvesting.

Social networks also play a significant role in people's access to resources for production like in time of food shortage and what type of livelihood strategies to pursue. Communities find it cheaper to buy inputs as a group and grow crops together in block. This approach is said to lessen a single household risk of crop failure. Additionally they also grow and access much more food after sharing than each would have been able to grow on her individual plot.

Labour exchange in the community is also another way to access labour and to earn a wage. People in the area who do not own any business are ready to be hired as labour on the fields. Also people in the group labour exchange after finishing work in their fields hire out labour in someone's field for cash. An example of how women divert exchange of labour may be instructive. The members in the groups have different acres of fields to be work on by the labour exchange group. In case one's field is completed in the next rounds she does not drop out of the group but use the group to dig for money for her. Take for instance member A, B and C In a first round, they weed each other's field. In a second round, A field is completed and no work is left A would now exchange his/her labour for a wage labour contract on someone else's field in the area. She takes B and C to this field where the holder organizes weeding work for money where A would be allowed to get not only her own but also the wages of B and C. Afterwards, the three weed the fields of B and C. B and C will also divert labour for a contract after a third round, the same was as A did in the second round. This has been the major source of petty cash especially for women during the adverse time when crops are not yet sold and harvested.

Labour exchange is also another way of strengthening social capital among community. It has been described as one of the important assets of the poor because of its function as a safety net in time of stress or crises (Karuhanga, 2008). According to Haddad and Gillespie (2001) social capital refers to the strength of associational life, trust and norms of reciprocity. Focus group participation provides information on the ways in which group members invest in social capital. These include helping members with some labour intensive agricultural task such as land preparation, weeding or harvesting, shared cropping arrangement.

Experience has shown that working with farmer groups (FGs) is important to ensure greater inclusiveness of the rural poor in innovation and development programmes also, that the involvement of FGs (more formal associations and organizations) and their capacity to provide effective representation and services especially for small farmers is a key factor in achieving more rapid and sound rural development (World Bank 2000). Donors are seeing the value of farmer groups, such that they are sometimes a prerequisite for various agricultural projects (MAAIF, 2000)

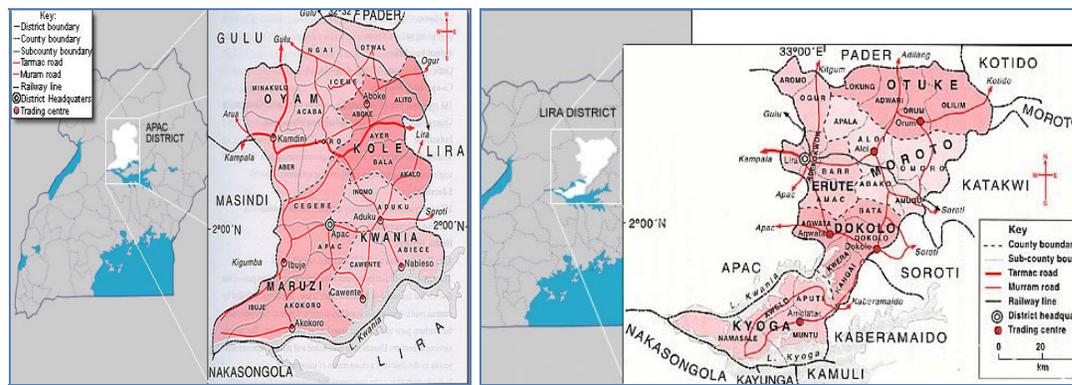
In deduction it can be say that most studies have been on the importance of farmers being in the group, the different categories of existing groups in the community, activities which groups are usually involved in and HIV/AIDS impacts on the household's choice to join group or not . There is no study on impacts of HIV/AIDS on the already organized groups in the community carrying out group labour exchange activities, coping mechanism to the impacts of HIV/AIDS by the group, the different kind of supports that the group can offer to HIV/AIDS affected members in the group and what inspired households in groups to remain in group labour exchange despite shortage of labour caused by the epidemic..

### 3.0 CHAPTER THREE: RESEARCH METHODOLOGY

This chapter starts with brief description of the study area followed by discussion of the research design, selection of respondents, data collection and methods of data analysis. It ends by discussing problem encountered in data collection.

#### 3.1 Study area.

The research was conducted in 8 sub counties (Adekokwok, Amac, Abako and bar in Lira district and Alito, Akalo, Inomo and Apac in Apac district.) of Apac and Lira Districts in Uganda. A sub county is the third largest division after a county in a district.



**Figure 3.1: Map of Apac and Lira Districts**

Lira and Apac Districts are located in northern region of Uganda. The inhabitants of the two districts are of the same tribes/ethnic group (Lango), speak the same local language and practicing same farming system and same livelihood strategy. The rationale for the selection was guided by the type of farmers to study, that is, impacts of HIV/AIDS on small scale farmers growing oilseed crops. Oilseed crops production is an important livelihood in the two districts. The two selected districts are the leading districts in oilseed production in the northern region. Further more, HIV Sero-Baseline Survey done in 2005 indicate that northern region which these two districts is found, had the highest HIV prevalence (UAC, 2005). Also Lango sub-region which is until recently, composed of Apac and Lira districts falls second as far as HIV prevalence in the country by sub region/tribe is concerned. Recent study report (2007) obtained from AIC and TASO and confirmed by UAC Household Sero-baseline Survey of 2005 indicates Lango sub-region's HIV prevalence is at 9.4% next to Batoro 14.9% (AIC, TASO, 2007 and UAC, 2005). Random selection of the research sub-counties, villages and the UOSPA farmer groups were done in close consultation with the UOSPA staff who work in the area

#### 3.2 Research design

Prior to the design of this case study, a desk study review of existing literature related to the study to undertaken was done. This was to help in identification of data gaps and identify what is applicable in present UOSPA group based activities approaches so as to refine research methodology and support the development of research framework.

A qualitative case study is conducted in Lira and Apac Districts of Uganda. The study focused mainly on rural oilseed farming households and farmer groups.

Although the target population of the research is vulnerable households, the case study is aimed specifically at households that are directly affected by HIV/AIDS. More specifically, the research had initially planned to sample the following four categories of vulnerable households;

- Female-headed households with orphans (i.e. father has died), these households are headed by women of 15 to 49 years and are taking care of their orphaned children.
- Male-headed households with orphans (i.e. mother has died) these households are headed by men of 15 to 49 years and are take care of their own orphaned children.
- Female-headed households taking care of people living with AIDS or related chronic diseases. That is, households headed by women in which at least one family member of 15 to 49 years of age has been sick as a result of HIV/AIDS or related illness, tuberculosis (TB) for along time (5 years)
- Male-headed households taking care of people living with AIDS or related chronic diseases. That is, households headed by men in which at least one family member between 15 and 49 years of age (productive age) has been sick from HIV/AIDS or related illness like (TB) for along time ( 5years).

However, the four categories above were reduced to two during real survey activities; HIV/AIDS as listed below;

- Female headed household taking care of adult living with HIV/AIDS in the household.
- Male headed household taking care of adults living with HIV/AIDS in the household.

This is because it was difficult in the field to separate households who are caring for orphans due to AIDS related death from that caused by any other contagious diseases like Ebola or syphilis. Otherwise female or male headed household taking care of chronically ill member of household was obvious. Secondly most household heads who have lost the spouse may not admit it was due to HIV/AIDS while for those caring for the sick adult, besides information being given the researcher can optically judge.<sup>c</sup>

### **3.3 Selection of respondents:**

Random selection of 8 farmer groups and 16 individual households from was done in close consultation with the UOSPA staff that works in the selected areas and contact farmers of the selected groups. In total 16 vulnerable households who belongs to farming group 8 headed by men and 8 headed by female were identified from 8 selected farmer groups (2 individual household surveys from each group) as per the above definition of vulnerable households. However most selected women groups had few men in them and verse versa.

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<sup>c</sup> The change in the category of sampled respondents did not change respondent sample size.

Vulnerable male and female headed households was selected as respondents for the following reasons; to reach all common heads of household in the community and for comparison of impacts of HIV/AIDS on male and female headed households participation in group labour exchange.

Four (4) HIV/AIDS support organizations were also selected as key informant.

### **3.4 Data Collection**

The data was collected in four stages: orientation phase, key informant interviews, farming household survey and focus group discussion as described below.

Before data collection a check list of unstructured questions was developed (ANEX 1) Also 5 days (one week) pre-visit to the research site to meet the community leaders and get acquainted to the research area and make appointments with Key informants in the two districts. Heads of the 16 randomly selected HIV/AIDS affected households' were then interviewed through semi-structured interviews using pre-formatted check lists. The interview include; household population, source(s) of household labour, cases of chronic illness, impacts of the illness, on household's participation in group labour exchange, household coping mechanism to mitigate the impacts.

Interviews were also administered to 4 key informants from HIV/AIDS support organizations working with the community in the surveyed districts. These were Dr. Kagwire of Northern Uganda Malaria AIDS and Tuberculosis programme (NUMAT). NUMAT is working in collaboration with the District Medical Officer of Lira District medical offices of Lira and Apac office, Mr. Emmanuel Aling Data analysis for Aids Information Centre (AIC), Mr. Tommy Otoo of TASO Gulu who provided the information because Lira TASO mini office do not have type of information I was in need and Haword Ayo of Lira Community Development Association (LICODA). Interviews with key informants focused mainly on; what HIV/AIDS support activities these organization are providing to the community, who are the community they are working with, who are the other HIV/AIDS organization they are working with, what are the challenges and opportunities recorded during their working with community and what is the HIV prevalent in the community they are working with..

Discussions with individual from selected HIV/AIDS affected households headed by women and men was focusing on their experiences on the impacts of chronic illness on the household's ability or member of the household to participation in village labour exchange activities, how it affects or has changed the traditional labour exchange mechanism, and the ways in which they have responded to the impacts.

Note: Due to its sensitiveness, HIV/AIDS was referred to during group discussion and individual household interviews as chronic illness/disease unless otherwise mention directly by the respondent as AIDS.

Eight (8) farmer groups randomly selected from the 108 oilseed groups mentioned above was interviewed through Focus group discussion to compare group responses on how HIV/AIDS affects group labour exchange partner, how groups organizes labour exchange, how group have been supporting vulnerable households in their and how groups could modify their organization to enhance vulnerable households' participation or involvement in group labour exchange or developmental activities.

Other source of information was also recorded in the field through observation of what is happening and relevant literatures from HIV/AIDS organization offices in the two districts were also obtained.

The study took great care to respect confidentiality (no names of the dead in the group asked was mentioned).. At community level, local leaders were introduced to the objective of the study and asked for their approval and cooperation in selecting the respondent for interviews. Selected respondents were again informed about the objectives of the study and their oral consent to participate in the study was solicited.

Data collected was analyzed using PESTEC and Matrix tools of data analysis, this is because the sample size is very small could not be subjected to SSP statistical computer analysis.

**Table 3. 1 Summary of Respondents, category and method of data collection**

Number of respondent	Category of respondent	Method of data collection
24	People from HIV/AIDS affected household <ul style="list-style-type: none"> <li>• Households still in group labour exchange.</li> <li>• Household that has left the group.</li> </ul>	Interview and observation
8	Oilseed farming groups	Focus group discusion
4	Key informant	Interview and sourcing of some literatue.

### **3.5 Limitation**

This is the peak period of farming activities in the area so there was difficulty in meeting the farmer groups and household respondents at scheduled time and during group discussion some women would asked for permission to leave before the discussion is over to go and continue with field work.

HIV/AIDS being a sensitive issues, there were times I have to build confident of the respondent before I could enter real issues, so this made me sometimes spend an un necessarily longer hours with a respondent than initially planed. This added 4 more extra days beyond the planed days for completion of interviews.

There was also a problem with key informants in that; one they would demand for introductory letter from the institution which I am schooling in stipulated the purpose of the data collection and which type of data is needed. Then secondly the informant would not be their even after appointment such that I would be forced to go back to the same office more than once increasing number of days scheduled to meet key informants.

Another limitation was the period given for the data collection and report writing for this thesis, it did not cater for 6 days (to and from Netherlands) involve in travels.

## 4.0 CHAPTER FOUR: RESULTS AND DISCUSSION

This section presents findings from the survey with discussion. It is presented as follows: brief highlight on interviewed household dependency ratio, followed by impacts of HIV/AIDS on group, this is sub divided into; impacts on the members, changes in group membership and impacts on group labour. Furthermore, impacts of HIV/AIDS on the participation of household in labour exchange activities, coping mechanisms for both household and group to mitigate impacts of HIV/AIDS on group labour exchange activities; group supports to assist HIV/AIDS affected households to participate in group labour exchange activities are presented in this section. Finally the section ends by discussing why participating households stick to group labour exchange for long despite labour shortage in the event of HIV/AIDS.

Findings presented in this chapter are responses form individual households selected from UOSPA groups and the group discussion responses. Where the finding concerns individual household it will be indicated in the heading as household and from focus group likewise.

### 4.1 Demographic composition of households surveyed.

The mean number of adults in reproductive years (15-64years) provides an estimate of the prime labour pool from which a household can draw for agricultural labour and other productive tasks. This is used as the denominator in calculating household dependency ratio (UNU-WIDER, 2006). In the absent of sufficient adult workers from this age group, the household must fill labour gaps by utilizing children or the elderly, by hiring labour or by exchanging labour with other households. Dependency ratios increase where households comprise of more children and elderly (Barnett, Whiteside, 2005). This has the implication for other household because of interdependence, resulting to increase weakening of coping mechanism of farming communities as more households in the community are affected and communal support networks are less and less able to provide support.

**Table 4.1 Composition of the HIV/AIDS affected household interviewed**

Composition of household members by age					Dependency Ratio (Children: Adults)	
NO	Male headed households		Female headed households		Male headed households	Female headed households
	Adults ≥ 15 years)	Children (≤14 years)	Adults ≥ 15 years)	Children (≤14 years)		
1	5	6	2	5	1.2 : 1	2.5 : 1
2	6	4	2	2	0.6 : 1	1 : 1
3	3	4	1*	3	1.3 : 1	3 : 1
4	2	4	4	5	2 : 1	1.3 : 1
5	3	5	3	5	2.5 : 1	2 : 1
6	4	4	4	6	2 : 1	1.5 : 1
7	2	1	5	5	0.5 ; 1	1 : 1
8	1*	2	2	4	2 : 1	1 : 1
<b>Tot</b>	<b>25</b>	<b>30</b>	<b>23</b>	<b>35</b>	<b>1.3:1</b>	<b>1.5 : 1</b>

Source: Household Survey, 2008

\* Households where one of the spouses has died and the widower and the widow have young children with them.

The household survey revealed that there is more dependents in female headed household (35) compared to male headed household (30). Also comparing the dependency ratio the result still reveals that women headed household has higher dependency ratio (3:1) than that of man headed household (2.5:1) This has the implication that the women headed households have less prime age group to help them in labour exchange activities, thus the household must fill labour gaps by utilizing children or the elderly, by hiring labour or by exchanging labour with other households. This would mean the member of this household have to undertake extra activities beside just labour exchange activities and additional working hours. A cause that at times lead to women headed household affected by HIV/AIDS pulling out of labour exchange activities, because she could not balance between home care and labour exchange regulations

#### **4.2 Organization of labour exchange activities**

The focus group discussion revealed that labour exchange group membership is between 15 to 30 members usually from the same administrative village. This was indicated during the group discussion that 15 to 30 is a number which is preferred because of easy management of the group activities like: meetings, trainings, monitoring members' progress and group farm activities. However there was one group who have They indicated that joining the group during group formation is voluntary but have to meet the membership fees. Leaving the farm labour exchange group you have to notify the group with importance reasons given. Where there is some group saving which exiting member(s) have a share it is given. People who are lazy and do not obey group regulations and rules are sent away in disgrace never to come be admitted back to such a group in case he/she has decided to come back.

Where there is mixed group, a man and a woman or women from the same household usually join the same labour group activities. This type of composition is said to be preferred during focus group discussion in that, one household would be reaping the benefit of the group labour or loan support from both sources (man and woman). This also reduces the number of households composing of the group but increasing the frequency of support provided by the group labour exchange to the household involved in a season. However, during the training and group planning meetings men tend to dominate as women would tend to shy away in the present of their husbands.

The labour exchange activities carried by the groups, with the exception of youth group, are mainly of agriculture in nature like; land opening, planting, weeding, harvesting and post harvest handling of crops (the latter is common in women's group). In the youth group, labour exchange is mainly of income generating activities like; brick making, seedling raising and tree planting.

The survey revealed that there are usually more women in a mixed group than men (table 2 below). Being in mix farming group therefore would tend to alleviate the problem of extension workers mainly directing extension services only to adult men while leaving out novel, and highly vulnerable households in AIDS affected communities: those

comprising of grandparents and orphans, child headed household, and female headed households. For example, a survey study carried in 1998 by FAO found that globally only seven per cent of agricultural extension resources were directed at young farmers (children) and just five per cent were focused on female farmers (Holden, 2003).

### 4.3 Impacts of HIV/AIDS on group farming labour exchange activities

HIV/AIDS increasingly impacts on and changes the group arrangement as well as ways of group labour activities. The internal labour capacity of the group would also be affected as members start to be absent for group activities. Most notably, as infection rate in the group increases absenteeism from labour exchange activities also increases leading to low productivity of the group (Nguthi.N, 2005)

During the focus group discussion on impacts of HIV/AIDS on the group labour exchange, three sub-areas was of concern; HIV/AIDS related morbidity and mortality in the group, changes in group membership for the last five year and socio-economic impacts of HIV/AIDS on the group.

#### a) Cases of HIV/AIDS morbidity and mortality in the group

During discussion of morbidity and mortality in the groups members agreed on two procedures: that they were going to give me the number of HIV/AIDS sick people in the group who have already come out openly and have tested positive. While for the dead they agree only to give number of members who died when they had disclosed their status. The group members argue that they want to give me information that they are sure of and avoid stigma.

**Table 4.2: Shows cases of morbidity and mortality in the interviewed UOSPA's labour exchange groups for the last five years.**

Group	number of members		Cases of chronic illness in the group mentioned by the members		Cases of death from chronic illness in the group for the last five years mentioned by members.	
	M	F	M	F	M	F
1- Can mii diro	7	15	1	2	1	1
2 - Otemo W. group	13	17	1	3	3	4
3 – Acap.	11	16	1	4	-	1
4 - Alito Joint Christian	38	12	2	3	1	2
5- St. Luke	6	9	-	3	-	1
6- Camkwoki	10	24	-	-	-	1
7- Gin lero	9	12	-	1	1	2
8- Ber llwak	14	16	-	1	-	-
Total by gender	108	121	5	17	6	12
<b>Overall total</b>	<b>229</b>		<b>22</b>		<b>19</b>	

Source: Focus group discussion, 2008.

Of the 8 farmer groups that participated in focus group discussion all declared one or more adult (15-50 years of age) group members in the group died from chronic diseases in the previous last five years. Also seven out of eight groups revealed cases of chronic illness in their groups. The survey indicated that there were significantly more women among the cases of chronic illness in the group studied than men (table above). HIV/AIDS is not the only disease with which people have to die, but unlike other diseases it warrants special attention because it mainly attacks the most productive age group in the society and has systemic effect with major cost for the society. Because of its characteristic long illness the epidemic impacts on farm labour and depletion of household income is tremendous.

According to Uganda HIV/AIDS Sero Behavioural survey and data from Aids Information centre (2007), for every 100 person in Lango sub-region 9 would be HIV positive. This is in the total population of 670,000. During the group discussion a population of 229 was reached implying that if we were going by the AIC and UAC the expected HIV/AIDS cases would have been 18 persons, but the reported cases by the participating groups was 22, thus chronic illness and death prevalence is higher a bit in the group than the regional average. Although the sample size is small this result can still be taken as an indication of HIV/AIDS impacts on groups, in terms of loss of adult labour in group. It can be said that on average every adult member is dying each year in the group labour exchange. This would literally mean that a group of 15 members would then disappear within fifteen years of existence. Implication is that UOSPA have to trained young new farmers with no farming skill left behind due to death of these trained and productive adults.

Household survey confirmed early data I obtained from TASO and AIC Lira/Apac that indicate that more women in the sub region are experiencing HIV/AIDS related morbidity and mortality than men. For instance AIC have so far tested positive 137,263 clients in Lango sub-region since 2004 to date of which 59,564 are male and 77,699 are female. This could be argue that the reproductive gender role of women make them have health seeking behaviour than men. Pregnant women who visit antenatal clinics are mandatory to take care of the foetus hence find themselves in the system. Moreover they (those who happen to reach antenatal) receive more counselling and sensitization on health issues than men. Combining information-based approaches with counselling has been shown to increase disclosure among people living with HIV/AIDS, and has triggered improved community attitudes compared with baseline measures in countries like Uganda and Zimbabwe (UNAIDS, 2002).

One of the information obtained during the focus group discussion to indicate impacts of HIV/AIDS in the group was changes in the groups being interviewed in terms of membership for the last five years.

Last five years was chosen in getting this information because I wanted to talk to members who have long experience in being in group labour exchange activities. Secondly the respondents can still remember slightly well what happened to the group within that period and lastly a group which has stayed for five consecutive years have established record and is expected to be stable. That is, people do not pull out because of lack of trust among members; this would have already been built for over years. The answers given by the group on group membership was cross checked with group record book with the secretary.

### b) Changes in group membership for the last five years

As was indicated early in the literature there is usually a workable group size that can favour management of labour group activities and trust among members with little gossip. Group size like wise determine what type of activities the group can undertake and all members benefit. The information in table 3.3 was given by group members especially the group leaders during focus group discussion and crosschecked with group records from the secretary.

**Table 4.3 Changes in the membership of 8 interviewed UOSPA groups during the last 5 years.**

Group name	Group membership, 2004			Group membership, 2008		
	male	female	total	male	female	total
Canmiidiro	12	33	45	7	15	22
Otemo	30	27	57	13	17	30
Acap	18	24	42	11	16	27
Alito Christian	20	17	37	38	12	50*
St. Luke	20	35	55	6	9	15
Camkwoki	12	14	26	10	24	34*
Ginero	10	20	30	9	12	21
Ber Ilwak	26	12	38	14	16	30
Total	148	182	330	108	121	229

Source: Focus group discussion, 2008.

\*Groups that registered increase within the last five years, has been observed during the survey that they have tangible group property. An example of this is Alito Christian farmer which acquired both group permanent building store and motorized oil mill in 2007. The latter is to add value to the sunflower grown by the group and sell as crude oils to bigger miller at higher profit. Also Camkwoki is a group that saves and gives loans to the member at paltry interest and no collaterals need payable after three months in instalment.

The table above shows that within five years the total number of members has been decreased by 106. The reasons given for these membership lost were: death due to HIV/AIDS related morbidity and mortality, migration of some member to another village, voluntary exit due to laziness and expulsion due to failure to adhere to group regulations and rules. During focus group discussion the groups revealed that total of 19 members died of AIDS (table 3.2 above) from the groups within the last five years. This would mean that out of 106 decreases in membership AIDS contributed 18 percent loss of members and moreover many members in the group (22) are still reported chronically ill. If we are to go by UOSPA's recommendation of 15-30 members in a group, this membership lost of 106 members would be equivalent to loss of 1 farming group within 5 years by HIV/AIDS related death. This means that if each member in the group is to grow 2 acres of oilseed crop in a year then there would be total lost in oilseed production of 36 acres from 8 groups this year a case that would explain the gradual drop in area planted with oilseed in figure 2 of chapter two above.

### c) Impacts on group operations

Here the farming groups were asked to mention how HIV/AIDS in the group affects the group activities. The responses were given by the group through focus group discussions and recorded as in table 4.4 below

**Table 4.4 impacts of HIV/AIDS on group operation.**

Response.	Frequency.
Shift from group block farming activities to individual household labour exchange activities.	5
Decreasing group saving	8
Poor crop production and productivity	6
Delayed group labour exchange activities	5
Decreasing group membership	7
Increasing absenteeism in labour exchange activity	8
Total	39

During focus group discussion, all the eight groups mention that due to frequent sickness and death from related HIV/AIDS there is decreasing group savings and increasing absenteeism of members from group activities. Group savings is used by group as immediate support to members at time of crisis and its also a factor that can motivate members to work hard in the group with expectation of good income at the end of every year.

The death of a member(s) changes the labour availability of the group and affects execution of the planned activities as the group members in most cases have to spent time supporting and preparing for the burial of their lost members (usually a minimum of 3 none farm working days). So it can be noted that illness and death of a member from a group is not limited to the ill person or household where he or she lives only. The group where he or she works is also directly affected because households in the group have to make contribution in cash, kind or as labour to the affected household.

*One member in the discussion said 'this is equivalent to opening 3 acres of land if the group was working and when translated into cash would be 120,000 Ushs (80US dollars)<sup>d</sup>*

In Uganda poverty is measured basing on how much US \$ a person can earn a day. Those who earn less than one US dollar a day are said to be below poverty line. The earning of 40,000 Uganda shillings (27 US \$) a day by a group of 15 members would mean a member getting 1.8 US \$ per day hence pushing members in group above poverty line as per Uganda's standard.

Tanja R. Muller (2005) noted that formal institutions that contribute to social networks formation, such as church groups, women groups, farming groups and youth groups are likely to be weakened by HIV/AIDS related morbidity and mortality. This was noticed to be happening, during the survey, in Otemo women groups in Adyeda Parish, Inomo Sub County in Apac district and Acap Farmers in Owalo parish, Abako Sub County in Lira District. In the latter (Acap Farmers) the group chairperson and treasurer is terribly ill and there is virtually no serious group activities taking place as mobilization of group meetings and group contribution has almost come to a halt. This is because the group secretary was killed by rebel but not yet replaced and the vice chair person Mr Odyek David is staying in Lira town where he has started petty business. Interviewed chairperson Mrs. Joice Oling who has been leading the group since its inception in 1999 explained what is happening in the group.

*'We have stopped banking money in our account in Stanbick Bank Lira since 2006 because there is poor group membership collection and much group loan re-payment default. Members have dropped from 42 in 2006 to 27 presently (2008) and is expected to continue since there are no 'strong binding' forces. People use to stay in the group because they would be expecting benefits at the end of the year like division of group savings to members during Christmas time, provision of group savings as loan to needy members at time of crop production and some benefit from the Community HIV/AIDS Initiative as material support to HIV/AIDS affected households but this has stopped forcing many members to pull out. Moreover since then there is poor organization of group members for group labour exchange, another disincentive causing the collapse of this group'.*

This has implication in group organization and management, where the elected members are trusted and kept to lead the group for too long without change in leadership the other members in the group tend to shy away to lead thinking they can not lead, a factor that have been observed to lead to group labour exchange disintegration.

#### **4.4 Impacts of HIV/AIDS on participation of household in group labour exchange activities.**

Since the first study on the potential and observed impacts of HIV/AIDS on agriculture and rural livelihoods, labour shortage due to pre-mature adult morbidity and mortality, both in term of availability and allocation of labour has been at the centre of debate (Mullar, 2005). HIV/AIDS first impacts on household is illness/death the later results to

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<sup>d</sup> I US \$ is equivalent to 1500 Uganda shillings (ushs).

shortage of household farm labour either through diversion of adult labour to care of the sick member or loss of the adult labour as a result of death.

Interviews with heads of household affected with HIV/AIDS but working with groups revealed that the most significant impacts of HIV/AIDS on participation of household in farming labour exchange activities are:

- Pulling out of the household from group labour exchange activities,
- Failure of the household in question to meet group obligations,
- Replacement of adult labour in the group by child labour,
- Denial of and pulling out from group leadership

The respondents were asked to mention how HIV/AIDS impacts on their participation in group labour exchange. The different answers given were tabulated as below to compare the frequency of the above answers and find out the most common answers

**Table 4.5 HIV/AIDS impacts on participation of household in farming labour exchange activities (n=16)\***

	Response	Frequency.		% Responses	
		MHH	FHH	male	female
1	Pull out of group labour exchange activities.	4	9	16	29
2	Failure to pay for group contribution	2	-	8	-
3	Failure to meet requirement for group loans scheme	8	2	32	6.5
4	Irregular attendance of group activities	4	8	16	25.8
5	Denial of and/or removal from group leadership position	3	5	12	16.1
6	Replacement of adult labour by child labour	4	7	16	22.6
7	Total	25	31	100	100

Source: household survey (2008)

\* More than one answer could be given by respondent

The survey showed that about 11 what, I do not see 11 of the households reported members having to relocate their labour time to care for the sick household members or replace the loss labour due to death of adult member of the household by using children to replace them in group labour exchange activities. The aim here is for the household to maintain ties with farming groups so that the benefits of working in group (group cash loan, group labour loan, free labour support at times of problems) can still be reaped. This has implication that a woman does not have resources and find it difficult to get loan support from commercial institution as an individual. When in group the group can provide her with loan or she can get loan as group from external organizations. A group becomes the guarantor of members and the loan provider would look at the group potential not individual member in the group. The loan is used by individual (but monitor by the group) in income generating activities hence improving the economic independence of female members in the group.

About a third of the surveyed households members were forced to reduce time engaged in group productive activities, with total of 13 respondents (male and female headed households) indicating that they had to completely abandon their group to care for the sick, hence one of the reason for leaving the group? These are mainly households that

do not have children at the prime age who can replace them in group labour exchange activities Pulling out of group labour exchange activities was reported more by women headed household than men headed households. T.Hilhorst (2006) said that, men leave care of the sick household member to relatives especially their mothers and when his woman dies he re-marries immediately filling the gap loss due to the woman's death. This is reverse for a widow who remains single caring for the children left behind after the death of the husband.

Labour reallocation entailing changes in gender roles was observed in two cases where a woman (Adong Silvia) in Ajok Welo village, Adologo Parish, Alito Sub-County in Apac District took the role of constructing grass thatched sleeping house and her young girl of nine years old with difficulty, took the role of cooking and caring for her two younger siblings when the mother is in the farm. This confirm study done by Mullar (2005) which revealed that, it is gender and household composition of the deceased or sick person together with the assets level of the household that determines the extent of household's vulnerability to HIV/AIDS impacts and susceptibility to HIV.

The survey further revealed that frequent absenteeism from group labour exchange activities was prominent in households where a woman is the member of the group but male adult or a child is bed ridden. When a household member becomes ill due to AIDS, or any chronic disease women's time is increasingly diverted to care and support, and away from group farming activities (Karuhanga.M. 2007). The household survey data revealed that some of the adult HIV/AIDS affected patients could be bed ridden for several months to as long as three years. A case in place was the family of Opio Ray, Okwerodot Parish, in Alito Sub-county, Apac District. Opio's woman is a member of Alito Christiam farmer group. She missed group labour exchange activities for about 4 months (March to July 2007) when she was caring for the husband admitted in Lira Referral Hospital. Whether adult or young child is the one sick in the household, the rate of absenteeism from group labour exchange activities by housewife had no significant difference. Cases of absenteeism from group labour activities was less prevalent 4 out of 8 in households where the man is the only member of the group but the woman is the one who is sick.

#### **4.6 Coping Mechanism**

This section focuses on how households in the labour exchange groups in the study area try to deal with and adapt to the impacts of HIV/AIDS on labour exchange activities; The discussion is presented into two;

- Household coping mechanism.
- Group coping mechanism.

##### **4. 6. 0 Household coping mechanisms**

What is included under this household coping mechanism is the responses given by 16 head of households interviewed. The information given indicate the various ways a household in the group labour exchange try to cope with impacts of the epidemic on the household's participation in group labour exchange activities so as to maintain the household in group activities.

The responses given by the households as coping mechanism were;

- Increased workload for the remaining members of the household (hours of working in garden per/day),

- use of family labour mainly children labour,
- hire of casual labour, reduction in area cultivated,
- hire of household services out for money in someone's field,
- poor adoption of technology and renting of land out for money.

The frequencies of these responses were then categorized and put in a table as below.

#### a) Labour based responses

As indicated in Barnett and Whiteside (2006), the study found out that illness and death triggers inter-household labour substitution as a way off filling the group labour loss due to sickness or death. The survey confirmed that household labour base strategies generally involve replacing the lost labour in the household by household reallocating labour such as bringing in relative(s) to joint or hiring labour from the remaining group member. At times household involve child to help at critical labour pressure like crop weeding or harvest of particular crop which would otherwise get spoil if not immediately harvested. This has increased child labour in such a group, the child is expected to attend group meetings and participate in ploughing the task allocated in group garden work for his/her parents. In household surveyed the studied revealed a shift in crop mix and areas planted to adjust to labour shortage.

**Table 4.6 Household labour base coping responses to the Impacts of HIV/AIDS on their participation in group labour exchange activity (n=16)\***

	Coping strategy	Frequency		% of responses	
		male	female	male	female
1	Increased workload (hours of working in garden per/day)	4	12	12.1	34.2
2	Poor adoption of new technologies	9	12	22.3	34.2
3	Use child labour/ removal of child from school	1	2	3.0	5.7
4	Hire of casual labour	2	1	5.3	3.0
5	Hire out services for money	6	3	18.2	8.6
6	Reduction in areas to be cultivated	5	5	15.2	14.3
7	Renting out land	6	-	18.2	-
8	Total	33	35	100	100

Source: Household Survey, 2008.

\* More than one answer could be given by one respondent

Increased workload of the members of the household was mentioned more by female headed household (12 female headed households) than male headed household during the survey. The implication here is that because of the triple role of women; reproduction, production and community management women tend to work more hours than men even without HIV/AIDS impacts, HIV/AIDS impacts just exacerbated this. Much of this is unrecognized and unpaid, so that women are always over employed in terms of hour worked and unpaid in terms of income received. Therefore women's overall responsibilities affect poor household to adopt new activities or technology when additional source of labour is not available or they can not afford hire of labour, reason

why may be the response for increased work load in table 4.6 above is corresponding to poor adoption of new technology.

### **b) Removal of child from school**

During the household survey, children were found to be taken out of school temporarily to replace adult labour in the group labour activities. These children after farm work get engaged in small income generating activities like making and selling of pancakes, roasting and selling of snacks (peanuts, cassava and soybeans). Alternatively they work for money or food items in peoples' garden to earn money and/or to feed household members. Among the 24 households interviewed three households which have bed ridden husbands had already withdrawn their children from school to help in group labour task. The female parents of these children were unable to participate in group activities regularly, or with any predictability. Their availability for group activities depended on their husband's state of health, which, as is typical of AIDS, was unpredictable. They argue that children would maintain the household in group work so that the group can continue helping them in farm labour exchange and group loan. This was not revealed in households where either of the parents has died. This has implication that at time of school examination children would refuse to heed to parent's advise of remaining to work in group labour exchange meaning that such group member would fall out from the group or start hiring group labour on loan.



Source Field observation, 2008

**Figure 4 picture of school children pulled out to help with sourcing of household income.**

Use of child labour to replace loss labour due to sickness of the parent(s) was a common observation during the household survey. These children are working for money to help

their single mother who is sick at home. A task work of 1,500 ushs (1dollar) is an area measuring 2 meters wide by 90 meters long. If the woman was a member of farming group she would have hired the group labour to do this for her or she would have been loaned money by the group and pay later. The children are still schooling but once in a while miss going to school to look for money to help them purchase books, pens or buy basic items for home use. Study carried by FAO ( ) found that this group of age children during training of farmers by agricultural extension workers are not targeted because they have no production resource.

### **c) Access to group labour loan**

Among the households interviewed only 3 were able to hire casual labour and to limited extent all respondents were employing family labour. The latter depends on the affected household composition and age of the children in the affected family. Even without HIV/AIDS the poor households in the group mainly rely on group labour. Free labour from relatives was very limited and could not be relied upon as most households grow crops at the same time and equally experience labour constraints. The survey revealed that free labour assistance from relatives is for a short term, period of 1 to 2 consecutive seasons and is abandoned as relatives get tired of assisting HIV/AIDS affected households. The assistance is said to be more in male headed house than in female headed households. The female headed household receive labour assistance from her relatives who are in most cases placed far away from her marital home they come to help once a season. While male headed households get the assistance from the parents and brothers whom he stays with within the same vicinity.

### **d) Reduction of Area cultivated**

These response was given by heads of HIV/AIDS affected households interviewed. According to Hilhorst *et al* (2006), the most common strategies employed by HIV/AIDS affected households in response to HIV/AIDS – related morbidity and mortality is the reduction of area under cultivation. The survey of households who are in farming groups did not reveal significant changes in the areas and type of crops cultivated by these HIV/AIDS affected households. Most respondents indicated that they are still growing same number of crops in the same size of areas as before sickness (group members provide for the lost labour) while 10 heads of households interview said they have reduced area of land cultivated but maintain the crops they have been growing. Group's labour exchange is mostly on crops decided by the group to be planted in a season. Say if the group decides that members will plan sunflower in first season that would mean group labour assistance to household members in that group will be on ploughing, planting, harvesting and marketing of sunflower crops. Thus HIV/AIDS affected household experiencing labour shortage for food crops would wish to take advantage of group labour assistance on sunflower by intercropping sunflower with beans (food crop).

Therefore what was most evident in 24 heads of HIV/AIDS affected households surveyed is a shift from planting pure crops inline to mix cropping but broadcasted. For instance through observation it could be seen that, groundnuts (pea-nuts) were being intercropped with cassava or pigeon peas, sunflower being intercropped with maize or cassava and sesame (simsim) are being intercropped with maize or beans (observation from respondents fields). Moreover optimum crop population in the field is the major

determinants of good crop yields. This shows that HIV/AIDS affected households will always end up with little harvest of both food and cash crop (even with group labour help) that translate into household food insecurity and low income. Low income and poor food harvest would act as disincentive for the member to continue working with the group hence high chances of leaving the group. Secondly the resulting household poverty and poor nutrition of household members then end up increasing the household members' vulnerability to AIDS and susceptibility to HIV infection. During the study one of the respondents Mr. Ogwang John from Alito Sub-county in Apac District who has been bed ridden revealed that there is marked decrease in areas and type of crops he is now planting.

*Before this sickness I would use the group labour and hired labour of over 20 workers in my field for a season and the family would grow crops in a total of 50 acres in a year (2 seasons). I had a permanent house store which I have even sold it away and I was produce seller (dealer). Since this sickness attacked me for years backed , I have pulled out of the group and reduced area planted with crops to 3 acres a year and these are food crop only (cassava, beans and a bit of maize). I have lost production assets like cows, ox-plough and all the goats. The only things I have are 2 hand hoes which my elderly daughter and my wife are using for agricultural production. This season (meaning first season of 2008), my former group members showed my problem and help to open for me one acre of land, this is where I had planted the peanuts in the first season. My wife can not even join the group because she is always with me in hospital at an interval of half or one year leaving the daughter taking care for the younger siblings. I could not even use the group farming labour exchange called 'Cam Badi' who provide loans in form of labour and are paid later on at the end of the year because I was not sure of what could happen to me between March to December 2008 (at the time payment is needed). I fear my family would suffer incase I die when the loan is not paid as the little food crop which is there would be grabbed by the group to recover the loan.*

#### **e) Renting out of land to get income**

Six out of the 24 households survey revealed that, at time of lack of money to pay group contribution, or at times of high needs for farming inputs by household they hire out land at approximately 30,000 (18 us dollars) per season per acre. This is normal number of rotational cropping season in one piece of land after which the land is let to rest by fallowing it for another 2 seasons. However some members of HIV/AIDS affected heads of households interviewed said that this has been in long run means by which the person renting land eventually buys this land cheaply from desperate household especially HIV/AIDS infected widows at time of increased sickness of the widow. This affects the household member decision to continue with reciprocal group labour exchange as she would not have any land where group labour can farm for her, a factor mentioned by one woman as cause of not bothering to remain in group labour exchange. During the household survey no women respondent mentioned renting out of land to earn money at the time of crisis probably because they do not have power in land use decision even after the death of the husband. She has to seek permission from the husband's parents or relatives which in most cases is block because the husband's parents would look at it as a trick to begin land selling. (C.Moser & A. Norton, 2001) said that, although there is

women rights to; bank loans, mortgages and other form of financial credits women in most cases are barred from such benefits because they do not own resources that could act as collaterals.

Another type of response mention by household though to lesser extent by women than by male headed household was; taking up casual work for money, often at the expense of working on their own farm. Unlike women counterpart, men have less domestic work so usually after group farm work (which takes approximately 3 hours maximum per day), they divert the remaining time looking for casual labour within the village in exchange for money which in most cases, it is spent alone by the man in drinking alcohol and eating snacks under beer party. This has affected the group labour exchange in that some men are pulling out of the group labour exchange and carry on daily casual labour to earn money which is not used to benefit all household members. The woman who remains in group labour becomes the bread winner while he becomes dependant increasing the workload of woman in household who may eventually also fall off group labour exchange.

#### **4.6.1 Group coping mechanism**

Groups which are collection of households are equally negatively affected by HIV/AIDS like household members constituting them. During the focus group discussion the members in the group explained that they have to develop strategies to make group functional and sustained in case HIV/AIDS strikes. The strategies mentioned were:

- Provision of group cash loan to the affected member of the household to help the in land preparation, purchase of input
- Provision of labour loan in case there is no cash reserve in the group
- Provision of free labour to the affected household(s)
- Planting of demonstration in the affected household's field

##### **a) Provision of cash loan**

All the 8 group discussion revealed that as a strategy to have ready money avoid bureaucracy of the financial institutions (need guarantor, loan interest rate very high and at times no grace period), they have started group savings and credit scheme. The amount and frequency of collecting this savings varies from group to group. For instance, Camkwoki farmer group (34 members), in Adekokwok subcounty Lira district do weekly saving collection on every Tuesday of the week. Every Tuesday, Members' saving with the group depends on one's capacity but the minimum is 1,000 U shs (0.7 US dollar cent) and a member can borrow up to 500,000 (334 US dollar). A member is given 4 months grace period after which he/she can start paying either at once or in instalment for a period agreed upon by the group and the borrower at interest rate of 10% that is, if you borrow 100,000 you pay a total of 110,000. At the end of the year (before Christmas) the money is divided among the group members. The implication is that the total profit accrued from interest saved in the group benefits all whether you started contribution to group savings and stopped on the way, which is a times case in HIV/AIDS affected households.

Group base microfinance is helpful in taking poor household over difficult times It also help them to invest and in the process build savings that that lift them out of poverty (Nguthi, 2007) This in turn can help to assist women in developing effective income generating strategies that benefit entire family, improve their social networks and have wider control over household decision making process. In addition, evidence from the survey revealed that group base micro credit scheme may have long term positive impacts on the women groups. The provision of trainings combined generally with capacity building has enabled women's groups to obtain credits from external organizations where their gender, poverty and lack of assets would previously have prevented them from doing. Example of such is the group I interviewed called Can Mii Diro women group who at the time of this study was being assess by Centenary Rural Development Bank, Lira Branch basing on what they produce and market as a group not houses or land they have, which would be the requirement for other clients to get loan.

### **b) Labour loan assistance**

This is where the group members assist affected households with farm labour during crop production and are the group is paid in cash equivalent or in kind during harvest time. This is the most common and long term methods of assisting group member who is bed ridden and can not contribute to group labour exchange practices. It has also become ways of group accumulating group savings from within but through providing assistance to the affected. This type of coping is risky if the household is 100% relying on the crop(s) being grown for payment of the labour loan.. Incase of crop failure the loan would not be paid and that would mark the end of the assistance by the group to the household.

### **c) Free labour offer from group to the sick**

member of the group. Members in farming groups stay as one family and once a member falls sick during the farming season they would offer labour assistance. However this is done only for a season after which if the member can not recover and start contributing in group labour exchange he/she is dropped as a group member, reason why most HIV/AIDS affected members in the group pull out of group (information from group discussion and individual respondent).

### **d) Demonstration and/or Farmers Field School (FFS)**

In development and diffusion of new technology to farmer groups UOSPA and other development organization are promoting demonstration and/or Farmers Field School FFS. During the group discussion 6 out of the 8 groups talked to had planted demonstration sites and one group had farmer field schools. When selecting sites for these demonstrations, priority was given to households who are affected by HIV/AIDS, reason being that they have to benefit from the group labour. Demonstration and field schools have similarity in that more than one improved crop technology are planted at one site and most of the trainings on crop production and marketing are carried at these sites. All the harvest of the demonstration is given to the person who offers land which in this case was the HIV/AIDS affected households.

As noted by Tanja R. Mullar 2005, farmers field schools or demonstration gardens are valuable tools in developing analytical and decision making skills of the group and individuals in the group. It is also a tool that enhances and raises consciousness, as well

as a tool for promoting decision about communal problems and creating informal networks. All this contribute to strong social cohesion which is potentially decisive factor in combating the HIV/AIDS pandemic as it would remove stigma and discrimination among members in the group. The problem shown in this approach of aiding the HIV/AIDS affected household is that in almost, all the groups talked to indicated that farmer field school is carried in one site season out season in and the proceeds got out of the field school are shared by all in the group irrespective of status of the members. For demonstration the area planted with each crop is usually less than half an acre indicating that what the household get may not sustain them for a year/until the next harvest. Farmer field school was preferred but need to be rotated among many members of the group and the proceeds out of the field school be divided among all HIV/AIDS affected household.

#### **4.7 Group support to HIV/AIDS affected household**

Regarding community/group support to affected household and infected members in the group/community, the finding here is divided into two parts; support given by the group to its member and general support given by the community where the affected household or member live. The response was in the two cases obtained focus group discussion.

As was noted by FAO, 2004 that in the absent of strong community safety nets, most of the support to HIV/AIDS affected households come from relatives and friends within the community, it was also confirmed by the group discussion. For general community support, the focus group discussion revealed that care given to HIV/AIDS affected member or household constitutes; provision of food cooked or raw foods, collection of water or firewood for the affected household, home base care like; bathing of the sick, feeding bed ridden, visit of the sick in the hospital or at home and provision of labour for funerals. These contributions mentioned above were revealed by the focus group discussion to differ significantly between men and women. Women make frequent visit and take some hours or days with the sick than men. This is reflected in the nature of support mention above which are more of women's activities than men's activities,

However the survey indicated marked difference between community support and support offer by formally established group to its member affected by HIV/AIDS. During the group discussion with the groups, the following additional support was mentioned; free cash contribution by group (5 groups out of 8) to supplement cost of treatment of sick member of the group. If it is found that the total voluntary contribution by the group members can not meet the cost and upkeep of the sick member in hospital, the group can offer to give cash loan from group saving and credit scheme that would be paid as per the group regulation. It should be noted here that the cash loan support is not only limited to the HIV/AIDS affected members of the group but to members of the group in need.

During the group discussion members in the group further mentioned that groups can act as collateral substitute for their affected members to access credit from commercial institutions in case group can not provide such loan to the households in question. In addition, groups have the potential to increase the sustainability and outreach of the credit program. Further, groups have the advantage of reducing the transaction costs and improving credit management among members;

Another support revealed during group discussion is support is provision of agricultural input (improved seed in particular) and labour support to the affected household. The group hold group technology demonstration in the field of the sick so that she/he can gain the benefit of the group field activities and crop harvested given to the affected household, This have implication that these being improved seeds can increase the productivity of the affected members' harvest in the subsequent planting therefore improving on food security of this household. This type of group support, was observed during the study in *Ber Ilwak* farmer group in Bar Sub-County Lira District where improved cassava and beans crops were established in the farm of HIV/AIDS affected member (Ocen Dickens).

#### 4.9 Why a household stick in group labour exchange practice for long

When 24 households members in different 8 groups were asked reasons for their preferring to work in groups rather than doing their own agricultural work as individual household the following were given; tangible group material, exchange of skills and farming ideas, ease of which agricultural activities are carried out, security for future support from the group members or development organization, source of obtaining useful farming information, means of purchasing agricultural input cheaply in bulk as a group and ways of obtaining humanitarian support from NGOs were revealed as main reasons This was not indicated by 8 household who have never joined any groups. Instead the latter said that group work delays crop production activities, marketing of crops as you have to wait for every body in the group to harvest and that it benefits the leaders not people in the group.

**Table 4.7 Factors that makes group members stay in group for long**

	Response	Frequency		% responses.	
		Male HH	Female HH	Male HH	Female HH
1	Availability of tangible group Material(s)-group land, animals, stores	8	10	10.7	11.5
2	Trust and good leadership	11	11	14.7	12.7
3	Exchange of skills and ideas	12	12	16.0	13.8
4	Produce crops and market in bulk.	9	10	12.0	11.5
5	Acquisition of inputs through bulk purchase	4	6	5.3	6.9
6	Ease of carrying out agricultural activities.	10	12	13.3	13.8
7	Security for supports (cash, in kind, labour) from group members	6	11	8	12.6
8	Expectation of handouts Support from NGOs.	7	3	9.3	3.4
9	Source of obtaining useful information	8	12	10.7	13.8
10	Total	75	87	100	100

Source: group survey (2008)

\*more than one answer would be given.

The survey reveals that more women (11 responses from women) remain working in group labour exchange activities to build social networks and as security for future support than men. Being in group labour exchange activities was said to play significant role in the members' access to resources to production like land and type of livelihood strategies pursued (Nguthi, 2007). For instance a member in a group who lacks land can access it from a fellow member who has fallowed land without cost. This has implication of assisting women who do not own or have access to production assets like land to access one for agricultural production. A member of women's group in Adekokwok in Lira district said that she finds it cheaper and affordable to hire land, buy other inputs (especially improve seeds) and grow crops as a group rather than individual.

Responses for the expectation of support from NGOs were given more by male headed households (7) than female headed households. Women headed household explained that most developmental organization targets men who owns resource than women and youth and in any case there is some supports still men would take away such benefits. Thus many women do not look at being in group as expectation of support from NGOs.

However both women and male headed households interviewed equally indicated that they stick to group labour for long because of four major reasons; exchange of skill, availability of group tangible investment, trust and good leadership in the group and production of crops and sell in bulk at better price.

## **5.0 CHAPTER FIVE: CONCLUSION AND RECOMMENDATION**

### **5.1 Conclusion**

This section draws conclusion from the findings after the study and recommendations are suggested to guide the implementers in the direction which could lead to filling gaps

From the study the main conclusion is that there is apparent high HIV/AIDS prevalence among the labour exchange groups in the study area (table4.2). secondly that HIV/AIDS is undermining group labour exchange activities as valuable form of collective action to farmers, providing resources such as credit, labour and information The morbidity and mortality caused by HIV/AIDS related illness on the group members is leading to; decreasing quality and quantity of labour force in group labour exchange activities, increasing absenteeism of members in labour exchange activities, decreasing crop output of the group and reducing group cash saving scheme.

Secondly it can be concluded that there is increasing dependants, more specifically in the female headed households in the group labour exchange (table 4.1 above). This is leading to increased employment of unskilled children labour in group labour exchange activities and increase absenteeism of the female headed household from the group as she has to care for the increasing dependants. Composition and size of households are good indicators of household labour availability and productivity and that it affects choice of households to remain in group labour exchange.

Thirdly it can be concluded that there is shift away from group block farming labour exchange activities to group members' labour rotation activities within households in the group. This is further resulting to poor management of crops in individual household's farm leading to collective low crop productivity and poor exchange of skill and knowledge in the group.

Group support is the immediate assistance to the members in crisis but the source of assistance is being overwhelmed especially the group saving and credit scheme which members contribution is the source. Even the labour support to affected household may be challenged due increasing workload for the remaining group members in group labour exchange activities.

Therefore, it can be said that UOSPA is working in changing environment hence it has to tune its programme towards the change. This changing environment has three principal implications for the nature and style of UOSPA work. First the reality of HIV/AIDS calls for new ways of targeting, identifying and organizing vulnerable groups because traditional classifications alone may no longer be relevant. Secondly, the epidemic requires new strategies to effect development of the groups in a changing context with different needs and priorities. Thus UOSPA has to identify new modes of working that requires closer collaboration between sectors and joint initiatives between partners.

## 5.2 Recommendation

The study revealed much pull out from group labour exchange especially by female headed household members in the group. Sickness in the house diverts the woman's labour and time to care for the sick thus decreasing her participation in group labour exchange which she belongs. There is need therefore to introduce labour saving technologies (LSTs) which can in particular address the specific gender problems and constraints. Domestic labour saving technologies might be a better investment than agricultural base LSTs in this groups where HIV/AIDS cases is high, as they are likely to free time especially for women who are the main care giver for AIDS patients. This would give the female group members time to fully participate in group activities with little absenteeism as cases of pull out from the group due to increased work load or failure to balance increased domestic work with group activities had been reported. This can be combined with strengthening of group savings and credit scheme in many groups to help groups in purchase of such technologies.

UOSPA to support existing local safety nets practices in the group so that these can become more effective without becoming overwhelmed and also it has to look at how to sustain the productive and reproductive capacity of the groups in view of the demographic and social- economic effects of the epidemic on the group. UOSPA and the group has to work towards seeing that support to the affected households in the group is built on initiatives and existing safety net avoiding total dependency on external or parallel support systems that can not be sustained. People living with HIV/AIDS and their groups should be central in the development of the action programme. Moreover, a context specific is important given that the epidemic impacts on the group differ between the groups and the households in the different groups. This can be done by encouraging and strengthening the savings and credit scheme through up scaling it in many groups. Savings in the group can be soft loans to the members for hiring casual labour to help in the farm at peak agricultural activities or in case of diversion of labour due to care for the sick.

UOSPA and the groups should work towards encourage block farming and farmers field school instead of labour exchange arrangement where members carry out reciprocal type of farming from one household to another. This would allow widow and women who may not have access to land resource to produce in group block farm and also labour of the 'healthy' can compensate the loss of labour due to sickness or diverted to care for the sick by a member in the group. Moreover, observation has shown that management and subsequently yields of crops in group block farms is much better than crops managed individually.

Most of the extension services of UOSPA to the group focus on cash crops with no or little focus on food or subsistence crops, which are the primary concern of women (responsible for feeding household members) and HIV/AIDS affected households (this is where they shift to in the event of labour shortage). There is need therefore for UOSPA to come up with nutritional intervention and train its groups in diversification of food products from the crops being promoted within the group. For instance the groups can be trained on food recipe to start processing soyabeans into soya milk and soya flour using the locally available material in the group. Milk would be taken as tea and flour as porridge. There is a saying that "the first treatment of HIV/AIDS is enough food with

proper diet'. (Barnett and Whiteside, 2005). This would improve the nutritional status of the household and energy requirements of members in the group thus having strength to continue with group labour exchange activities.

From the literature data obtained from key informants and the group case study it is apparent that UOSPA is working with community in high HIV prevalence. It can therefore be recommended here that UOSPA need to Identify and partner with strategic HIV/AIDS support organization like AIC, TASO, and LICODA who would provide direct HIV/AIDS intervention in the group so as to mitigate its impacts on the group.

Field extension officers of UOSPA should put emphasis on formation and development of more women and youth groups during facilitation of group establishment. At present women and youth constitute only 30% and 5% of total membership of UOSPA respectively.

Encourage the group to invest as a group in tangible group facilities like group store, group farm land, group animals. This has the advantage in that it inspires members in group to own the group and work hard for sustainability of the group.

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## ANEX 1

### CHECK LIST:

#### 1 - Focus group discussion

##### a) General group information:

- When was the group formed?
- What was the purpose of the group?
- Has the purpose of the group change? (if yes why?)
- What is the composition of group (men, women, youth or mixed)?
- How many members does the group have?
- Has membership changed over time (if yes, why?)
- What is the organization structure of the group (leaders structure)
- How does the group get its leaders?
- Has there been unexpected change in leadership (if yes, why?)

##### b) Group activities related to labour exchange

Activity	How is done by the group	Problem experienced
Ploughing/tilling		
Planting		
Weeding		
Harvesting		
Marketing		
Advice		

##### c) Problems affecting participation of members in group activities related to labour exchange.

Problem	How does the problem affect participation	How the members handle the problem
Chronic illness		
Lack resources		
Leadership		
Stigmatization		
Absenteeism		
Openness on HIV/AIDS		

- d) Effect of HIV/AIDS on participation of members
- How does HIV/AIDS affect participation of members in the group?
  - How does the group handle the problem of HIV/AIDS?

## **2- CHECK LIST FOR HOUSEHOLDS.**

- a) Characteristics of the household
- Headship of the household (male, female)
  - Number of people in the household ( and age structure)
  - Resource potential of the household (sources of income)
- b) Labour Characteristics of the household
- Source of labour (labour , exchange , family, informal groups, hire etc)?
  - What problems does the household face in relation to farm labour?
  - How does the household cope with the labour problem?
- c) Inter household farming relation and labour exchange
- How much does the household depend on group for labour?
  - How does the HIV/AIDS problem facing the household affect their participation in labour exchange?
  - How does the household cope this specific problem?
  - How does the HIV/AIDS problem affect the general interaction with neighboring households?

## **3- CHECK LIST FOR OBSERVATION;**

- Crops being grown by household and groups and the way they are grown
- Field operations being carried by the group (block farming, weeding),
- The composition of members in the group field
- Presence of chronically ill person(s) in visited households
- People in the household.

## **CHECK LIST FOR KEY INFORMANTS AND LITERATURE**

**CHAI – NONUMAT an NGO** dealing with the integration of HIV/AIDS affected and infected persons in the in community. Information of interest will be on type of support being provide composition of people they are supporting, how the members in the group support each others and numbers of groups they are support.

**AIC – AIDS Information Center**, the information of interest will be on:  
HIV prevalence in Lira and Apac Districts- this includes even the new Districts of Oyam, Dokolo and Amolatar.

Number of people who have come for or whom you have tested for HIV since your inception in this place to date (Men and Women separate).

Support you might be offering to the sick from AIDS if any.

Strategies you are using to mobilize community to sensitize on HIV/AIDS.

Any problem in sensitizing community people in HIV/AIDS.

Trained counselors if and who are they composition (Men and female)

**TASO** – Information of interest will people they are supporting, type of support they are providing, how they organize community for support and composition of the people they are supporting male and female).

**AIC-** project operates Lira sub counties, group they are working with in the district how they are organizing community in groups, people they are working with (women and men) what type of support they are providing.

**LICODA- HIV/AIDS** support groups helping other infected persons, composition of the people you are supporting. What type of support is being provided, and how the groups are mobilized and problem in mobilization.