Highlights of October 2007

- More than 80% of the sample households indicated they had **no food stocks** at the time of the survey - around 73% each in Hhohho and Manzini. In Shiselweni, 65% of non-beneficiaries and 83% of beneficiaries had no food stocks compared to 91% of non-beneficiaries and 95% of beneficiaries in Lubombo.

- Three-quarters of beneficiary households indicated that **food assistance** was their most important source of cereal while 54% of non-beneficiary households rely on purchase and 15% on gifts and only 11% on own production for cereals.

- Over 30% of the households had received **food remittances** in the six months prior to the survey; 21% had received cash remittance and 22% had received agricultural inputs.

- 19% of the households had **borrowed money** in the 3 months prior to the survey, mostly to buy food (Both), pay education (Both) or health care (Bens).

- Round 9 showed that only 9% of households **sold assets** to pay for food and 8% sold assets to pay for health care.

- About 30% of all households did not cultivate for the 2007/08 agricultural season. The reason being that they did not trust the weather conditions at the beginning of the season.

Effects of Food Assistance

Analysis of CHS data allows for comparison of WFP beneficiary and non-beneficiary groups on the basis of measures computed from the household data. The **Coping Strategies Index** (CSI) measures the frequency and severity of actions taken by households in response to the presence or threat of a food shortage.

With the CSI, a lower score implies reduced stress on the household and thus, relatively better food security. As indicated in the graph, the average CSI score of beneficiary households is no different from that of the non-beneficiaries, indicating that the targeting of food assistance has helped the households’ ability to cope.

- October 2007 shows an increase in CSI for both beneficiary and non-beneficiary households when compared to March 2007 but are not significantly different.
- By region, the CSI was 34.8 in Hhohho and 31.8 in Manzini, the non-operational areas.
- The highest CSI was found in Shiselweni where it was 55.9 for non-beneficiaries and 50.2 for beneficiaries. In Lubombo it was around 38 for both beneficiaries and non-beneficiaries.
- By programme activity, the CSI for FFW/FFA beneficiaries was 33.6 in Shiselweni and 51.9 in Lubombo and 53.2 for TFD/VGF beneficiaries in Shiselweni and 33.6 in Lubombo.

Food Consumption Profiles

The **food consumption score** not only allows comparisons of dietary quality and diversity between beneficiary and non-beneficiary populations but also is used to establish a threshold of dietary quality against which to compare these populations. Research has shown that dietary diversity food and frequency are good proxy measures of household food security.

- The chart shows that the percentage of non-beneficiary households with **poor consumption** decreased since March 2007 but increased for beneficiary households. In the non-operational regions, 10% of the households in Hhohho and 7% in Manzini had poor consumption. The percentage of households with adequate consumption was lowest in Hhohho and among beneficiary households in Shiselweni.

Consumption Classifications

Using a 7-day recall period, information was collected on the variety and frequency of different foods and food groups to calculate a weighted food consumption score. Weights were based on the nutritional density of the foods.

Households were then classified as having either ‘poor’, ‘borderline’ or ‘adequate’ consumption based on the analysis of the data.

- Households with ‘borderline’ consumption are consuming the equivalent of cereals and vegetables on a daily basis plus pulses and oils about 4 times per week. Those with ‘poor’ consumption managed to eat the equivalent of only cereals and vegetables on a daily basis. This is considered a bare minimum and is a sign of extreme household food insecurity.
Livelihood Sources and Expenditure

The most common livelihood source for beneficiary households was food assistance, which has increased from 68% in October 2006 and 71% in March 2007. For non-beneficiaries, remittances and casual labour are the most common sources with heavy reliance also on petty trade and begging. This indicates growing reliance on external support for this population. In Hhohho, the most commonly named livelihood source was remittance (20%), followed by petty trade (21%) and casual labour and remittances.

When comparing the two groups, there are significant differences in share from remittances, food and cash cropping, casual labour, livestock, salary, gifts and of course, food assistance.

Expenditure information was collected for the third time in Round 9.

- Beneficiary households had a significantly lower share of monthly expenditure for food (51%) than non-beneficiaries (58%). However, beneficiaries allocated a significantly greater share of monthly expenditure for health (4.9% vs. 2.4%).
- Monthly per capita expenditure was E 88 for beneficiaries and E 153 for non-beneficiary households, a statistically significant difference (p < 0.001) and an increase from March 2007.
- Share of monthly expenditure for food was higher for TFD/VGF beneficiaries (52%) than for FFA beneficiaries (47%).
- Share of expenditure for food was the same as for non-beneficiaries in the non-operational areas (58%) while their monthly per capita expenditure was more than beneficiaries but less than non-beneficiaries (E 132).
- Households with adequate consumption had a per capita monthly expenditure of E 129 as compared to E 70 for those with borderline consumption and E 52 for households with poor consumption.

Avian Influenza Issues

Poultry and sales of poultry products are important sources of income in some rural households in Swaziland. The October 2007 CHS again attempts to investigate the potential impact of an outbreak of avian influenza on these households.

- In Round 9, significantly more (p < 0.001) non-beneficiary (87%) than beneficiary (77%) households reported owning at least one chicken.
- For all households, those without poultry are significantly more likely to be asset poor.
- More than one-third of the households had consumed chicken or eggs in the week prior to the survey, more non-beneficiaries (40%) vs. 36%).
In Round 9, more than 350 non-pregnant women aged 15-49 years from all regions were weighed and measured. Information on health was collected on 473 women. The chart below summarizes the trends in nutritional status for the sample of beneficiary and non-beneficiary women in Shiselweni and Lubombo regions. For non-beneficiaries, the situation has ‘improved’ since March 2007 with an increase in the percentage of women who are overweight (BMI 25-30 kg/m²) or obese (30+ kg/m²). A similar pattern is found for beneficiary women except there are fewer who are obese.

In non-operational areas, about 1% of the women were undernourished, 44% ‘normal’ (BMI 18.5-25 kg/m²), 30% overweight and 25% obese. There were no differences between region. In this sample, only 1% of all women were undernourished, stunted (< 145 cms) or underweight (< 45 kgs) while 58% were overweight or obese. Overall, non-beneficiary women in Shiselweni had the highest average BMI (29.6 kg/m²), followed by non-beneficiaries in Lubombo, Hhohho, Manzini and then beneficiaries in Shiselweni and Lubombo.

Women: education and illness

- In the Round 9 sample, the education levels of beneficiary women were lower than the non-beneficiary sample with 23% having never attended school compared to 13% of the non-beneficiary sample. The best educated women were found in the non-operational areas, especially Manzini.
- Women who have completed primary school have the highest average body mass index while those with secondary or higher education have the lowest average BMI (around 25 kg/m²). Body Mass Index increases with increased age until about 39 years where it peaks at around 29.5 kg/m².
- Exactly 20% of the women reported having diarrhoea in the 2 weeks prior to the survey. This was higher than 13% in March 07 and similar to 19% in October 2006.
- The 2-week period prevalence of fever among the women was 28% which was much higher than the 20% for the three rounds of data collection.
- There was no relationship between water & sanitation and illness in women.
- However, women from poor households were significantly (p < 0.01) more likely to be undernourished (BMI 18.5 kg/m²) and significantly (p < 0.05) more likely to have experienced diarrhoea in the previous two weeks (33% vs. 18%).

Nutrition & HH food security

For women

- Women from asset poor households are significantly (p < 0.01) more likely to have low BMI.
- Women from households with poor consumption are significantly (p < 0.001) more likely to have low BMI.
- Women who have low BMI are more likely to come from households with a significantly higher share of consumption from gifts and lower share from purchase. They also come from households with a significantly higher share of expenditure for food.
- There is a statistically significant (p < 0.001) relationship between mothers’ illness and children’s recent illnesses.
- Women with low BMI are significantly more likely to have children that are wasted (p < 0.001) or underweight (p < 0.05).

Children

- Significantly more (p < 0.001) children are underweight in households with poor consumption (22%) when compared to those with borderline or adequate consumption (6%).
- Significantly more (p < 0.001) children are underweight in asset poor households (21%) when compared to those that are asset medium or rich (6%).
- Child underweight is significantly related to share of consumption from gifts while child stunting is significantly related to share of income from casual labour.
In Round 9, 630 children 6-59 months were weighed and measured. For the sample, 0.4% in programme areas (Shiselweni and Lubombo) and 1.5% in non-operational areas (Hhohho and Manzini) were wasted or low weight-for-height, while 6.7% (S&L) and 7.8% (H&M) were underweight (low weight-for-age) and 34.6% (S&L) and 37.3% (H&M) were chronically malnourished or stunted. This compares with 3.4% wasting, 11.2% underweight and 27.8% stunting in March 2007.

By programme activity, no beneficiary children were wasted while 5.9% of FFA and 5.1% of TFD/VGF beneficiary children were underweight. However, 65% of FFA beneficiary children were stunted which was significantly ($p < 0.01$) higher than 30% for TFD/VGF beneficiary children. However, these children were all found in Lubombo region. However, in general there was not much difference in levels of malnutrition between beneficiary and non-beneficiary children.

For children 0-59 years 23% had experienced diarrhoea in the 2 weeks prior to the survey: 31% of beneficiary children in Shiselweni and 17% in Lubombo. For non-beneficiary children it ranged from 36% in Hhohho to 13% in Manzini and 11% in Shiselweni. Around one-third experienced recent fever, with 35% each of beneficiary children (S&L) and ranging from 41% in Hhohho to 37% in Lubombo and 29% in both Manzini and Shiselweni for non-beneficiary children.

Lastly, 20% of the children had suffered from acute respiratory infection with 22% of beneficiary children in each region and 21% in Hhohho, 18% in Manzini, 16% in Lubombo and 9% in Shiselweni for non-beneficiaries.

By region, children living in poor quality houses (thatched roof and dirt floor) were significantly more likely to be stunted (Hhohho & Shiselweni) or underweight (S only). In Manzini, children with recent fever or diarrhoea were significantly more likely to be underweight. In Lubombo, children with recent ARI were significantly more likely to be stunted. Lastly, children in Hhohho without access to drinking water from improved sources were more likely to have experienced recent diarrhoea.

### Preferred Type of Assistance

For the sample, 76% of the households said they preferred **food assistance only** for the following reasons:
- Satisfies household food shortages (68%)
- Food prices are high (62%)
- Food prices are unpredictable (35%)
- Food is easier to share with family and friends (33%)
- Market supply of food is unpredictable (27%)
- Difficult to access markets (26%)

Of the 13% who prefer **cash only**, most said it was because they could purchase food and other items (74%), because they could purchase a variety of foods (63%), it could be used for other expenses (58%) or they could save part of the cash (35%). For those who preferred both **cash and food** (11%), it was mainly because the combination meets seasonal needs (100%) or improves the households’ ability to cope (79%).

By programme type, the TFD/VGF were most likely to prefer food only (79%) compared to 74% of FFA which also had 19% who preferred cash only. These are compared with March 2007 in the chart below.

Based on **vulnerability**, most households still preferred food only assistance. However, 14% of the low vulnerability households preferred cash only, compared to 12% of high vulnerability and only 9% of low vulnerability households.

More households in Lubombo tended to prefer cash only (15%) when compared to those in Shiselweni (10%).
Demographic indicators

<table>
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<th>Non-beneficiaries</th>
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<tr>
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<tr>
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<td>57%</td>
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<td>dependents*</td>
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</tr>
<tr>
<td>Female head*</td>
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<td>Elderly head*</td>
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<td>30%</td>
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<td>Member died in</td>
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<tr>
<td>past 3 months</td>
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<tr>
<td>Chronically ill</td>
<td>28%</td>
<td>21%</td>
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<tr>
<td>member</td>
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<td></td>
</tr>
<tr>
<td>Asset poor*</td>
<td>28%</td>
<td>12%</td>
</tr>
</tbody>
</table>

Vulnerability Characteristics

In this round, vulnerability was assessed by considering the number of vulnerable characteristics (out of 12) found in each household.

- Variables used were asset poverty, female or elderly head, chronically ill member, hosting orphans, disabled member, recent death of a member, 80% or more effective dependents, poor housing, unsafe water or sanitation and having no livestock.
- Households were described as having either low (0-1 characteristics), medium (2-5) or high (6+) vulnerability.
- Significantly more (p < 0.001) beneficiary households had high vulnerability (22%) as compared to non-beneficiary households (10%).
- The chart below compares the mean coping strategies index (CSI) and food consumption score (FCS) by vulnerability level and beneficiary status. For both groups the relationship between FCS and vulnerability is clearly illustrated. For CSI, it appears that food assistance reduces the use of risky coping strategies because the CSI for beneficiaries remains nearly the same in each vulnerability category.
- However, the CSI for non-beneficiaries with high vulnerability is the highest ever seen for this group indicating the impact of last year’s crop failure on the population.
- By region, 26% beneficiary households in Shiselweni have high vulnerability compared to 21% in Lubombo. For non-beneficiaries, significantly more (p < 0.05) in Shiselweni were highly vulnerable when compared to the non-operational areas of Hhohho and Manzini (4% each). Only 8% of non-beneficiary households in Lubombo were highly vulnerable.

Asset wealth is defined on the basis of the number of different types of productive and/or non-productive assets owned by a household. Groups are classified as:
- Asset Poor = 0 to 4 different types of assets
- Asset Medium = 5 to 9 different types of assets
- Asset Rich = 10 or more different types of assets

In total, 22% of the sample in operational areas were asset poor households with beneficiary households significantly (p < 0.001) more likely to be asset poor (28%) than non-beneficiary households (12%). For beneficiary households, the asset poor were significantly (p < 0.01) more likely to have poor food consumption levels. For non-beneficiary households the average coping strategies index for the asset poor was higher than that for asset medium or rich.

For the entire sample, the most asset poor households were found in Shiselweni (23%), followed by Lubombo (21%), Manzini (10%) and finally Hhohho (8%).

The chart on the left shows the relationship between asset poverty and consumption both within operational areas (S & L) and outside (H & M). It appears that asset poverty has a greater impact on the non-operational areas - those not receiving food assistance. In Hhohho, although there are few asset poor households, more than half of them had poor consumption. In Manzini and Lubombo around 20% of asset poor households had poor consumption. This is much higher than the 5% found in the total sample.

The fact that few asset poor households have poor consumption in Shiselweni could illustrate the positive impacts of food assistance although the high percentage in Lubombo is still unacceptable.
Overall 85% of the non-beneficiaries and 77% of beneficiary households had access to agricultural land, with the greatest access found in the non-operational areas - 92% in Hhohho and 89% in Manzini. Only 65% of the non-beneficiaries in Shiselweni had access to land compared to 76% of beneficiary households in that region. For Lubombo, land access was 77% for both beneficiaries and non-beneficiaries.

Of those with land, very few did not plan to cultivate in the 2007/08 as illustrated in the graph below. It is interesting that so many households planned to cultivate 2 or more hectares - 43% in the non-operational area of Manzini. Overall there is very little difference between beneficiaries and non-beneficiaries in area planned to cultivate within operational areas.

More than 80% of the households in Manzini were using tractors for draught power, followed by 71% in Hhohho. Around 70% of non-beneficiaries in Shiselweni used tractors as compared to only 41% of beneficiaries in that region. In Lubombo, use of tractor was similar between beneficiaries and non-beneficiaries.

All cultivating households had planted maize. Beans/peas were cultivated by 27% of non-beneficiaries and 42% of beneficiaries while 30% of non-beneficiaries and 34% of beneficiaries were cultivating groundnuts. One-quarter of FFA beneficiary households were growing cotton as compared to only 9% of TFD/VGF beneficiary households.

2007/08 Agriculture Season

Children’s education
- For beneficiaries 82% of eligible boys and 80% of girls are attending school compared to 85% (B) and 86% (G) in March 07, 83% (B) and 86% (G) in October 06 and 83% (B) and 84% (G) in March 06.
- When comparing by beneficiary status, there is no difference in enrollment.
- However, by programme activity, slightly more eligible children from TFD/VGF beneficiary households were enrolled and attending.
- By region, significantly more eligible children in Hhohho (87%) and Shiselweni (88%) are enrolled and attending when compared to Manzini (79%) and Lubombo (79%).
- By orphan status, there is no difference in enrollment for girls. However, 82% of non-orphan boys are enrolled and attending as compared to 88% of male single orphans and only 77% of male double orphans.

Sources of Food Consumed by Households

Identifying the major sources of food and monitoring these over time is critical to understanding the principal factors affecting food security of households. As illustrated in the chart below:
- As in previous rounds, non-beneficiary households accessed most of their food from purchase; those with poor consumption also relying significantly more on gifts and borrowing (p < 0.001) and less on purchase (p < 0.01) to access food.
- Beneficiary households relied mostly on food assistance and purchase for their food. However those with poor consumption rely significantly more (p < 0.001) on borrowing than those with borderline or adequate consumption. For both groups, access from own production and gathering wild foods has decreased compared to March 2007. Access from food assistance has decreased for those with poor consumption.
- In non-operational areas, food access is similar to the non-beneficiary sample where households with poor consumption relying significantly more on casual labour, borrowing and gifts and significantly less on purchase to access their food.