CONSULTATIONS WITH THE POOR

NATIONAL SYNTHESIS REPORT ZAMBIA

BY THE PARTICIPATORY ASSESSMENT GROUP

LUSAKA

MAY, 1999

The findings, interpretations, and conclusions expressed here are those of the authors and do not necessarily represent the views of the World Bank, its Board of Executive
Directors, or the governments they represent.

Preface

This study is part of a global research effort entitled *Consultations with the Poor*, designed to inform the *World Development Report 2000/1 on Poverty and Development*. The research involved poor people in twenty-three countries around the world. The effort also included two comprehensive reviews of Participatory Poverty Assessments completed in recent years by the World Bank and other agencies. Deepa Narayan, Principal Social Development Specialist in the World Bank's Poverty Group, initiated and led the research effort.

The global *Consultations with the Poor* is unique in two respects. It is the first large scale comparative research effort using participatory methods to focus on the voices of the poor. It is also the first time that the World Development Report is drawing on participatory research in a systematic fashion. Much has been learned in this process about how to conduct Participatory Poverty Assessments on a major scale across countries so that they have policy relevance. Findings from the country studies are already being used at the national level, and the methodology developed by the study team is already being adopted by many others.

We want to congratulate the network of 23 country research teams who mobilized at such short notice and completed the studies within six months. We also want to thank Deepa Narayan and her team: Patti Petesch, Consultant, provided overall coordination; Meera Kaul Shah, Consultant, provided methodological guidance; Ulrike Erhardt, provided administrative assistance; and the Institute of Development Studies, University of Sussex provided advisory support. More than a hundred colleagues within the World Bank also contributed greatly by identifying and supporting the local research teams.

The study would not have been possible without the generous financial support of the U.K. Department for International Development (DFID), numerous departments within the World Bank, the Swedish International Development Agency, MacArthur Foundation and several NGOs.

The completion of these studies in a way is just the beginning. We must now ensure that the findings lead to follow-up action to make a difference in the lives of the poor.

Michael Walton Director, Poverty Group & Chief Economist, Human Development Ravi Kanbur Director, World Development Report

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EXECUTIVE SUMMARY

INTRODUCTION

The major objective of the study entitled *Consultations with the Poor* has been to enable the poor in diverse social conditions and countries to share their views on issues of poverty so that they inform and contribute towards the concepts and contents of the World Development Report 2000/01. In Zambia the study was carried out in 12 of the poorest districts, six rural and six urban. Participatory research methods have been used in generating the data analyzed in this report. A total of 60 groups -- 24 women's groups, 24 men's and 12 youth groups -- participated in generating the data. Some 65 individual interviews were also carried out.

MAIN FINDINGS

Well-being and Ill-being

The various vernacular terms which denote well-being and ill-being were solicited from the sites' groups of research participants. The terms pointed at two main ideas: namely, economic wealth or lack of it, and total human well-being in terms of "living well," i.e having a good life, or the opposite, namely suffering.

What matters most to the poor is food, followed by water, good health and, increasingly, some kind of formal education.

A long list of priorities and problems which people face was drawn up. Water tops the list, followed by lack of access to fertilizer in rural areas and unemployment in urban areas. Poor farm productivity, which is caused by lack of access to fertilizer (due to cost, distance, and sheep unavailability) causes hunger. So does unemployment. Hunger was regarded as a key problem in both rural and urban sites.

Access to health and education are also regarded as top priorities. The cost of these services is thought to be a major impediment to accessing them. Other impediments are distance to the services, especially in rural areas, their often times poor quality, shortage of drugs and unfriendly health staff in health centres, dilapidated school infrastructure, and shortages of trained teachers. Education and health problems were common in both rural and urban sites. Women's groups were more vocal on health issues and on fertilizer issues. The latter is probably because lack of fertilizer affects them most as they are the ones most concerned with food and feeding the family.

Youth groups were more concerned with education and employment issues. Men's groups also placed unemployment and job losses very high on the list of problems.

Other problems included absence of markets, bad roads, poor and expensive transport system, poor housing and, especially over the past 10 years, problems of food security, unemployment, roads and

crime have increased.

These problems of ill-being/poverty are responsible for another long list of problems like crime, particularly food theft in rural areas, prostitution, HIV/AIDS, looking after widows and orphans, witchcraft, and increased poverty.

As many as 42 different institutions assisting the poor operate in the 12 study sites. The majority of these are non-governmental organisations. Most of them are formal institutions which do not allow the poor much say in their operations. Some of the 9 government institutions were not highly rated as they do not provide the services they are supposed to provide. This applies especially to agriculture, community development and social services. The churches which are found in particularly all the study sites were ranked highly because they take care of the very needy. Other institutions which were appreciated include the Resident Development Committee in urban sites because they take into account people's views in their work. In addition, these committees are generally very active initiating and promoting development activities. The same cannot be said of many elected politicians, i.e. ward councillors and members of parliament hardly visit their constituencies, let alone promote development initiatives.

Most households have been regarded as the females' domain. Their tasks include cooking, washing dishes and clothes, fetching water, looking after small children and the sick, cultivating and cleaning the surroundings of the home. Except for the last two, all the others have been assigned to community women. Some changes are, however, taking place in that more men are beginning to do things that once were done only by women. This change has partly been caused by economic circumstances, i.e. that men, the former bread winners, are pruned from their jobs and forced to stay home while the women engage themselves in breadwinning activities like food for work or selling at the market.

Responsibilities at the community level have been and are still being fairly well borne by both men and women.

The men used to take the lion's share in decision making prowess both at the household and community levels in rural and urban areas. This is the case especially in urban areas where money issues are discussed and divided by man and wife. So are decisions regarding children's education and welfare generally. Other issues where women are slowly beginning to participate in decision making are family planning, buying capital goods and planning for the future.

Violence against women has been known in the twelve study sites. Five women's groups thought assaults against women were on the increase. Two men's groups thought they were on the decrease. Rape was also thought to be on the increase by the women and on the decrease by men.

Wife battery was felt to be on the decrease by both men and women. A number of reasons were advanced for this. They included the fact that men have been so weakened by hunger that they do not have the strength anymore to beat their wives; husbands not wanting to beat and antagonise the

breadwinner otherwise they will go hungry; the Victim Support Unit of the Zambia Police which is very active in defending women's rights, especially those who have been beaten by their husbands and those whose training property has been grabbed by the relatives of their deceased husbands; and sensitisation by churches and non governmental organisations.

The answer to whether or not women feel they are better off now than in the past is omitted.

Some women feel they are better off because they share decision-making with their spouses and the male folks generally. Some are the breadwinners of their households and hence have a lot of economic power. Others feel the added responsibilities of breadwinning by selling at markets or being involved in food for work activities or sitting on committees responsible for community affairs places added workloads on them. Looking after the very sick is increasingly compounding the situation.

CONCLUSION

Poverty and ill-being levels are on the increase. Causes of this have been very clearly identified, as have been the effects of this increasing poverty. On the other hand, the position and plight of women is increasingly brightening up as men are beginning to share some of their workloads including the all-important decision-making functions. There is a growing awareness on the part of society, i.e the men, the youth and the women themselves, regarding the equality of men and women. Except for rape, violence against women is on the decrease.

What seems to be left, therefore, is a concerted effort by all concerned to tackle the problem of poverty and its causes which are low agricultural productivity, unemployment and inadequacy of the social services being provided. The concerned parties are the poor themselves who previously have had little say in the activities aimed at their development and instead looked up to government for this. The government, the non-governmental organisations, community-based organisations and the private sector of the economy are some of the key actors in poverty reduction/elimination.

2. BACKGROUND

2.1 Study Purpose

The purpose of *Consultations With the Poor*, a study which has been undertaken in a score of countries, has been to enable a wide range of poor people in different countries and conditions to share their views in such a way that they inform and contribute to the concepts and content of the World Development Report 2000/01.

The study has concentrated on four major themes, namely:

(i) Poor

People's own definitions and concepts of well-being and ill-being, the different categories of well-being, the criteria for placing households in these categories, the perceived relative sizes of these categories, and trends and changes over time.

The study has also explored the various concepts which are essential to well-being and ill-being. These are security, social exclusion, social cohesion, crime, conflict, and opportunities for social and economic mobility.

(ii) Priorities of the Poor

The study identified the priorities and problems faced by the different groups of people within the community. It compared different types of communities and assessed changes in these priorities over time as well as problems which people solve themselves and those which may require external assistance. This section should provide a useful indication of the issues that the poor would like to be tackled by on-going and planned projects and programs like the Bank-funded Social Recovery Project (SRP).

(iii) Institutional Analysis

The study's aim has been to:

Identify important institutions in people's lives;

Rate the institutions in terms of both trust/confidence and their effectiveness;

Describe people's control, if any, over these institutions; and

Assess how people deal with crises.

(iv) Gender Relations

The study probed whether women are better off or worse off now than before. "Before" means 10 years ago, i.e. the end of the 1980s, which also saw the end of one-party system of government in Zambia.

The study also explored the difference, if any, in gender relations among different groups

within the community.

The *Consultations with the Poor* study is expected to make useful contributions towards poverty reduction in the country for it will provide useful insights into the reality of poverty to the major determinors of poverty reduction in the country. These include the government itself, the World Bank, non governmental organisations (NGOs), the private sector, and the donor community. Indeed, some key findings of this study as well as a number of previous ones have already found their way into such inportant documents as the government's National Poverty Reduction Action Plan (NPRAP) and the Employment and Sustainable Livelihoods (ESL) program.

2.2 Methodology and Process

Qualitative participatory methods were used in exploring the above issues. These are indicated in table form below.

TABLE I: RESEARCH METHODS USED

ISSU	ES EXPLORED	METHODS/TOOLS	INFORMANTS
(i)	Well-being/ill-being	Focus Group Discussion (FGD)	Group of women, men and youth (•) Community leaders
		Semi Structured Interviews (SSI)	(*) District level(*) Groups of women, men
		Priority Ranking	Community members
(i)	Priorities of the poor	Case Studies	Groups of women, men and youth
		Flow Charts Ranking Matrices	
(ii)	Institutional Analysis	FGDs SSI	" Community leaders
	Identification of important institutions	FGDs Case Studies SSI	Groups of women, men and youth Community members Community leaders
	Rating of institutions	Ranking Matrices and FGDs	Groups of women, men and youth
	(•) Control over institutions	FGDs	Same as above
	(•) Coping with crises	FGDs Case Studies SSI FGDs	Same as above Community members Community leaders Groups of women, men and youth
(iv)	Gender Relations	Ranking Matrices	Same as above

A training manual was prepared which briefly outlined the aims of the present study. It put the

present study into context by referring to previous studies and findings on poverty, studies that used both qualitative and quantitative methods.

The manual went on to describe the methods and participatory tools which were to be used in the field. It then touched on such practical issues as team work, note taking, evening meetings, site reports and feedback to the communities.

A ten-day training session was held during which the field researchers went through the prepared training manual. The training started with theoretical classroom work for 5 days and then went into three townships, referred to as compounds, in Lusaka to do practical work for 6 days. During the evening the whole 13 person team would gather to share experiences and suggest improvements on the research process. It was at this stage that the Process Guide arrived which necessitated a few changes in the research instrument.

The training started on the 26th of January (1999), while the practical work in Lusaka, which was part of the training and whose findings are included in this report, was from 1st to 6th February. The remaining 9 sites were covered during the remainder of February.

The Research Team

A gender balanced 12-person team (6 women and 6 men) carried out field work. This team, which was sub-divided into three sub-teams of two men and two women, was constantly supervised by the overall Lead Researcher.

2.3 Selected Sites

The Central Statistics Office (CSO) had carried out several studies between 1996 and 1998 which indicated the poor distribution levels in the country by district. Some districts had as much as 90 per cent of their population living in poverty. It was resolved that the *Consultations with the Poor* should target these districts. However, language barriers prohibited the research team from going to the two poorest districts of Kalabo and Gwembe, which had more than 95 per cent of its people among the poor! Hence, instead the next poorest were selected, namely Chinsali and Serenje for rural communities, and Lusaka and Luanshya for the urban communities.

Lusaka was selected because, although the aggregate poverty levels may not be high, those in the peri-urban high density and low-income settlements are exceedingly high.

The six rural communities are predominantly subsistence farming ones. An earlier study carried out by the Participatory Assessment Group (<u>Comparative Poverty Study</u>) observed that farming in these two districts had gone down over the past 9 years due to the liberalisation of agricultural marketing which removed parastatal companies which used to supply farm inputs and purchase farm produce.

Urban residents have been adversely affected by the economic adjustment program which has seen the closure of many companies with accompanying job losses.

In Luanshya, a copper mining town, three types of compounds were selected: namely, a mining compound where many had lost their jobs; a district council compound where the majority had bought the houses they live in; and a shanty compound where people, most of whom are not employed, build their own houses.

The fact that extremely poor communities were selected for the study made it difficult to find and isolate groups of the non-poor in each community. One would have to do a wealth ranking exercise first and then go out to round up those that were identified as non-poor and bring them together, an exercise which is both sensitive and time consuming given the scattered nature of the settlements.

Bemba is the vernacular language spoken in Northern Zambia where Chinsali is located. It is also spoken in Serenje whose local language, Lala, is a dialect of Bemba. The latter is the lingua franca of the Copperbelt where Luanshya is located. The indigenous language of this area is Lamba, another Bemba dialect. In Lusaka, Nyanja and Bemba are spoken.

3. PERCEPTIONS OF POVERTY: WELL-BEING DEFINITIONS AND TRENDS

3.1 Definition of Well-being and Ill-being

The following were the local terms used to describe and define well-being and ill-being in the twelve study sites. The languages spoken in these sites are:

Bemba for all the sites; Lala, a dialect of Bemba in the three sites of the Central province; and Nyanja, together with Bemba, in the nine other sites.

Well-being:

Local Term	Literal		Translation
Kwikala bwin	o (Bemba)		Living well
Umoyo	(Nyanja)	Life	
Ubumi	(Bemba)		Life
Bali bwino	(Bemba, Lala))	Who are well
Abakankala	(Bemba, Lala))	The rich
Bacinondo	(Bemba)		The rich
Bolemela	(Nyanja)		The rich
Otukuka	(Nyanja)		The developed ones
Ukulya bwino	(Bemba)		Eating well
Abafyuma	(Bemba)		Those with money

Ill-Being:

Abacushi or incushi	(Bemba)	Who are suffering
Abalanda	(Bemba)	Who are suffering and poor
Obvutika	(Nyanja)	Who are suffering
Osauka	(Nyanja)	Who are suffering
Ubupina	(Bemba, Lala)	Poverty
Bapengele	(Lala)	Who are suffering

The above terms are often qualified by such adjectives as <u>sana</u>: "very", "very much" or <u>panono</u>: "a little bit". Thus <u>bakankala</u>: "the rich" is often qualified as <u>bakankala sana</u> or <u>bakankala panono</u>, the "very rich" or the "somewhat rich". <u>Incushi</u>: "who are suffering" can be qualified as inchushi sana or inchushi panono: "who suffer a lot" or "who suffer a bit".

The suffix "ko" appended to the substantive words, e.g. <u>baikalako bwino</u>, "who live well a bit", plays the same role as the adjectives <u>sana</u> or <u>panono</u>. By using these adjectives and the suffix <u>ko</u>, one can identify a number of categories or groups ranging from the very well off to those experiencing a bit of suffering and poverty.

The above concepts portray both the idea of economic wealth or lack of it, as well as full human well-being which is often associated with economic possesions. In fact, words like <u>mulanda</u>: "who suffer" are often translated as poor, or even "the suffering poor".

There are obviously no rural/urban, gender, or age differences with regard to these conceptions and definitions.

Orphans, the lame, and the aged -- especially the female aged and widowed -- were said to experience ill-being and poverty most acutely. The following is the experience of ill-being and poverty that Lizzie of Mpatamatu, Luanshya suffers.

The Narrative

I was born in Luanshya in 1973. While I was a child our parents divorced and my father disappeared. We do not know where he is living. We were being kept by my mother who died before I completed grade 7. There were six of us children and we had no where to go. My aunt who lives in Mikomfwa took us to her house. We still do not know where our father is. They say he is staying somewhere in Mpongwe or Kafulafuta. I was very sickly while staying with our aunt. My Aunt used to look after all of us children - we were six, 3 are now dead. It was very difficult for her to keep us in a small house.

My older sister heard that the Catholic have built houses in Twashuka by sister Maria Pia. So she went there and registered. She was given this house last year. We (the sisters and brothers) moved out from our aunt's house last year in July and came to stay here. My elder sister only stayed here a short time and she died. My one year old child also died. It has been a very sad time indeed. I am staying with my younger sister and my other child. The house is still in my older sisters' name but I am the one who has now taken over the headship.

Sr. Maria Pia is the one who has been assisting us. She give us mealie meal, sugar, salt, sometimes Kapenta, fish, surf, bath soap etc. She gives us on a monthly basis. She has given some people umbrellas but she refused to give us in this house. She has also increased the size of mealie meal for some families, but not for us.

Sometimes the mealie meal finishes half-way so if you have no money, you suffer.

I have no work, so I only do piece work when the meal-meal finishes. If you wish, you work for money or food.

The sixty groups of people -- women (24), men (24), and youth (12) -- came up with a number of well-being/wealth categories. One group came up with only two such categories, a few with five, others with six, and the majority with three or four. The tables below summarize the criteria that research participants used in placing households in the various categories and the proportion of households in each category. The *range*, not the *mean*, of the estimated number of households is given. The criteria given by rural communities tended to differ from those identified by their urban counterparts. Hence the two tables on the issue.

TABLE 3.1 WELL-BEING CATEGORIES, CRITERIA AND PROPORTIONS OF HOUSEHOLDS IN EACH CATEGORY: THE SIX RURAL SITES

CATEGORY		CRITERIA	PROPORTIONS OF HOUSEHOLDS (HHs)		
			NOW	BEFORE	
i)	Abakankala (the rich Abekala bwino (who live well)	 have big farms, have livestock (cattle), eat well employ other people on their farms can afford to educate children have fertilizer have good health have good houses can travel easily have hammer mills 	0-30%	10 - 90%	
ii)	Abakankala panono (who are rich a bit) Abalibwino panono (who are well a bit)	 have few cattle cultivate fairly large fields can afford a bit of fertilizer some have hammer mills send their children to school eat two meals a day harvest enough to eat 	2 - 40%	14 - 50%	
iii)	Incushi (who suffer) Bapina (the poor) Balanda (the suffering poor)	 do not have proper meals cannot afford to educate children do not have good clothes cannot afford health costs cannot afford to buy soap can hardly cultivate fields 	20 - 90%	0 - 20%	
iv)	Balanda sana (the very poor and suffering) Bapina sana (the very poor)	 lack food, eat once or twice on a number of days have poor hygiene, flies fall over them cannot afford school and health costs lead miserable lives poor, dirty clothing poor sanitation, access to water look like mad people live on vegetables and sweet potatoes 	3 - 85%	2 - 25%	

v)	Special group of	- cannot cultivate fields		
	the blind,	- depend on others (churches and neighbours) for		
	the widows	food	10 -40%	2 - 10%
	the orphans	- have no children/dependents to work for them		
	the disabled			
	the dumb			
	the chronically ill			
	the aged			

Source: Field data

None of the research participants in the rural communities came up with "the very well off" or very rich category.

TABLE 3.2 WELL-BEING CATEGORIES CRITERIA PROPORTION OF HOUSEHOLDS IN EACH CATEGORY NOW AND 10 YEARS AGO: THE SIX URBAN SITES

	CATEGORY	CRITERIA	PROPORTIO HOUSEHOLE	
			NOW	BEFORE
i)	Bakankala sana (very rich)	 they eat from morning till bed-time easily afford health and education costs own and drive cars own individual boreholes own satellite dishes for television own big business enterprises afford private medical care services 	0 - 2%	0 - 20%
ii)	Abalibwino (well-off) Olemela (the rich) Bakankala (the rich)	 live in big houses own big houses are in formal employment have lucrative private businesses eat three meals a day plus mid-morning and afternoon tea/snacks. afford education and health costs for their families 	0 - 15%	0 - 10%
iii)	Abaikala bwino panono (who live a little bit well)	 eat three meals a day are in formal employment can afford health and education costs are well dressed some have own businesses have radios and television sets 	5 - 50%	5 - 70%
iv)	Abacula panono (who suffer a little bit)	 some are in formal, others in informal employment but earn too little to afford regular meals, health and education costs they produce too many children some depend on piece work some depend on prostitution for their incomes 	15 - 70%	10 - 60%
v)	Bacula (who suffer) Bapina (the poor)	 they work for the rich have no shelter eat okra (instead of vegetables) they do not bathe because they cannot afford to pay water bills 	15 - 70%	5 - 30%

	 they look like mad people they are not respected in the community cannot afford health and education costs no regular meals, eat once a day do not have money produce too many children children turn into street kids 		
vi) Otsaukilatu (who suffer through and through) Abapina sana (the very poor)	 cannot do piece work survive through begging cannot afford health or education costs poor clothing, often mistaken for mad people no houses of their own one meal in a number of days no blankets 	10 - 70%	4 – 30%
viii) By Employment Status (special category mentioned only once)			
a) Unemployed	 old people, no energy to work youth - no jobs street vendors thieves and prostitutes do piece work draw water from streams as they cannot afford water bills 	9%	7%
b) Self-employed	- run own business - mostly retirees/retrenchees - build houses for rent - able to feed themselves - employ youth from the community	4%	2%
c) Labourers	 work in mine or nearby farms rent one-roomed house can only buy small packets of maize meal cannot afford water, education and health services use firewood which they collect themselves as they cannot afford to buy charcoal, let alone electricity 	5%	6%
d) White collar employees	- own houses or - rent good houses		

	eat three meals a daydrink bottled beerdress well	2%	%5
e) The black mambas	- earn good income but do not use it properly	-	-

Narrative Analysis

There are no big differences between women and men, elderly people and youth regarding the various well-being categories, their criteria and proportions of households in each category, except for the following:

- The youth were more concerned with employment issues as well as those of non use of family planning methods and the consequent fertility and high production of babies on the part of the <u>bacula/bapina</u> (who suffer/poor) and <u>bacula/bapina sana</u> (who suffer a lot/very poor).
- . The women tended to assign bigger proportions in the poor/suffers and very poor/suffering a lot categories than did the men and the youth.

Food is the biggest issue which cut across gender and age lines as well as the rural/urban dichotomies. Availability of food characterised those in the well off or rich categories.

"They eat (non-stop) from early morning till they go to sleep"

"They eat meat most of the time; they eat three meals a day as well as tea and snacks mid morning and mid-afternoon"

The least privileged categories of the <u>bapina</u> (the poor) and <u>incushi</u> (those who suffer), both in rural and urban areas, have less access to food.

"They eat once in a day or in several days";

"Depend on charitable food handouts";

"Collect food from rubbish bins":

"Eat vegetables, beans or okra";

"Hunger and not clothing is the main concern of people here" so said expatriate development worker in Chinsali.

Rural areas characterised well-being/ill-being with cultivating large or small/zero fields, access to

fertilizers, having herds of livestock, especially cattle, employing others (i.e the less well off) in their fields, having hammer mills, having energy to plough. It is these physical and human assets that bring food in rural areas.

Urban communities link ill-being with employment or lack of it, well-being with thriving private businesses. Urban dwellers also view well-being in terms of big houses people own or at least live in, the cars they own and drive, and television sets and radios.

Access to water, health and educational services cut across all segments of both rural and urban communities. Those belonging to the <u>balanda</u> (sufferers) category do not access these services while the well to do can go for the more expensive private school and health centres.

The two tables show a definite perceived increase in ill-being levels for both the rural and urban sites. In rural areas the well-to-do categories of <u>bakankala/balibwino</u> (rich/who are well-off) are estimated to have been three times more than they are now, while the least privileged category of <u>balanda sana</u> (the very poor and suffering) are now more than three times what they were a decade ago. A similar increase of the <u>otsaukilatu</u> (who suffer through and through) was noted for the urban areas, an increase from 30 to 70 percent.

A somewhat mixed picture was painted for the two better off categories. In the first place, rural informants did not think that these were very rich households. Only a couple find themselves in the category of <u>balanda</u> (the sufferers) or <u>bapina</u> (the poor).

The case of a Mundu, Chinsali, woman who used to live well but is now poor and suffering:

- Used to cultivate a lot because the government used to provide fertilizer.
- Never used to experience droughts in those days.
- Husband was alive, he used to help cultivate a large field, therefore used to have enough food to last the whole year.
- Government used to deliver fertilizer on time.
- Government used to buy maize from them.
- Used to sell part of the harvest as source of income. Therefore could afford to buy soap, salt and other household needs. Could also afford to buy medicine.
- Education was free, never used to budget for education fees.

Now she is a mulanda (poor and suffering). Reasons:

- Husband died.
- Fertilizer is sold to them (instead of loans); they have to pay deposit of K30,000 (this is too expensive).
- Villagers are supposed to collect fertilizer from Mpika depot, she cannot afford to go because has no transport money.
- Not growing enough because of lack of fertilizer.
- Drought late beginning of rain season.

- Late delivery of fertilizer by the government.
- Cost of commodities too high (e.g. salt, soap).
- No support from children on the Copperbelt because they don't have well-paying jobs.

The situation now:

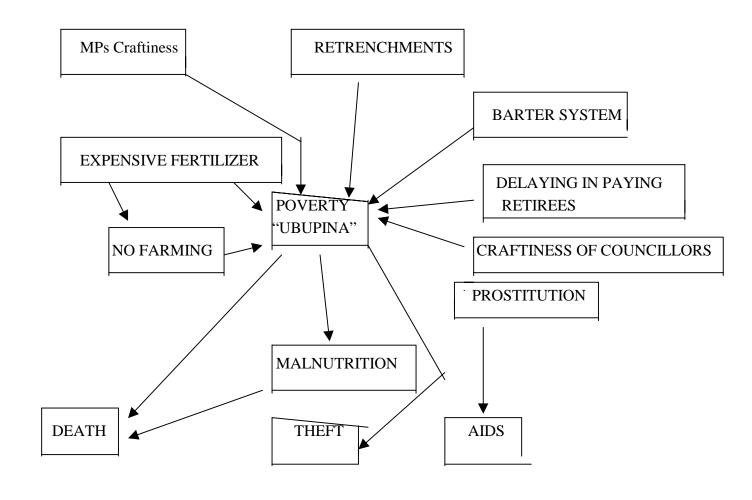
- Small space for farming because no one to help since the husband died.
- Has meals once a day.
- Cannot afford to pay education fee, all her children have dropped out of school.
- Harvest does not last the whole year, resorts to eating wild fruits.
- Sometimes works for food.
- No proper shelter.
- No food security.

3.2 Causes of (Increasing) Ill-being Levels in Rural Areas

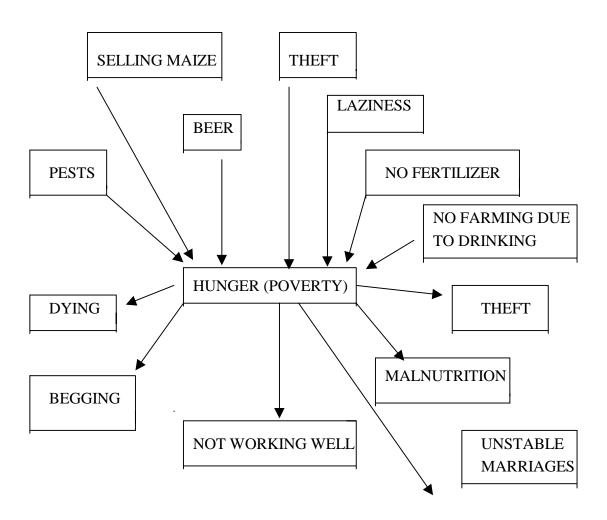
Several causal flow diagrams were drawn in each of the twelve research communities which show the causes and effects of poverty and ill-being.

Two are reproduced below:

CAUSAL AND IMPACT ANAYLSIS OF POVERTY - MUNDU, CHINSALI DISTRICT



CAUSES AND IMPACTS OF POVERTY - YOUTH OF KABAMBA



The first diagram was drawn by a group of men in Mundu, Chinsali district, the second by a mixed group of youth in Kabamba, Serenje district.

The diagrams show that poverty which is here synonymous with hunger is brought about by a number of causes. These are poor farming practices which in turn are caused by lack of expensive fertilizers and/or people's laziness and excessive drinking habits. Pests eat the little that is grown; thieves grab what remains. The four series of participatory poverty monitoring studies which the Participatory Assessment Group (PAG) has been conducting yearly since 1994 have revealed a growing tendency of stealing from the field and from granaries at home over the years. The habit of selling the bit of maize that one harvests (i.e after poor production, after thefts by humans, birds and pests) also increases the hunger/poverty levels.

The Mundu diagram adds to this list the following factors:

- . Unscrupulous private traders exchange food crops, mainly maize, for goods to the great disadvantage of the farmers.
- . Many people who have retired or have been retrenched in urban Zambia return to their homes of origin. Often their retirement packages come very late. In the meantime they languish in <u>bulanda</u> (poverty and suffering).
- . Politicians, particularly members of parliament and councillors, do not do their jobs. They rarely visit their constituencies and thus do not promote any development.

The effects of <u>bupina</u> (poverty) and <u>bucushi</u> (suffering) are, according to the two causal flow diagrams, more thefts; inability to work; malnutrition leading to premature health problems; prostitution leading to HIV/AIDS infections and, ultimately, premature death; begging for food from neighbours; and unstable marriages.

Other effects mentioned by different research groups include:

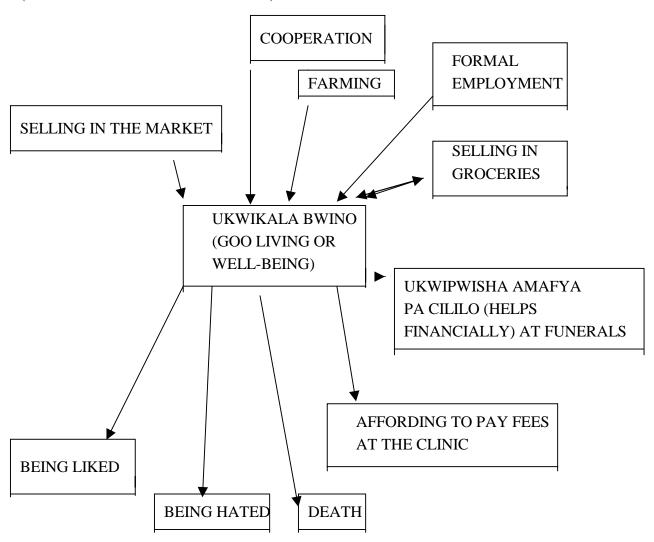
- . Inability to pay health and education costs;
- . Disease (because of malnutrition);
- . Madness (a number of people were said to have run mad because of poverty);
- . Poor dressing.

3.3 Causes and Effects of Well-being and Ill-being in Urban Areas

The flow chart reproduced below shows some of the causes and effects of well-being in a high density, low-income residential urban area.

CAUSAL- IMPACT ANALYSIS OF WELL-BEING - TWASHUKA COMPOUND

(DONE BY 10 WOMEN ON 09/02/99)



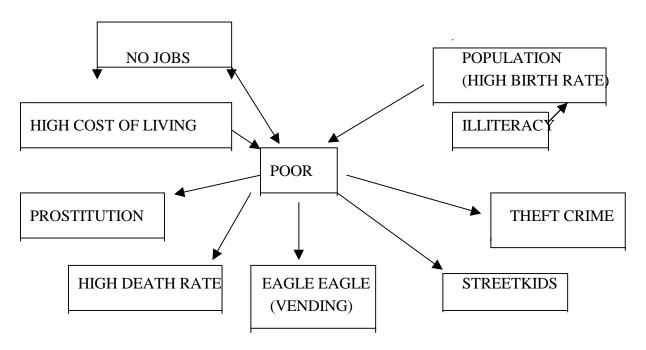
Well paying formal employment or farming, having a lucrative business of one's own, e.g. owning a grocery shop or even selling at a market and co-operation, are some of the factors that bring well-being. Ironically, the latter's effects are not always positive. For well-being and richness makes others jealous of one and hence brings hatred and death. On the bright side the

well-to-do household is often liked, it assists in meeting funeral expenses, and is able to meet health costs.

A number of households were reported and indeed reported themselves to have improved upon their well-being levels. This came about either through very hard work as attested to by case studies or because of the liberalised economy which has opened opportunities for lucrative enterpreneurship.

The flow chart reproduced below shows what a united group of 4 youths in Ng'omba, a low-income Lusaka township, perceive to be the causes and effects of poverty.

COPING WITH CRISES - DRAWN BY A GROUP OF YOUTHS AT NG'OMBE, LUSAKA



Poverty is caused by absence of jobs, population explosion (much of this population being illiterate), and by the ever rising cost of living.

Crime, especially thefts, prostitution, high mortality rates, street vending, and street kids are the results of the ever increasing levels of poverty.

Another youth group in a different Lusaka low income township, Kanyama, came up with the following causes of <u>ubupina</u> (poverty) which they equated to <u>kusauka</u> (suffering):

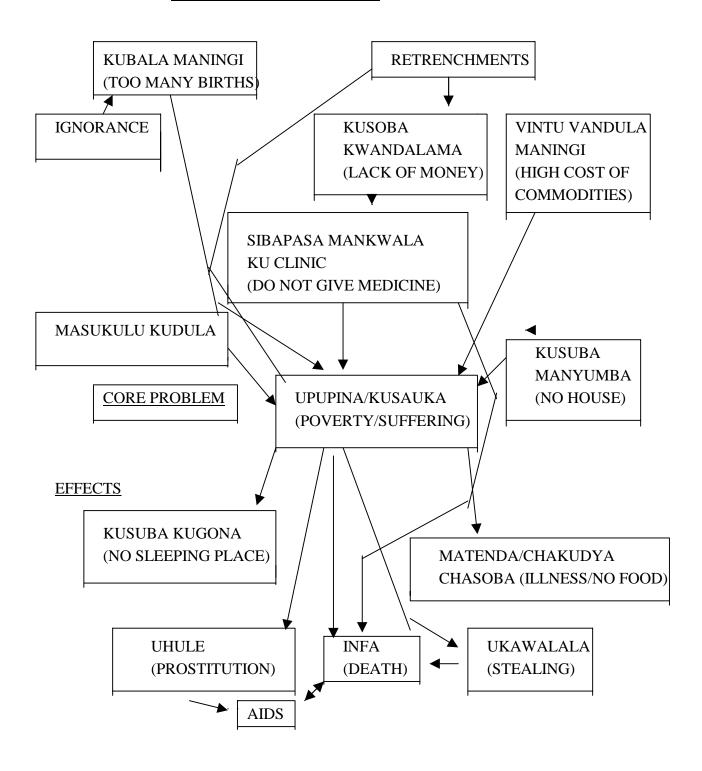
- ignorance which leads to bearing (too) many children;
- . job losses and lack of money;
- . high cost of living;
- . shortage of housing; and
- . unaffordable school and clinic fees.

The effects of all this are:

- . no sleeping place (no housing);
- . prostitution leading to AIDS then death;
- . death is also caused by inaccessible medicine;
- . thefts; and
- . illness (malnutrition) caused by lack of food.

The causal flow diagram is reproduced below:

CAUSAL-IMPACT ANALYSIS OF POVERTY AS PERCEIVED BY KANYAMA YOUTH GROUP (1 female and 3 males)



Similar trends in increasing poverty levels have been reported in PAG's yearly poverty monitoring exercises. The liberalisation of agricultural marketing has denied rural households the services of farm inputs, especially fertilizers, and marketing agencies. This has reduced farm productivity and introduced the barter system in crop marketing which has not allowed people to access cash, hence their inability to meet education and health costs.

The 1997 <u>Participatory Poverty Monitoring</u> study showed that the informal sector which the majority of the people are running after losing their jobs, is becoming less and less lucrative. This is due to (a) many business women and men doing the same thing, thus saturating the market; and (b) very little money in circulation due to the decline in formal employment.

The above factors exacerbate the poverty situation throughout the country. In rural areas it is the poor farm productivity caused by poor marketing of both farm inputs and farm produce that comes out as the biggest cause of ill-being. Unemployment occasioned by job losses which in turn have been caused by the current economic restructuring is the number one cause of ill-being in urban areas.

4. PRIORITIES OF THE POOR

4.1 Rural Study Sites Table

The table below shows the main priorities and problems from both rural and urban communities' experiences. Specific communities' rankings are presented in table form in the Annex.

TABLE 4.1 PRIORITIES AND PROBLEMS BY NUMBER STUDY GROUPS

	DDODI EMG	RURAL SITES				URBAN SITES				
PROBLEMS		WOMEN	MEN	YOUTH	SUBTOTAL	WOMEN	MEN	YOUTH	SUBTOTAL	TOTAL
1.	Water	8	7	1	6	7	4	1	12	28
2.	No/expensive fertilizers	12	9	5	26					26
3.	Agricultural related	1	4			5				5
4.	Hunger	7	4	2	13	7	3	1	11	24
5.	School related	2	7	4	13	6	3		9	22
6.	Unaffordable health fees	7	5	2	14	3	2	1	6	20
7.	Health service related	7	4	2	13	3	2	2		20
8.	Transport	5	5	2	12	3	1	4	8	20
9.	Bad roads	5	5	2	12	2	3	2	7	19
10.	Unaffordable school fees	2	3	5	10	4	1	4	9	19

11.	No employment	1	1	2	4	4	6	5	15	19
12.	Employment related (privatisation)					2	2	1	5	5
13.	No money/low income	5	2	2	9	2	5	2	9	18
14.	HIV/AIDS	2	1	1	4	8	3	2	13	17
15.	Crime/murders	2	5	1	8	6	1	1	8	16
16.	Prostitution	1	2		3	4	8	4	12	15
17.	No markets	4	5	2	11	2	1	1	4	15
18.	High cost of living	4		2	6	3	3	1	7	13
19.	Too many illnesses	2	1		3	3	1	2	6	9
20.	No. family planing/too many babies			2	2		3	4	7	9
21.	Thefts	3	1		4	3	1		4	9
22.	No grinding mill	5	2		7	2			2	9
23.	Poor housing	2	1	1	4	3	2		5	8
24.	Witchcraft	3	2		5	2	1			8
25.	Too many dependants (orphans, old sick)	4			4	3			3	7
26.	No Women's clubs	6			6					6
27.	No/poor clothing/blankets									
28.	No/poor refuse disposal					1	3	1	5	5

Surprisingly enough, water problems top the list of priorities. A similar surprise was generated by the Bank-sponsored 1994 Poverty Assessment for Zambia, in which the problem of water was underlined. The problems obviously have not been adequately addressed since they have persisted. They include poor quality of water and sheer non-availability. The problem is more prevalent in rural areas where women have often to travel fairly long distances to water sources which are not very clean. Women complained about water more than the other two groups (42.8% of the groups complained). This is because they are the people who draw water in most areas.

"Streams dry and so we walk long distances to get water. We need transport for these journeys, and also boreholes," exclaimed a young woman in Kabamba, Serenje district.

Slightly more than 86.6% of the 30 groups of rural women, men and youth mentioned fertilizer as one of their major priorities. No urban group brought it up.

"The major cause of hunger here is the lack of fertilizer. The government has stopped bringing fertilizer here as they used to do in the old days. Now we have to go to Serenje or Mkushi to get fertilizer." A Nchimishi male respondent.

That fertilizer was mentioned by more groups than even hunger -- which is often regarded as synonymous to poverty itself -- is not surprising because lack of fertilizer does not only bring hunger through poor harvest, but it also reduces cash incomes with which to access education and health services.

One big surprise is that more women's groups than those of men complained of inaccessible fertilizers. One would have thought that men are more concerned with farming than women, hence they should have talked more about fertilizer than the women did. Indeed more men's groups talked of other farm-related constraints like inadequate farm implements and unavailability of seed. The explanation to the seeming anomaly of more women expressing concern over fertilizer than men seems to lie in the fact that farming here is basically subsistence. People cultivate fields predominantly to feed themselves and food is predominantly women's concern.

Hunger came next as the most often mentioned priority/problem: 40% of the study groups mentioned it. Of these, 58.3 per cent were women's groups, once again underlining the fact that women are more concerned with feeding the family, and hence with food than men are.

The problem of hunger was causally related to poor farm yields which in turn were caused by

inaccessible fertilizer.

"How can we keep part of our harvest (to eat later in the year) when we do not produce enough. We need fertilizer as we earlier told you. That is when we can have food to eat the whole year." exclaimed an elderly woman in Ilondola, Chinsali district."

Causally related to the problem of hunger are the following:

- The inadequate crop marketing arrangements which were mentioned by 11 of the 30 rural groups;
- The bad roads (12 rural groups);
- The unavailable transport (12 rural groups); and
- Crop thefts.

The 1999 <u>Comparative Poverty Study</u> noted the proliferation of unscrupulous traders who use the barter system of exchange and swindle farmers of their produce. Using the barter system means reducing access to cash incomes and consequently to education and health services which require cash payments. This in turn increases poverty.

Four of the thirty urban groups talked of poor markets. This is because, due to many people involved in selling goods at markets, often the same types of goods, the markets are no longer lucrative. Hence it is difficult to feed the family from market incomes.

Bad roads and unavailability of transport exacerbate problems of hunger and poverty. The <u>Comparative Poverty Study</u> referred to above, observed that people (or rather men) living in the Luano/Luangwa valley have to travel several days across the Muchinga Escarpment to take mats and baskets to Serenje town for sale. Women do not take part in this very rare source of cash income for the people of Luano valley.

The poor state of the roads and of the transport system was voiced equally by rural men and women. In urban sites, the potholes and the expensive transport system which often hinder people from taking their sick to health centres, especially at night, was the concern of all the groups.

Crop thefts are a major concern in rural areas.

"We are dying from these greedy people who are stealing our food," lamented a Kabamba male respondent in Serenje district.

Accessibility to social services is another very big concern for both urban and rural communities. In the health sector, for instance, diseases and especially HIV/IADS are on the increase while health services are inaccessible. The latter is largely due to cost of health services (a third of the groups, both rural and urban).

"Now health costs are just too much (high) for the villagers who do not even have a source of income," stated a male informant in Muchinka, Serenje district.

Another problem related to health is the distance to health centres.

"Kanyama is a very big compound and yet there is only one clinic which is situated in New Kanyama (some 5 kilometres away). How can one walk all this long distance when one is ill? It becomes a very big problem when one falls sick at night because the security situation is very bad here," said a woman of Kanyama compound in Lusaka.

The problem of distance is obviously more severe in rural areas when one has to travel not 5 but often more than 50 kilometres to the nearest health centre.

Health staff attitudes towards patients and lack of maternity wards in many health centres worry community members a lot. So do constant shortages of drugs. What irritates people most is often not the cost of medicine but the fact that people are made to pay consultation fees on arrival at the health centre, only to be told at the end of a long wait and a discussion with the health staff who are often rude, that there was no medicine. This often drives them either to traditional healers who are sometimes more expensive than modern medicine and whom, in many cases, communities do not trust (see Participatory Poverty Monitoring II), or to purchasing drugs from grocery shops. Many of these drugs often have expired and/or correct dosages are not adhered to, thus compounding the ill-health status.

The women who look after the sick besides falling ill themselves were more vocal on increase of diseases, of HIV/AID, of the high costs of medicine, etc. than were the other groups.

Education ranked high as a priority among both rural and urban communities. Once again, cost of education was a major concern (19 of the 60 groups). The youth were most vocal in this regard.

"School fees, including college/university ones are too high and a lot of people cannot afford them," said a male youth of Mpatamatu, Luanshya.

Other problems related to school are:

- Distance, this was felt more acute in rural areas;
- Poor and dilapidated school infrastructure, noted more by male groups than by the others:
- Lack of secondary schools in the vicinity, both rural and urban sites; and
- Use of corrupt practices, i.e soliciting and accepting bribes when admitting pupils into the school, noted in urban areas by both the parents (male) and the pupils themselves.

Lack of employment, often caused by job losses and privatisation was the most often cited problem in urban areas. It is actually felt by both the youth and the adult males. It was also mentioned by three rural study groups: two youth, one male and one female.

Related to unemployment and poor farm yields is the rising cost of living mentioned by 13 groups, seven urban and six rural.

Women's groups are also very concerned with the ever-increasing number of dependants, especially orphans, the sick and the aged. This came out from both rural (4) groups and urban (3) groups.

Six women's groups lamented over the fact that there were no women's clubs in their areas. Such clubs often assist the women in different development activities.

Youths are very concerned with population explosion and the non-use of family planning methods.

Crime, which often ends in murder, is a concern for both rural and urban communities. Flow charts causally associated it to unemployment and deteriorating agricultural production.

Prostitution was said especially by urban male groups to be on the increase; causal flow diagrams linked it to HIV/AIDS and death.

Witchcraft is another concern expressed especially in rural areas. People practice it as a deterrent against theft. They try to ensure, through supernatural means, that misfortune, including illness and death, befall those who steal their crops. On the other hand, those who seem to be doing well in life are often the subjects of other people's envy which sometimes turns

into hatred and ends up in attempts at cutting short through witchcraft the lives of those who are doing well. This is sometimes in order to inherit their crops or merely to get rid of the people since they are different from the rest.

Other concerns were expressed over inadequate police protection in the form of Police Posts, both in rural and urban areas; inadequate social amenities; poor housing; no hammer mills; lack of electricity in homes; and illiteracy.

4.2 Change of Priorities Over Time

The informants of several communities were asked to indicate whether or not they have perceived change in the prevalence of their various problems. They also were asked to rank their problems by priority; these rankings appear in table form in this section (see Annex for additional tables from other sites).

Muchinka

The ranking matrix reproduced below is a response to the above question from a group of men in Muchinka, Serenje. The lower the rank, the greater the perceived priority.

RANKING, SCORING AND TRENDS ANALYSIS OF PROBLEMS IN MUCHINKA AREA

PROBLEM ISSUE	1999	1987
	RANK	RANK
Lack of Food	1	6
Lack of Farming inputs	2	7
Bad Roads	7	2
No Information	4	5
Educational Cost	6	8
No Social Entertainment	5	1
No Social Entertainment	8	3
No source of Income	3	4

The following are verbatim explanations of the matrix given by the group of Muchinka men who responded.

Lack of Food

'This is the number one problem we have. It has mainly been caused by the poor agricultural policies that the new government has adopted.'

'We hear about relief food being taken to some areas but it does not reach this place'.

'Ten years or so ago lack of food was not such an issue. We had enough fertilizer to do what we wanted with. Now are depending on things like mushrooms and caterpillars'.

Lack of Farming Inputs

Previously the issue of farming inputs like fertilizers and seed was not a problem (1/10). Now it has reached its maximum (10/10).

The government should change its policy from using the distribution agents who even make the inputs expensive to a system like the old where things like fertilizer are delivered straight to the

villages without all those middlemen.'

Source of Income

'Because there is no farming, our main source of income has been killed.'

'We are now depending on the barter system whereby if you have some livestock like chicken, you can exchange for cassava.'

No Information

'The government has neglected us. Now there is no information flow between us and the top.'

'So we can't get feedback on what the government intentions are and we cannot make an input in government policies.'

'The other thing is that previously we had a Post Office in this area. But that was shut down and we do not have any way of receiving mail quickly.'

Health

'This is the fifth problem now. It was number one problem then only because we had to walk to the hospital.'

'But now the health costs are just too much for the villagers who do not even have a source of income.'

Education

'This follows the health issue. Education was not a problem because previously it was free. We had nothing to pay except buy a few things like uniforms and books.'

'Now the school fees are too high.'

Bad Roads

'Previously the situation was not this bad. Even though the roads branching off from the tarmac road were gravel, they were maintained.'

'Graders would be sent to come and work on these feeder roads.'

'Now you have seen for yourselves how bad they have become.' (The team observed a major gravel road that runs from the tarmac road through the school and a number of villages to the

Mission hospital. The state of the road was not very bad except in certain places where it is eaten away by the rains and needs rehabilitation).

No Social Entertainment

'We also need some entertainment here. The only form of relaxation we have is the drinking of illicit local brews.'

'We need a social centre where we can even have games like tennis and even watch a film once in a while.' (Most of the participants were retirees from the mines on the Copperbelt where social centres for entertainment and relaxation are a common feature).

The trend analysis and matrix reproduced above, together with the discussion that followed, have given a picture of how priorities and problems are perceived to have changed over the past 10 -12 years. In summary, livelihood services have deteriorated due to factors already discussed in this report, namely expensive and poor distribution of fertilizer and the non-existence of an adequate crop marketing system.

Lusaka

The matrices and discussion that follow below give a corresponding picture of the urban areas. The first was done by a group of youths of Linda compound in Lusaka.

Problems and Priorities

The youths listed what they perceived as the most important of the problems faced in the community. These were then scored and ranked as they were seen now and about 10 years before. Health problems have come first in 1999 and have swapped places with water, which was priority number one in 1991 and is now number three.

The problems were then ranked in their order of importance from the most important to the least (i.e. 1 - 8).

The table below shows the scores and ranks of the problems in 1999 and in 1991.

PROBLEMS AND PRIORITIES AS SCORED AND RANKED BY THE YOUTHS OF LINDA COMPOUND

PROBLEM/ISSUE	1999	1991
	RANK	RANK
WATER	3	1
HOUSING	2	2
MARKET	6	4
ROADS	7	7
COMMUNITY HALL	5	6
CLINIC	1	3
SCHOOL	4	5
COLLEGE	8	8

Water

'We get water from the communal taps serviced by the Lusaka Water and Sewerage Company. This is problematic because a lot of people here cannot afford the levy of K2,000 per month.'

'Moreover the population of Linda has grown. The compound needs more water sources.'

'In 1991 we all had to depend on the few boreholes that were in the compound so the water problem was really critical.'

'Now the Lusaka Water and Sewerage Company has operations here making the situation more bearable, although water is still one of the biggest problems.'

Housing

Poor accommodation is still the number two problem even though things have improved slightly. More people here have built houses which they are renting out.'

'Organisations like the Africa Housing Fund are also helping people build houses.'

'Nevertheless, poorly built houses are falling due to heavy rains. And the population of the compound has also increased tremendously over the years.'

Market

'The market is now dilapidated. You should see these structures.'

Roads

'The problem of roads has maintained the seventh slot in items being ranked. Because now even the only tarmac which runs through the area is very bad.' (The team of facilitators observed that the road was gone in a lot of places).

'We don't want to say that the problem has been eased by the Food for Work Programme because this project is still underway.'

Community Hall

'We don't have a community hall where various activities can take place. In a community hall we can have short course in mechanic and sewing.'

Clinic

'We have had no clinic here.'

School/College

'The only school here is a grade 7 primary. Another one is under construction by Zambia Community Schools. The latter is expected to reach grade 9 in future.'

'What we also need is a skills training Centre or college where we can learn some trades.'

'The clinic, water and housing have been the three biggest priorities and problems over the past 8 years. They have only swapped positions.'

Copperbelt

For the youth of Twashuka-Luanshya compound in urban Copperbelt, the situation is very different from that of urban Lusaka. In the Copperbelt, which has seen a considerable amount of job losses and no new employment opportunities, unemployment is the biggest priority and, quite naturally, reduces the amounts of money people (including the youth) have access to. The bits of money they can lay their hands on cannot purchase much. The youth were also concerned with the high mortality rate of their parents, a condition which often turns them into orphans.

FREE SCORING OF THE CONSTRAINTS OF TWASHUKA-LUANSHYA BY A YOUTH GROUP (5 BOYS AND 8 GIRLS)

	NOW		10 YEARS AGO		
	SCORE	RANK	SCORE	RANK	
Lack of employment	30	1			
Lack of money	26	2			
Death of parents	23	3			
Strength of money	0	4			

Note: All the youths talked to were aged between 13 and 21 years old, and thus were not in a position to tell how the situation was like 10 years ago.

Problem Solving

In terms of people's ability to solve the problems they experience, a list drawn by a group of female informants in Kabamba, Serenje shows there is not much that communities can do to solve these problems.

LIST OF PROBLEMS

	PROBLEM	COMMENT
1.	Fertilizer	Someone should supply them with fertilizer. They cannot do it on their own.
2.	Hammer mill	"We cannot afford them, let government or UNICEF bring them to us.'
3.	Clinic/ambulance and health post	Government should bring them.
4.	School	Government should provide trained teachers.
5.	Transport	Unable to provide this on their own.
6.	Food	Relief food should be brought in.
7.	Mono pumps and boreholes	These should be provided in order to solve our problems.
8.	Certified seed	Should be provided.
9.	Cattle loans	Should be given.
10.	Skills training	Should be provided.
11.	Community health post	Should be provided.
12.	Looking after the poor and vulnerable	Food and clothes should be given to those who are looking after vulnerable people.

The list of problems people can solve on their own has one precondition which outsiders, particularly government, must fulfill first before the people can solve the problems.

The list includes: thefts, water, clothes, diseases caused by hunger, money and unemployment. The precondition is: Government must provide fertilizer.

"This will sort out the problem of unemployment as people will be engaged in farming.

"There would be enough food; theft (of food crops) would reduce as well as diseases related to starvation; many problems would also be a thing of the past as farm products would be sold. The money would be used to buy clothes.

"If people can be provided with the necessary material and technical support, that is, drilling of boreholes and installing mono pumps, they would provide the necessary labour to put up (water) structures"

(statements from Kanyama women's group participants).

The strong sense of dependency on external support to solve problems which the rural group of women expressed above is confirmed and consolidated in no uncertain terms by an urban group of men. The latter listed their problems as: unemployment, health (no access to drugs), low salaries, poor quality water, diseases, hammer mill and transport. And this is what they had to say about the solutions to these problems:

"The government should bring on more investors so that jobs can be created.

"United Transport Taxis Association (UTTA) should start servicing our compound as well so that those who can afford will be able to use the buses.

"The council has got a half of land which they can give to us so that we can start farming.

"The government should have a hand in controlling the prices of food commodities, especially price of mealie meal. They know very well that we all need to eat and that we cannot afford the higher prices but are just watching us suffer."

"The government should assist us digging more bore holes since the two which we have are not adequate for the whole compound.

"The Government through the Luanshya Municipal Council should

from time to time spray our shallow wells with chemicals."

It is the strong option of the author of this report that promoting a sense of self-reliance after years of being spoon-fed by government parastatals is one way towards the attainment of sustainable development in both rural and urban Zambia.

5. INSTITUTIONAL ANALYSIS

This section of the report does the following:

- . Identifies the various institutions which influence people's lives. These are formal and informal, government and non-government.
- . Discusses the roles and functions which these institutions play and perform.
- . Describes how people rate these institutions.
- . Analyzes whether people, i.e the poor who are the subject of this study, have any control over said institutions.
- . Describes how people cope with crisis.

5.1 Institutions That Play a Role in (Poor) Rural and Urban Communities by Their Status

TABLE 5.1 INSTITUTIONS THAT PLAY A ROLE IN (POOR) PEOPLE'S LIVES BY NUMBER OF RURAL AND URBAN STUDY SITES AND LOCATION

	LOCATION			STATUS				
INSTITUTION	RURAL	URBAN	TOTAL	FORMAL	INFORMAL	GOVT.	NON-GOVT	
1. Africa Housing Fund			1					
2. Agricultural Extension	6		6					
3. Bachimbusa (female instructress at puberty and marriage rites)	1		1					
4. Catholic Women's League		1	1					
5. Children in distress		1	1					
6. Training Farmers Group	1		1					
7. Christian Children Fund (CCF)		1	1					
8. Church	6	5	11					
9. Councillor (Ward)	6	2	8					
10. Community Development (Department)	2		2					
11. Farmers Group	2	2	4					
12. Filolo (Chief's advisors)	2							
13. Health Centre/Hospital	4	4	8					

14. Hospital (Mission)			1		
15. Hope Foundation	1	1	2		
16. Human Settlement in Zambia		1	1		
17. Humanist Society		1	1		
18. JICA		1	1		
19. Lusaka City Council (LCC)		2	2		
20. Lusaka Water and Sewerage Company		1	1		
21. Member of Parliament	6		6		
22. Mine Police		2	2		
23. Mine Workers Union		3	3		
24. Movement for Multiparty Democracy (MMD)	1	1	2		
25. Neighbourhood Health Committee	3	1			
26. Neighbourhood Watch	4	3	7		
27. Orphan Support Program	1		1		
28. Parents Teachers Association	2		2		
29. Peace and Justice Commission	1		1		
30. Planned Parents Association		1	1		
31. Red Cross		2	2		

32. PUSH		1	1				
33. Residents Development Committee		4	4				
34. Rotary International		1	1				
35. School/Education	5		5				
36. Social Welfare (Department)	2		2				
37. Sultan (Village heads)	2		2				
38. Veterinary Officer/Department	3		3				
39. Village Committee	1		1				
40. Zambia Community Schools		2	2				
41. Zambia Police	2	3	5				
42. Women's clubs	2		2				
43. Young Women Christian Association		1	1				
44. Youth Club	1		1				
Totals	6.8	56	124	33	9	9	33

A total of 42 different institutions have made their presence felt by the twelve different communities of the study sites. As many as 20 of them were mentioned only once. The most often mentioned (the churches) were mentioned in practically all the study sites. Other institutions whose work and effect are found in the poor rural and urban study sites were health centres/hospitals and world councillors (mentioned in 8 places each), agricultural extension and members of parliament (6 times), and schools and Zambia Police mentioned in 2 sites each.

The table shows that the majority of these institutions are non-governmental. This is perhaps the way it should be in a liberalising country where government is shedding off most of its functions to civil society. In any country, government may not be in a position to carry out all the functions that non-governmental organisations are now doing. However, the fact that only 21.4 per cent of the institutions working with the poor are informal seems to leave much to be desired. For it points back to the deep sense of dependency alluded to in the previous section. There are, however, more institutions working among the rural poor (78.5%). This is probably as it should be given the fact that poverty is more widespread in rural Zambia than in urban areas.

5.2 Rating the Institutions

Most of the 60 study groups of women, men and youth ranked the institutions operating in their midst. The following table is an example of these rankings, drawn from different groups in Ilondola, Chinsali.

The smaller the number, the more highly the institution is rated. The matrix refers to the effectiveness of the institutions, i.e. the value of the services the institutions provide.

TABLE 5.2 RANKING OF DIFFERENT INSTITUTIONS BY DIFFERENT GROUPS IN ILONDOLA, CHINSALI

INSTITUTIONS	MEN'S GROUP 1	MEN'S GROUP 2	WOMEN'S GROUP 1	WOMEN'S GROUP 2	YOUTH GROUP
Health Centre	2	1	1		2
School	5	2			3
Member of Parliament	V	V	1	4	5√
Councillor	V	V			V
Agriculture (Ministry)	V			4	4
Veterinary (Department)	4	3	1		
Church	1			1	
Roman Catholic	1				
Community Development Officer	$\sqrt{}$				6
Village Committee	3		1	2	
Neighbourhood Health Committee			4		V
Neighbourhood Watch			1	3	V
Hope Foundation			3		
Youth Club			4		
Justice and Peace			2		
Parents Teachers Association			1		

Key: $\sqrt{}$ Group was not willing to rank that particular institution; same ticks in combination with numbers was deducted from RGDs.

Narrative Analysis

Health Centre

The Health Centre was ranked number one by two groups and number two by two others. Only one women's group (second) did not mention it as an institution in their village because they felt it belonged to Ilondola (Chakuba village). The people felt that they were benefiting from the health services the hospital was providing, the men further went on to say it was helping the poor in that they accepted payment in kind or deferred payments. In their view, although health came first above all other things, it was ranked second in some cases because church was considered above it, and because the clinic was understaffed with the nurses not being very receptive to patients (this was expressed by the youths).

It was ranked 2, 3, and 5 by the second men's group, youth, and first men's group respectively. The two women's groups did not list the school under institutions. All three groups felt the school was effective as the pass rates were good. The first men's group also added that they could influence the work of the school through the PTA. The only negative aspect of the school was the fees which they thought were too high.

Member of Parliament

He was ranked number one by the first women's group which said he had done quite a number of things in their community - bringing electricity, bringing maize and donated blankets and iron roofing sheets to the hospital. The second women's group ranked him fourth, whereas the youth and the two men's groups were not even willing to rank him as they were very displeased with him. They said they could not see his work.

Councillor

Two groups mentioned him but none of them ranked him, as they thought he was not even worth ranking.

Agriculture

Out of the four groups that put down this institution, two ranked it fourth and the other two merely mentioned it and said they could not rank it. The youths said the agriculture people teach them farming methods but in spite of this they are not helpful as they don't bring fertiliser. The men felt they concentrated on other areas and not their villages.

Veterinary Department

The department was mentioned by only one group (first men's group). They were pleased with the officer as he would treat their animals when sick. They did not mind that they were charged so long as he provided the service.

Church

This is all churches combined. Four groups ranked it number one, reasons being God is supreme and overall. The churches assist orphans by meeting educational costs, they help those who are poor spiritually and materially, they provide Christian teaching which has helped stabilise marriages and improved gender relationships between men and women. The second men's group ranked the church third because of mentoring and that they help orphans. The youths did not rank all the churches they only mentioned them saying they spread the word of God.

Catholic Church

The youths (who are the only ones to mention this particular church) ranked it number one because it helps the needy, and it does not segregate.

Community Development Officer

This officer was noted by the first men's group and the youths, both of whom did not look at him favourably as they thought he was not worth ranking. This was because they felt he was not working.

Village Committee

The village committee was ranked 1, 2 and 3 by the first, second women's groups and the first men's group respectively. The latter, however, changed its ranking from 3 to 2; this was influenced by the headman who was a member of the committee. The reasons for the high ranking are that village committees settle disputes and thus bring peace; they pass regulations on hygiene; and it was added by the men's group that the committee had formed itself and thus had control.

Neighbourhood Health Committee

It were ranked fourth and just mentioned by the youths as people felt they really did not know the committee and thus could not appreciate its work. One woman defended it saying it was new.

Neighbourhood Watch

The two women's groups ranked this institution 1 and 3 saying they help curb crime in their communities. The youths on the other hand felt that they were doing nothing.

Hope Foundation

This was ranked third by the first women's group which was the only one to mention the foundation. They said it helps the poor but it helped only once.

Natwikatane Youth Club

Here again only the first women group mentioned it. It was said that it is a women's club but the women do not go there, and thus it was not perceived to be effective.

Justice and Peace

The first women's group was the only one to mention the group. Many people did not seem to know the group but a very vocal lady said she was a member, and that because they worked incognito, this was why the group was ranked number two; a lot of the ladies seemed to appreciate that the particular lady was hardworking.

Parents Teachers Association

Was mentioned by the first women's group and ranked one as they felt they participated fully in the association, and that the association was being effective in taking the parents' grievances to the school.

5.3 Ranking Institutions in Terms of Effectiveness in Muchinka, Serenje

Once again the churches scored high for the services they provide to the very needy (which is often concluded in supernatural terms). The Mission Hospital and the school that are providing health and education services also scored high.

On the other hand, the women's club had a low rating because only a few women benefit from it; so does the Christian farmer's group whose targets are only few selected farmers. The government Community Development worker was mentioned by one group of women and given a low rating because "he does nothing." The same complaint was levelled against the electoral local politicians, namely, the member of parliament and the ward councillor whom respondents said hardly visit them, let along bring development to their area.

In urban areas the resident development committees (RDCs) generally ranked high because they are often seen to organise people for community development work.

There are no major differences between men, women and youths in the ranking matrices.

The institutions that are perceived to provide most services in urban areas are the churches. The Resident Development Committees are not trusted by the communities. In Serenje, the traditional leaders, namely chief's advisors (filolo) and village headmen and women (sultans), are perceived to provide such important functions as arbitration in the case of disputes. Many of these disputes arise from crop thefts and the often accompanying witchcraft accusation and practices.

While the Neighbourhood Watch was created for the noble purpose of providing security to people and is appreciated for this in urban sites, in others, like Mundu (see Annex), they have outlived their usefulness as they now use excessive violence against suspected culprits, especially crop thieves.

5.4 The Poor's Influence and Control over the Institutions

The people, the majority of whom (more then 90%) are poor and whom the 42 institutions serve, do not generally have much to say about the majority of them. This is understandable in view of the fact that most institutions (78.5%) are formal ones. That is, they are either government or NGOs which have been formed and created and sent from the Centre, Lusaka, or from abroad. They have specific mandates and long established ways of doing things, and most of them have not begun to listen to the people they work with as, for example, the Microprojets Unit does through agricultural extension and farming systems research.

The few institutions that influence people are local and informal community-based organisations (CBOs) which the poor have had a hand in their information. However, these account for less than 22 per cent of the total number of institutions over which some informants said they had some control and influence. These include women's and youth clubs, the health Neighbourhood Committee, the RDC and, surprisingly enough, the churches including the very hierarchically organised Catholic Church. Probing revealed that the poor were not thinking of such church functions as appointing leaders (bishops) or formulating dogmas, which are functions done by Rome. They meant local church groups, small Christian Communities with which they relate on a daily basis and which provide them the much needed services, e.g food, health care, and care of orphans and widows.

A complaint was raised about some of these institutions and groups, namely that they tend to favour their fellow members to the exclusion of the rest.

5.5 Coping With Crises

The following are the types of crises that were identified by the various study groups: funerals, hunger, diseases (especially those of prolonged duration), and being widowed or orphaned. The crises were voiced equally by male and female respondents in both rural and urban study sites. Crop pests and droughts came up exclusively in rural sites while several urban sites mentioned job losses and houses collapsing because of floods.

1. Collapse of houses: This is a seasonal catastrophe which affects a good number of community members especially in Linda and Kanyama who live in muddy houses.

"We know no institutions to which to turn to in such a situation. We go and squat with relatives; some of the elderly people whose houses collapse seek refuge at the local Catholic Church." Linda informant.

- 2. Hunger: There are several strategies that the affected adopt. These are:
 - Food theft (all rural sites)
 - Searching for and getting involved in piece work in neighbouring farms (Linda)
 - Work on Food-for-Work program (Linda, Ng'ombe)
 - Reliance on relief food (Mundu, Linda)
 - Use of barter system where items like fish are exchanged for cassava (Muchinka)
 - Emphasis on grouping cassava instead of maize; cassava does not require the use of fertilizer and, in fact, Chief Muchinka has declared that all his people must grow cassava

Other coping strategies that PAG found in previous studies include families moving away from their homes into distant hills where soils had not yet been destroyed by overuse of fertilizers.

- 3. A previous study in Chief Muchinka's area found that all the houses and villages were very clean. The chief sends away from his chiefdom all who cannot follow his rules. Families remove themselves from education and health centres, thus exacerbating their poverty. Others go back to the traditional shuffling cultivation (Serenje, Chinsali and Isoka). Young men of Luangwa were said to abandon their families and return to their houses (they practice uxorilocal marriages) when hunger strikes. Others adopt more sustainable strategies by diversifying their livestock, so that when disease attacks and decimates the cattle population, they go in for goats.
- 4. Droughts: most people sit and do nothing while awaiting for a better next year.

5.	Funerals			
	ı			

"Churches came to the aid of the bereaved.' This is the only institution which helps in times of crises, exclaimed a female Muchinka respondent.

- 5. Widowhood and being orphaned: the following coping mechanisms were mentioned:
 - Being left to fend for oneself, especially after relatives of the deceased have grabbed all the latter's property.
 - Going to stay with relatives. A current Situational Analysis of the orphanage problem is finding out that, besides having limited access to food, health and education, orphans suffer from a tremendous sense of isolation.
 - Churches often look after orphans by periodically assisting them with clothing, food, and the ability to get their education and medical care.
 - The Orphan study referred to above, and a 1996 study of the public Welfare Assistance Scheme, both by the OAG, revealed a growing number of community based organisations and individuals looking after both the widows and the orphans.
- 6. Disease: The clinic is the usual place people go for treatment. However, prolonged bans of illness, compounded by inadequate supplies at the modern Health Centre, often drives patients to seek traditional healer assistance.
- 7. Job losses: Investing retiring packages into business ventures is one common strategy people who lose jobs adopt. However, the problem is that retirement pay comes very late for many people.

"The coping mechanism for retrenchees from Mount Makulu Agricultural Research Station is investment of their retirement packages into businesses such as bars, tarvens and transport. Those who were retrenched from town and neighbouring farms get involved in illegal charcoal burning. However, these income generating activities have proved to be unsustainable because people do not have adequate business skills." A Linda male informant.

8. The extremely poor: These fend for themselves most of the time. In urban areas some go out into the streets begging while many go to the garbage disposal place to pick remnants of food. Ilondola residents talked of the Hope Foundation which "helps those who are very poor by providing them with food through women's group. However, this was only done once".

5.6 Other Well-being Issues

Having discussed well-being and ill-being and the latter's causes and effects, the problems that people experience, and the institutions that assist or at least are supposed to assist them, it now remains to discuss several issues which relate to the broader subject of well-being.

Social Exclusion

It was the overwhelming view of the study groups that nobody is excluded from any aspect of community life. However, a few examples of exclusion were hinted at here and there. Thus the youth group of Musanya thought that vulnerable people, particularly the blind and disabled and those who work for others in order to obtain food, are often excluded from participating in community activities.

In another site, the elderly and the youth are either deliberately included or exempted from such communal work as road mending.

Orphans, as already stated, feel a deep sense of exclusion from their mates because of their situation.

Social Cohesion and Conflict

On social cohesion, the various groups generally felt that it exists, especially through the large attendance and support given to each other during funerals. Giving of food to the needy by others who have a little was also seen as a sign of social cohesion. Inasmuch as social cohesion exists, there do occasionally occur conflicts. These occur when there is mismanagement of communal funds. When this issue was raised among a group of women during an EED, there was total silence and violence of answering the question (conflict), which indicated that conflicts do exist.

Crime and Conflict

While occasional conflicts between individuals was acknowledged, there are no long standing feuds and conflicts on such differences as religion, colour or activity. None of the Hutwache study sites mentioned such conflicts. However, a 1996 study by PAG, a Beneficiary Assessment for the European Union funded Microprojects Programme, noted a growing ill-being which the people of Ng'ombe (one of the current 12 study sites) were harbouring against the economically well off neighbours who reside in Roma township. The poor of Ng'omba are often required to attend the funerals of the rich of Roma. The latter make all the decisions regarding a nursery school which is supposed to serve the two groups. While this has not blown into actual conflict, there is some tension which was not observed in the current study.

Crime, however, is perceived to be on the increase. In the rural areas it takes the form of food thefts and a few murders. In urban areas thefts, rape, prostitution and, increasingly, murders are the order of the day.

Opportunities for Economic and Social Mobility

The statements quoted below capture the achievements of the majority of the rural study participants.

- "Opportunities for economic and social mobility have not increased; if any they have gone sleepily," claimed a Mundu male participant.
- "As a result of this down movement most of us previously rich have become poor, we can not feed properly, cannot meet the cost of both health and education," observed another man.
- "The fact that fertilizers are left at Mpika and we only are told to go there to collect them, when in fact they know we do not have such capacity to travel, this makes our hearts break. The members of Parliament that have been chosen do not seem supportive, thereby demeaning our opportunities for upward social mobility," said one man lamentably.

When asked to comment on how they perceive the future relative to existing opportunities, it was the poor's view that the future was bleak as long as everything was left in its current condition. "So long as no attempt is made by policy makers to reverse the trend by providing input fertilizers through village headmen and groups, we will all one day wake up dead," said a man helplessly.

5.7 Suggestions to Come out of Ill-Being

"Let government, the councillor or member of parliament do this or that," or "They have now stopped doing this or that" are the most frequently heard cries. However, a number of people have come up with some positive suggestions.

One such suggestion is adopting sustainable means of raising livelihoods when previous ones have failed. The examples of switching to cassava from the short lived maize growing in Muchinka, Serenje and to goats when cattle die from drought are two such examples.

Training in business skills, preferably done by an NGO, is another suggestion made by research participants. This will greatly assist able-bodied people who lose jobs in the formal sector.

Government and donor assistance (financial and otherwise) should be channelled more often through the NGOs, churches, the mushrooming community-based organisations (identified in the

1996 and the 1999 orphan studies), and individuals who look after the vulnerable (e.g. the orphan, widow, hungry, old and poor). The established government agencies have been ranked rather low in this study.

6. GENDER RELATIONS

6.1 Major Responsibilities within the Household

Except for slashing grass, which is men's exclusive responsibility, and tilling the land, in which both men and women participate, the rest of common household responsibilities are carried out by women. These are cooking, washing dishes, sweeping, etc. There is, however, a gradual change whereby men are starting to participate. Retrenched men in urban sites, especially Luanshya, admitted that now that they are no longer the breadwinners, all they can do is to stay home and do household chores which once were regarded as female activities. The men and women have changed roles to an extent in that many of the women are now the breadwinners while the men stay at home.

ANNEX

PROBLEMS AND PRIORITIES TABLES (the smaller the number, the greater the problem)

TABLE I: PROBLEMS AND PRIORITIES – ILONDOLA SITE

PROBLEMS	MEN 1	MEN 2	WOMEN 1	WOMEN 2	YOUTH
1. No Clinic	1	1	1	3	1
2. No Fertilizer	2	2	2	6	
3. Few Teachers					4
4. School Dilapidated	3	3	3	5	2
5. No Market	5	6	6		
6. Unemployment	6				
7. No Police	7				
8. No Grinding Mill		4	5		
9. Water	4	5	4	2	
10. No Women's Club			7		
11. No Money				7	
12. Too many Orphans				4	
13. Hunger				1	
14. No Basic School					3

TABLE II: PROBLEMS AND PRIORITIES - MUNDU, CHINSALI

PROBLEMS	RANKS GIV	EN TO DIFFER	ENT PROBLEMS I	BY DIFFERENT	GROUPS
	GROUP 1 WOMEN	GROUP 2 WOMEN	GROUP 3 MEN	GROUP 4 MEN	GROUP 5 YOUTHS
Harmmer-mill	6				
Transport	5	5	5	4	5
Women's Clubs	4				
Roads		6	6		
Water		2		2	
Bridges				5	
Security			4		
Market		7			4
Fishing Nets					1
Fertilizer	1	1	1	1	
Gas Fees		4	3		2
Domestic Animals	3				3
Prices of Commodities	7			3	
Ambulance		3			
Negligence by H. Worker	2		2		

TABLE III: PRIORITIES & PROBLEMS - MUCHINKA, CHINSALI

PROBLEMS	CATEGORIES OF HOUSEHOLDS
1. No Clinic	1, 1, 1, 3, 1
2. No Fertilizer	2, 2, 2, 6
3. Few Teachers	4
4. School Dilapidated	3, 3, 3, 5, 2
5. No Market	5, 6, 6
6. Unemployment	6
7. No Police (Security)	7
8. No Grinding Mill	4, 5
9. Water	4, 5, 4, 2
10. No Women's Club	7
11. No Money	7
12. Too many Orphans	4
13. Hunger	1
14. No Basic School	3

TABLE IV: CHANGES IN PROBLEMS AND PRIORITY – MUCHINKA, CHINSALI (prioritised problems both BEFORE and NOW, ranked by different groups)

PROBLEMS	GROUP 1 WOMEN 1		GROUP 2 WOMEN 2		GROUP 3 MEN		GROUP 4 MEN		GROUP 5 YOUTHS	
	BEFORE	NOW	BEFORE	NO W	BEFORE	NOW	BEFORE	NOW	BEFORE	NOW
Hammer Mill	2	6								
Transport		5		5		5		4	1	5
Women's clubs		4						2		
Roads				6		6		5		
Water				2						
Bridges										
Security						4				
Market			1	7						
Fishing Nets									5	4
Fertilizer		1		1		1		1	4	1
User fees				4		3				
Domestic Animals									2	2

Money		3					3	3
Prices of Commodities		7				3		
Ambulance			3					
Negligence by Health Centre		2		1	2			
Essential Commodities	1							

TABLE V: CHANGES IN PROBLEMS AND PRIORITY - MUSANYA (prioritised problems both BEFORE and NOW, ranked by different groups)

GROUP 1 WOMEN GROUP 2 WOMEN				GROUP 3 MEN			GROUP 4 MEN			GROUP 5 YOUTHS				
PROBLEMS	NOW	10 YRS AGO	PROBLEMS	NOW	10 YRS AGO	PROBLEMS	NOW	10 YRS AGO	PROBLEMS	NOW	10 YRS AGO	PROBLEMS	NOW	10 YRS AGO
WATER	2	1	WATER	4	4	CLINIC	1	1	CLINIC	1	1	CLINIC	1	1
CLINIC	3	2	SCHOOL	3	5	SCHOOL	3	2	CLINIC	3	-	LACK OF DESKS	4	5
SCHOOL	5	3	CLINIC	1	1	WATER	4	2	SCHOOL	2	-	SCHOOL FEES	2	4
FERTILIZER	6	5	FERTILIZER	2	2	UN EMPLOYMENT	6	6	FERTILIZER	5	2	LACK OF BASIC SCHOOL	3	2
HUNGER	1	6	HAMMER MILL	5	3	SECURITY	7	4	WATER	6	-	LACK OF TEACHERS	5	-
LACK OF MONEY	7	7	MARKET	6	7	FERTILIZER	2	7	MARKET	4	-			
ORPHAN	4	4	WOMEN'S CLUB	7	6				HAMMER MILL					