Poverty, Food Security, Survival Activities and HIV and Aids in Swaziland

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Abstract Poor and food insecure people are especially vulnerable to HIV-infection as they are more likely to engage in high-risk behaviour such as commercial sex work, thus highly susceptible to HIV infection. This paper aims to contribute to the emerging discussion on food security and HIV and AIDS in Swaziland by interrogating the relationship between poverty, food security, survival activities and HIV and AIDS. Nsubane and Makhonza are the study sites, with Nsubane providing an acute example of a community or village in Swaziland ‘in crisis’ of food insecurity and poverty due to persistent droughts and crop failure, while Makhonza, on the other hand, provides a good example of an area that is food secure and less vulnerable to poverty. These two study sites were selected to determine and compare the survival activities undertaken in these two communities. Data was collected from 130 heads of households using household questionnaires, observation and two focus group discussions (of 15 participants) with the youth and elders of the communities (women and men separately). The study found that survival activities link food security and HIV and AIDS. It was found that in Nsubane (food insecure), most of the activities undertaken were associated with risks that expose the people to sexual abuse, activities such as selling of sexual favours, and getting money from lovers (multiple sexual partners). However, the study found that most of the activities undertaken in Makhonza (food secured) had few risks. The study concluded that poverty and food insecurity have a direct influence on people’s survival activities and push vulnerable households into engaging into risky activities in an attempt to secure food thus exposing them into getting infected with HIV and AIDS in the process. The study recommends that improving food security of rural households should be emphasized as among the strategies to fight with HIV and AIDS in Swaziland, especially in the poor areas. All legal and ethical considerations were adhered to during the research process. Participation was strictly voluntary, right to privacy was also observed.

Keywords: HIV and AID, poverty, survival activities, Swaziland


1. Introduction

Food security, which is the ability to secure an adequate daily supply of food that is affordable, nutritious and hygienic, has become a major development challenge of the 21st century and has thus, been part of the lexicon of international development since the establishment of the United Nations Food and Agriculture Organization (FAO) in 1945 [9]. Although remarkable progress has been made to address the state of food insecurity globally, majority of people still suffer severe food shortage resulting in a remarkable number of people losing their lives due to hunger and vulnerability to different diseases [9]. The latest FAO report indicates that about 805 million people are estimated to be chronically undernourished [10].

Developing countries, especially in the global south, are the most affected. Crush et al. [4] observe that household food security challenges in Southern Africa have intensified during the past decade. Several factors account for the observed rise in food insecurity in Africa which includes climate change and climatic extremes (floods and droughts), global food inflation, rapid population growth, land availability and uneven distribution, internal political conflicts, HIV and AIDS, poverty, biasness of state policies as well as gender bias or patriarchal attitudes in relation to the agricultural sector [4,11,29].

Poverty is a key player that exacerbates the rate of HIV infection, especially among women, as it leads the rural poor to engage in risky behaviors that expose them to HIV infection [3,25]. The same view is shared by Farmer et al. [8] who also observe that poverty aggravates other factors that heighten the susceptibility of women, especially in developing countries, Swaziland not an exception [19]. A remarkable proportion of the poor are rural dwellers and rely almost exclusively on agriculture (major source of livelihood) which is currently threatened by climatic extremes and HIV and AIDS, among other factors [18].

Levels of poverty in the country vary from one agro-ecological region to the next, with the Lowveld region being the most affected due to persistent droughts. The impact of poverty in Swaziland is experienced by women more than men as most women in the country are not employed but live as housewives as opposed to their counterparts [17]. According to the National Vulnerability
Assessment Committee [NVAC] [17], women in the country are subjected under pressure to seek alternative income which leads to vulnerability to HIV infection. Swaziland is among the most affected country with over 33 percent prevalence and HIV and AIDS infections, most of which are females with prevalence as high as 31 per cent compared to 20 per cent in men [30].

This paper aims to contribute to the emerging discussion on food security and HIV and AIDS in Swaziland by interrogating the relationship between rural household food security, poverty, survival activities and HIV and AIDS in Swaziland. Some studies have shown that poverty and HIV infection are in correlation [12,16,34] but none has established whether or not survival activities provide another link between food security and HIV and AIDS among poor households of the global south. Among the things this study seeks to establish is whether or not poverty and the resulting food insecurity push vulnerable households to embark on risky survival activities which put them into the danger of being infected with HIV and AIDS. Establishing this link in Swaziland remains crucial given the high rate of poverty, food insecurity and high prevalence of HIV and AIDS. The main objective of this study, therefore, is to determine whether poverty and food insecurity has a direct influence on people’s survival activities and their vulnerability to infection or re-infection of HIV/AIDS in Swaziland.

1.1. Poverty, HIV and AIDS and Food Security in Swaziland – A Brief Overview

Swaziland is amongst the countries hardest hit by the HIV pandemic in Sub-Saharan Africa. According to UNICEF [31], the HIV and AIDS prevalence rate amongst adults in Swaziland is 26.5 percent. The peak incidence of HIV infections is borne by women aged 18-19, 20-24 and 30-34 and men aged 30-34. The epidemic presents a gender disparity, with prevalence being higher in women compared to men [21]. It is currently estimated that of the approximately 1.1 million people of Swaziland, between 2000 - 210,000 people live with HIV and AIDS and between 4200 – 5200 people die due to AIDS related deaths per year [2,31].

Majority of the rural population in the country is poor, with almost two thirds of the national population living below the poverty datum line for basic goods and services [5,32], while 43 % live in extreme poverty and consume less than the required minimum in terms of caloric food energy and subsist on less than a US dollar per day [5,24,28]. Due to heavy reliance on rain fed agriculture, which is also currently threatened by climatic extremes (droughts & floods), majority of Swazis are at risk of food insecurity which is also fuelled by the high rates of unemployment and high income inequality [32].

The annual Vulnerability Assessment estimates that in 2015 Swaziland will face a food deficit of 17,700 mt of maize, and that approximately 6 percent of people are chronically food insecure. Staple food production (maize) has been declining considerably in the last two decades, and domestic production now falls far short of domestic consumption requirements. Maize, for example, fell from 88,000 to 62,000 tonnes in the previous year [18]. Vulnerability assessments by the Famine Early Warning System estimate that between May 2008 and April 2009, the number of food-insecure people was 238,625 or roughly 25 % of the national population [24].

1.2. The Link between Poverty, Food Security, Survival Strategies and HIV and AIDS

Food insecurity and HIV and AIDS are intertwined in a vicious cycle that heightens vulnerability to, and worsens the severity of each condition [1]. The pandemic is widespread in poor countries such as Swaziland and continues to worsen the state of food insecurity. Other factors that contribute to food insecurity include recurring droughts and floods and the loss of agricultural labour to HIV and AIDS and rural-urban migration [7,15,18,26,27]. Despite the major impacts of the epidemic being already felt at the household level in many countries, a lack of recognition of the socioeconomic determinants of HIV infection and the economic and social impacts of HIV and AIDS and their relationship with poverty persists in many developing countries, Swaziland included [35].

The impact of HIV and AIDS on food security includes short and long term effects. In the short and medium term, the epidemic impoverishes households through: loss of labour in agriculture and other livelihood activities, increases cost of health care and funerals, diminishes capacity to care for children and other vulnerable individuals and erosion of the asset base [23,33]. HIV and AIDS do not only reduce the availability of labour but also the knowledge which, in turn, affects household level access to food. It further reduces the inter-generational transfer of skills and knowledge of agriculture and livelihood.

Collins and Rau [6] argue that poverty is a key factor in leading to behaviors that expose people to risky of HIV infection. The impact of food insecurity, on its own, is not only seen in food shortage and nutritional status of the population involved, but, food insecurity negatively influences the moral lives of affected people resulting to new infection and faster progression from HIV to AIDS. This relationship is depicted in Figure 1 below which illustrate that in the poverty-HIV and AIDS cycle, poor people are especially vulnerable to HIV-infection as they are more likely to engage in high-risk behaviour such as commercial sex work, and high-risk behavior in turn makes people susceptible to HIV infection.

![Figure 1. Bi-directional relationship between HIV and AIDS and food security (Source: Save the Children and Oxfam [20])](Image 311x77 to 546x259)
Over the past years in Swaziland, droughts, poverty and high HIV and AIDS prevalence have contributed to chronic food insecurity and gradually weakening livelihoods. This resulted to Swaziland experiencing increasing reports of sexual exploitation and abuse, in particular rape. Conflicts over scarce resources increase during droughts putting women and girls at higher risks of experiencing sexual violence. Sexual intercourse in most cases is used as a commodity for food exchange, which can lead to physical injury, transmission of HIV and AIDS and other sexually-transmitted infections (STIs) and unwanted pregnancy ([18]: 390).

2. Methodology

2.1. Research Approach

The study employed the mixed method approach involving both the qualitative and quantitative techniques. The Save the Children and Oxfam [20] framework (Figure 1) on the bi-directional relationship between HIV and AIDS and food security was used to establish the relationship between poverty, food security, survival activities and HIV and AIDS. The variables considered in this study include, among others, food security status, survival activities, and demographic characteristics of households which included age of head of household, size in both selected study areas. The study had, as its target population, the heads of households, the youth and the elders in both communities of Nsubane located in the Lubombo region and Makhonza in the Middleveld region in Swaziland.

2.2. Selection of the Sample

For the purpose of primary data collection exercise, purposive sampling was used to select two study areas: Nsubane (in the Lubombo region of Swaziland) and Makhonza (in the Shiselweni region). Nsubane is a rural community or village in the Southern part of the kingdom of Swaziland located closest to the Lavumisa border. Nsubane is one of the poorest communities (villages) in Swaziland with a total of 71 households. The place receives the lowest rainfall in the country and is prone to drought and food insecurity and comprise of a large number of unskilled people who work as laborers due to poor education background and high rate of unemployment. Most of the people in the areas have stopped practicing agriculture due to persistent crop failure and some keep livestock which also die due to droughts. Makhonza, on the other hand, is a community with a total of 59 households according to the Central Statistics Office [5]. The area receives good rainfall, and produces most of the food consumed in Swaziland. Most of the people in Makhonza are educated and wage employed and are food secure.

The total population was studied in Nsubane and Makhonza as they had 71 and 59 households, respectively making a total of 130 households thus making it unnecessary to sample.

2.3. Methods of Data Collection

Different methods of data collection were used in an attempt to get the useful information need by the study. Questionnaires (with both open and closed ended questions) were used and directed to heads of households to gather information on demographic characteristics of household, economic status and food security status among other things. Observation was also used to supplement data collected through questionnaire, especially information that the respondents were not willing to expose, such as the food availability, nutritional status and level of poverty of their households. This method of data collection, as an appropriate method for studying behavior, enabled the researcher to study the targeted population in their natural setting and was very useful to check against participants’ subjective reporting of what they believe and to gain understanding of the physical, social, cultural, and economic contexts in which participants live.

Due to the sensitive nature of the study, focus group discussions (with the youth and community elders, separately) were conducted to solicit information on types and nature of survival activities that people of the areas under study engage into as a means to secure food. Such information includes the risks involved in these activities. Secondary data was also used to provide a conceptual framework and scholarly background to the study and to furnish the researcher with knowledge and understanding of the connections between HIV and AIDS, food security and survival activities.

2.4. Ethical Considerations

Considering that the study required personal data collection, certain ethical considerations were taken into account before the commencement of fieldwork to ensure that participants were protected from potential harm. The researcher requested for permission to conduct the research in the selected study areas and explaining the contents and intention of the study to the community authorities. Participants were fully informed of what the research was about, its desired outcomes and what it required of them before their input was solicited. Respondents were given an information letter and a consent form which they signed after reading its contents. The informed consent form assured participants that their participation in the research was voluntary with no form of coercion and that participants reserved the right to withdraw from the research at any stage and for any reason whatsoever. Right to privacy was observed through protecting the identity of participants in the research. Issues of confidentiality and anonymity was also observed in the research to give participants confidence to provide research data truthfully without fear. The gathered data was reported without any alterations and a true reflection of the findings.

2.5. Data Analysis and Presentation

In this study, analysis allowed for greater attention to be paid on the survival activities undertaken by people who are poor and food insecure and those who are self-sufficient and food secure. Therefore, the central idea behind the whole study was to determine whether poverty and food insecurity has a direct influence on people’s survival activities and infection or re-infection of HIV and AIDS in Swaziland. Qualitative data generated was processed and analyzed using qualitative techniques and
inertial statistics was used. Qualitative approaches entailed employing a thematic ordering and systematization of the information generated. For quantitative data, inferential statistics was used. Data was coded (SPSS) and frequencies and cross tabulations were done to find relationships amongst variables.

Data was coded (SPSS) and frequencies and cross tabulations were done to find relationships amongst variables. The researcher compared and contrasted the responses on the types of survival activities undertaken by the people from these different areas (Nsubane and Makhonza) to find out if the survival activities differ with respect to the prevailing conditions in the areas. The results of the study were presented using graphical techniques such as bar graphs, pie charts and frequency tables, depending on the nature of the data. A form of narration was also used to supplement the presented data.

3. Results and Discussion

Although the objective of the study is to determine whether poverty and food insecurity has a direct influence on people’s survival activities and their vulnerability to infection or re-infection of HIV/AIDS in Swaziland, it was essential for the study to begin by determining the levels of poverty and food insecurity in the study areas. This was done by considering some of the variables considered in measuring the level of poverty in a given area. According to Moser, current understandings of poverty places considerable emphasis on the ownership or access to that can be put to productive use as the building block by which the poor can construct their own route out of poverty. The socio-economic conditions of the two communities were therefore analyzed to include: literacy rate, employment status, land ownership, the nature of houses, accessibility, nature of roads, mode of transport used, source of energy used, water supply, Number of livestock owned, number of chickens owned, types of crops grown and quantities produced, food self-sufficiency, means used by households heads to secure food and lastly, signs of deprivation.

3.1. Poverty and Food Insecurity in Nsubane and Makhonza Communities

Based on all indicators covered in this study, Nsubane is seen to be poor and more vulnerable to food insecurity and Makhonza, on the other hand is less vulnerable to poverty and food secure. The level of poverty in Nsubane was reflected, for example, on the nature of houses and building material used by majority (62%) which is mainly stick and mud. Majority of the people in the community have never been to school (55%) and many are not employed (63%). Very few could afford electricity and majority (95.8%) used fire wood as a source of fuel. Due to the ecological disadvantages of the place (drought prone area) and land shortage, very few (8%) engaged in crop production. An analysis of food self-sufficiency shows that Nsubane is not food self-sufficient as very few (5.6%) had sufficient food at the time of the survey and more than half (50.7%) of the Nsubane people survive on food aid. Even those who own livestock (52.1%), majority of them (87.3%) own less than ten cattle and the area is faced with a serious problem of stock theft. This makes the people in the area more vulnerable to poverty as they have little or nothing to sell in times of economic difficulties and food shortage.

Makhonza, on the other hand, is less vulnerable to poverty and more food secure due to her ecological advantage which promotes crop production. Every household in Makhonza owned land and engaged in crop production which also provides a source of income even for the few (35%) unemployed residents. Majority (93.2%) in the area are food-self-sufficient as majority (54.2%) manage to produce at least ten (50kg) bags of maize, the staple food of Swaziland. The economic condition of Makhonza is better compared to Nsubane. For example, a larger proportion (42%) uses concrete and bricks and some (10%) afford bricks and tiles. A remarkable number (40.7%) afford electricity, which reflects the economic status of the households. Majority of those who own livestock (35.6%) own more than ten cattle and very few own no cattle. The number of cattle owned in Swaziland is crucial in the economy of a household and they are sold in times of severe food shortage.

From what has been analyzed and discussed so far, one may conclude that Nsubane stands as an example of a poor and more vulnerable community to food insecurity. This conclusion is supported by Frank and Ntengwa [13] who state that poor people possess little or no land, little or no cattle, little or no formal education and are characterized by selling labour to others. This is what characterizes the Nsubane community.

3.2. Survival Activities Undertaken by the Communities

An analysis of survival activities undertaken in both communities indicates that in Nsubane majority (51%) of respondents are not involved in any activity (Figure 2). The most undertaken activity is transporting goods for people (11.2%). Few (8.2%), than expected, engage in crop farming. About (7.1%) sell livestock and others (6.3%) sell sexual favours as a survival activity with about (5.1%) getting money from lovers. About (4.2%) survive by selling fat cakes (Marketing) while others (2%) get money by stealing. It is important to mention also that at Nsubane some (2%) survive on fetching and selling firewood.

Figure 2. Survival Activities undertaken at Nsubane
While crop farming is the major source of livelihood for rural Swaziland, fewer than expected (8.2%) were found to engage in crop farming. Some of the reasons that were gathered from the respondents in relation to the small number of people who engage in crop farming are that most people in the area have small portions of land to survive on while others (4.2%) do not have cultivation land at all. Most of the cultivation land in the area was changed into a private farm and more than half of the population in Nsubane own less than one hectare of land. Another reason is that of climatic extremes. The area is drought prone, and it was gathered that the people are discouraged by the persistent crop failure in the area resulting to poor yield especially in maize.

Another survival activity undertaken by Nsubane people is marketing. This activity was found to be undertaken by women. It is important to point out that most young people in this area do not go to school because their parents do not afford the school fees, for that reason, the out-of-school young girls join their parents and sell food staffs such as fat cakes, ice blocks, sweets and fish. In Nsubane it was found that other people depend on their lovers for financial assistance. This survival activity was found to be undertaken mostly by females in the area. The respondents mentioned that the females engage in love relationship with more than one love partners (multiple sexual partners) to increase chances of getting money in times of need. It was also gathered that even married women do engage in this activity even though the women did not want to come out clearly but only mentioned that they sometimes get tempted too to engage in extra love affair but also stated that very few do it since they are afraid their husbands might discover it. The results show that in Nsubane others sell sexual favours as a survival strategy. This activity was found to be undertaken by girls, especially out-of-school girls. In a focus group discussion (with elders of the community), it transpired that the girls sleep during the day and wake up in the afternoon and go to ‘work’ at Lavumisa border gate and carry them on their shoulders to the roadside where they then use donkeys to take them to the customers’ place. It is important also to state that there are those people who were found to undertake no activity at all in Nsubane community.

In Makhonza (Figure 3), it was found that majority (51.9%) undertake no activity. Majority (32.2%) engages in crop farming and the second most attended activity (4.9%) is that of ploughing for people. 3.7 percent get money from lovers. Few (1.2%) engage in Marketing and few (1.2%) engage in vegetable growing.

As already shown above, majority of the people in Makhonza (32.2%) engage in crop farming. It was discovered that the people are encouraged by the good yield due to the favourable climatic conditions which support crop production, maize in particular. Most households in the community get enough yields to sustain them until the next farming season. The respondents stated that almost every year most households sell surplus since most households harvest at least ten (50kg) bags of maize up to eighty and sometimes hundreds bags of maize. Food is not an issue in Makhonza.

Marketing was also found to be undertaken in Makhonza, although by few women. It is important to state that unlike in Nsubane, in Makhonza marketing was found to be done mostly by women but not young girls since most young people in the community go to school. However, it was gathered that during weekends and holidays, young girls help their parents in the markets. Other people in Makhonza survive by get money from
lovers. What came out is that girls are the most active people in this activity. It is important, however, to mention that the respondents stated that most of the girls who get money from lovers in Makhonza are those who are not going to school and have children with their lovers. In a focus group discussion (with girls), the respondents stated that they cannot deny that they do get money from their lovers but it is not that much a survival strategy in the true sense of the word, but the money is needed to cater for the children’s needs even though they are the ones who decide what to purchase with that money as ‘parents’ and do benefit from the money. What is worth mentioning also is that in Makhonza the respondents pointed out that most of the girls probable do not engage in multiple sexual partners except for those few, if any, who have bad morals.

In Makhonza, others earn a living by sewing. Only females undertake this activity. There are those who survive by weeding other people’s fields and get money, while others make mats. Women are the partakers in these activities. In Makhonza it was found that other people, especially males, plough for other people as a means of survival. This activity was found to be one of the most undertaken in the community. The results show that in Makhonza, there are those who grow vegetables as a survival strategy, however, only a smaller proportion (1.2%) engage in vegetable production as a survival strategy, however, only a smaller proportion (1.2%) engage in vegetable production as a survival strategy. Most people buy vegetables in Nhlangano since most people work there or at least pass by Nhlangano every day they go to work. There are those who were found to undertake no activity in Makhonza.

3.3. Comparison of the Survival Activities undertaken - Nsubane and Makhonza

It was essential for the study to compare the survival activities undertaken in these communities to determine if there is a significant difference between the activities (Figure 4). A comparison of the survival activities undertaken in the two communities show that in both communities, about half of the household heads were not involved in any activity at all. An analysis of the types of survival activities undertaken shows that Makhonza is more involved in crop farming and ploughing for people. On the other hand, Nsubane is more on carrying people’s goods, sell livestock and sell sexual favours. There are activities that were found to be undertaken in both communities, activities such as crop farming, marketing, getting money from lovers and sawing. However, it is important to mention that the rate of engagement in these activities is not the same. For example, in Makhonza more people (28% more) engage in crop farming compared to Nsubane (Figure 4).

Likewise, Nsubane engage more (approximately three times more) in marketing than Makhonza. Even in the issue of getting money from lovers, Nsubane engages more (1.4% more) in this activity than Makhonza. It is also worth noting that activities such as selling of sexual favours, looking after cattle, fetching of firewood, stealing, transporting goods, selling of livestock, and cutting of logs were found to be undertaken only in Nsubane. Makhonza was also found to undertake activities that were not undertaken in Nsubane, activities such as sawing, making of mats, ploughing for people and growing of vegetables.

Figure 4. Survival Activities undertaken – Nsubane and Makhonza

3.4. Survival Activities and Risks Involved – Nsubane and Makhonza

This sub-section of the study presents the survival activities that were found to be undertaken in the communities, Nsubane and Makhonza, and further indicates whether or not there was any risk associated with the activities outlined. The tables below (Table 1 & Table 2) show the activities undertaken in Nsubane and indicate if there is any risk involved.

<table>
<thead>
<tr>
<th>Table 1. Survival Activities Undertaken and Risk-Nsubane</th>
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<tr>
<td><strong>Activities Undertaken</strong></td>
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<tr>
<td>Crop farming</td>
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<tr>
<td>Marketing</td>
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<tr>
<td>Get money from lovers</td>
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<tr>
<td>Sell sexual favours</td>
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<tr>
<td>Look after cattle</td>
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<tr>
<td>Fetch firewood</td>
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<tr>
<td>Stealing</td>
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<tr>
<td>Transport/carry goods</td>
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<tr>
<td>Sell livestock</td>
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<tr>
<td>Sewing</td>
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<td>Cut logs and sell</td>
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<table>
<thead>
<tr>
<th>Table 2. Survival Activities Undertaken and Risk Involved - Makhonza</th>
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<tr>
<td><strong>Activities Undertaken</strong></td>
</tr>
<tr>
<td>Crop farming</td>
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<tr>
<td>Get money from lovers</td>
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<td>Sewing</td>
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<tr>
<td>Weeding</td>
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<td>Make mats</td>
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<tr>
<td>Plough for people</td>
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<tr>
<td>Grow vegetables</td>
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</table>

The results (Table 1) show that most of the activities undertaken in Nsubane community are risky. Marketing, getting money from lover, selling sexual favours, fetching firewood, stealing, and transporting goods were found to
be risky. Out of the eleven activities, only five have no risks associated with them. While in Makhonza (Table 2) among the eight activities undertaken, only one have risks associated with it. Only those who get money from lovers face some risks. It is also important to note that marketing was found to have risks in Nsubane while in Makhonza it is free of risks.

A close analysis of the activities undertaken in the two communities show that there is indeed a significant difference between the survival activities undertaken by Nsubane people and those undertaken by people in Makhonza community. Most of the activities undertaken in Nsubane are risky compared to those undertaken by the people in Makhonza community (Table 1 and Table 2). It was discovered that among the eleven survival activities undertaken in Nsubane community, only five were not associated with any risk. The six activities undertaken in the community have risk associated with them (Table 1).

On the other hand, in Makhonza only one survival strategy was found to be risky, among the eight survival activities undertaken in the community (Table 2). Only those people who get money from lovers were found to face risk of sexual favours in the community. The respondents (girls) stated that they are exposed to this risk because their lovers sometimes ask for sexual favours and threaten to stop supporting the children if they (girls) refuse. The extent of risk in Makhonza is not much, compared to Nsubane who engages more in these risky survival activities. The prevailing conditions in Nsubane are so serious that the residents are so vulnerable to risks faced by survival activities. The people in the community are collectively experience by the risks associated with them. Only those who get money from lovers were found to have risks in Nsubane while in Makhonza it is free of risks.

Evidence shows that the people of Nsubane are more exposed to risks than those in Makhonza community. The results (Table 1) show clearly that the people who survive by selling firewood and those who transport goods in Nsubane community are also exposed to risks. The respondents stated that the people who survive by selling firewood are mainly females. The young men and sometimes old men have developed a tendency of waiting for the females in the bush and ask if they can help them collect the firewood and ask sexual favours in the process. Those who survive by transporting goods were said to face most of the risks experienced by the people in the community. All the possible risks experienced by the people in the community are collectively experience by the people who engage in goods transportation. The people in the area stated that sometimes they transport goods from the bus stop and cross the border only to get abused in the forests, either by the person they transport goods for or others on the way back home. Since the community is located at the foot of the mountain, these people get abused in the forests, where they are asked sexual favours; others get raped when they refuse and sometimes they are assaulted to the extent that others get killed in the process.

The elders in the community said they are confused what to do since they get reports of people who are raped and sometimes killed in the forest as they try some means to get money at least to buy food to support their families. The respondents pointed out that this is a serious problem faced by the community since most people in the area survive by this activity thus manage to buy food for their families. This shows the great challenge faced by the people in the community and the extent to which these people are exposed to risks in the area. What was gathered and also observed during field work is that the people of Nsubane use donkeys to transport the goods so that they transport more loads to get a better sum of money for food. It was found that stealing was another survival strategy used mainly by young people (boys) in the community and was equally risky. The people who undertake this activity face the risk of being arrested by police and sometimes killed in the process of stealing. These people steal items and cross the border to South Africa to sell the stolen items. Respondents during the focus group discussion (with men) stated that theft is one of the serious problems faced by the people in the community. The people stated that it is no longer a surprise to wake up one morning and find that all the cattle are stolen. The respondents further stated that most people in the area are discouraged to keep cattle and goats due to the high risk of theft and prefer to keep donkeys to use when cultivating and transporting goods since donkeys are not stolen; even if they can be stolen they are cheaper to purchase.

Nsubane is indeed facing a serious challenge as far as risky survival activities are concerned. Selling of sexual favours was found to be another survival activity associated with many risks in Nsubane community. The people who engage in this survival activity face risks of sexual favours, risks of being raped and risks of being killed. According to the respondents, many families in Nsubane survive by this activity. The extent and impact of this survival strategy in the community is so great that it
has not only created division in the households but has also caused confusion to the leaders in the community. In a focus group discussion (with the leaders), it was gathered that selling sexual favours is one of the main activities through which many households in Nsubane survive. One respondent stated that the issue of selling sexual favours in the community have become so serious that the girls in the community sleep during the day and wake up around six in the afternoon and go for ‘work’ and come back in the morning. The respondents said that the young people (girls) do this activity (selling sexual favours) with soldiers at the border line and others at Lavumisa border gate with truck drivers, and in rare instances with the soldiers at the camping site. From the responses gathered in the community, one is tempted to conclude that the residents of Nsubane are indeed facing a challenge as a community. What is more serious is that the people in the area, including the leaders of the community seem to have reached a dead-end and seem to have no way out given the prevailing food situation and poor standard of living which the residents say increase the rate of engagement into this risky survival strategy. This is in line with Hallman’s observation that money influence African girls, especially young girls not to suggest condom use [14]. This, therefore, has been the case in Nsubane and had led to high death rate, especially of young girls in the community compared to Makhonza.

3.5. Death Trends

The study found it essential to collect data on death trends/occurrences over a period of ten years. This was meant to establish if there was any significant difference in the death rate and causes of deaths between the two communities. The findings are presented in Table 3 below to show the frequency and percentage. Figure 5 shows the same results for purposes of comparison.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Nsubane</th>
<th>Makhonza</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-5</td>
<td>21</td>
<td>8</td>
</tr>
<tr>
<td>5-15</td>
<td>14</td>
<td>16</td>
</tr>
<tr>
<td>15-35</td>
<td>64</td>
<td>30</td>
</tr>
<tr>
<td>35-55</td>
<td>38</td>
<td>28</td>
</tr>
<tr>
<td>55+</td>
<td>16</td>
<td>19</td>
</tr>
<tr>
<td>Total</td>
<td>153</td>
<td>101</td>
</tr>
</tbody>
</table>

Figure 5. Death trends by age group over the past 10 years - Nsubane and Makhonza

The results (Figure 5) show that in Nsubane, majority (41.8%) that died are in the age group 15-35 years, followed by the age group 35-55 years which recorded 24.8 percent. Very few (9.2%) died in the age group 5-15 years and only 10 percent died in the age group 55 and above. In Makhonza few (29.7%) died in the age group 15-35, as compared to Nsubane. More (27.7%) people died in the age group 35-55 as compared to Nsubane and
more (18.8%) died in the age group 55 and above. It is worth noting that the graph (Makhonza) shows a gentle curve, however, in Nsubane the curve peaks up in the age group 15-35 and slightly low in the age group 35-55 years.

![Figure 6. Causes of deaths](image)

### 3.6. Causes of Deaths

It was important to also establish the major causes of death in the two selected communities to determine whether they are HIV and AIDS related. The results (Figure 6) showed that majority (47.1%) of the people who died in Nsubane died of HIV and AIDS. Few (37.1%) as compared to Makhonza, died of other causes and (15.9%) were not known. On the other hand, very few (11.9%) were recorded to have died of HIV and AIDS as compared to Nsubane. Majority (79.2%) died of other causes, with only (8.9%) whose cause of death was not known.

![Figure 7. Causes of deaths by gender and age group over the Past 10 Years - Nsubane & Makhonza](image)

These who died with evidence of HIV and AIDS in their deaths were further analyzed separately by gender and age group to determine the gender and age group that recorded the highest number of deaths. It was established (Figure 7) that the most dying age group in Nsubane is 15-35 years with more females (79.5%) dying than males (65%). The age group 35-55 is the next which recorded the highest number of deaths. Also females were recorded to be the most dying (57.1%) compared to males (25%). In Makhonza, few died in the age group 15-35 as compared to Nsubane; females recorded the highest (33.3%) number of deaths while only few males (20%) died. Very few people died in the age group 35-55 as compared to Nsubane; however females still record the highest number (10%) than males (5.6%).

Analysis of death trends over the past ten years confirms that more people are dying in Nsubane than in Makhonza community (Table 3). What can be observed from the results is that more (153) people have died in Nsubane over the past ten years compared to few (101) people who died in Makhonza. It is to be noted that the graph (Makhonza) shows a gentle curve, however, the graph curve (Nsubane) peaks up in the age group 15-35 and is slightly low in the age group 35-55 years (Figure 5). This means that in Makhonza, the people die almost evenly across the different age groups unlike in Nsubane where the sexual active age group (15-35) seems to be the most dying group. For instance, Figure 5 shows that Nsubane recorded more (41.8%) people who died in the sexual active age group (15-35). There is a sudden decrease from 41.8 percent to 24.8 percent (difference of 17%) in the number of people who died in the age group 15-35 (more sexually active) and age group 35-55 (less sexually active) years. Even more interesting to note is that very few (10%) died among the old people (55+). In Makhonza, the results show a very small (2%) difference between the number of people who died in the sexually active age group 15-35 and age group 35-55 years. The small difference shows that in Makhonza the people die at an almost equal rate across the age groups while the big difference in Nsubane shows that there is high death rate in the sexually active age group compared to the less active age groups.

An analysis of the main causes of deaths in the two communities reflect that in Nsubane, majority (47.1%) of the people who have died over the past ten years died of HIV and AIDS related illnesses. Few died of other causes such as car accidents and suicides (Figure 6). In Makhonza, on the other hand, it was found that very few (11.9%) died of HIV and AIDS related illnesses compared to Nsubane. Most people in the community die of other causes of deaths. This can be interpreted to mean that in Nsubane, the survival strategies undertaken in the community have a great impact and contribute a lot to the rate of death in the community. HIV and AIDS related illnesses have become major killers in Nsubane community due to the risks of sexual favours associated with most of the survival strategies undertaken by the community. It is also important to note that Nsubane recorded the highest number of people who died in the sexually active age group (15-35) compared to Makhonza and most (79.5%) of them are females (Figure 7). An explanation to this difference can be that majority (71.4%) of the girls in Nsubane community were found to be in love relationship, especially in the age group 15-25 years. Very few (28.6%) were found single in this age group. In Makhonza, on the other hand, it was observed that majority (65%) females are single, only a few (35%) are in love relationships. The same pattern was also observed in the age group 15-35 years.

Worth noting, therefore is that the females in Nsubane community engage more in love relationship than the males in the community. For instance, in the age group 15-25 years more (71.4%) females were found to be in
love while very few (25%) males were found to be in love relationship in the same age group. This supports what was gathered in a focus group discussion (with boys) that the young girls of Nsubane engage more in love relationships with people outside the community to increase chances of getting money since most males in Nsubane are not financially stable. The level of engagement of young people in love affairs provide an explanation to the high number of females who have died over the past ten years in the community and majority of these people have died of HIV and AIDS related illnesses (Figure 6). Masuku [15] provides an explanation to this finding by pointing out that females in Swaziland are the most people who are affected by HIV and AIDS since they are also the most vulnerable group due to cultural beliefs and patriarchal attitudes. In a focus group discussion (with elders) the respondents explained that the reason girls die of HIV and AIDS related illnesses in such an alarming rate in the community is that in most households girls are the bread winners, that is, they are the source of income. They get the money through selling sexual favours and/or through getting money from lovers thus they are exposed to the high risk of getting infected by HIV and AIDS. One respondent was quoted saying: “In those homesteads (respondent pointing at three homesteads) the girls there are known to be the one who support their families through selling sexual favours. They buy food and pay school fees using that money. In that one (pointing have been involved in this activity and are HIV and AIDS. One respondent was quoted saying: “In those homesteads (respondent pointing at three homesteads) the girls there are known to be the one who support their families through selling sexual favours. They buy food and pay school fees using that money. In that one (pointing at yet another homestead) two girls died last month (November), they were HIV positive and were also known in the community to be among those who sell sexual favours for food and money to support their families…”

The elders in the community sadly stated that the main cause of this immoral behaviour is that most families in Nsubane do not afford to provide the youth with basic needs, not as a form of punishment, but because even the households heads do not have anything to provide. Men (in a focus group) admitted that they fail to provide for their families and to cater for their children’s needs since they do not have a reliable source of income because most of them are not employed but survive on piece jobs such as transporting goods. One respondent was quoted saying “we as heads of households feel responsible for our children’s behavior because we are supposed to provide for our families, but we fail because we have nothing to offer to them, so when our children engage into such activities we become tongue-tied. If we say they must stop it, what are we really saying? Are we saying we are going to provide for them? Where are we going to get the money to cater for their needs?” The respondent further stated that as heads of households they feel embarrassed and feel their status as heads is being lowered by the unconducive environment they live in and feel like they do not deserve to be addressed as heads anymore since they feel it is ironical to them given that they are heads by title but not by actions or responsibility.

The elders of the community (Nsubane) stated that as elders they are in a fix and are completely confused what to do about the prevailing situation in the area, mostly because they see that the young people (girls) are pushed by hunger and poverty to such activities. In support of the elders’ response Whiteside [35] states that poverty and inequality influence young people’s behaviour and increases the likelihood that poor women will be forced into commercial sex as a survival strategy. The elders went on to point out that even those who have been known to be morally upright had changed and are joining the group (sell sexual favours). The leaders made mention of the fact that as a community, they are really faced with a challenge since even growing crops is not a solution given the serious land shortage and the drought prevalence that has characterized the area. The elders added that most households in Nsubane fail to produce enough food to sustain them till the next farming season. According to the people in the area, this (prevailing situation) is the main cause of the sudden immoral behaviour among the young people. One respondent, among the elders, recalled what was happening in the past. He stated that even though the place is characterized by a high rate of unemployment, but they were able to survive on farming and were able to feed their families and had never encountered this problem (immoral behaviour) they are now faced with. He further stated that their children have lived right while the place was productive, and during the time when they had enough land for crop production. They stated that they know that most of their children have good moral, so they do not blame this sudden immoral behavior to anything other than poverty and hunger.

Based on the impact of these risky survival strategies in the community, the elders of Nsubane stated that these activities, especially selling sexual favours, have accelerated the rate of HIV and AIDS infection in the community. The respondents stated that young people, girls in particular, are dying like ants. Females are the most suffering due to the fact that they are also the most vulnerable to these risky survival strategies probable due to their position in society and cultural beliefs. This is in line with Hallman [14] who observed that due to high rate of joblessness in developing countries, young women often find themselves relying on their sexual partners for economic support and consequently get exposed to risks of abuse and HIV and AIDS infection. In relation to Hallman’s observation, Shumba [22] points out that it is a fact that the very same factors that fuel the increase in food insecurity promotes the resort to risky coping strategies including migration to high prevalence area for alternative livelihoods and income sources, prostitution and casual sex which in turn fuel the spread of the epidemic.

Though it was not part of the study’s objectives to relate the influence religion has on the people’s behaviour in Nsubane community, it is found worth by the study to add that it was found that religion has no much influence on the people’s behaviour in Nsubane community. In most communities in Swaziland, religion especially Christianity, shape up most people’s moral behaviour. However, in Nsubane it was gathered that religion has very little or no influence on the moral behaviour of the people due to the prevailing economic condition in the area. What was gathered in a focus group discussion with the different groups in the community is that there is no difference between those who subscribe to the Christian religion and those who do not subscribe to any religious belief at all. The respondents stated that even if one can live upright in another place, immediately s/he comes to Nsubane, s/he is
subject to change for the worse due to the pressure the young people are subjected to in community due to the economic challenges in the area. This shows the extent at which poverty and food insecurity can push vulnerable individuals to risky behaviours and in the process increase their likelihood of getting infected with HIV thus spreading the HIV pandemic.

4. Conclusion

Based on the indicators covered in this study, Nsubane is seen to be a poor community, which is prone to food insecurity compared to Makhonza community. The people of Nsubane engage more in survival activities which were too risky such as selling sexual favours, getting money from lovers (multiple sexual partners) and goods transportation, compared to those in Makhonza who were more food secure. Such activities put these people into more risk of being raped, and risks of unprotected sex (selling sexual favours) which increases their chances of infection or re-infection of HIV and AIDS. On the other hand, people in Makhonza (self-sufficient and are food secured area) engage less in risky activities such as getting money from lovers. As such, few people were found to have died of HIV and AIDS related illnesses in Makhonza compared to Nsubane. It can rightly be concluded, therefore, that poverty and food insecurity has a direct influence on people’s survival activities and infection or re-infection of HIV and AIDS in Swaziland, as observed by the study. In line with this conclusion, Collins and Rau (2005) state that poverty and food insecurity are a key factor in leading to risky behaviors that expose people to high risk of HIV infection as they seek alternative ways of generation income.

Based on the study findings, it is recommended that job creation and improving food security of rural households should be emphasized as among the strategies to fight with HIV and AIDS in developing countries, especially in the poor rural areas.

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