Some Food for Thought

how rural livelihoods and poverty affect the health of communities in the Global South - and vice-versa

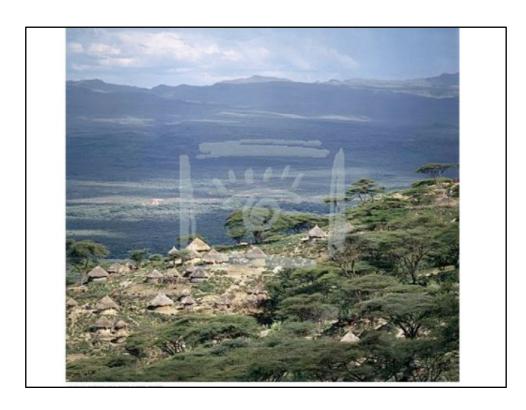
AutumnFest - Ottery St. Mary

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The Sophia Forum
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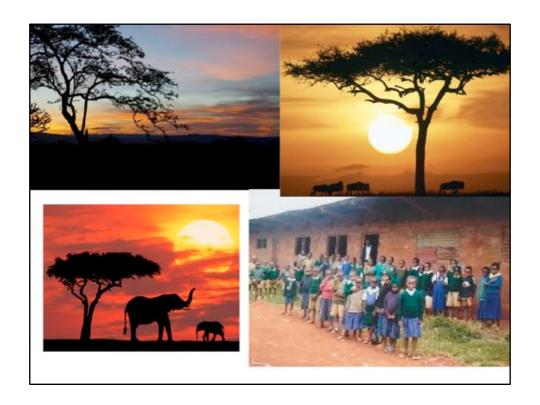
I grew up in London – a capital city which has, I think, more public parks than any other in the world. I knew the names of a few flowers, but I didn't really know the seasons or notice their passing particularly, other than through having warm, sunny dry days or cold, cloudy wet days. That was really the sum of my awareness of the seasons.



Then when I was 21 I found myself on the Western wall of the Great Rift Valley in Northern Kenya, with extraordinary expanses of sky, landscape, and beauty. I made my way down into this area on a precipitous track by motorbike, 5 hours from Eldoret, the nearest town, and tried not to look over the edge too often at the vehicles which had plummeted over the side in the past. In this landscape there were no straight lines, apart from the few modern buildings on the valley floor. I lived, like most others, in a mud hut with a thatched roof, no running water, no electricity, no light, except for candles which melted in the 36 degrees heat before they had even been lit. I had mice and rats doing circuit training round the top of the walls of my hut and the odd scorpion scuttled across the floor of my hut, until pounced upon and dispatched by my trusty cat.



Around me on the hillside and the valley everyone was hard at work – not sitting around like me. Women were fetching and carrying huge bundles of firewood from the valley floor up to their huts on the hillside, out of reach from mosquitoes, for their light and cooking. I couldn't even begin to lift these bundles, let alone carry them anywhere. They would also be tending the crops, hoeing or weeding, with babies wrapped round their backs. Men would get involved in clearing new land for planting or in commercial nurseries like this one; and sometimes I would sit at night in a "chai hoteli" with men sorting out Kenyan politics, while the women cared for their children back up the mountainside.



I used to sit and watch the sun, clouds, moon and landscape for hours, and wonder aloud at their beauty. However people there would ask me what I meant. It's like living in Devon here in the UK – you don't really notice its beauty until someone comes to visit you and remind you how special it is. The government primary schools were full of children eager to learn, but with barely trained teachers, one of whom at least was getting his students pregnant, and next to nothing in the way of exercise or text books or pencils.



When the rains came at the end of the long hot dusty dry season, it felt like three festivals had come all at once. The fresh scent of rain on the air, the deluge, the release from the relentless heat, suddenly not having to walk for miles for water, were all amazing. And the flying termites which suddenly filled the air are a much welcomed and needed protein-rich delicacy which everyone loves. I only ate the fried rather than the fresh variety, I must confess. They taste like delicious prawns.



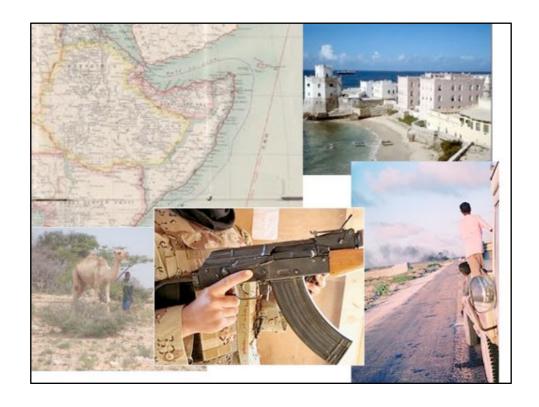
This boost of protein is extremely timely, because when the rains arrive this is when all the hardest agricultural labour begins in earnest – clearing and planting for the new crops. Yet, as I learnt during my 18 months living there, many people even in 1980 were growing the modern maize and the traditional finger millet crop in just the right proportions to brew beer, which they could then sell to their neighbours, in order to raise money to pay for their government taxes. This brewing was normally done by women, as a means to raise a cash income which was otherwise very hard for them to find (see Susser 2009). However it meant that, although the fields looked flourishing with crops, children were in fact going hungry in households, because the crops were being turned into beer as cash crops, rather being used as subsistence crops to feed them.



In fact, whilst I lived in this community between 1980 and 1983, I could already see the advent of adult-onset diabetes in this community as well as the presence of protein-energy malnutrition amongst children. The few women at that time who had husbands who had gone off to find paid work on tea plantations or in factories started to be noticeable because they would abandon working in the fields and living in the mud huts on the mountainside, in preference to moving down to the valley floor, where they could live in a newly erected hut with a tin roof, with a latrine and a little kitchen garden around their plot. Instead of growing the traditional richly nutritious bulrush and finger millets, they would now just eat maize – and would sometimes even buy maizemeal ready-ground, rather than growing it themselves. The odd loaf of white bread started to appear in the one shop, for sale as a prestige item alongside the coke and fanta and white sugar. So the women, released from their daily hard manual labour and on this new status-rich but nutrient-starved diet would balloon in size and develop adult-onset diabetes. Meanwhile, some children who were living both on the mountainside and in the valley were developing the telltale large stomachs and spindly limbs of protein-energy malnutrition. However the local government health care centre was barely functioning and only a couple of local foreign mission health centres were really used for health care – if people felt they needed health care desperately. Food and nutrition issues were certainly on no-one's health care agenda then.



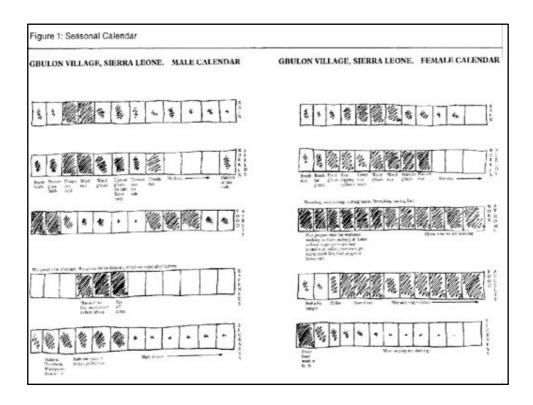
After completing my PhD, I then went to live and work in Somalia for 5 years, in the 1980s. Here I learnt about the lives and living conditions of pastoral communities and their huge dependency on their livestock. Even though the landscape looked so barren, it worked well for camels, sheep and goats and the communities who lived with them. Somali pastoral huts are cool and airy inside, with beautifully, richly patterned woven mats roped together over a framework of flexible bent branches. Surrounded by a fence of thorn, which protects them at night from hyenas or other predators, women and children stay here with their sheep and goat, whilst the men and male youth travel further afield with the camels in search of grazing for them. Pastoralists move with the rains, packing up these huts on the backs of the camels and ranging far and wide over traditional grazing grounds. Somalis said to us "if our animals are healthy we are healthy" and that most certainly seemed to be the case when we first talked with them in 1984.



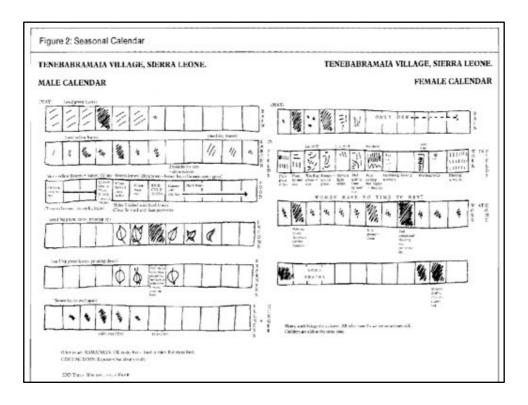
However climate change and war have brought with them different stories over the past 30 years. I moved on from Somalia in 1989 when the civil war of the North of Somalia first reached Mogadishu, when Western-backed Siad Barre's government tanks fired on an innocent demonstration in the city centre. Meanwhile the Sovietbacked Ethiopian regime of Mengistu was collapsing, along with the Berlin Wall and the whole of the Horn of Africa was turning into a disaster zone, as the demise of the cold war also left its mark on the lands of these dictators. With the collapse of any sense of law and order, traditional or modern, caches of western-manufactured arms across the Horn were broken into and Kalashnikovs became the weapon of choice and status for the young male nomads, completely replacing their traditional spears. Thus skirmishes over camel rustling, scare water sources or grazing areas which had traditionally resulted in an injury or death of one or two at most, turned into largescale killing sprees, with consequent mass reprisals. And so the whole of the Horn of Africa erupted into civil war. Meanwhile, as the Ethiopian soldiers of Mengistu's army, unpaid for months, began to walk back to their homes from the Somali frontline across the length and breadth of Ehiopia, they took HIV with them and shared it along the way. So the mass epidemic of HIV in Ethiopia began.



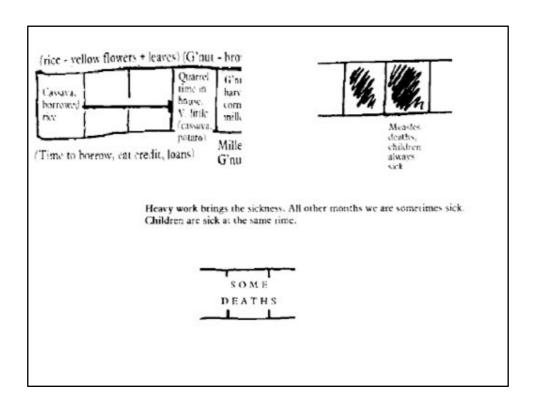
And what of climate change? I first began to hear of climate change in late 1990 in Northern Ghana, when elderly men pointed to the desert around them and explained how it had all be forests when they were young – and that the seasons had gone haywire in their lifetimes. In rural Malawi, in 1991, women told us how they now had to travel into the territory of the neighbouring community to fetch firewood because all the trees nearer to home were needed for tobacco curing by their men. They too talked of how the seasons were shifting. Around the continent, as the seasons have shifted, land has cracked up – or become inundated, water has become more scarce – or has flooded and firewood has become increasingly scarce. Animals have died en masse in the pastoral areas, thereby increasing the vulnerability of the people of wartorn areas like the Horn. And what of agricultural communities?



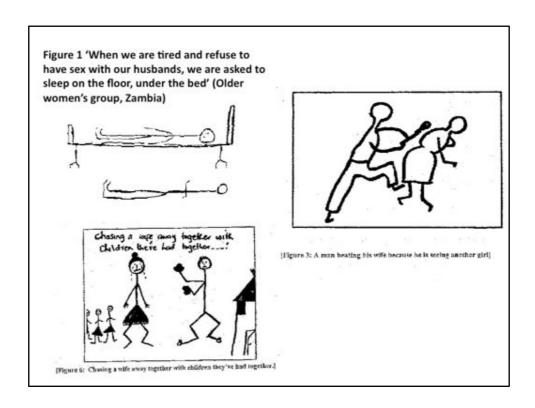
In this picture we can see some diagrams drawn by a group each of men and women in a community in Northern Sierra Leone, drawn in 1990, before the civil war that has also torn that country apart. These "seasonal calendars" as they are called, were drawn separately but simultaneously by the men and women in different parts of the village. They track the seasons over a year and compare what is happening in terms, for instance, of rainfall, work in the fields, food availability, expenditure, health and any other issues they want to include. The beauty of this technique is that no literacy is needed and people can just draw the diagrams with a stick in the earth, piling on leaves or stones into each square to show quantities. They can also comment on individual months. In this diagram we can see how, for instance, the women have included a line for work at home, describing how it never stops. They have talked about how they play, sing and dance once the harvest has arrived, they have paid off their debts and have food in their stomachs and grainstores. They describe how there is some sickness during the cold, rainy hungry season but how otherwise their health is good.



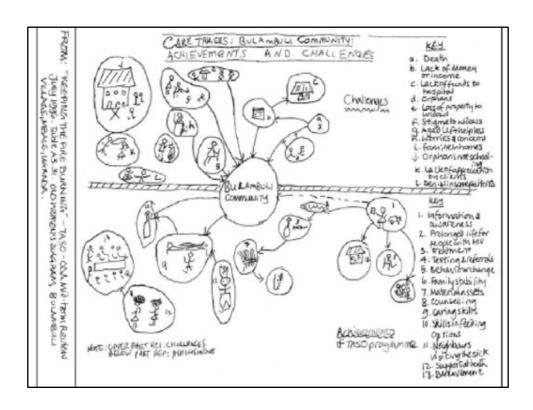
Compare those diagrams to these diagrams drawn by groups of men and women in a village a few miles away, which clearly had poorer soils and more poverty. In this diagram, there were even some deaths identified in the hungry season. The women said that their children were always sick and that women have no time to rest. There was no mention of singing and dancing in this community.



If we look even more closely at this diagram we can see what men were describing during the hungry season. They said they were having to borrow, and eat credit and loans. They also said this was the quarrel time in the house, when it was cold, wet and everyone was hungry. This I think is a crucial issue that we need to look at more carefully – the question of the inter-connectedness of food availability, workload and gender relations in househeholds.



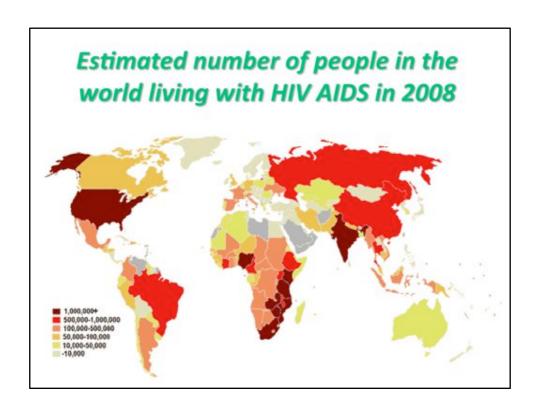
Here are some diagrams drawn by women in East and Southern Africa, indicating their perceptions regarding other causes and consequences of intimate partner violence. These include women's exhaustion, men feeling that somehow their wives are to blame if they have other girlfriends, and the effects of intimate partner violence not only on a woman but on children.



And those diagrams were all to do with issues which have been around for years, with no mention of HIV. What happens then when HIV comes into this equation? Here we have a diagram drawn by a group of older women in a community in Eastern Uganda. Now Uganda was always known as the bread basket of Africa, and Eastern Uganda was known as the breadbasket of Uganda. So it is extra disturbing to see from this diagram how these women in 1996 were identifying famine in their homes as one of their challenges (point I in the upper diagram). As they were drawing this diagram, the women explained to us that this was caused because their family members were sick and so the women had no time to weed the crops: and so the crops were being choked by these weeds and they had no harvest. These women also told us that they had never come together as a group before and that each of them had thought that she was alone and somehow to blame for this sickness and plight that had befallen her family. Fortunately, our being there enabled them to stand up in front of the rest of the community a couple of days later to present this diagram on a large flipchart. All were shocked into silence and the elders in that community announced that from then onwards all community members to join together to support one another to overcome this hidden famine in their midst.

WEALTH > HEALTH or HEALTH > WEALTH

So from these experiences and from those studies with seasonal calendars and other research in West Africa, I have learnt how either communities have enough wealth to have the occasional illness, but otherwise manage to keep sickness at bay and manageable; *or* there reaches a critical tipping point where ill-health becomes too much for a family and their livelihoods collapse. Given that we know now what we do about how gender-based violence is a major structural driver in relation to women's vulnerability to HIV (eg WHO 2010, UNAIDS 2010), then it becomes clear how food availability and women's labour demands, linked as they are to gender violence are critical in relation to keeping HIV at bay – and in relation to support families affected by HIV.



If we look at this map, we can see how HIV has now spread around the world and is widespread across East and Southern Africa and India especially – countries which are particularly vulnerable to food *in*security and climate change.



Even I with my HIV have to make sure that I have enough good food in my body each day before I take my medication — otherwise I can feel queasy. Just imagine then what a nonsense it is for people who have HIV not to have any nutritious food, which must always be the first principle of treatment for anyone with any life-threatening disease.



We can do our best to develop health centres in resource-poor settings such as this one in Northern Kenya to get out condoms to everyone and medication to people with HIV, but without food security and enough food in the grain store, quarreling will ensue, men – and women – will turn to other partners for comfort and HIV will continue to spread.



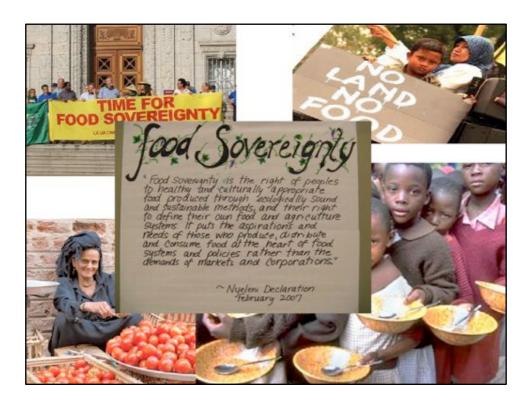
The late Lynde Francis, nutritionist and Director of the Center in Harare, was also HIV-positive. She took ARVs herself and believed in them. But at the same time she realised that it was always really important for people who first came to the Center very ill to be given good nutritious food and anti-worming and anti-fungal tablets for the first couple of months. Only then could their bodies be well enough accept – and respond well to - the onslaught of the powerful chemotherapy which ARVs are.



We know the importance of good healthy nutrition to ensure that we have enough in our bodies to help us thrive, both mentally and physically – but as those first slides showed in this presentation, many communities have had to resort to local beer brewing to make ends meet; have moved away from good traditional foods to shop-bought refined high-status and nutrition-empty foods with the march of "modernity"; and have even faced gender violence and famine as social and economic consequences of gender inequities in their communities.



In Vienna in July 2010 we joined together with thousands of activists from around the world to march to uphold human rights in relation to HIV.



I am also a strong advocate for human rights in relation to global food sovereignty – our fundamental right to be able to grow and eat the food we want for ourselves, without being tied in to anyone else's ownership of it. I hope that this presentation has shown how I believe that food sovereignty forms a key part of creating a safer world – one which will do something to reduce women's vulnerability to gender violence – and thus to HIV in the world also. We all know here that climate change and global politics challenge food sovereignty hugely. I hope I have made it clear therefore how these issues are also affecting women's vulnerability to and ability to cope with HIV in their communities.



Another fundamental issue of course, as water around the Global South becomes privatised, is water sovereignty. But that is another story for another day.

THANK YOU

The fee from tonight's talk is being donated to the Sophia Forum

If you would like to learn more about HIV and what we can *all* do about it, please add your name and email address to the list – and you can find us on facebook too!

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Thank you to all the photographers also!