



ABSTRACT: LIFT Namibia Assessment

Main Objectives:

- Identify and analyze activities with the highest potential for livelihood and economic strengthening.
- Assess how Food by Prescription (FBP) can be complemented with longerterm livelihood approaches.
- Identify key market opportunities that can be pursued.
- Identify existing programs for partnership potential.
- Consider gender and illness burden issues.

The Livelihoods and Food Security Technical Assistance (LIFT) program is a 5-year cooperative agreement awarded by the USAID Office of HIV/AIDS to FHI 360, Save the Children, and CARE through the FIELD-Support LWA.

Find out more at: www.microlinks.org/lift

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Barb Monahan 202-884-8552 bmonahan@fhi360.org Project Director, LIFT FHI 360 On behalf of USAID Namibia, the LIFT program conducted a comprehensive assessment to identify and analyze activities with the highest potential for livelihood and economic strengthening for people living with HIV/AIDS (PLHIV). The first step was undertaking a desk review of available data to examine the current situation of PLHIV in Namibia and existing economic strengthening programming. LIFT then carried out an in-country mission to meet with relevant stakeholders, to follow-up on promising opportunities and to address information gaps identified during the desk review. The desk review and in-country assessment took place from November 2009 to May 2010. The assessment team found that despite the challenging environment facing PLHIV in Namibia, many opportunities currently exist to strengthen livelihoods and food security.

Context:

Namibia has the seventh highest HIV prevalence in the world, as more than I3% of Namibia's adult population (I80,000 individuals) was living with HIV in 2009. An estimated 70,000 children have been orphaned as a result of AIDS. HIV incidence is in decline in Namibia, and the percentage of PLHIV receiving anti-retroviral therapy (ART) is increasing. Nevertheless, the epidemic places high demands on the health system, and creates major challenges in terms of household food and livelihood security.

Namibia's deceptive upper-middle income ranking masks one of the world's highest disparities in income. The gap between the small, modern formal economy and a large and growing informal economy is perpetuated by extremely high unemployment and inadequate competitiveness. Unemployment is disproportionately high among women (58.4%) and youth aged 20 to 24 (67%). PLHIV are particularly affected by the lack of adequate systems to maintain productive lifestyles.

Although food availability is generally not a major problem in Namibia, household access to food and adequate nutrition pose challenges, as almost a quarter of the adult population is malnourished. HIV/AIDS compounds this problem, as PLHIV cope with diminished productivity and earning power, at the same time that their caloric requirements increase by 10-30%.

The impact of the crisis falls most heavily on women. Stigma is often worse for women, while the burden of caring for dependents is greater. In addition, the loss of a male head of household can put women at risk of losing access to land and other critical resources. In general, women represent the largest proportion of workers in the informal sector, and are often unpaid or earn less than male counterparts.

Livelihood Priorities and Strategies

In response, LIFT identified several priorities to guide PEPFAR's work in advancing PLHIV livelihoods in Namibia, specifically focusing on how to complement the Ministry of Health and Social Services' Food by Prescription program with more sustainable food security and livelihoods strategies. The priorities are oriented towards addressing the needs of the most vulnerable, such as PLHIV, and therefore include several strategic opportunities for livelihood provisioning, protection, and promotion. The recommended opportunities address the key constraints preventing PLHIV and other members of their households from improving their level of food security and economic well-being, avoiding activities that may place an undue physical, social, or psychological burden on PLHIV. The assessment identified short-term and long-term livelihood strategies and took into account gender dynamics, for example: how do inheritance rights, social and cultural norms and priorities such as child care affect women's participation in various opportunities.

• Provision of Temporary Livelihood Support:

Targeted temporary provisioning of livelihood support can assist PLHIV and affected household members to avoid harmful coping strategies, allowing them to avert the sale of productive assets and avoid a spiral of worsening household food insecurity. Recommended short-term interventions include Basic Income Grant (BIG) and, in the longer term, public works programming that generates employment opportunities for PLHIV or family members.

• Protection of Emerging Livelihoods:

PLHIV who have managed to achieve a minimum level of assets and stabilize their consumption patterns are often vulnerable to unexpected health or other shocks that may severely disrupt their livelihoods. In response, the focus should be on building systems to cope with risk, rather than maximizing profits. Such systems may include building assets, managing cash flow, and diversifying income streams. In the case of Namibia, the assessment team identified savings mobilization and provision of support for legal access and protection within existing projects as two recommended short-term strategies to build safety nets and assets. In the long-term, both micro-insurance and legal reforms are priorities, but will require considerable investment.

• Promotion of Enduring Livelihood Opportunities:

PLHIV with productive assets and access to safety nets have a greater ability to pursue income growth strategies. Given the diversity of PLHIV and their livelihood strategies in Namibia, LIFT identified both urban and rural priorities for income growth that would leverage key market opportunities. In urban areas, LIFT identified skills building as a critical priority in sub-sectors requiring skill sets not adequately available at present, but within reach of PLHIV and their families. These include tourism, craft production, and sales. In rural areas, LIFT found it essential to focus on improving agricultural livelihoods, recognizing the critical role that agriculture plays as a source of nutrition and income for many PLHIV, especially in the north-central and northeast. Priority sub-sectors included small animal husbandry and vegetable production, and in the long-term, conservation agriculture to improve mahangu yields and cultivation of indigenous natural products.

The full report is available online at www.microlinks.org/lift.





