

Rural Development Partners (RDP)



BASELINE SURVEY REPORT FOR LUHOMERO INTEGRATED PROJECT

Submitted to:

Love A Village (LAV)



Submitted by:

The Executive Director
Rural Development Partners
P.O Box 773
Mzuzu
Malawi
Tel. (265) 9 356 886
E-mail: dannyirenda@gmail.com

Date: November 2016

Table of Contents

LIST OF TABLES.....	3
LIST OF FIGURES.....	4
ACRONOMYS.....	5
1.0 EXECUTIVE SUMMARY.....	6
2.0 PROJECT OVERVIEW.....	7
2.1 Implementing Partner Information.....	7
2.2 Project Location Background.....	7
3.0 PURPOSE OF THE BASELINE SURVEY.....	9
4.0 METHODOLOGY.....	9
4.1 Sampling.....	9
4.2 Development of Data Collection Tools.....	9
4.3 Data Collection.....	10
4.4 Data entry and analysis.....	10
4.5 Study Team.....	10
5.0 FINDINGS.....	12
5.1 Characteristics of households.....	12
5.2 Means of Living for the Households.....	14
5.3 Status of Household food security.....	16
5.4 Housing/Shelter and WASH practices of households.....	18
6.0 RECOMMENDATIONS.....	20
7.0 ANNEX 1: LUHOMERO BASELINE QUESTIONNAIRE.....	21

LIST OF TABLES

Table 1 : Study team

LIST OF FIGURES

- Fig 1 : Sex of respondents
- Fig 2 : Religion of respondents
- Fig 3 : Age of respondents
- Fig 4 : Marital status of respondents
- Fig 5 : Head of house highest level of education
- Fig 6 : Involvement in business
- Fig 7 : Purpose of growing crops
- Fig 8 : Purpose of keeping livestock
- Fig 9 : Income earned from farming per annum
- Fig 10 : Number of meals taken per day
- Fig 11 : Type of livestock reared
- Fig 12 : Type of crops grown
- Fig 13 : House type
- Fig 14 : Type of latrine owned
- Fig 15 : People practicing hand washing
- Fig 16 : Type of latrine people want

ACRONOMYS

AIDS	:	Acquired Immune Deficiency Syndrome
FFF	:	Foundations For Farming
HH	:	Household
HIV	:	Human Immune Deficiency Virus
HSA	:	Health Surveillance Assistant
LAV	:	Love A Village
NGO	:	Non-Governmental Organisation
RDP	:	Rural Development Partners
VH	:	Village Headman
WASH:		Water Sanitation and Hygiene

1.0 EXECUTIVE SUMMARY

This report highlights the major findings and recommendations of the baseline survey of Luhomero Integrated Project that was conducted in Luhomero in the months of May, June, July and August. The assessment was done in randomly selected villages in Luhomero. The assessment was conducted by RDP project team in conjunction with 2 volunteers from LAV Canada. The purpose of the baseline survey was to establish the social economic status of the people of Luhomero. The survey also aimed at establishing the impact of LAVs interventions over the last 2 years.

The survey revealed that 97.5% are Christians, the average number of people per household is 5 which is in line with the District average and 84.7% are married. In terms of people's livelihood, the survey determined that livelihood strategies are farming, business, and piece work. The main source of income comes from crop sales were maize is the major source of income seconded by groundnuts and tobacco.

15% of the population does not have toilets and almost 90% of those with toilets have unimproved latrines. In addition, 59% do not treat their drinking water and 86% don't have hand washing facilities next to their toilets - a sign that they rarely wash hands after toilet use

38% of the respondents eat at least 3 times per day while 72% eat almost 2 times. These figures are not promising because the survey was done in the season soon after harvest yet a majority of respondents indicated having only 2 meals a day. About 70 respondents indicated that they don't sale anything to earn money while a meagre 20 indicated that they make a minimum of K4,000 (\$5.5) to a maximum of MK87,000 (\$120.7) per annum.

Following the findings of the assessment, it is recommended that a proposal be drafted to address the identified gaps and every intervention should base on existing practices.

2.0 PROJECT OVERVIEW

2.1 Implementing Partner Information

Rural Development Partners (RDP) was initiated in 2015 as a fully fledged Local Non-Governmental Organisation (NGO). It is currently being supported by LAV to implement an integrated project in Lhomero. It has also implemented small projects in areas around Ekwendeni supported my institutions and families from Holland. Just like LAV, RDP envisages a self-reliant community committed to attaining improved sustainable livelihoods and development. It exists to facilitate development processes aimed at socio-economic empowerment of the communities in Malawi but starting with Lhomero.

The work of RDP is motivated and centred on the following core values: responsiveness, accountability, transparency and Integrity. RDP pursues 4 priority issues namely: Agriculture and Food Security, Water, Sanitation and Hygiene (WASH), Housing/Shelter and HIV and AIDS programs.

RDP does not have permanent employees but has people volunteering to implement its projects. In the coming year (2017) it will start taking a strategic direction and have full time employees who will be responsible for implementing projects.

2.2 Project Location Background

The project is implemented in Lhomero area in Mzimba District (Northern Malawi) under Traditional Authority Mtwalo. Lhomero area constitutes 42 villages plus 17 others from Kapondero and Kasasire which are all served by Lhomero Health Post. This Health Post is run by a Health Surveillance Assistant (HSA) who can only handle simple ailments because he is not a qualified clinician. Most of the families depend on farming and micro-enterprise as their main source of livelihoods. Maize, groundnuts and soya beans are grown as major crops. Maize is the staple food in the area.

Luhomero is not spared from hunger which hits the country almost every year. Ailments are also order of the day in this area. Some of the villages cannot be accessed due to poor road networks or destroyed/lack of bridges across streams. This poor road network not only impedes various types of developmental activities to reach the area but also prevents people from accessing markets for social economic development. In a nutshell, the effects of all these have been reduced family income, hunger, low production of farm inputs and infrastructure underdevelopment.

RDP and LAV have been implementing some activities in Luhomero in a bid to alleviate some problems that people face. The focus areas have been agriculture and food security, WASH (which includes girl's hygiene) housing/shelter and HIV/AIDS. All activities aim at empowering the locals to be self sustaining in all aspects.

3.0 PURPOSE OF THE BASELINE SURVEY

The general purpose of the baseline survey was to determine factors affecting people's livelihood in Luhomero. Specifically, the assessment had the following objectives:

- To establish the general health and environmental conditions of the area.
- To generate information for setting appropriate and achievable targets of the project.
- To assess the current food situation, type of housing/shelter and general socio-economic characteristics of the targeted right holders.
- To determine the water, sanitation and hygiene practices of the community

4.0 METHODOLOGY

4.1 Sampling

A sample size calculator could have been used to come up with the sample size. However, the survey selected 30% of the total number of households in Luhomero (**Note:** 30% is higher than most sample size formulae). Stratified random sampling was used to select villages then households. A total of 184 households were interviewed but the project team only managed to collect data from 118 HH.

4.2 Development of Data Collection Tools

A semi-structured questionnaire for household interviews and observation was developed to guide data collection in the survey. The project team developed the tool using mWater app – a mobile based application used to design and analyse data. This app stores data in the cloud once the mobile phone is synced. It is able to analyse and produce graphs and charts for visualisation. The data can also be imported into an

excel sheet and processed further. The questionnaire was tried first to see how it works and whether changes were necessary before the actual survey. It was revised and finalised on the basis of pre-test results. The pre-test provided a means of catching and solving unforeseen problems in the use of the questionnaire, such as phrasing and sequencing of questions. It helped in improving the wording of the questionnaire, translating technical terms and helped in estimating time needed to conduct the interview.

4.3 Data Collection

The developed questionnaire was used to gather qualitative and quantitative data from interviews with selected households. Data collection was done in the months of May, June, July and August 2016. Interpreters were used to explain the questions to respondents since the questionnaire was in English.

4.4 Data entry and analysis

mWater app automatically entered the data into the dashboard. The project team simply had to check and clean the data using simple probability tests and make commands to get desired graphs and charts.

4.5 Study Team

The study team comprised of project team (Executive Director, LAV founder and Volunteers, Project Volunteer/driver) and HSA. An orientation session on the survey was done whereby the study team went through the questionnaire. A pretesting session at the house of Agnes and Mpatso was done. mWater use and management was demonstrated to the study team. Table 1 below shows the study team composition and their respective roles.

Table1: Composition of study team

Name	Organisation	Role played during the survey
Daniel Nyirenda	RDP	Questionnaire design, Data collection, analysis, supervision and report writing,
Julie Seath	LAV	Technical Support and financing
Taylor-Ann Seath	LAV	Data collection
Moriah Regier	LAV	Data collection
Richard Mvula	MoH	Interpreting
Mac Honde	RDP	Interpreting

5.0 FINDINGS

As stated in section 4 above, the analysis involved descriptive statistics. Baseline values are established in two ways, either by analysing the survey data or according to project design. In this case, the former was used because there is no written project design at the moment. It is believed that after this report a proposal will be drafted to address the gaps identified in this report.

Apart from establishing baseline values for important indicators, the survey also aimed at understanding the current food, housing and WASH situation. It also identified the social economic characteristics of the community.

5.1. Characteristics of households

In total, 118 respondents were interviewed of which 55.9% were female. The respondents revealed that 97.5% are Christians, the average number of people per household is 5 which is in line with the District average and 84.7% are married. At 8.5%, the people that are widowed, present quite a high figure. This is a clear sign that there are major health issues in Luhomero. One can only guess that it is due to HIV and AIDS pandemic. There was no age group that dominated as 10 year ranges from 20 years to 60 years and above were all around 20%. In terms of education, a meagre 22.9% of the head of households had attained secondary (high school) education. On the other hand, 55.9% of head of households attained primary (elementary) school.

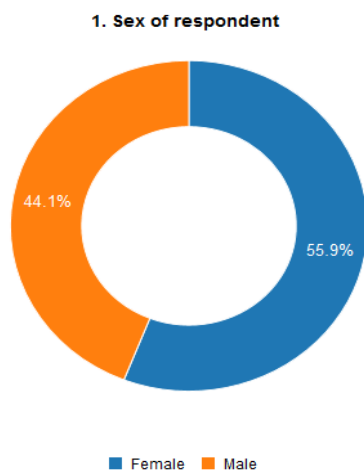


Fig 1: Sex of respondents

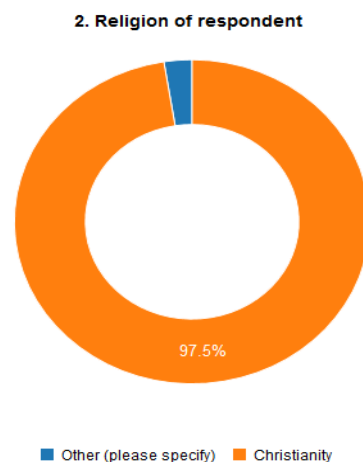


Fig 2: Religion of respondents

3. Age of respondent

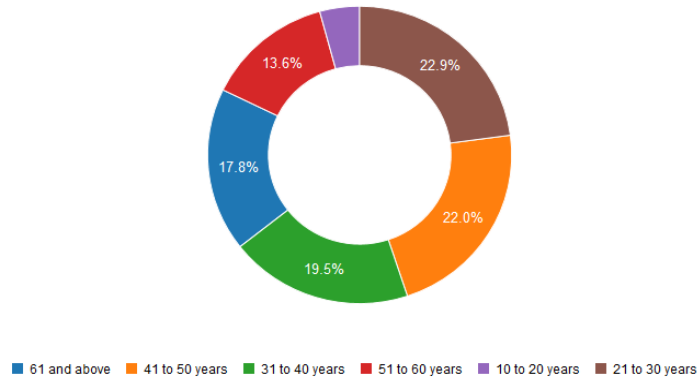


Fig 3: Age of respondents

4. Marital status of respondent

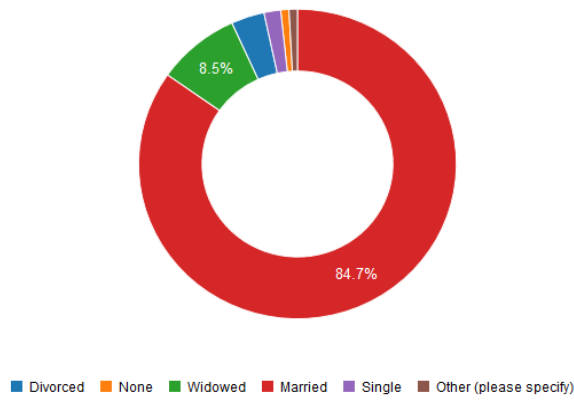


Fig 4: Marital status of respondents

5. Head of household highest level of education

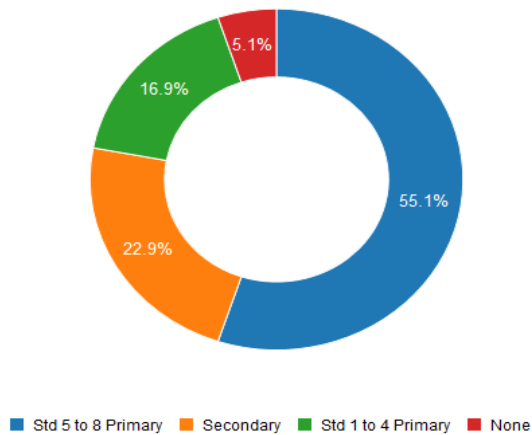


Fig 5: Head of house highest level of education

5.2 Means of Living for the Households

The study asked respondents to give their means of living in terms of income and source. It is interesting to note that household members engage in different livelihood strategies to support their families. The main livelihood strategies are farming, business, and piece work. The main source of income comes from crop sales where maize is the major source of income seconded by groundnuts and tobacco. Business (in terms of groceries, baking, buying and selling tomatoes; and beer brewing) are also sources of income for the people of Luhomero although they did not indicate. It is something that is observed as one takes a walk/ ride through this community.

4. Are you involved in any kind of business?

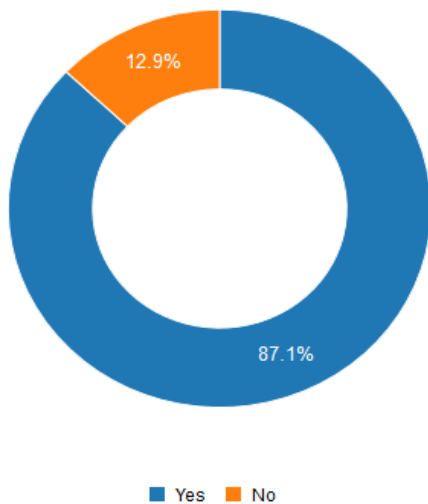


Fig 6: Involvement in business

3. What is the purpose of these crops?

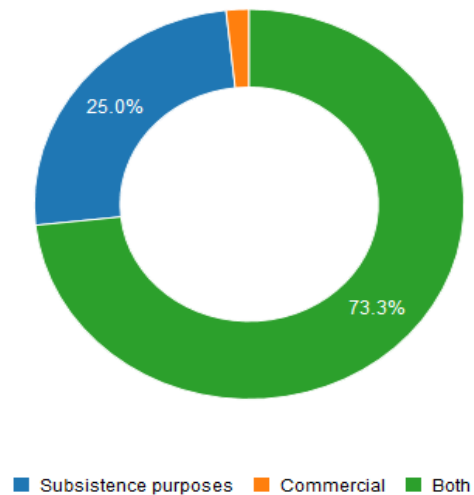


Fig 7: Purpose of growing crops

11. What is the purpose for keeping livestock?

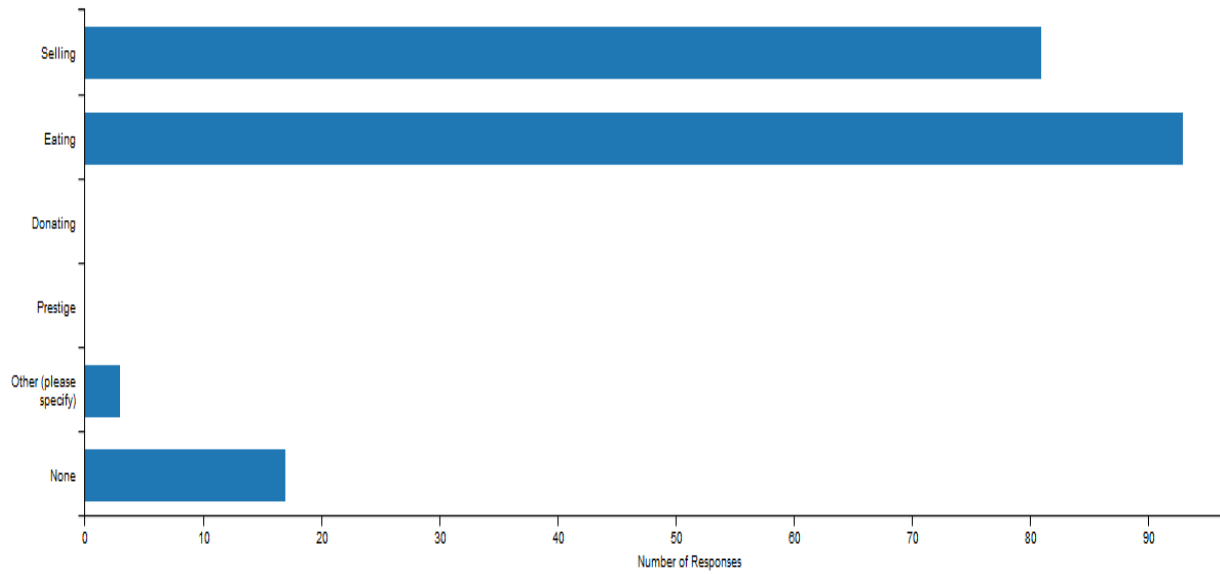


Fig 8: Purpose of keeping livestock

4. If commercial, how much do you make from your crops in one year?

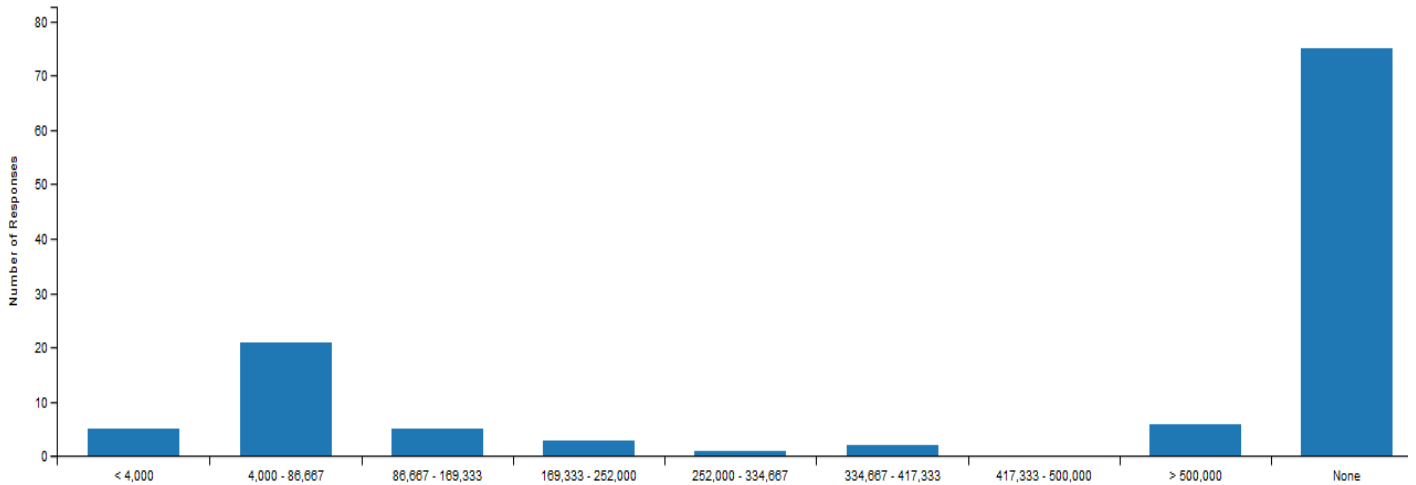


Fig 9: Income earned from farming per annum

In general, this suggests that people from Luhomero derive most of their livelihood from farming. People who derive their livelihood only through farming usually use a combination of eating food from their own production and also selling food or other crops in order to derive income. As observed in fig 9 above, not many families make good money out of what they sell. About 70 respondents indicated that they don't sell

anything to earn money while a meagre 20 indicated that they make a minimum of K4,000 (\$5.5) to a maximum of MK87,000 (\$120.7) per annum. This is significant in providing an opportunity to build the capacity of farmers to achieve increased production through Farming God’s Way/ Foundations for Farming (FFF) and reinforce the mindset of people to view farming beyond subsistence to one that makes them start taking farming as a business.

5.3 Status of Household food security

The respondents were asked to indicate their frequency of food consumption per day but were not asked about the number of food groups consumed. Again, they were asked to outline the type of crops and livestock they grow and rear respectively. This was done to help in measuring and monitoring the quantity of food eaten by people in the community. This helped the project team to have a more meaningful indicator for dietary intake to determine nutrition status. The number of food groups would have been used to determine the quality of food but this survey did not go into those details. Results showed that 38% of the respondents eat at least 3 times per day while 72% eat almost 2 times. These figures are not promising because the survey was done in the season soon after harvest yet a majority of respondents indicated having only 2 meals a day. Clearly, if the survey was to be done in the critical months of November to March, hunger and starvation would have been written all over.

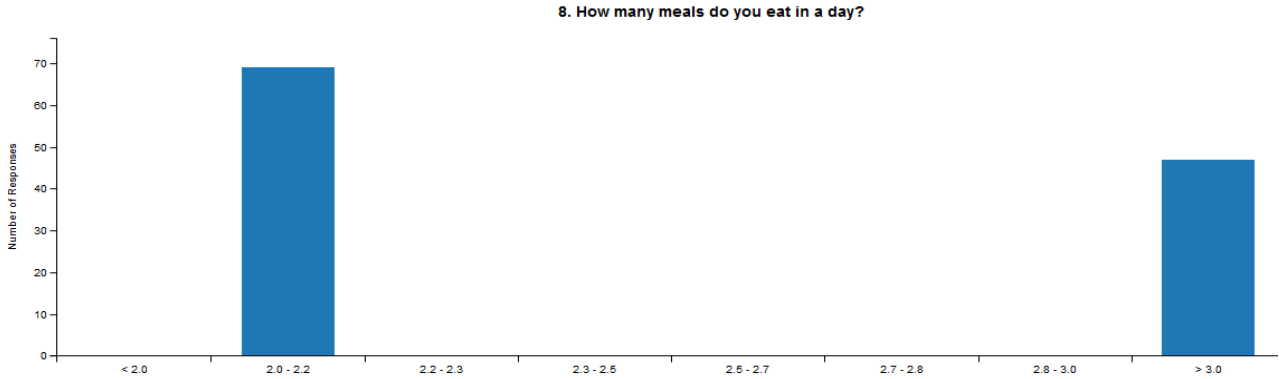


Fig 10: Number of meals taken per day

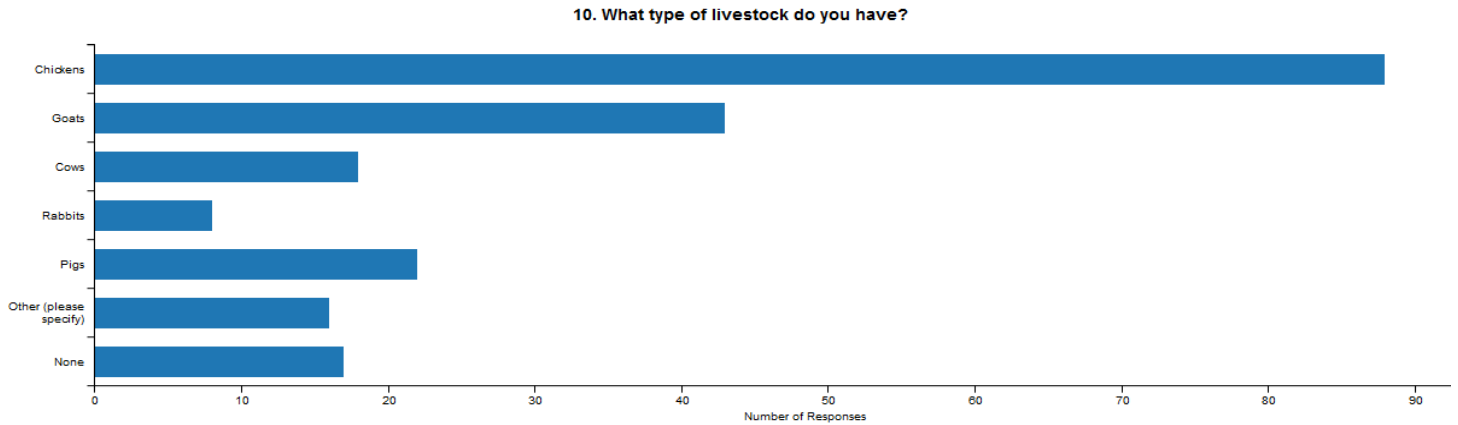


Fig 11: Type of livestock reared

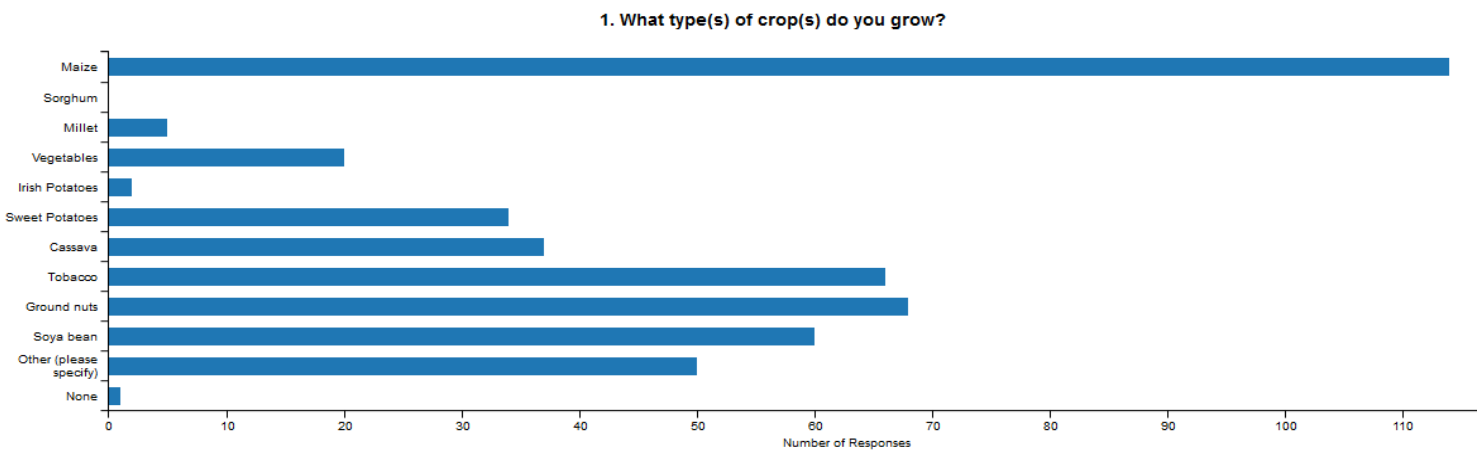


Fig 12: Type of crops grown

As expected, maize is their staple crop in the area seconded by groundnuts and tobacco. The area grows some legumes which are grown together with their main crops. These include groundnuts, sweet potatoes and soya beans. Tobacco is considered a cash crop. Much as there is crop diversification practiced in the area, it cannot be understood why malnutrition is the case as observed by reports from the health centre facility. Again, it doesn't make sense why a greater part of the community does not afford at least 3 meals a day. This suggests that there is low consumption or utilization of legumes and other essential food groups locally available in the area. This can be attributed to the fact that people sell their produce or livestock to buy other basic needs like sugar, salt, cooking oil, soap etc.

The findings presented above show that people engage in different livelihood strategies to support their families. Farming is their main livelihood which is mostly supported by income realised from crop/livestock sales, small businesses and piece work as discussed in section 5.2. Since a good number of people rely on farming as their main livelihood, this poses a major challenge to their life as their production is characterised by low yields and food insufficiency.

5.4 Housing/Shelter and WASH practices of households

Shelter and WASH conditions/practices have been combined because they all focus on infrastructure and facilities owned by households. It is not surprising that an area as remote as Lhomero has almost half (49.2%) of the houses built from brick walls with grass thatched roofs. Thatched roofing is characteristic of low income households. This type of roofing also makes the inhabitants prone to an array of hazards as it leaks during the rainy season, attract tropical insects and catch fire easily.

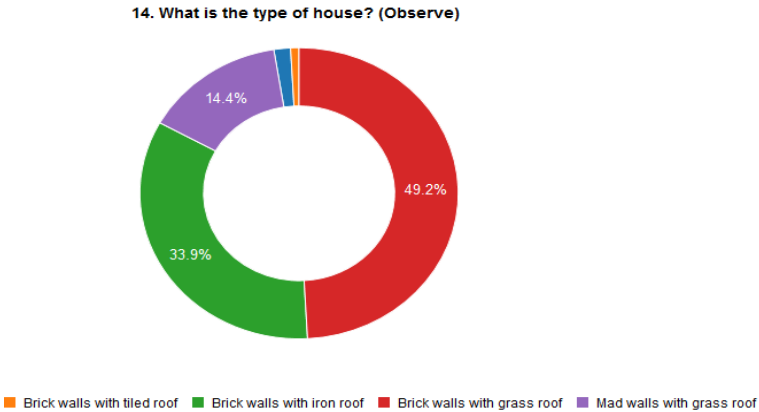
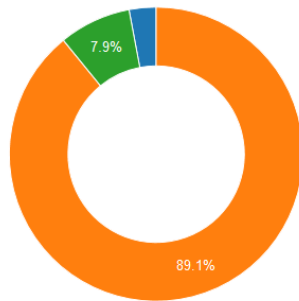


Fig 13: House type

According to the Centre for Disease Control and Prevention, diarrhea is the 4th cause of mortality in Malawi and is attributed to poor WASH conditions/practices. Contrary to this statistic, less than 2% in Lhomero reported having diarrhea a fortnight before the day of interview. However, the WASH conditions and practices do not marry with what was reported as 15% of the population does not have toilets and almost 90% of those with toilets have unimproved latrines. In addition, 59% do not treat their drinking water and 86% don't have hand washing facilities next to their toilets - a sign that they rarely wash

hands after toilet use. It can be concluded that they are just lucky to be surviving these conditions and that an outbreak of diarrhea or cholera would spread like wild fire.

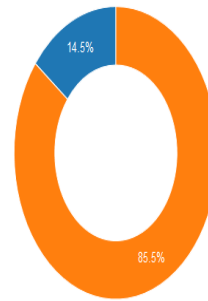
2. If yes, what type of toilet is it?



■ Improved traditional pit latrine ■ Unimproved traditional latrine ■ Other (please specify)

Fig 14: Type of latrine owned

9. Does your latrine have a sink or any facility for handwashing?

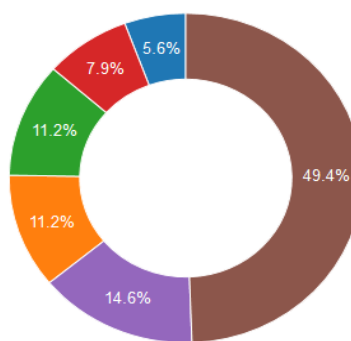


■ Yes ■ No

Fig 15: People practicing hand washing

On a positive note, people of Luhomero realise that it is important to have a decent toilet and to practice good hygiene. This is evident in their willingness to get a loan in order to construct a latrine. 78.3% of the respondents indicated that they would get a loan for latrine construction and almost half (49.4%) would like to have an improved traditional latrine which has more health benefits than the basic/ unimproved pit latrine owned by 89.1% of the population.

9. What type of latrine would you want to build?



■ Other (please specify) ■ Traditional latrine ■ Ecosan ■ Water closet inside ■ Ventilated Improved Pit Latrine (VIP) ■ Improved traditional pit latrine

Fig 16: Type of latrine people want

6.0 RECOMMENDATIONS

- 6.1 A proposal should be drafted to address the gaps identified in this report and priority should be given major issues.
- 6.2 All interventions for Luhomnero should build on what is already existing in this area for sustainabilities sake.
- 6.3 FFF or Farming God's way should be scared up to help in improving yields of crop production.

7.0 ANNEX 1: LUHOMERO BASELINE QUESTIONNAIRE

Part 1 - DEMOGRAPHIC INFORMATION

1. Sex of respondent
 - a. Female
 - b. Male
2. Religion of respondent
 - a. Christianity
 - b. Other (please specify)
3. Age of respondent
 - a. 10 to 20 years
 - b. 21 to 30 years
 - c. 31 to 40 years
 - d. 41 to 50 years
 - e. 51 to 60 years
 - f. 61 and above
4. Marital status of respondent
 - a. Divorced
 - b. Widowed
 - c. Married
 - d. Single
 - e. None
 - f. Other (please specify)
5. Head of household highest level of education
 - a. Standard 1 to 4 Primary
 - b. Standard 5 to 8 Primary
 - c. Secondary
 - d. None
6. If never been to school, do you know how to read and write?
 - a. Yes vernacular only
 - b. Yes both English and vernacular
 - c. Partially
 - d. No
7. Do you have a basic school in this location which trains adults on how to read and write?
 - a. Yes
 - b. No
8. If yes, have you ever gone to this school?
9. How many are you in this household?
10. How many are male?
11. How many are female?
12. How many under-five are in this household?
13. Who is the household head?

- a. Male
 - b. Female
 - c. Elderly
14. What is the type of house? (Observe)
- a. Brick walls with tiled roof
 - b. Brick walls with iron roof
 - c. Brick walls with grass roof
 - d. Mud walls with grass roof
 - e. Other (Please specify)

Part 2 - WATER HYGIENE

1. What water source do you use for drinking?
 - a. Borehole
 - b. Protected well
 - c. Unprotected well
 - d. River/Stream
 - e. Other (please specify)
 - f. None
2. Do you treat water before drinking?
 - a. Yes
 - b. No
3. If yes, what method of treatment do you use?
 - a. Boiling
 - b. Filtration
 - c. Chlorination
 - d. Water Guard
 - e. Other (please specify)
 - f. None
4. If you do not treat the water before drinking, why is it so?
5. Do you have a drinking water storage container?
 - a. Yes
 - b. No
6. What type of container is it?
 - a. Bucket (chidebe)
 - b. Clay pot
 - c. Traditional pail (ndowa)
 - d. Jerry can (gas can)
7. Is the drinking water storage container covered?
 - a. Yes
 - b. No
8. Do you use the same cup for drawing and drinking water?
 - a. Yes
 - b. No

Part 3 - SANITATION

1. Do you have a toilet facility at this household?
 - a. Yes
 - b. No
2. If yes, what type of toilet is it?
 - a. Improved traditional pit latrine
 - b. Unimproved traditional latrine
 - c. Other (please specify)
3. When was the toilet built?
 - a. 1 to 2 years ago
 - b. 3 to 4 years ago
 - c. Above 5 years ago
 - d. Don't know
4. Who uses this latrine?
 - a. Adult Female
 - b. Both adult male and female
 - c. All
5. Is the toilet mentioned above in good usable form?
 - a. Yes
 - b. No
6. If no, where do you go to help yourself?
 - a. Use latrine at work place
 - b. Open defecation
 - c. Communal latrine
 - d. Neighbour's latrine
 - e. Other (please specify)
 - f. None
7. What are the reasons for not having a latrine?
 - a. Other (please specify)
 - b. None
8. What efforts have you tried to have a latrine?
9. What type of latrine would you want to build?
 - a. Traditional latrine
 - b. Water closet inside
 - c. Ventilated Improved Pit Latrine (VIP)
 - d. Improved traditional pit latrine
 - e. Ecosan
 - f. Other (please specify)
10. If you have a latrine, do you share it with neighbours?
 - a. Yes
 - b. No
11. If yes, what are the reasons for sharing?
 - a. Same plot

- b. Other plot has no latrine
 - c. Better latrine
 - d. Other (specify)
12. Is there any organization/persons who assisted you with the materials for building a latrine?
- a. Yes
 - b. No

Part 4 - HEALTH EFFECTS AND HYGIENE PROMOTION

1. Did any member of the household suffer from any of the following diseases in the last two weeks?
 - a. Diarrhea
 - b. Cholera
 - c. Acute respiratory infections
 - d. Stomach worms
 - e. Typhoid
 - f. Malaria
 - g. Other (please specify)
 - h. None
2. Was she/he given any treatment?
 - a. Yes
 - b. No
3. Where did the patient above go for treatment?
 - a. Health facility
 - b. Self-medication
 - c. Other (please specify)
4. In the last two weeks how much did you spend on medication and transport?
5. N/A
6. N/A
7. N/A
8. N/a
9. Does your latrine have a sink or any facility for hand washing?
 - a. Yes
 - b. No
10. N/A
11. What do you use when washing hands after visiting the latrine?
 - a. Water only
 - b. Water and soap
 - c. Water and ash
 - d. Other (please specify)
 - e. None
12. N/A
13. In your area, do you have a sanitation and hygiene committee?

- a. Yes
- b. No

Part 5 - GENDER AND CHILD RIGHTS

1. Who is responsible for fetching water at your household?
 - a. Mother
 - b. Father
 - c. Male Children
 - d. Female Children
 - e. Other (please specify)
 - f. None
2. Who is responsible for building a toilet/bathroom, refuse pit, at your house?
 - a. Mother
 - b. Father
 - c. Male Children
 - d. Female Children
 - e. Donor
 - f. Other (please specify)
 - g. None
3. In what activities are children involved in around the home?
 - a. Fetching firewood
 - b. Maintenance of sanitation facilities
 - c. Fetching water
 - d. Selling goods at market
 - e. Cleaning the household surrounding
 - f. Farming
 - g. Other (please specify)
 - h. None

Part 6 - MICROFINANCE

1. Do you have organizations from which you can loan money?
 - a. Yes
 - b. No
2. Have you ever loaned (borrowed) money from such organizations?
 - a. Yes
 - b. No
3. Would you be willing to loan (borrow) money to construct a latrine?
 - a. Yes
 - b. No
4. Are you involved in any kind of business?

- a. Yes
 - b. No
5. If yes, explain the business.
6. If no, are you willing to be involved in any kind of business?
- a. Yes
 - b. No

Part 7 - AGRICULTURE AND FOOD SECURITY

1. What type(s) of crop(s) do you grow?
- a. Maize
 - b. Sorghum
 - c. Millet
 - d. Vegetables
 - e. Irish Potatoes
 - f. Sweet Potatoes
 - g. Cassava
 - h. Tobacco
 - i. Ground Nuts
 - j. Soya Bean
 - k. Other (please specify)
 - l. None
2. How many times do you grow these crops in a year?
- a. <1
 - b. +1
 - c. >1
 - d. None
3. What is the purpose of these crops?
- a. Subsistence purposes
 - b. Commercial
 - c. Both
4. If commercial, how much do you make from your crops in one year?
- a. <K4,000
 - b. K4,000 - 86,667
 - c. K86,667 - 169,333
 - d. K169,333 - 252,000
 - e. K252,000 - 334,667
 - f. K334,667 - 417,333
 - g. K417,333 - 500,000
 - h. >K500,000
 - i. None
5. N/A
6. What style of farming do you use?

- a. Traditional
 - b. Conservation Farming
 - c. Both
 - d. Other (please specify)
7. Have you heard about conservation farming/Foundations for Farming/Farming God's Way?
- a. Yes
 - b. No
8. How many meals do you eat in a day?
- a. 2
 - b. 3
9. Who is most likely to sacrifice their portion of food in your family?
- a. Mother
 - b. Father
 - c. Male Gogo
 - d. Female gogo
 - e. Male children
 - f. Female children
 - g. Non
10. What type of livestock do you have?
- a. Chickens
 - b. Goats
 - c. Cows
 - d. Rabbits
 - e. Pigs
 - f. Other (please specify)
 - g. None
11. What is the purpose of keeping livestock?
- a. Selling
 - b. Eating
 - c. Donating
 - d. Prestige
 - e. Other (please specify)
 - f. None