



South Africa & Lesotho

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Country Snapshots

	South Africa	Lesotho
Population:	50 million	2 million
Life expectancy at birth:	52 years	45 years
Literacy rate:	88%	82%
Access to improved water source:	93%	78%
GDP per capita (PPP):*	US\$9,757	US\$1,541
Infant mortality rate: (per 1,000 live births)	48	63
Maternal mortality rate: (per 100,000 live births)	400	960
HIV prevalence:	18.1%	23.2%

Sources: UNICEF State of the World's Children Report 2010, *UNDP Human Development Report 2009

Program Overview CARE has operated in South Africa since 1994 and Lesotho since 1968; the two offices merged in 2001. Despite the range of differences between these two countries, South Africa and Lesotho share many of the same causes and manifestations of poverty and inequality. In both contexts, high rates of HIV/AIDS and a lack of access to basic health care and education perpetuate cycles of underdevelopment. Youth and women disproportionately share the burden of disease, and lack food, education and livelihoods. CARE works with communities and local organizations within South Africa and Lesotho to implement programs in the areas of health care and HIV/AIDS, economic empowerment, democratic governance and food security.

Primary Health Care and HIV/AIDS

CARE focuses on prevention programs and strengthening healthcare provision for those affected by HIV/AIDS. In partnership with community organizations, CARE raises awareness about the HIV/AIDS counselling and testing services that are available. Because South Africa and Lesotho have some of the highest rates of HIV infection, many rural families are in need of access to treatment and local care providers. CARE works with community-based organizations to expand home and local care, particularly for women, orphans and other vulnerable children.

The burden of South Africa and Lesotho's HIV/AIDS populations falls heavily on female family members who in most instances do not have the skills or resources to adequately care for the sick. CARE works with community organizations to train and support caregivers to look after children and other family members living with HIV/AIDS. These caregivers receive a very small stipend from the government for a job that requires enormous strength and resilience. These programs also help families to access grants from the government so that they can buy food for sick families. CARE also provides HIV/AIDS education to governments, community organizations and private businesses.

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CARE's support for orphans and other vulnerable children includes helping them access legal documents such as birth certificates and the death certificates of their parents, which determine eligibility for social grants. Since most of the households affected by HIV/AIDS live in poverty, CARE trains members of these households to set up voluntary savings and loan groups in communities so that money can be saved, invested and used to buy food and clothing, and pay for medical treatment.

Governance

Accountability, transparency and voice (or the ability to be heard) are important elements of strengthening governance in development policies. For example, a school which has an active Parent-Teacher Association is more likely to have teachers attending school regularly than one that does not. CARE provides training and support to community organizations on how to better manage resources and structure their governing body in order to ensure that they will become self-sufficient in the long-run. In addition, CARE continues to assist local groups in developing advocacy strategies to make their voices heard by policymakers. Along these lines, CARE works with partner organizations to find ways and means to improve the functioning of health centres and clinics, including through the incorporation of government training programs for HIV/AIDS community caregivers.

Economic Empowerment

CARE supports programs aimed at the economic empowerment of low income and marginalized communities. In all of CARE's health projects, vulnerable and poor families are supported in running highly effective village savings and loan groups to generate income for partners in HIV/AIDS and food security projects.

Village savings and loan programs work with women from the community, who make weekly contributions to their savings group. Then, with training from CARE staff, they make loans to one another to start or grow their small

businesses. Decisions regarding how to use the funds rest entirely with association members. Experience shows that these programs lead to better nutrition, health and education for children, as well as enhance women's participation in public life.

Food Security

High levels of poverty, unemployment and lack of access to productive land in both South Africa and Lesotho contribute to food insecurity and malnutrition in these countries. Under apartheid, many farms and communal lands worked by black Africans were taken away from communities. Some of this land has now been returned, but local government and communities require renewed skills and expertise to make the land economically viable. CARE aims to help enhance agricultural production and productivity by teaching farmers ways to conserve scarce resources, such as water for irrigation. In order to respond to serious nutritional needs, CARE will continue to expand community gardens projects and home-based cultivation of vegetables and other foods.

Natural Resource Management

CARE is exploring strategies to mitigate the impacts of climate change, such as drought, floods, deforestation, and soil degradation. This is a new area and one that CARE believes is vital for the future, as it can affect health, food security and livelihoods. In Lesotho, deforestation and poor soil conditions persist, while soil degradation may be the greatest environmental problem facing South Africa. CARE plans to reach out to academic institutions and others to develop programs in areas like watershed management and the prevention of soil erosion.

Major Donors

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