Fair Trade Cooperatives and Women's Empowerment: Impacts for US Policy on Food Security and HIV

By
Miranda Bernstein
Beloit College

and

Georgia Duerst-Lahti Ph.D. ¹
Department of Political Science
Beloit College
700 College Street
Beloit, WI 53536
duerstgj@beloit.edu


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Abstract
Can small cooperatives designed for women’s employment and empowerment in three Southern African countries inform US policy toward food security and HIV/AIDS? Although the scale and scope of cooperatives with fewer than 5,000 households seems a paltry site of evidence for major US policy initiatives, in-depth analysis of the micro level can provide important insights into macro-level policy, much as was true of the World Bank’s shift to supporting micro loans. Using a month-long participant observation, structured interviews with 20 respondents, and a focus group at one producer organization, we find organized, small fair-trade activity has strong impact upon women’s sense of empowerment, ability to feed their households, and orientation to HIV and health generally. This depth analysis is supplemented with profiles of two additional small producer organizations, developed through site visits, and interviews with key informants. Evidence suggests participation in organized (fair) trading activity contributes to efficacy, which is reflected in household gender power dynamics, as well as community status. Further, even a small increase in income shapes how often and how well these families eat, which has direct bearing on the success of HIV treatment. We conclude US policy should strengthen support for such activity in its HIV and food security policies and explicitly attend to the link between such micro-level income and women’s empowerment efforts.
Women’s empowerment lies at the nexus of several US development policy areas such as women’s empowerment, food security, and HIV/AIDS. In an interactive process, women’s empowerment relates to a country’s economic development, its population’s health, and general food security. Compared to the past, and at least in theory, considerable attention is now directed to women. In July 2010, the United Nations consolidated its women’s programs under UN Women, and the United Nation Development Programme recognizes that “Development cannot be achieved if fifty percent of the population is excluded from the benefits that it brings.”

UNDP explicitly integrates gender equality and women’s empowerment in its four main areas of work: poverty reduction, democratic governance, crisis prevention and recovery, and environment and sustainable development, and recognizes violence done toward women and girls in the home and beyond. It also acknowledges the consequences of excluding two-third of girls from education in many countries.

US policy also has increased its focus on women. Extending the work of previous secretaries of state, Hillary Clinton has given strong emphasis to women and girls, appointing a special ambassador, Melanne Verveer as ambassador at large for women’s issues. Its policies now provide a focus on women and girls in areas such as the Global Business Coalition, which launched its “Healthy Women, Healthy Economies” initiative January 6, 2011 and which seeks integrated action. Other more direct policy initiatives are The Global Health Initiative and the President’s Emergency Plan for AIDS Relief, PEPFAR.

Importantly for this paper, PEPFAR now seeks to stabilize its efforts, transitioning from emergency response to sustainable programs. It also now explicitly recognizes the perilous position women face vis-à-vis this disease. While efforts to stem HIV/AIDS must include support of the health care system, palliative care, orphans, and the like, they must also become more holistic and integrate across policies. Because policy tends toward a singular focus, the US government has been slow in its policies to explicitly connect women’s empowerment to the HIV/AIDS epidemic or food security, or either of the former to sustainable women’s income, and so on. Policy tends to develop with a singular focus; otherwise, to create and implement any one becomes far more complex and assessing each is confounded.

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3 Business membership costs $30,000 for “premiere” status and $5,000 for “affiliate status. It attracts very large entities such as Coca-cola, Johnson & Johnson, Nike, and Levi Strauss.

4 [http://www.pepfar.gov/about/index.htm](http://www.pepfar.gov/about/index.htm)

Nonetheless, women’s disempowerment generally furthers all problems because related issues are intertwined.

In this paper, we focus on the relationships among women’s empowerment, economic autonomy, food security, and HIV/AIDS. We conclude ultimately that—along with macro-level policy—US policy should promote and foster small, fair trade producer groups because such groups offer a sustainable way to address all of these issues. Using research conducted at a fair trade cooperative in Swaziland and evidence from focus groups at fair trade co-ops across Southern Africa, we demonstrate how income women earn through such cooperatives provides its members with more than just money.

Specifically, like most who research women’s empowerment, we expected to and did find a strong link between earning income and increased empowerment. Similarly, we expected to and could confirm that with income, a women’s entire family eats more and better. In these two areas, our purpose was to provide details and nuance of the dynamics of these now widely accepted truisms. In other areas we intended to expand knowledge. We explored processes and elements of empowerment to understand whether, and if so how, income generation opportunities relate to HIV/AIDS prevention and improved health. Overall we asked the question: What are the impacts of small fair trade producer groups for the women who participate and why?

Swaziland and the region

The Southern African region is notorious for its high HIV/AIDS rates, and its poverty and inequality. For world ranking of percentage of population living with HIV/AIDS, nine of the top ten countries are in the Southern Africa region. Countries of interest to this study rank accordingly: Swaziland (1st), South Africa (5th), and Namibia (6th). In some cases, the percentage of adults living with the disease has declined since its peak because many have already died. In these three countries, women constitute a majority of those living with HIV/AIDS at 62 percent in South Africa and 59 percent in the other two countries.

Table 1. Rank Gross Domestic Product and Purchasing Power Parity, Swaziland, Namibia, South Africa

<table>
<thead>
<tr>
<th>Country</th>
<th>IMF</th>
<th>World Bank 2</th>
<th>CIA Factbook</th>
</tr>
</thead>
</table>


All of these countries suffer from poverty as Table 2 shows, with South Africa holding the strongest relative per capita purchasing power, and Swaziland the weakest. South Africa is a bit misleading as it has pockets of great wealth and then the “other South Africa” in rural areas such as KwaZulu-Natal Province where producer group members participated in a focus group and key informants were also interviewed. Namibia, a vast desert country with a relatively small population, struggles to develop economic activity other than extractive industries and ranching, neither of which tend to employ women in large numbers.

Table 2. Country Comparison on Selective HIV/AIDS Data

<table>
<thead>
<tr>
<th>Country</th>
<th>Rank</th>
<th>% adults living with HIV/AIDS</th>
<th>Women as percent of adults with HIV/AIDS</th>
<th>ARV Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Swaziland</td>
<td>1st</td>
<td>25.9%</td>
<td>59%</td>
<td>59%</td>
</tr>
<tr>
<td>South Africa</td>
<td>5th</td>
<td>17.8%</td>
<td>62%</td>
<td>37%</td>
</tr>
<tr>
<td>Namibia</td>
<td>6th</td>
<td>13.1%</td>
<td>59%</td>
<td>76%</td>
</tr>
</tbody>
</table>


In Swaziland, the primary focus of this study, one in four adults is infected with HIV and nearly 70 percent of the population live below the poverty line. Additionally, women’s empowerment faces a serious challenge from state-supported polygamy.

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The king of Swaziland has 14 wives, choosing a new one each year through a pageant in which all maidens are required to parade before him, topless. Such commoditization has created increased vulnerability for women. Combined, these factors create an atmosphere in which research on a fair trade cooperative designed to give women more economic independence could be fruitful. It is possible to track the relationships among this earned income, their improved well-being, and increased capacity to take control of their HIV/AIDS status.

In terms of US policy, PEPFAR has established the Swaziland Partnership Framework on HIV and AIDS with the government of Swaziland. This framework promotes a sustainable approach to fighting HIV/AIDS with one of its five pillars being “building human and institutional capacity.” PEPFAR also offers funding to implement gender-focused programs that address the “fundamental causes of young women’s vulnerability to HIV in Southern Africa: poverty and gender inequity.”

**Swazi Indigenous Products**

The fair trade cooperative we studied, Swazi Indigenous Products (SIP), presents a sustainable option to achieve PEPFAR’s goals in large part because its methodology integrates and addresses poverty, gender inequality, and HIV/AIDS rather than tackling each individually. In fact, its focus rests squarely with fair income generation, with all other activities following from that. Fair trade is based upon fair prices and living wages for producers. Fair trade is also intended to promote economic development and women’s empowerment. These practices offer fertile conditions to investigate whether and how a fair trade cooperative is able to promote economic autonomy, women’s empowerment, improved food security, and related HIV/AIDS concerns.

SIP is located in Mpaka, Swaziland. The co-op’s 2,600 participants live throughout the Lubombo region. SIP pays rural Swazi women in cash for wild-harvested, hand-cracked marula nuts that it makes into marula oil and other cosmetic products at a factory run by the cooperative and originally established by the Queen Mother. The marula is purchased from the Swazi women at procurement meetings. One of the benefits of this income opportunity is that participation requires no material or financial input; women collect the wild nuts and then crack them with rocks, a traditional skill already practiced. For many of the women who come to SIP, the marula money is their primary source of income. Of the 2,600 participants, about

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9 “Swaziland HIV/AIDS Health Profile,” USAID, October 2010: 3.

10 Ibid 4.
half are registered members, and hence receive a higher price for their kernels and hold a share in the company.

**Development Women’s Empowerment**

Women’s empowerment has been a topic of scholarly interest, especially since the UN focused on its decades on women beginning in Mexico City in 1975 and furthered the interest through its Millennium Goals. This practical application gives grist for the scholarly mill about women’s empowerment. Some scholars use a theoretical approach to discuss women’s empowerment and focus generally on institutions (Shih 2004; VonDoepp 2002; Sharma 2006; Sharp et al. 2003). Looking at institutions inevitably leads Sharp et al. to conclude that to “adopt empowerment as part of a GAD (gender and development) strategy, it is also necessary to take seriously the role of men,”11 in part because men dominate institutions.

The concept of empowerment has been considered slippery by many, however, as its exact parameters are hard to delimit and it has been used in a variety of ways. For example, Easton et al. make empowerment synonymous with grassroots, bottom up, transmission of new information.12 In other instances, empowerment may be too assumed as a product of education or income. Malhotra and Mathers claim the typical notion that economic means and education empowers women is not necessarily true, particularly in the developing world because these theories are based on Western assumptions that income earning is reflected in household decision-making, a dynamic that did not occur in Sri Lanka.13 Such suggests that cultural differences are important for how women’s empowerment takes place. However, sufficient empirical evidence demonstrates the positive effects of employment and education for women; international policy now works to encourage through these means and most scholars agree that they work.

In fact much of the scholarship on empowerment focuses on economic or educational means (Odutolu et al. 2003; Fonjong 2001; Datta 2003; Bernasek 2003; Riyami et al. 2004) and also often extends to a health focus (Jacob et al. 2006;)


Odutolu et al. 2003; Riyami et al. 2004). For example, Odutolu et al. found that providing women with basic job training skills and micro-credit opportunity increased their control over their reproductive health. These studies emphasize the fact that women across the developing world are marginalized and vulnerable, and encourage change.

The empowerment literature argues that economic empowerment in combination with education will result in an improvement in other aspects of the women’s lives because it allows for women to have more power to make decisions and better their lives overall (Odutolu et al. 2003; Ryami et al. 2004). These studies led us to expect we would find evidence of empowerment similar to a program in Nigeria that provided young females with educational material about reproductive health. Participants found the program beneficial because they no longer rely on others (often men) for money, and as a result, the young females avoid feeling like they owe the men.\textsuperscript{14} Economic independence provides the women with autonomy in other aspects of their life. Improvement in sexual health becomes particularly useful in the context of Swaziland where over one quarter of the population is infected with HIV. When women earn their own income, they do not need to ask men for money giving them greater power in sexual relationships with men; this power in turn means they can much better protect themselves from HIV infection. Accordingly, income and knowledge create a power shift in which women can take control of their chances of becoming infected with HIV.

Women with their own income experience benefits beyond the economic improvement. One significant example of this is the use of micro-lending as first utilized by the Grameen Bank in Bangladesh, which provides small loans to those who cannot secure larger loans from banks. Over time, the bank came to give 95 percent of its loans to women because, “income earned by female borrowers had more beneficial effects on the well-being of children and household members generally than income earned by male borrowers.”\textsuperscript{15} Strong evidence shows households in which women have an income are better off than those with men as the primary income earner.

**Food Security, Poverty, and Women’s Empowerment**


If income-earning women are found to improve their households’ well-being, then improved health from better nutrition is also likely. One of the greatest struggles with women’s empowerment is that it is generally worst in countries with other significant problems. In these dire situations a connection between women’s empowerment and food security may be most evident.

A case study from KwaZulu-Natal, South Africa about policy toward land reform and agricultural transformation demonstrates ways in which Southern African women are disempowered, as well as its relationship to food security. According to the UN Food and Agriculture Organization (FAO) food security exists “when all people at all times have access to the food they need for a healthy, active life.” This definition of food security suggests people must have enough food, but also requires food that makes them healthy. In rural communities women are generally responsible for food production. However, cultural and social norms undervalue their work so the food producers themselves often eat too little. In a vicious circle, the food producers have less access to crucial resources necessary to achieve food security for everyone.

Much research connects poverty and food security and suggests that overcoming poverty is at the root of food security (Haile 2005; Kaschula 2008; Tweeten 1999). Hence, in order to achieve food security, poverty must first be addressed; hence, the need for greater attention and action towards economic development. “Because it is the poor who lack access to food, alleviating food insecurity means alleviating poverty.”

The United Nations and particularly the World Health Organization (WHO) directly connect food security and poverty. WHO presents food security as a problem for much of the developing world and designates poverty as a primary root of the issue. Its response concentrates on three primary aspects: the impact of nutrition, health and poverty, and the importance of providing sound information and analyses for targeting the most vulnerable groups within the most vulnerable countries.

**Food Security and HIV/AIDS**

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Although not all policy connects the two, nutrition is primary to both food security and HIV/AIDS. In fact, as a dimension of HIV treatment and care, nutrition is often overlooked. Infected individuals taking ARV medications must have a healthy and balanced diet or the medicine will make them very ill. However, with little access to nutritious food, infected individuals in rural and impoverished areas find taking their medications to fight the disease difficult. In addition, and generally less considered, is the relationship between malnutrition and the disease. Quite simply, HIV positive people who are vitamin deficient are less able to fight off the disease because their immune system lacks essential vitamins. Additionally, vitamin deficiency was shown to increase the chance of mother to child transmission. Food security was connected directly to ameliorating HIV/AIDS through nutrition.

**Approach and Methods**

Despite past trends to keep policy areas separate, women’s empowerment is now generally understood to be related to a host of concerns critical to development. Although we wanted to confirm whether this relationship existed in fair trade women’s cooperatives, we were more concerned with how these dynamics might work. Our methodology therefore triangulated to include participant observation, structured interviews, and focus groups. It was supplemented by data analysis of procurement records in order to understand patterns in how much participants earned over the past several years and conversations with key informants.

The participant observation took place for the month of July 2010 when Miranda Bernstein worked at the SIP factory analyzing the procurement data and lived with someone central to its operations.

Through a translator Jabu Mkhonta, Miranda Bernstein conducted structured interviews with 20 marula harvesters. In order to avoid cherry picking particularly successful cooperative members well-known to SIP staff, interviews were conducted during procurement meetings where participants came to sell the marula nuts to SIP. While the women waited in line to have their nuts weighed, Miranda would select one woman to interview with an eye toward a good distribution by age, the only aspect she could judge consistently. The interviews took between 20 and 45 minutes. Generally, they took longer initially as Miranda and Jabu resolved how to translate most effectively and efficiently.

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20 Procurement records produced no discernable patterns.
Several aspects of the interviews warrant further details. First, great care was taken with the translator so as to avoid leading the responses. Second, the initial questionnaire assumed that the women were familiar with the concept of empowerment, but not one word in siSwati translates into empowerment. As a result, while they readily told us what they spent their income on, it took several iterations in order to tap dimensions of empowerment from their point of view. To do so we included a hypothetical situation of being at a clinic with a nurse who ignored her, asking if that reaction was any different from before their participation with SIP. One question explicitly asked whether she felt stronger on the inside than before. Finally, we asked explicitly who decided how the marula money was to be spent. These interviews form the basis for most of the results reported here.

Georgia Duerst-Lahti conducted the focus groups as well as eliciting information from key informants associated with each of the three producer groups included in this research. For SIP, the focus group consisted of 12 women who gathered for their weekly self-help loan group organized by SIP. Not all the participants were members of SIP, although they came together because they trusted SIP. Another focus group took place near Ondangwa, Namibia through Eudafano Women’s Cooperative (EWC). EWC also produces marula oil, mainly for bulk export. All of the members belonged to one of the 23 local associations that comprise EWC. A founder and officer of the association was part of the focus group. A third focus group was conducted in the KwaZulu-Natal (KZN) province of South Africa with producers of an essential oil. This project had only been in existence for a few years and was fledgling compared to the others so it was less formal. This group also was mixed sex group, with participants drawn from a men’s producer group and a women’s producer group. Mostly here we concentrate on the SIP group and use others to support findings from it.

Analysis

The first task in establishing the impact of SIP is to determine the respondent’s socio-economic status (SES) prior to their participation. The SES could only be established by self reports in answers to questions about themselves before SIP and what they did with the income. Ultimately, the 20 respondents were placed into four categories based on changes (or lack thereof) in eating; what they are able to purchase with the income (necessities and/or “luxury” items); and whether they save any of the money earned, put it towards another business, or use it for purchases that would extend beyond “luxury”, such as electricity or water.

Note that the some respondents considered bread, rice, and certain vegetables to be luxuries in contrast to the local starchy staple and “wild” vegetables. Others put curtains in this category. Importantly, their concept of luxury differs dramatically from its common usage in developed countries and is more akin to “nicer” or anything beyond absolute necessities.
The four categories suggest the different impact from SIP income by considering the initial socio-economic status in contrast to the “nature of change” each reported. The categories are, as shown in Chart 1, from nothing to something; from nothing to saving; from livable to secure; and from secure to nicer. These categories are largely determined by what the women are able to do for themselves with their income. Categories demonstrate the varying degrees of benefit respondents experienced. These indicated respondents' socio-economic statuses (SES) prior to participation with SIP. We infer that whatever they indicate they are able to buy now they could not buy before.

Chart 1: Impact Categories and Nature of Change

<table>
<thead>
<tr>
<th>Category (n)</th>
<th>Nature of Change</th>
<th>Income Use</th>
<th>Surplus?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A (3)</td>
<td>From “secure” to nicer</td>
<td>Money is spent on luxury or non-necessities</td>
<td>Extra money for saving, business or investments</td>
</tr>
<tr>
<td>B (4)</td>
<td>From livable to “secure”</td>
<td>Purchases some luxury items in addition to necessities</td>
<td>Saves some or contributes to outside business</td>
</tr>
<tr>
<td>C (5)</td>
<td>From “nothing” to saving</td>
<td>Can now buy necessities</td>
<td>Saves a little</td>
</tr>
<tr>
<td>D (8)</td>
<td>From “nothing” to something</td>
<td>Can only buy some necessities</td>
<td>No surplus to save</td>
</tr>
</tbody>
</table>

As Chart 1 shows, about two-thirds of respondents (13 of 20) started with “nothing.” Given the hard work involved in gathering and cracking the marula “stones” or nuts to get the kernels, this proportion is unsurprising. The eight women of Category D clearly began destitute, as this income does not even cover all necessities. Categories A and B offer a contrast because respondents report already being “secure” or having “livable” conditions before SIP. Usually these households had income from male wage earners. Non necessities include purchases such as better dishes or curtains. Importantly, often respondents in Categories A and B used the income to start an outside business. From the interviews it is not possible to tell whether they are particularly entrepreneurial and ambitious, although this seems likely. A key informant told the story of the one man who humbled himself by doing “women’s work” of SIP for a year in order to gather enough capital to start a small hog farm, which had grown to be successful with eight hogs. Another key informant stated that the management of SIP celebrates when a participant feels wealthy enough to retire because there “always would be more poor women to gather and crack,” and these women were their greatest concern.
We asked each respondent whether she was able to save or invest any of her SIP income. We found this to be a particularly significant indicator of impact because it tells us whether they had any “surplus” money and if so, whether they are able to create more financial stability with it. Saving or investing could mean that they put a small portion of their SIP income towards a small savings group, investing in a side business like craftwork or a roadside merchant stand, and/or a large purchase that exceeded a nicer luxury item such as livestock or electricity. Sixty per cent of respondents answered that they save some portion of their earnings from SIP. Given the limited resources most of these women have, that over half manages to save toward a business, bigger purchase, or for emergencies is important.

**Food and health impact**

Many studies show that any income for women tends to improve the food security and nutrition of their family. We wanted to first confirm this fact held in the SIP, a small, fair trade enterprise. We also wanted to determine whether and how respondents understand the relationship between more and better food and their health, especially related to HIV/AIDS. The food security impact was determined through answers to several questions: if there was a change in their eating since starting with SIP; what that change is; how many meals per day they ate before SIP; how many meals a day they eat now; and the types of food they eat.

Chart 2: Changes in Eating by Respondent Category

<table>
<thead>
<tr>
<th>Category (n)</th>
<th>Change in Eating</th>
</tr>
</thead>
<tbody>
<tr>
<td>A (3)</td>
<td>Already ate regularly, now food is better</td>
</tr>
<tr>
<td>B (4)</td>
<td>Ate 2 meals/day, now 3 meals/day</td>
</tr>
<tr>
<td>C (5)</td>
<td>Ate few meals, now eats 2-3 meals/day (possibly better food as well)</td>
</tr>
<tr>
<td>D (8)</td>
<td>Minimal changes (1 more meal/day or no change)</td>
</tr>
</tbody>
</table>

Continuing with the same SES categories as Chart 1, Chart 2 focuses on changes in eating. We found 75 percent of respondents reported an improvement in eating. Improved eating was considered to be either eating more meals per day and/or
eating “better” food. Of the four who reported no difference in food due to SIP income, three were in Category D and used their SIP income for other necessities. The remaining respondent, from Category A, already ate three balanced meals a day. With SIP income, all respondents ate at least two meals a day, with the average number of meals eaten per day being 2.75. Overall, these SIP participants provide themselves with more food than before, seemingly enough food, which is a crucial component of food security.

Also of relevance for food security, half (50 percent) of respondents made the connection between the importance of food and health. Without prompting, at some point in their interviews, they mentioned that they were better able to buy food to stay healthy. Many noted the importance of eating vegetables for either taking with medication or to maintain overall health. Most often, the connection between food and health came from the series of questions regarding HIV/AIDS, a set of questions separate from those about eating. When asked if she was more likely to protect herself from HIV, one respondent answered, “Because of the extra income, I can protect myself and buy food. I want a long life.” Focus groups, both at SIP and the other sites strengthen the contention women who participate in fair trade producer organizations recognize that health and food security are very much connected. Many in the Namibian EWC focus group explicitly stated more food was a primary incentive to harvest and crack the nuts because important for them and their children. Similarly in the KZN group, the connection between HIV medication and food was mentioned generally, but one spoke of helping to prevent her daughter from selling sex to get the food. School fees were the only expenditure mentioned with frequency similar to food in the focus groups. Not surprisingly, food always came first, but not all women wanted for sufficient food. Further, food was easier to adjust (i.e., they could go hungry) than fees, which had to be paid by a date and was undertaken as a public act. If a family was late in paying school fees, others usually knew.

Empowerment through Fair Income and Association

SIP provides economic opportunity for Swazi women, but does this income earning opportunity empower the participants? If so, how does the empowerment grow and manifest in daily life.

According to the UN, women's empowerment is composed of five characteristics:

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21 “Better” food was noted by the respondent, it does not necessarily mean more nutritious, but that the woman is able to buy food that she considers nicer.

22 A balanced meal is considered to include food with protein and vitamins.
Women’s sense of self-worth; their right to have and to determine choices; their right to have access to opportunities and resources; their right to have the power to control their own lives, both within and outside the home; and their ability to influence the direction of social change to create a more just social and economic order, nationally and internationally.\textsuperscript{23}

Inductive analysis of the interviews uncovered three categories of empowerment directly related to participation in SIP. These three correspond to the UN characteristics: self esteem (self worth), self sufficiency (access opportunities and resources), and change in power dynamics (right to choose; control life; direct change). From the interviews, empowerment impacts were found in responses throughout the entire questionnaire, not necessarily responses to specific questions.

Focus groups offered many statements of empowerment also, proving particularly rich for insights into self esteem as empowerment. In the KZN group, participants spoke of the value in learning how to grow the crop for essential oil and the pride in their success, especially with the first real payoff (often the second cutting). Education and income combine to increase self esteem. The EWC group produced resounding response to a question about how they feel inside and whether participating in EWC made them feel stronger inside. All participants raised both their hands, ululating in joyous sound. A participant in the SIP focus group perhaps captured elements of self-esteem best when she said, “Participating has given me the confidence to contract to put a proper toilet in my house.” That is, she explicitly references confidence to undertake a complex arrangement as a result of her SIP participation.

Many SIP interview respondents spoke of the value of simple association, of connecting with other women at procurement meetings. SIP procurement meetings were the source of this impact. Similar dynamics were reported at all three focus groups in which the “joy of coming together” gave them confidence to stand their ground or assurance that they knew what to do. Sometimes the confidence was about producing more and more efficiently, such as techniques for cracking nuts or growing the crops for essential oil. They gained confidence through proficiency and the group helped them to achieve it. More often, conversation centered on matters of home and hearth: how to deal with a sick child, what to do with a son who allowed his wife to flout custom, and nutrition about HIV/AIDS were all mentioned. Several key informants suggested that these meetings had replaced conversation women used to have at the river washing laundry or fetching water. Modernity had isolated them and producer group meetings or procurement day offered a chance to come together and share perspective. The shared perspectives, as well as the

content of the information, both appear to contribute to empowerment, as did associating, being part of a larger group.

All SIP interview respondents—100 percent—reported empowerment through improved self esteem. Most often self-esteem empowerment impacts emerged when respondents were asked how they view themselves in comparison to community members who do not sell marula to SIP. For this question, every respondent answered that they were either “different” or “better” than these individuals generally directly because of their SIP income. “I find that I’m better than them (non-participating community members) because I have the income and they don’t.”

As expected, earning income improved self sufficiency, which also affected self esteem. Many respondents mentioned “feeling free” because they no longer rely on others for the things they need. Importantly, self sufficiency or economic autonomy means that these women are less vulnerable because they no longer must depend on others for necessities. Income from SIP was reported to create a sense of self sufficiency for 95 percent of respondents. Several women answered that because they have their own income, they no longer need to beg from their neighbors for things like money for school fees, bus fare, or salt and sugar. Furthermore, in a theme echoed in two focus groups, they said that now their neighbors come to them for things, which means they have gone from a net borrower to a net lender. For these women, such a shift in community status held great meaning. No longer did they face the shame of needing to borrow and could feel the pride of having enough resources so they could lend. This shift, in turn, changed the power dynamics.

The EWC focus group also clearly indicated changed dynamics in the household; KZN key informants confirmed some change, albeit weaker. As suggested by the case study in Bangladesh, cultural difference likely figure into the relative ease of changed household dynamics. Judging from the focus groups and key informants, women’s earned income was unquestionably hers to decide how to spend at EWC in Namibia; all but two of the 22 participants raised their hands to say it was her own to decide. At the SIP focus group, clearly the women had strong claim to the money and deciding how it was spent. However, when a man resided in the household (husband, brother, son, etc.) decisions about the money became more of a conversation and exact decision control was somewhat ambiguous. Nonetheless, the women who earned the income continued to have a strong claim on its use. Among Zulus in KZN, key informants were reluctant to suggest that women who earned money could simply spend it without regard to her husband as such resources remained the husband’s. However, earning income gave women the capacity to enter the conversation about how to spend the money, and all agreed it would mean that she would not have to ask for permission to buy soap or other small household necessities. Over such purchases she could decide if she earned the income.
Figure 1 illustrates how empowerment through self sufficiency and self esteem work together to change the power dynamics in respondents’ lives. While self esteem improves the feeling of self sufficiency for participants, they often find that they have more power in their households.

Figure 1: Empowerment Process

Source: Miranda Bernstein and Georgia Duerst-Lahti, 2011.

One important result of this change in power dynamics is that respondents become sexually less vulnerable and better able to protect themselves from HIV. For example, the women discuss how to talk to their husbands about wearing a condom. When asked if she could now better protect herself from HIV, a SIP respondent said, “Yes, I can protect myself now. I feel more power to talk to my husband about wearing a condom because I talked to other women here (at SIP procurement meetings) about it.” Another respondent made the point that when you can earn your own money, you don’t need to ask for things, and therefore, favors are not expected from you. “Now I have money and don’t have to beg because when you beg for things they expect sex. Now the money I need is in my hand.” When women have the power and ability to refuse sex or make their partner wear a condom, they gain considerable control over their chance of HIV infection. One KZN mother spoke of how her income protected her daughter from selling sex to get necessities.
These interviews confirm that SIP addresses each of the UN’s characteristics of empowerment through income opportunity: With increased access to resources through SIP, women experience a boost in self esteem, considerable economic autonomy, more power regarding household decisions, and enhance community status. They also gain greater control of their sexual health. Control of sexual health is especially important because of the HIV prevalence in Swaziland and the region. In addition, because the women have their own income they are able to purchase food that will keep them healthy. Significantly, a high proportion of respondents recognized and valued the importance of eating properly in regards to HIV/AIDS health. Policy should, as well. Figure 2 illustrates dynamic flows that lead to women’s improved ability to fight HIV/AIDS, bringing the various issue areas together.

Figure 2: Income, Empowerment, and HIV Dynamics

Small, local, fair trade cooperatives like SIP start from the bottom and provide rural women a means to earn their own income. The producer organizations are outstanding examples of the “partners” sought by most US policy programs in food security, HIV/AIDS, and women’s economic development. Facets of successful
organizations are beyond the scope of this paper, but SIP (and EWC, along with other producer groups profiled beyond this study) demonstrated such features can be developed. From this location, participants are better able to buy the things they need and find themselves less vulnerable because they no longer beg from neighbors or men. In addition, we find that when women have their own income they eat more and more nutritiously and improve their able to stay healthy. A healthier lifestyle allows women to better prevent and care for HIV. Fair trade associations build women’s rights and empowerment into their operating practices; hence, members can experience and practice how to be empowered and act accordingly. They demonstrate that income generating projects work to fight against other aspects of poverty, specifically food security and poor health. Most importantly, with good trade policies (e.g., no tariffs or restrictive taxes) fair trade producer groups create a sustainable methodology for combating the debilitating conditions related to poverty so prevalent in Southern Africa.

**Fair Trade, Women’s Empowerment, and US Policy**

Though impacts varied among respondent categories and by policy area, SIP has undeniably improved the lives of their participants overall. When asked if their lives are better, worse, or no different than before SIP, 100 percent of respondents answered that their lives are better. Such overall improvement accords with the stated aim of many US policies to “integrate” better.

We cannot discern from these data whether and how the fact SIP is a certified fair trade organization—that operates far beyond minimum fair trade practices—contributes to these findings of empowerment. Perhaps any income opportunity when coupled with some association and education for the women would have the same effect. It is clear however that by generating their own income, women who supply marula to SIP are better able to provide necessities, save for the future, feed themselves and their families, and protect themselves from HIV. It is also clear that the act of coming together, associating, contributes to their overall well being.

Of course, the ability for any country to develop hinges upon its capacity to ameliorate poverty, gender inequity, food security, and major health concerns such as HIV. For these reasons, policy must recognize the linkages between and among empowerment, income, food security, and HIV. This micro-level study provides clear evidence that US policy should promote fair trade producer groups if it wants to achieve sustainable solutions to these devastating problems. Among other changes, it should continue to rethink HIV/AIDS policy. If PEPFAR aims to transition from emergency to sustainable approaches to fight the AIDS epidemic in Southern Africa, it should better address gender inequity and poverty. Fair trade producer groups that provide income opportunities should be given optimal consideration.
## Appendix

Table 1: Respondent Impact category, Start Year and Marula Quality

<table>
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<tr>
<th>Respondent #</th>
<th>Conventional/Organic?</th>
<th>Started selling</th>
<th>Category</th>
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<tr>
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<tr>
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<td>Conventional</td>
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<td>B</td>
</tr>
<tr>
<td>301</td>
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<td>2007</td>
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<tr>
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Works Cited


