### 附属 資料

ミニッツ

組織図(LDHMT:ルサカ地区保健管理チーム)

岡本雅博短期専門家調査報告要旨

MICROCREDIT ASSESSMENT MISSION TO LUSAKA(英文)

Dr. Dibalok SINGHA

マイクロクレジット調査報告翻訳版(要約)

ZAMBIA INTEGRATED HEALTH PACKAGE

USAID/ZAMBIA



# THE MINUTES OF THE MEETING BETWEEN THE-JAPANESE CONSULTATION TEAM AND

## THE AUTHORITIES CONCERNED OF THE REPUBLIC OF ZAMBIA ON THE JAPANESE TECHNICAL COOPERATION FOR

### THE LUSAKA DISTRICT PRIMARY HEALTH CARE PROJECT

The Japanese Consultation Team (hereinafter referred to as "the Team") organised by Japan International Cooperation Agency (hereinafter referred to as "JICA") and headed by Dr. Takefumi FUKUHARA, visited the Republic of Zambia from 10th to 17th of March, 1998 for the purpose of reviewing the activities concerning the Lusaka District Primary Health Care Project (hereinafter referred to as "the Project"), and discussing the future plan of the Project.

During it's stay in the Republic of Zambia, the Team exchanged opinions and had a series of discussions with the Zambian authorities concerning the activities and implementation plan of the Project. The Joint Coordinating Committee Meeting of the Project was held between the Republic of Zambia and Japan in Lusaka on 13th March, 1998.

The result of the discussions is attached hereto.

Lusaka, 16th March, 1998

Dr. Takefumi FUKUHARA

Leader

Consultation Team

Japan International Cooperation Agency

Japan

Dr. Kashiwa BULAYA

Permanent Secretary Ministry of Health

The Republic of Zambia

Dr. R. KUMWENDA-PHIRI

District Director of Health-Lusaka

The Republic of Zambia

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### ATTACHED DOCUMENT

### I. ATTENDANCE OF JOINT COORDINATING COMMITTEE MEETING

(1) Japanese side

Consultation Team

Dr. Takefumi FUKUHARA Managing Director,

Medical Cooperation Department, JICA

Prof. Hiroshi SUZUKI Professor of Public Health, Niigata University,

School of Medicine

Dr. Shigeru SUGANAMI President, The Association of Medical Doctors of

Asia

Mr. Noritaka KITSUKI Staff, Second Medical Cooperation Division, JICA

Japanese Experts

Mr. Yoshio SAITO Chief Advisor Mr. Masonori OIKAWA Coordinator

Dr. Keiko HATTORI Health Programming and Planning

Ms. Yoko SHIMADA Health Education
Mr. Masahiro OKAMOTO Social Research

JICA Zambia Office

Mr. Naoki ANDO Assistant of Resident Representative

(2)Zambian side

Dr. R. KUMWENDA-PHIRI Project Director, District Director of Health-Lusaka

Dr. Sarai B. MALUMO Project Coordinator,

Manager Planning and Development

Lusaka District Health Management Team

Dr. Moses SINKALA Project Coordinator,

Manager Planning and Development

Lusaka District Health Management Team

Dr. B. U. CHIRWA Ag/ ex. Director - University Teaching Hospital

Dr. L. CHIWELE Head, Community Medicine Department,

School of Medicine, University of Zambia

Mrs. Febby SINYENGA Ag/ Sister in Charge, Chawama Clinic Dr. E. LIMBAMBALA Director of Monitoring & Evaluation,

Central Board of Health

Dr. C. MUKUKA Clinical Care Specialist - South East Region

Mr. Watson C. NGOMALALA Chief Economist (AID), External Resource

Mobilisation Department,

Ministry of Finance

(3)OBSERVER

Mr. Shunji MATSUBARA Second Secretary, Embassy of Japan

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### II. GENERAL REVIEW OF THE PROJECT

The Project started on the 17th March, 1997 with 5 years term for the purpose of improving the overall health status of the people in the community in Lusaka District in line with the Zambian Health Reform Policy and the Strategic Plan.

Lusaka District Health Management Team (hereinafter referred to as "LDHMT") has played a roll for implementing the Project as principal implementing organisation with support of other Zambian cooperative partners in cooperation with JICA.

General performance of the Project in line with Record of Discussion signed on 19th February, 1997 was acknowledged until now by the Zambian side and the Japanese side as follows:

- (1) Dispatch of Japanese Experts (ANNEX I)
- (2) Provision of Machinery and Equipment (ANNEX -II)
- (3) Achievement of the Project

Several activities have been performed to date as shown in ANNEX-III.

- (4) Local cost funded by JICA (ANNEX IV)
- (5) Input of the Zambian side
  - a. Zambian side provided proper office room to the Project in LDHMT building.
  - b. Every staff of LDHMT and Urban Health Centres (hereinafter referred to as "UHCs") have collaborated with JICA Experts for effective implementation of the Project. (Ref: List of Zambian Counter-parts as show in ANNEX V).
  - c. Budget for the implementation of the Project has not been separately accounted from total budget of LDHMT. (Ref: Budget of LDHMT and UHCs as show in ANNEX-VI)

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### III. SUMMARY OF MEETING

The Team and Zambian side discussed and agreed upon the following matters. The agreed matters will be reviewed and might be revised in the next Joint Coordinating Committee Meeting.

- (1) Project Design Matrix (ANNEX-VII)
- (2) Tentative Schedule of Implementation for the Project (ANNEX-VIII)
- (3) Selection of the pilot compound
  George compound has been selected as the pilot compound. George compound is one
  of the compounds that have the poorest sanitary condition and health status in Lusaka
  District. The intervention of the Project is expected to multiply the effect of the
  water Supply Project in satellite Area of Lusaka (Japanese Grant Aid), which has
  been dramatically improving the accessibility of residents to safe water in the area.
- (4) The project activities for community-based Primary Health Care
  - a. The main community-based Primary Health Care (hereinafter refered to as "PHC") activity focuses on prevention of malnutrition and diarrhoeal diseases through health education and improvement of sanitary conditions. This activity will be carried out through community-based resources, which would be community health workers, Neighbourhood Health Committee (hereinafter referred to as "NHC") and water committee under Resident Development Committee (hereinafter referred to as "RDC"), NGOs and others. LDHMT and Lusaka City Council will take strong initiative to implement the activities with best coordination.
  - b. Income-generating activities including microcredit would be examined as intervention for improving health status of residents with health information delivery in collaboration with NGOs and community organisations.
  - c. The school health activities including health education, such as diarrhea and malnutrition and health check for basic school students would also be examined as prospecting interventions. If LDHMT and Ministry of Education agree to do some school health programmes, the Project might support them.
- (5) The project activities for the referral system
  - a. The referral system will be improved through operational research and capacity building of the system. The research and capacity building focused on children diseases would cover diagnosis, reference, case management and treatment at different levels of the referral system comprehensively.
  - b. The capacity building of UHCs, and 1st Referral Hospitals will be carried out through practical trainings at University Teaching Hospital (hereinafter referred to as "UTH") Paediatric and Child Health Department, UTH outreach activities, and others mutually agreed upon. Zambian side shall share the training costs:20% of the whole

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costs in the second year of the training programme, 40% in the third year, 60% in the fourth year, and 80% in the f ifth year.

- c. The physical capacity building of health institutions in Lusaka District would be carried out within the budget limitation of Japanese and Zambian sides in accordance with essential health care package only if it proves to be sustainable in terms of finance, maintenance and operational skills of the practitioners.
- (6) Provision of machinery and equipment
  Both sides agreed that the Zambian Government through LDHMT will be responsible
  for local costs such as maintenance, insurance and any other costs for machinery and
  equipment provided by the Government of Japan for the successful implementation
  of the Project.

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### ANNEX I DISPATCH OF JAPANESE EXPERTS

NAME OF EXPERTS	FIELD OF ACTIVITY	TERM OF DUTY
LONG-TERM EXPERTS		
Mr. Yoshio SAITO	Chief Advisor	24th March,1997 -23rd March,1999
Mr.Masanori OIKAWA	Coordinator	24th March,1997 -23rd March,1999
Dr.Keiko HATTORI	Health Programming & Planning	3rd December,1997-2nd December,1999
Ms.Yoko SHIMADA	Health Education	12th December,1997-11th December,1998
SHORT-TERM EXPERTS		
Dr.Hideki YAMAMOTO	Public Health	4th August,1997-25th August,1997
Mr.Masahiro OKAMOTO	Social Research	20th February,1998-4th April,1998

16th March, 1998

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ANNEX II

MACHINERY AND EQUIPMENT, PROVIDED BY JICA in J.F.Y. 1997

DESCRIPTION	MAKER / MODEL	PRICE(US\$)
TOYOTA Land Cruiser P/UP	HZJ75RD-MR STD	27,673
MITSUBISHI Pajero	GL2400 / petrol	23,435
MITSUBISHI Pajero	GL2400 / petrol	23,435
Personal Computer with Laser Printer	Compaq Desktop2000T	4,025
Personal Computer with Laser Printer	Compaq Desktop2000T	4,025
Video Deck	Philips	557
Video Deck	Panasonic	417
Portable Electric Generator	Yamaha YL-1600	769
Notebook Computer	IBM Thinkpad 380ED	3,238
Photocopy Machine	Canon NP6025	10,750
Printing Machine	Gesteter 5385	18,799
Projector	Epson EMP 5100	10,864
TOTAL		127,987

1USD= 1,615K(13/03/98)

REMARK J.F.Y.: Japan Fiscal Year from April To March

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#### ANNEX III

### Achievement of the Project in 1997 Japanese Fiscal Year

In line with Record of Discussion, achievement of the Project as follow. (1)- a. To review the current status of the existing PHC programmes.

The Project studied and analysed monthly report of UHCs and annual report of LDHMT.

b. To execute baseline surveys including socioeconomic aspects in the pilot compound(s).

Household and Women(15-49 years old) Survey of sampled two hundreds(200) households each in George, Chawama and Chaisa compounds were executed and also Health Institution Survey was executed in twenty one (21) UHCs.

These surveys were performed with technical assistance of Population and Demography Branch, Central Statistical Office from the beginning of December, 1997 to the end of February, 1998.

- c. To execute community based PHC programmes in the pilot compound(s) in collaboration with district health staff, community groups, NGOs and other international donor agencies.
  - 1) Cooking demonstration of balanced food was performed with assistance from Chilenje Cooking Group as one of exhibition of LDHMT activities at the Zambian Agriculture & Commercial Show from 31st July to 4th August, 1997. More than one hundred (100) citizens enjoyed the balanced food with useful instructions.
  - 2) Garbage collection activity was performed in collaboration with Lusaka City Council in George compound on the 3rd and 4th of August, 1997. More than thirty (30) members of NHC participated in the activity and studied self-help measure of garbage collection.
- d. To strengthen the capacity of district health staff who are engaged in PHC programmes.
  - 1) The workshop of leadership was held at the Salvation Army Head-quarters for 5 days(17th-21st December, 1997). Twenty (20) members of NHC and eight (8)members of RDC participated from George compound and learned the importance of community participation, leadership skills and others.
  - 2) The Project supported LDHMT to hold the workshops held in UHCs for the up-dating knowledge and skills of preventing and controlling diseases for health workers. (Kaunda Square 2, Chainda 2, Chilenje 2, Kamwala 2, Makeni 1, Kabwata 1 Kanyama 1. Total 11 persons).

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3) The workshop of health problems in three (3) compounds (George, Chaisa and Chawama) was held in Lusaka on the 17th of January, 1998. Three (3) members of NHC and RDC, two(2) community health workers from three compounds and sisters in charge of three(3)UHCs (George, Chawama, Mandevu) (Total 27 persons) participated in the workshop and discussed how to solve major problems in 5 groups.

We identified problems faced in the compounds regarding health with a view of finding possible ways of solving them.

The topics of discussion in five (5) groups were:-

- <1> Garbage, drainage and poor sanitation
- <2> Inadequate clean water/vandalism
- <3> Poverty and malnutrition
- <4> Transport and referral system
- <5> Inadequate trained community health workers.
- (2)-a. To review the current status of referral system between different levels of health care in Lusaka District.

The reinforcement of functions of four 1st Referral Hospitals was strongly felt after reviewing the current status of the referral system.

The present referral procedure between UTH and UHCs is expected to be improved. The patients should be given the forms duly completed by staff at UTH, on discharge to take back to referring clinics. There is need to maintain accurate record of patients and reasons for referral diagnosis and initial treatment at UHCs and the outcome at UTH.

b. To strengthen the capacity of district health staff through several training programmes including UTH's outreach activities.

The task force for outreach activities consisting of LDHMT executive, medical doctors of UTH and JICA experts was organised on the 21st January, 1998 and they discussed several times about the working plan and cost-sharing of the outreach activities. So new outreach activity (on spot training for medical examination and treatment of difficult case by UTH doctors) is expected to operate in pilot compound based on studied working plan from the beginning of April, 1998.

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ANNEX IV

BUDGET OF LOCAL FUNDED BY JICA in J.F.Y. 1997

COST ITEM	AMOUNT
1. GENERAL LOCAL COST	40,085US\$
2. SPECIAL LOCAL COST	32,277US\$
3. EDUCATION & DIFFUSION COST	25,133US\$
TOTAL	97,495US\$

(1US\$=1,615k 13/03/98)

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## ANNEX V LIST OF ZAMBIAN COUNTER-PARTS IN LDHMT

NAME	DUTY
Dr. R. KUMWENDA- PHIRI	Project Director / District Director of Health
Dr. Sarai B. MALUMO	Project Coordinator /Manager Planning and Development
Dr. Moses SINKALA	Project Coordinator /Manager Planning and Development
Mrs. Leonisa MUNGABA	Acting Manager Administration
Mr. Andy O'CONNEL	Technical Advisor Health
Mrs. Mavis KALUMBA	Health Education
Mr. Zebron NGULUBE	Accounts
Mr. Philip MULENGA	Health Management Information System
Mrs. Mary V. C. BANDA	Universal Child Immunization & Family Planning
Mr. Alexandria MWALE	Maternity Service Department
Mr. Graham SAMUNGOLE	Acting Principal Clinical Officer TB/LEPROSY/HIV AIDS
Mrs. Mildred MULENGA	Pharmacy
Mr. J. KHONDOWE	Medical Equipment Department
Mr. TEMBO	Security Supervisor
Mr. CHOWA	Transport Officer

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### ANNEX VI

### CONSOLIDATED DISTRICT BUDGET in 1997(January to December)

Unit:1,000Kwacha

COST ITEM	LDHMT	HEALTH CENTRE	TOTAL
1. Personnel Costs	109,945	254,533	364,478
Allowances	86,685	208,143	294,828
Special Allowances	23,260	46,390	69,650
2. Drugs and Supplies	100,977	1,040,388	1,141,365
Drugs and vaccine	0	0	0
Medical Supplies	0	267,250	267,250
Non-medical Supplies	100,977	773,138	874,115
2 Transport	113,599	136,420	250,019
3. Transport Fuel	39,799	100,911	140,710
Spares & Maintenance	36,000	17,696	53,696
Other Transport Costs	37,800	17,813	55,613
Office Transport Costs	57,000		
4. Other Costs	238,080	410,041	648,121
Maintenance, Equipment/ Furniture	21,000	12,400	33,400
Maintenance, Building / Ground	34,000	116,263	150,263
General Charges	183,080	281,378	464,458
5 Carital	217,619	3,313,670	3,531,289
5. Capital  Medical Equipment	217,019	30,980	30,980
Non-medical Equipment	92,619	780,202	872,821
	125,000	357,000	482,000
Transport	123,000	2,145,488	2,145,488
Buildings		2,173,400	2,170,700
TOTAL EXPENDITURE	780,220	5,155,052	5,935,272

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Project Design Matrix (PDM) for the Lusaka District Primary Health Care Project

		or the Lusaka District Frimary fica		
	Project Structure (Narrative Summary)	Indicators of Achievements (Verifiable Indicators)	How quantified and assessed (Means of Verification)	Important Assumptions and Risks
		(veillable indicators)	(Means of Vermeation)	
ης. Σ.	(Overall Goal)  The overall health status of people in the community of the Lusaka District will be improved.	Improvement of health indicators in Lusaka District.	Health report by Ministry of Health     or LDHMT	Economic and political situation in the Republic of Zambia will be stable.
30	(Project Purpose)			
٠	The primary health care management system will be improved in Lusaka District in line with the Zambian Health Reform Policy and the Strategic Plan.	Improvement of capability of     LDHMT staff, co-medical with     the Project in pilot area.	<ol> <li>In-service training policy documents including guideline, procedures and forms.</li> <li>Project annual report.</li> <li>Monitoring surveys for people in pilot compound(s).</li> </ol>	a. The role and function of LDHMT will not change.
	(Output / Result)	1. Contents and frequency of		,
	(1) The community based PHC programmes are improved.  (2) The referral system between the different levels health care in	PHC programmes and activities. 2. Contents of referral system. 3. Number of co-medical staff	Project annual report of PHC activities.     Project annual report of referral system.     Project annual report of in-service training	a. LDHMT will maintain local budget for sustainable PHC activities and in-service training.
	Lusaka District is operated effectively.	trained.	including the subjects and the list of co-medical staff.	b. Referral system established will be enforced smoothly.
	(Activities)	(Inputs)		
	(1) a. To review the current status of the existing PHC programmes.		•	Counterpart personnel will continue to
	b. To execute base line surveys including socioeconomic aspects in	-Japanese Side-	-Zambian Side-	work for the Project.
	the pilot compound(s).	1. Dispatch of Japanese Experts	1. Counterparts	
	c. To execute community based PHC programmes in the pilot	<long term=""></long>	Project Director	
	compound(s) in collaboration with district health staff, community	Chief Advisor	Project Coordinator	1
	groups, NGOs, and other international donor agencies.	Coordinator	Counterparts for Japanese Experts	1
	d. To strengthen the capacity of district health staff who are engaged	Primary Health Care	Administrative personnel	
4	, , ,	Health Programming and Planning	2. Provision of land and facilities for the	(PRE-CONDITION)
à,	e. To strengthen the basic health management information system in	Public Health	Project	,
1	Lusaka District.	Health Education	3. Appropriation of local cost for the	The Zambian Government maintains
	f. To monitor and evaluate the effects of the programmes	<short term=""></short>	Project	PHC policy for the improvement of
	mentioned above.	Health Programming and Planning	•	health status.
		Medical Equipment Maintenance		
	(2) a. To review the current status of the referral system between	Social Research/Sociology		
	different levels of health care in Lusaka District.	Medical Laboratory		
	b. To strengthen the capacity of district health staff through	Community Development		
	several training programmes including UTH's outreach	Primary Health Care		
	activities.	Other related field mutually agreed		
	c. To improve the referral system in collaboration with relevant	upon as necessary		
	departments and institutions.	2. Provision of Machinery and Equipo		
2		3. Training of the Counterpart in Japa	an.	

### ANNEX VIII

Tentative Schedule of Implementation for the Lusaka District Primary Health Care Project

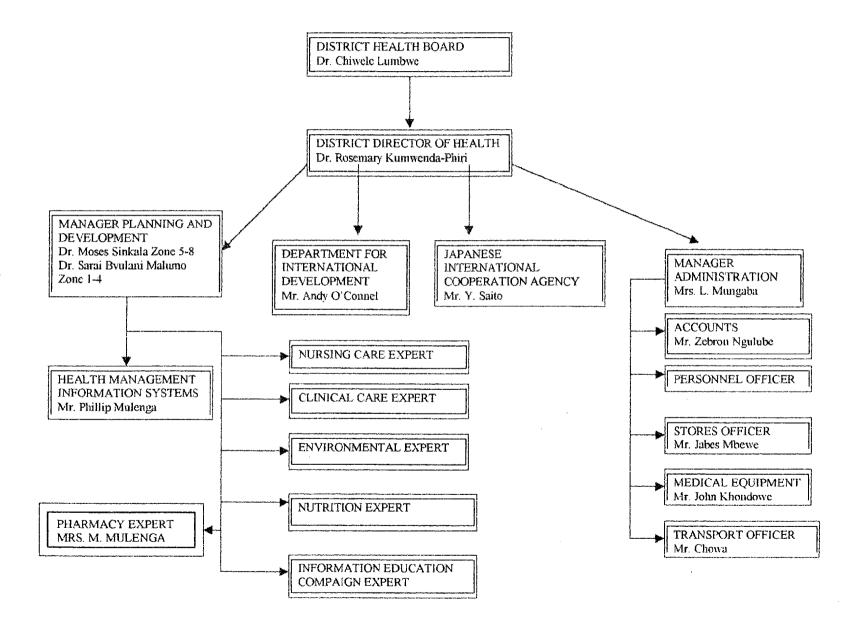
	96	J.F.Y.1997	J.F.Y.1998	J.F.Y.1999	J.F.Y.2000	J.F.Y.2001
	3	4 5 6 7 8 9 10 11 12 1 2 3	456789101112123	456789101112123	456789101112123	456789101112123
. PROJECT ACTIVITIES						
(1) a. To review the current status of the existing PHC	_					<b></b>
programmes.			Ì			1
b. To execute base line surveys including socioeconomic	-   -				<del></del>	<b></b>
aspects in the pilot compound(s).	1 1		<b> </b>			
c. To execute community based PHC programmes in	_		ļ			<b>-</b>
in collaboration with district health staff, community			İ		1	1
groups, NGOs, and other international donor agencies.				1		
d. To strengthen the capacity of district health staff	-		<b></b>			<b></b>
who are engaged in PHC programmes.		•				
e. To strengthen the basic health management information	_   -∢					<b></b>
system in Lusaka District.	1 1					
f. To monitor and evaluate the effects of the	_		<del> </del>	<del></del>		<b></b>
programmes mentioned above.		-		Į.		
2) a. To review the current status of the referral	-	ļ	<u> </u>		ļ	<b></b>
system between different levels of health care in				1		1
Lusaka District.						
b. To strengthen the capacity of district health staff	-			<u> </u>		
through several training programmes including UTH's			1			-
outreach activities.			1			
c. To improve the referral system in collaboration	-					
with relevant departments and institutions.	1		1			
2. JAPANESE EXPERT						
Long Term>					1	
Chief Advisor		<b></b>				
Coordinator						ļ
Primary Health Care		•	4			
Health Programming and Planning		◀				<u> </u>
Public Health		•	◀───			
Health Education		<b>—</b> —		ļ		ļ
<short term=""></short>			<b>†</b>		ł	1
Public Health		_	}		1	
Social Research / Sociology		-	-	1	1	
Other related fields mutually agreed upon as necessary				ļ		İ
3. TRAINING COUNTERPART In JAPAN						
Field mutually agreed as necessary.	lperson	2 persons	3 persons	3 persons	3 persons	2 persons
EQUIPMENT AND MACHINERY				T	1	
Equipment for training in the field of PHC other related	-	<u> </u>	<u> </u>		<del> </del>	
field mutually agreed as necessary.			1		1	1
. MISSION FROM JAPAN		Consultation Team		Advisory Team	<b>1</b>	Evaluation Team
· <del></del>		Special Measure for	Special Measure for	Special Measure for	Special Measure for	Special Measure for
S. LOCAL COST SUPPORT	-	Training of Middle-Level	Training of Middle-Level	Training of Middle-Level	Training of Middle-Level	Training of Middle-Level
	ŀ	Manpower(100%)	Manpower(80%)	Manpower(60%)	Manpower(40%)	Manpower(20%)

EMARKS (1) J.F.Y. Japan Fiscal Year (2) Local Cost Support (%): The portion to be covered by Japane:

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### 国際協力事業団

ザンビア共和国 ルサカ市・P H C プロジェクト

短期専門家報告書

社会学/社会調査 岡本雅博 (派遣期間 98 年 2 月 20 日~4 月 4 日)

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### 1. はじめに

### (1) ザンビアの都市の状況

アフリカの都市を考える場合、都市人類学者サウゾールによって提唱されたアフリカの都市の類型化に従ってまず考えることが有効であるといえる。これは、アフリカの諸都市を A・B 2 つの型に分類するものであり、 A 型は、植民地時代以前にすでにアフリカ社会において、一定の社会的機能を果たしていた都市であり、いっぽう B 型は、植民地体制下に建設された都市で、住民の大半ないし全員が移住者である。

この類型でいえば、ザンビアには、A型の都市はまったく存在せず、すべての都市はB型に分類できるといえる。すなわち現在、ザンビアに見られる都市は、首都に制定されている植民地都市として出発したルサカと、産銅州にあるンドラやチンゴラなどのいくつかの鉱山都市(鉱山の本格的開発が始まったのは1925年以降である)といった、今世紀になってから新たに作られたものである。

### (2) ルサカ市のコンパウンドの成立

このようにザンビアにおける都市の成立はそれほど昔のことではない。ルサカは 1905年にブロークンヒル鉱山 (現在のカブェ) への鉄道の駅が設置されたことが始まりである。 鉄道がつくられると、ヨーロッパ系農場が集中し、町として発展していった。ザンビア独立とともにヨーロッパからの移住者は本国へ帰国し、その跡地がザンビア人の居住地となるケースが多い。ジョージコンパウンドもこのようにしてできたコンパウンドである。

	1960	1963	1969	1980	1990
ザンビア全体		98.5	96.0	96.2	98.1
ルサカ	122.4	161.4	110.8	105.5	101.1
ジョージ					102.8

表 1 女性 100 人に対する男性数

1964年の独立以降、パス法の廃止も手伝い、地方からのザンビア人のルサカへの流入が顕著となってきた。このルサカにおける人口増加がコンパウンド成立の大きな要因となっている。

1963年当時は、男女の性比をみた場合、圧倒的に男の数が多いことがわかる。これが年が経るにつれて差が小さくなってきている。このことは独立頃は、男子単身による移動が多かったが、近年は単身ではなく家族同伴でルサカに居住する者が多くなったことをあらわしている。同様の数値がナイロビで138、ハラレで151であることをみると、これはルサカの大きな特徴であるといえる。

コンパウンドは、大きく分類して以下の3つになる。

- 1) シャンティ・コンパウンド
- 2) オーバースピル
- 3) サイト・アンド・サービス計画地区

### (3) ルサカの民族構成

ルサカでもっとも大きな人口をもつのは東部州の出身の民族であり、ンゴニ、チェワ、 ンセンガなどであり、ニャンジャ語系の言語を話す。次に多いのは北部州出身のベンバ系 民族である。

コンパウンドの住民のあいだに「部族主義」的な意識は薄いといえる。狭い意味での「部族主義」とは異なる民族間関係が存在する。それは民族間の冗談関係Joaking Relationshipであり、都市のような親族組織の希薄なところでその果たす役割は大きいと思われる。すなわち冗談関係の間柄であることから擬制的な親族関係(イトコ関係)を作り出すことにより、例えば葬式の時などお互いが助け合うような機能をもつとみられるからである。

ニャンジャ系民族とベンバ、トンガとロジがそのような関係にあるとされている。

### 2. ジョージ・コンパウンドの調査報告

(1) ジョージ・コンパウンドの歴史

植民地時代;「ジョージ」という名の人物が、コマーシャル・ファームを経営していた。 このときの住居は、現在でも残っている。

1963年 ;独立以降、ザンビア人の移住が盛んになってくる。

1974年~;世銀の支援により、Upgrading Shame(サイト・アンド・サービス計画を含む)が開始。地域の改善が進む。

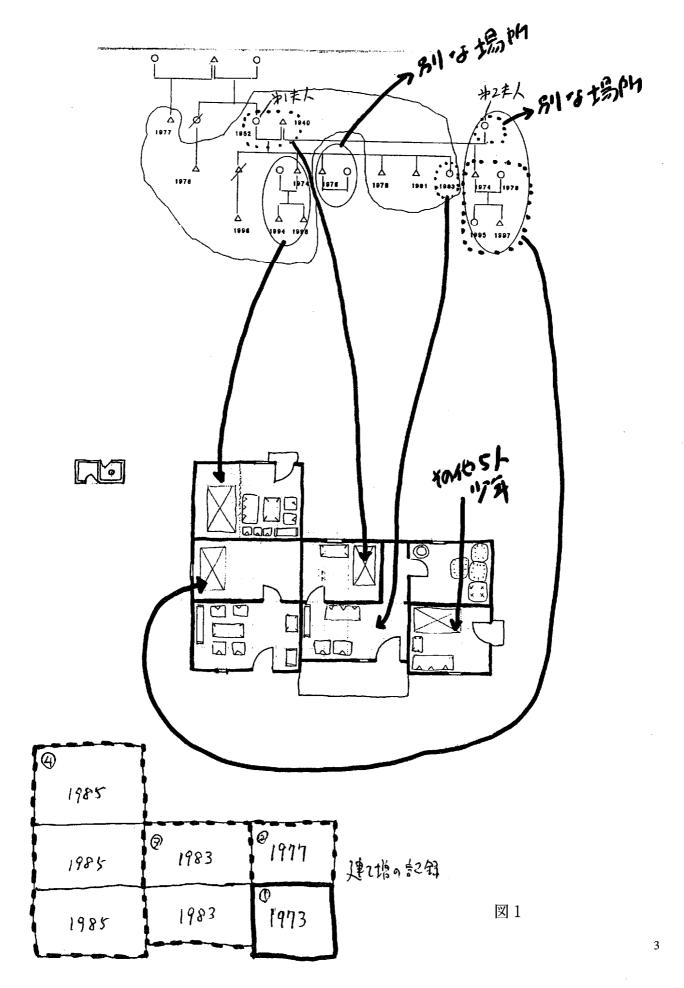
### (2) 家族構成と住居

単身で住んでいる者は少なく、多くが家族といっしょに住んでおり、拡大家族が多くみられる。なかには一夫多妻もみられる。図1はその例である。

住居は、最初に小さなものをつくり、その後少しずつ建て増しをして大きくしていくのが一般的である。図1の住居は、1973年には1部屋のみであったが、1977年には1部屋付け足し、1983年には2部屋増やし、1985年にはさらに3部屋増築し、合計7部屋の大きな住居に至った。また図2のような賃貸による長屋形式の住居も多い。

### (3) 住民開発委員会と区開発委員会

ジョージ・コンプレックスは27のゾーンより構成されている。そのうちジョージ・コンパウンドは、ゾーン2~13の部分に当たり、合計12ゾーンより成る。ジョージ・コンプレックス全体には住民開発委員会(RDC)があり、各ゾーンにはゾーン開発委員会(ZDC)がつくられることになっている。2つの委員会のあいだにはゾーン代表者フォーラ



### 長屋形式

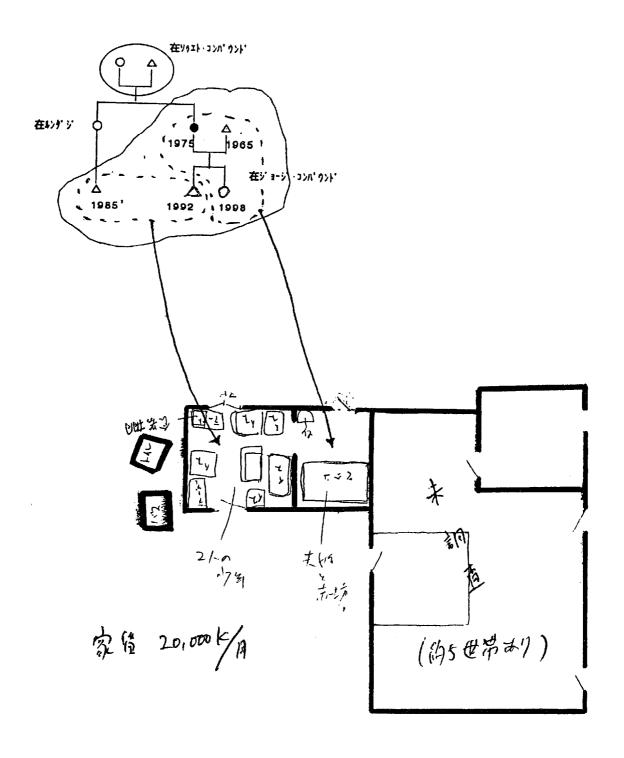


図 2

### ムが設置されている。

また現在、ジョージには以下のようなサブコミッティがあり活動が期待されている。

- 1) Water Sub Committee
- 2) Education Sub Committee
- 3) Disciprinary Sub Committee
- 4) Security Sub Committee
- 5) Health Sub Committee

### (4) 地域の民間医療従事者や他組織との連携の可能性

地域の中には、病院や保健所の他にも、医療活動に関与している専門家や組織が存在する。このようなものとの連携の可能性を探ることも有効であるものと思われる。

- 1) 伝統呪医一民間薬をおもに使用する。中には販売するものもある。妖術 (ウィッチクラフト) との関係も大きい。
- 2) 伝統的結婚相談師ーナチンブサ(ベンバ)、アランギジ(ニャンジャ)という。 初潮を迎えた少女に性知識を教授する年配の女性。教会に所属するものもある らしいが、たいていは民族ごとに行うなことが多い。詳細については民族ごと の秘密となっている。
- 3) 教会組織一教会の下部グループ(セクション)ごとにボランティア活動を行なっている。ジョージ周辺には、約20の教会がある。
  - 4) 学校組織ージョージ・コンプレックス周辺には9校の学校がある(Primary 5校、3校、Basic Secondry 2校)。プライマリーとベーシックでは、Child to Child のプログラムがある。

### 3. コンパウンドにおける収入創出活動

### (1) ジョージ・コンパウンドにおけるマイクロ・クレジットの実態

バングラデシュにおいて貧困層の収入向上に大きな成果をあげたグラミン銀行をモデル としたマイクロ・クレジット(小規模金融)のブログラムは、ルサカ市のコンパウンド地 区においてもすでに実施されている。

プロジェクトが活動のバイロット地区として選定しているジョージ・コンパウンドにおいては、国際 NGO である CARE が、CARE PULSE と CARE PROSPECT の 2 種類のマイクロ・クレジットのプログラムを推進している。また、 9 8 年の 4 月からは、新たに CARE A.B.O.Loans を開始しようとしており、注目に値する。

### 1) CARE PULSE

グラミン銀行をモデルとしている。マテロなども含むジョージ周辺に17グループがすで

に形成されている(計 347人)。 1 グループ=20人。このグループはさらに 5 人ずつの組に分かれる。この組を Sano(現地語で 5 という意味)と呼ぶ。 1 つのグループには 4 つの Sano がある。週に 1 度、ミィーティングをおこなう。貸付額は、 $50000\sim50000$  K (第 1 回目)。

表2 ローンを借りる順番

		<del>,</del>	
	初回借り受け者	第2回借り受け者	第3回借り受け者
	(1週目)	(3週後)	(6週後)
5人グループ・A	2名	1名	2名
5人グループ・B	2名	1名	2名
5人グループ・C	2名	1名	2名
5 人グループ・D	2名	1名	2名

表3 MWAIJK01のメンバー構成

	表3 MWAIJKUI のメンハー情成					
	性別_	<u> 民族</u>	住所	ビジネスの内容	5人グループ	
1	男	トンガ	リランダ	??	(1)	
2	女	トンガ	ジョージ	?	(1)	
3	男	ロジ	マテロ	電機販売	(1)	
4	女	マンブェ	チュンガ	?	(1)	
5	女	ロジ	チングェレ	商業	(1)	
6	男	ベンバ	リランダ	バー	(2)	
7	男	(東部州)	マテロ	商業	(2)	
8	女	レンジェ	チュンガ	縫製	(2)	
9	女	(東部州)	ジョージ	?	(2)	
10	男	(東部州)	リランダ	商業	(2)	
1 1	男	マンブェ	チュンガ	靴つくり	(3)	
1 2	男	ベンバ	マテロ	大工	(3)	
1 3	女	マンブェ	リランダ	食堂	(3)	
1 4	男	(東部州)	ジョージ	日用品売り	(3)	
1 5	女	(東部州)	デサイ	バー	(3)	
1 6	女	ベンバ	マテロ	?	(4)	
1 7	女	トゥンブカ	リランダ	食堂	(4)	
1 8	女	ベンバ	ジョージ	縫製	(4)	
1 9	女	(東部州)	マテロ	?	(4)	
2 0	女	マンブェ	ジョージ	?	(4)	
2 1	女	トンガ	リランダ	魚売り	(5)	
2 2	女	ベンバ	マテロ	?	(5)	
2 3	男	ベンバ	ジョージ	?	(5)	
2 4	男	レンジェ	チュンガ	商業	(5)	

表 4 FAITH JK02 のメンバー構成

	性別	民族	住所	ビジネスの内容	5人グループ
1	男	トンガ	マテロ	大工	(1)
2	女	トンガ	マテロ	文房具売り	(1)
3	女	(東部州)	マテロ	日用品売り	(1)
4	?	ベンバ	マテロ	?	(1)
5	女	ベンバ	マテロ	商業	(1)
6	女	ベンバ	デサイ	商業	(2)
7	?	トゥンブカ	マテロ	?	(2)
8	?	トンガ	マテロ	??	(2)
9	女	ンセンガ	リランダ	部品売り	(2)
1 0	女	マンブェ	マテロ	日用品売り	(2)
1 1	女	レンジェ	マテロ	?	(3)
1 2	女	ベンバ	マテロ	商業	(3)
1 3	女	カオンデ	マテロ	商業	(3)
1 4	男	(東部州)	ジョージ	日用品売り/商業	(3)
1 5	男	ベンバ	マテロ	?	(3)
1 6	男	ソリ	マテロ	?	(4)
1 7	男	ンセンガ	チングェレ	工業	(4)
1 8	男	(東部州)	デサイ	大工	(4)

### 2) PROSPECT

グループでおこなうビジネスを対象にした貸付制度。 1 グループ = 10~15 人。ジョージ内に約8 グループが形成されている。

### 例1) MACSIN SAVING GROUP

97年10月に南部州カロモ県まで出向き家畜を購入し、ルサカまで運んで販売。山羊15頭、豚13頭(表5参照)。

### 例 2) FACIM SAVING GROUP

グループの 16 人を 2 組に分け、カベンタ (干し魚)と木炭の交易を実施した (表 6 参照)。 木炭は中央州カブェ県まで出かけ 1 袋 90 kgを 50 袋、2000 Kで購入。ルサカに持ち帰り、 1 袋 5000 kで売っている最中であった。カベンタはカリバ湖まで出向き購入したが、思っていたよりも利益が少ないため、漁師から購入するのではなく網を購入し自分たちで魚を **CARE PROSPECT** 

闭体名: MACSIN SAVING ASSOCIATION

番号	氏名	役職	性別	民族集団	区	家畜売 買関与 の有無	備考
(1)	Clemesio Shawa	Chairman	M	東部州	17	•	FZR, Vice Chairperson 大工の技術あり
(2)	Dorothy Chipimo	Treasure	F	ベンバ	20	0	
(3)	Mercy Mebelo	Secretary	F	ロジ	17	0	
(4)	Aristario Memba		M	東部州	20	0	
(5)	Vincent Muke		М	東部州	20	0	
(6)	Rose Ngoma		F	東部州	20	Ö	
(7)	Osborne Nyirenda		M	東部州	12	0	
(8)	Yyonne Mteyha		F	東部州	12	0	
(9)	Margaret Imasiko		F	ロジ	その 他	×	元11区に居住、現在 Kanyama Compoundに居住
(10)	Willaiam Kalele		M	ベンバ	11	•	
(11)	Theresa Mutale		F	ベンバ	20	X	
(12)	Maureen Mumba		F	東部州	17	•	
(13)	Charity Muleenga		F	ベンバ	20	×	97年11月に脱退。
(14)	Peggy Luungu		F	東部州	20	×	97年11月に脱退。
(15)	Charity Kapenda		F	?	20	X	97年11月に脱退。

- 注) ●は実際にカロモまで家畜を入手しに行った者、○はルサカでの販売に関与した者、 ×はまったく関与しなかった者をそれぞれ表わす。
- 1. 同グループは、97年にCARE (PROSPECT)の支援により結成された。(1)と(2)(4)は以前からすでに友人どおしであったが、その他のメンバーはCAREが実施するトレーニングではじめて知り合った。
- 2. 同グループは元金450,000Kをもとに、97年10月に南部州カロモに家畜を仕入に 行き、ルサカまで運びそして販売するという商売を行なった。

表 6

項目	明細	支出 (Kwacha)	備考
バス (人) 、ルサカーカ ロモ	12,500K×3人	•	
バス(人)、カロモー村	3,500K×3人	10,500	村はカロモの町から、約38kmの距離。
家畜購入(山羊15頭)	7,000+10,000+11,000+ 17,500+12,500+8,500+ 6,000+6,000+6,000+ 6,000+13,000+13,000+ 12,000+15,500+12,500	156,500	
家畜購入 (ブタ3頭)	60,000+60,000+42,000	162,000	
バス(人)、村一カロモ	3,500K×3人	10,500	
バス (山羊15頭) 、村 ーカロモ		22,500	
バス (ブタ3頭) 、村一 カロモ		12,000	
カロモ役所への支払い (山羊、ブタの移動)	1,000K×18頭	18,000	
カロモ獣医局への支払い (山羊、ブタの移動)	350K×18頭	6,300	
トラック (人) 、カロモー村	10,000K×3人	30,000	
トラック(山羊)、カロ モー村	2,500K×15頭	37,500	
トラック(ブタ)、カロ モー村	3,000K×3頭	9,000	
チボリア・コンパウンド での家畜預かり代 4日間	1,000K×18頭	18,000	4日間
屠殺代(ブタ)	3,000K×9頭	9,000	
市場使用		3,000	

捕獲しビジネスをおこなうとのことである。

### 3) A.B.O.Loan

今後、開始する予定となっているプログラム。Area Based Organisation(ABO)が貸付の対象となる。具体的には、RDC、FZR、ZDCが対象となる。

目的は大きく 2 つあり、 1 つは生活の向上であり、もう 1 つは住民が地域活動参画促進のためのインセンティブとしてである。そのため、他のローンよりも各条件が甘く設定してあり、貸付金額は高く(最大 300 万 k)、必要となる初期の貯蓄率は 20% と低くなっている。

### (2) 金融講 (チリンバ・グループ)

日本でもみられるような無尽講・頼母子講が、ザンビアのコンパウンドでも盛んである。 メンバーでお金を融通し合う、いわば互助組織と見なすことができる。これをチリンバと 呼んでいる。

例1) メンバーは女性のみ7人。毎日1000 K ずつ各人が出し合い、メンバーの1人にその全額を渡す。その翌日は、また別のメンバーが同額を受け取る。

例 2) 路上でニワトリを販売している女性 8 人がメンバー。1 日おきに各人が 10000 K ずつ出し合い、順番にメンバーが受け取る。また毛糸編みを各人がおこない(1 人がソファ掛けを 2 枚)、完成した製品 16 舞を 1 人が受け取る。16 枚 1 セットで 50000 K で販売する。

またかつて、メンバーの1人が死亡したときにはグループとして、葬式用の食料、現金 (27000 K) を寄付している。すなわちチリンバは葬式講としての機能を持っていると見ることもできる。

### (3) 親戚関係と経済

ザンビアではそれぞれの家庭に親類が訪ねてくることが頻繁にある。その場合、迎える側は訪問者に対し食事を提供する義務を負う。時には宿泊させることもあるし、また現金を与えなければならないこともある。表ワはチパタコンパウンド在住のC氏の家に訪ねてきた訪問者と訪問者をもてなした内容の一覧である。これをみると、訪問者がいかに多いか、また訪問者をもてなすことがどれくらいの経済的なインパクトをもっているかが理解できると思われる。C氏がたまたまお金を沢山もっていたとしても、そのお金はこのような形で、親類間に流れていくといってよいであろう。

C氏はもてなすための資金がつきてしまい、馴染みの店で、現金後払いで買い物をした。 これをあらわしたのが表りである。カロバと呼ばれる高利貸しに行くのは最後に手段で、 このように貧窮の場合でもそれなりの対応策があることがわかる。コンパウンドにはコン

### パウンド独自の経済関係が見られるのである。

表7 チパタ・コンパウンド在住C氏宅への訪問者の明細

(対象時期: 97年12月~98年3月中旬)

		(V) 数h() 20 1 十 1	273 00-	L 0 / 1 1 10/	· · · · · · · · · · · · · · · · · · ·
時期	J <sub>A</sub>	内訳	訪問者の	訪問者か	訪問者への
	数		住所	らの供与	金品の供与
12/19~1/15	3	BD(15),BD(11),BS(14)	Kafue	なし	BD(15)に 25,000K(学 校制服代、交通費)、 他 2 名にそれぞれに 2,000K ずつ(交通費)
1/27~2/4	3	BW(25),BWS(7),BWD(4)	Livingstone	なし	なし
2/14~2/15	3	ZD(16),ZD(13),ZS(10)	Chawama	なし	3名それぞれに 1,000K ずつ(交通費)
2/27~3/3	1	WB(23)	Kafue	なし	5,000K(交通費)
3/4	1	Z(44)	Garden	なし	5,000K
3/7~3/8	1	MBD(41),MBDS(2),MBD (38),MBDD,MBD(35),MBDD	George	なし	なし
	5	B(48),BW(42),BS(23),Z (40),B(32)	Kafue	B(48)から 15,000K	なし
		MBD(36),MBDC,MBD (45),MBDC,MBD(36),MBDC, MBD(32),MBDC	Chawama	なし	なし
	4	FBS(55),FBSW(48),FBSS(27) ,FBSD(21)	Kanyama	なし	なし
	3	FBS(51),FBSW(46),FBSS(27)	Chawama	なし	なし
	3 .	FBS(46),FBSW(32),その他 (24)	Garden	なし	なし

(注) F:父、M:母、B:兄弟、Z:姉妹、S:息子、D:娘、H:夫、W:妻、C:子ども (性別は問わない)、括弧内の数字は年齢を表す。 (例) MBD(41)は、母の兄弟の娘 (41歳) という意味。

表8 C氏が97年3月7日に、料金後払いで購入したもの

品目	里里	金額	購入先
トウモロコシ粉	25kg	17,000k	A
木炭	1袋(トウモロコシ	7,000k	В

	90kg 用の袋)		
カペンタ(干し魚)		5,000k	C
豆 (ルサカビーンズ)		10,000k	С
ロウソク	-	2,000k	A
砂糖	2kg	4,000k	A
調理油	2.5	5,000k	Α

### 貧困緩和(生計向上)にかかる活動について

ルサカ市PHCプロジェクト 岡本雅博(社会調査/社会学) 1998年3月7日

### 1. 生計向上の手段について

ルサカ市のコンパウンドに居住する低所得者層の人々を対象とした、貧困緩和のための生計向上プログラムについての可能性調査を2月23日より実施してきている。現時点までで得られた情報をもとに、実施可能と考えられる方法(手段)について表1のとおりまとめてみた。他の援助団体の実施する生計向上プログラムの実例についての調査を今後とも継続するとともに、コンパウンドを実際に訪ね実態に即した計画の立案のための情報収集を行ないたいと考えている。

### 表 1

		the state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second state of the second st			
番号.内容	マイクロ・クレシ゛ッ トとの連携 の必要性	訓練の必要 性	対象性 別	運営方法	その他
1.家具造り	高い	高度な訓練 必要	男女		
2.縫製	高い	高度な訓練 必要	男女		
3.機織り・染 色	高い	高度な訓練 必要	男女		販路確保が課題
4.石鹸造り	高い	簡単な訓練 必要	男女	グループで運営	
5.ヒマワリ油 搾油	きわめて高 い	簡単な訓練 必要	男女	グループで運営	ヒマワリ種の調達先の 確保が課題
6.メイズ製粉	きわめて高 い	簡単な訓練 必要	男女	グループで運営	高利益が期待できる
7.小規模ビジネス	高い	簡単な訓練 必要	男女	個人またはグルー プ	豚、魚、野菜、古着、 木炭等の販売、パン製 造等
8.ブロック造 り	高い	簡単な訓練 必要	男女	グループで運営	トイレ普及と関連可能
9.苗木生産・ 販売	やや高い	簡単な訓練 必要	男女	グループまたはプ ロジェクト主体で 運営	果実、民間薬、環境保 全等多目的な植樹を普 及する
10.野菜栽培	低い	なし	9	公共用地を個人ま たはグループに貸 し出す	収穫物は自家消費また は販売。栄養教育との 連携可能
11.七厘製造	高い	高度な訓練 必要	男女		豆炭ブロジェクトの研 修を利用
12.家畜飼養	高い	なし	<b>32.77</b>		鳩飼養の可能性を今後 探る
13.皮細工	高い	高度な訓練 必要	男女	グループで運営	

### 2. 生計向上プログラムを実施するにあたり整理すべき点

本プログラムを実施するにあたり、当プロジェクトが関与する可能性のある内容のなかでもっとも大きなものに(1)マイクロクレジット、(2)生計向上に関する技術訓練の2つがあげられる。この2点をどう実施するか、あるいはしないかを明確にしておく必要があるといえる。そこで下記のように整理し、検討の材料としたい。

表 2

	高度な訓練あり	高度な訓練なし
マイクロクレジットあり	(A)	(B)
マイクロクレジットなし	(C)	(D)

### (A) マイクロクレジットおよび高度な訓練を与える

家具造りや縫製等の職業訓練を実施し、その卒業生に対して自立のための資金貸付を行なう方法がここに分類できる。Kanyama CompoundおよびChibolya Compoundに職業訓練センターを持つKanyama Youth Programme(MS-ZAMBIAの支援を受けている)では、技術を身につけた者が、自分で仕事を開始する際に必要となる道具類を購入するための貸付制度であるKYP Business Credit Schme Programmeをかつて実施していた(現在については不明)。NCSRではJICAの協力により七厘開発が行なわれているが、同時に地域住民を対象とした七厘製造の訓練コースも存在しているという。ブロジェクトの対象の女性に訓練を与え、その後必要となる経費の貸付を行ない、七厘製造および販売を居住地域で行なうことが可能性としては考えられる。

### (B) マイクロクレジットは与えるが、高度な訓練は与えない

貧困層の人々は現金稼得をする方法については知っているが、それを始めるための元手を得るための手段がなくそれゆえに貧困のままであるという認識に立ち、マイクロクレジットのモデルであるバングラデシュのグラミンバンクにおいては、銀行からお金を借りることができなかった貧困層の女性に融資を行なうものであり、現金稼得のための技術訓練は従来行なわれていない。よってグラミンバンクモデルによる貧困対策は、上の(B)に分類できる。とはいえども技術訓練は行なわないが、簡単なビジネス訓練は行なっているようである。George Compoundで実施されているCAREなどによるマイクロクレジットなどザンビアに見られる多くは、ここに分類できる。表1にあげたうち、4、5、6、7、12が含まれる。

### (C) 高度な訓練は与えるが、マイクロクレジットは与えない

一般的な職業訓練がこれに分類できる。ルサカ市内では、Garden Compoundに1980年よりデンマークの支援を受けて開始された Dzithandizeni Trade Schoolが成功例としてあげることができる。特に家具造りの部門においては、そのデザイン・質ともに高い評価を得ているが、ここでは卒業生をWorkerとして雇用し、家具造りにあたらせるという特殊な方法をとっている。すなわち卒業生の一部は、就職先(最大15年間働くことが可能とのこと)まで用意されているということになり、マイクロクレジットに代わるサービスが用意されているといえる。技術訓練のみを与えるだけで、どのような効果があがるのかについは今後、調査を行なう必要がある。

### (D) マイクロクレジットおよび高度な訓練のどちらも与えない

どちらも与えずに、生計向上を計るための手段としては、CAREによって実施される Food for Workのプログラムがあげられる。すなわち、道路整備などの公共事業に従事した住民が、その労働時間に見合った量の食糧の配給を受けることができるものである。しかしながらこのプログラムでは、外部から食糧の支援がある場合にのみ実施可能となるものであるため持続性という観点からは、必ずしも有効であるとは言い難く見直しが計られたとのこと。さて表1のなかでは、10の野菜栽培がここに該当する。高度の技術、多くの資金を必要とせず、地域住民が生計向上を計るためには、自らが農業、野菜栽培に従事することが有効であると考えられる。しかし、ルサカ市のコンパウンドにおいて農地をどのように確保するかが問題となる。コンバウンド内に存在する公共施設(Health Centreなど)の空地を利用可能かどうか調べる必要がある。

以上

④ MICROCREDIT ASSESSMENT MISSION TO LUSAKA (英文)

Dr. Dibalok SINGHA

マイクロクレジット調査報告翻訳版(要約)

JICA PHC/AMDA INTERNATIONAL Lusaka urban district

# MICROCREDIT ASSESSMENT MISSION TO LUSAKA

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## <u> AKNOWLEDGEMENT</u>

This report is an effort to assess the present practice of micro-credit tool covering the needs of people living in peri -urban compounds of Lusaka urban district and recommend a suitable design of micro-credit activity suited to the reality of compounds of Lusaka urban district. As part of that it tried to understand present macro-economic situation and extent of social crisis in the background of vigorous implementation of ESAP.

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## **Executive summary**

- 0.0 JICA decided to implement a primary health care project in Lusaka urban district. As policy project also decided to remain sensitive to participatory approach in implementing the project. Communities active participation have been one of the major concern of the project. In view of this AMDA International a NGO based in Japan was also invited to join the project to make community based initiatives a success.
- 0.01 Apart from health care activities it was also decided to attach a parallel micro-credit component to the project as part of community development activity; It was envisioned that apart from providing health care income enhancement of the community will also enhance the goals facilitated by a PHC program.
- O.02 Zambia is situated in the southern part of African continent and contains a vast territory. Country possess a good reserve of agricultural, mineral specially copper and other resources. Population of the country is about 9.5 million and a variety of ethnic African's are inhabitants of this vast country. Main official language is English.
- 0.03 Country is enjoying a multiparty democracy since 1991. Previously country followed a centralized controlled economic policy; Because of fall of copper price in international market Zambia started experiencing budget short falls since than had never-recovered from that crisis.
- O04 Presently country is vigorously implementing Economic Structural Adjustment policy (ESAP). Macro policies are intended to restore growth and reduce poverty. Unfortunately this has resulted in mass poverty of the Zambian population. As per current statistics about six million of the countries population are under poverty. GOZ has yet TO come up with a specific poverty line understanding; Current food basket requirement is around K 186000/ month/ household (Dr. Milimo PAG).
- O.05 Current social crisis have been manifested in following ways middle class has almost vanished from Zambian social composition (because of cut in formal employment) and weak private sector, proliferation of large informal sector (proliferation of street vending has become a normal phenomenon in present days which was not common in the past), shrinkage of extended families, reduction of meals per day, in order to meet the needs formal sector employed people are taking up odd jobs during and after office time, rise of crime and increase in number of commercial sex workers.
- 0.06 About two thirds of urban population of Lusaka lives in Peri urban compounds. Many of these compounds are illegal and do not have any municipal services. ESAP has devastating effects on urban compound dwellers. Massive cuts in formal employment sector has given rise to unemployment, violence and is being compounded by the burden of diseases particularly AIDS.
- 0.07 In this background informal sector is providing a breathing space for urban poor's especially women. There are some successful community based NGO initiatives for enhancement of income of the Peri- Urban compound dwellers. Such as CARE International, CFTZ, OXFAM, MBT funded intermediary projects in Lusaka urban compounds; It also should be noted that outreach of micro-credit practitioners are still low and interest rates are high because of inflation rates, inefficient services and high overhead costs.

- 0.08 NGO movement were very weak in the past; But change of governance has helped the growth of NGO's. Currently there are more than three hundred NGO's in Zambia. International organization's has bigger net work than national NGO's; Some of the NGO's and private companies are engaged in the micro-credit industry; But most of the NGO's do not have country wide network and mostly concentrated around Lusaka.
- O.09 There are almost forty two peri urban compounds in Lusaka some of them are not legalized. All this lacks basic municipal services; Formation of peri urban compounds has root in colonial past and all together has been neglected from a development point of view. Currently two third of Lusaka's population are living in urban compounds. A survey was carried out in three compounds of Urban Lusaka namely George, Chawama and Chaisa by LUDHMT and was found that eagerness of the community to participate in the self help community development project is much matured in Chawama. But it was noticed that poverty situation in this compounds are precarious along with water sanitation and solid waste management.
- O.1 There are micro-credit projects led by different NGO's and private companies. Some of them are PUSH, PUSH CARE, PULSE CARE, IRISH Aid project at Kamanga, World vision project at Chainda, Oxfam project at Mufulira, Micro Bankers Trust supported projects through intermediaries, HUZA, Women Finace Trust and Progress Finance. What was observed that most of them are following GRAMEEN methodology with some adjustments. Another observation is that micro finance institutions are new, not efficient, outreach is low and interest rates are high because of high inflation and overhead costs.
- 0.2 Poverty alleviation project is under preparation by the Ministry of Finance with support from ADB. This project is looking forward to work with NGO's and private financial institutions. A budget of four million have been set aside by the bank for this purpose.
- O.3 A concrete design of micro-credit activity is being attached here. What is important is to start the community mobilization activity first and then gradually embark on direct lending. It is possible to run a parallel health care activity with micro-credit. Main rationale behind it is to use strong community mobilization component around micro-credit program. A concrete budget and work plan has also been attached so it is recommended to start the activities along that line. As far micro credit activities are concerned it is necessary to train some of the staffs from Bangladesh so that they have clear understanding of policies and methodology in micro-credit. Apart from that all the MIS will be computerized so that all the stakeholders especially the consulting organization in Bangladesh and implementing organization in Zambia can readily consult on financial and community management issues on daily basis.
- O.4 Therefore specific recommendation's may be sum up as follows: In order to be well organized project starts with community actions which means starts mobilizing communities targeting micro-credit. In first six months project has to recruit staffs, train staffs, select compound for the proposed activity, training of prospective borrowers development of constitution for community members and secure fund for above. A review of all this should take place after six months. Following which credit shall be disbursed slowly in small amounts; This project activity should be planned for next three years which shall cover 1500- 2000 members; Loan range should be \$ 100-\$

300; For first year loan amount should be \$ 100 per borrower and repayment period 50 weeks. Interest rate should be 45% per year. Fund requirement for the first year period will be \$ 83600; Requirements for consecutive years may be fulfilled taping Japan Government sources, (GGA), PAP (ADB) sources and borrowing from other donors i.e. UNDP ( MICRO START) etc.

After six months community mobilization period project shall embark on attaching other health care activities such as training of community health workers and Traditional birth attendants and health training for community members. Maintain water sanitation and solid waste management services directly involving community mobilization strength around micro-credit component. There are other interested stakeholders who will come forward to join hands ( World Bank and others) if community mobilization and sustainability points are rationally in place. Micro -credit led community mobilization process will be able to address that definitely.

0.5 As it was revealed that many of the micro-credit institution's were following GRAMEEN methodology successfully; so it is assumed that current recommended design will also bear necessary fruit in next 18 months and as it is blended with parallel running PHC program so it will become a good demonstrative and replicable project in near future.

#### 1.0 Introduction

1.1 In these days there is widespread poverty in urban and rural areas of Zambia. Because of transition from a controlled centralized economy into a market economy, and gross reduction of employment in formal sector people of low income groups are facing much pain in pursuing their daily livelihood. In this context JICA decided to a urban health project along with a micro-credit component targeting improvement of access to health care provision and income enhancement by compound dwellers in Peri- urban areas of Lusaka urban district. In this background AMDA International an NGO based in Japan was also invited to join this efforts to make this project from community participation point of view a success. In view of the above AMDA International decided to appoint a consultant to review and assess the situation.

## 2.0 Country background

- Zambia is geographically located in the southern part of African continent. Total land area is about 752,614 square kilometer. Which is 2.5 percent of the African continent. It shares borders with Zaire and Tanzania in the north; Malawi and Mozambique in the east; Zimbabwe and Botswana in the south; Namibia in southwest and Angola in the west.
- 2.2 Present population is around 9.5 million. Zambia has 72 tribes. There are seven main languages namely Tonga, Nyanza, Lozi, Bembe, Luvale, Kaonde, and Lunda. Current study shows that sixty three percent of the population are living in rural areas and thirty seven percent are living in urban areas. Size of a household is about 5.3 in urban areas; average size of a household in national context is around 5.0.
- 2.3 The country enjoys considerable reserve of natural resources. Half of the country's territory is covered by natural forests. Agricultural production covers following crops i.e. Maize, groundnuts, millet, sorghum, cotton, tobacco, sunflower and cassava. Almost half of the cultivable land in the country is not being cultivated. Country's many lakes and rivers provide enormous water resources. Lakes and rivers support rich and diverse source of fishes.
- Zambia's major mineral resource is copper. It is the fourth largest producer of copper in the world (remaining economic life of copper mines are estimated to be twenty years). Other minerals which are available are cobalt, lead, zinc, limestone, coal and emeralds.
- 2.5 Zambia is well connected with the other countries of Southern Africa by Railways and roads.
- 2.6 Health indicators of the country are getting worse Maternal mortality and infant mortalities are one of the pressing concerns. Currently U5MR is near about 202 per thousand live births. Reliable data is not available in relation to MMR but estimated data reveals same tendencies as U5MR.
- 2.7 Education campaign was a success in Zambia; by the year 1985 primary enrollment reached the level of 90 percent but by the year 1992 it has declined to less than eighty percent.

- 2.8 Living conditions have deteriorated sharply over the past several years; this has been related to external economic shocks in 1974, inept industrial policies, bias towards urban industrial growth, neglect to Agriculture, gender insensitivity etc.;
- 2.8a Finally country is now facing a transition from controlled centralized type of governance to more open economy; in the mean time subsidies to health, education and other sectors has drastically reduced; on the other employment in formal institutions has been drastically cut off.
- 2.8b Under the situation Zambians find themselves in very difficult conditions; Two decades of decline in economy has virtually led to a social crisis. Current inflation rate is around 18.6%; in 1993 the rate was around 200%. Almost two third of Zambians are now living under poverty line putting the absolute figure in the range of six million people.

## 3. Economic policies of the Government

- 3.1 The severe external shocks and inappropriate policies of 1970's and 1980's has led the Zambian economy to extremely vulnerable conditions. The current debt situation is one of the worst in Africa. Zambia have to transfer about 10-15% of its domestic productions abroad as part of debt servicing in current years. In 1992 --1993 debt service was thirty three percent of its national revenue income.
- 3.2 Zambia is in the process of structural adjustment from the year 1991. Country is transferring it from controlled centralized economy with large nationalized parastatals to market oriented economy.
- 3.4 This macro policies are intended to restore growth change the pattern of development strategy in Zambia, and reduce poverty in long run.
- 3.5 Since the decline in copper prices Government maintained the subsidy system borrowing money to substitute the copper earnings. Withdrawal of subsidies and failure of the Government to maintain services means a desperate situation for Zambian poor. Which reflects employment is decreasing, food subsidies are not in place, inflation is high and they face serious chronic food insecurity.
- 3.6 The liberalization of trade and industry will drive many families previously in government protected industries to poverty.
- 3.7 Liberalization of maize prices also had hitted poor badly. Previously government subsidized maize to the consumer by regulating maize milling and sales. Since food expenditures account for about two thirds of expenditures by urban and rural poor households.
- 3.8 The continued decline in the economy has caused a squeeze on public expenditure and persistent governments deficits for last twenty years.
- 3.9 Spending for key sectors like Agriculture, infrastructure and social sectors all has declined sharply

- 3.10 At the same time powerful interest groups such as military and foreign services are able to maintain better shares of the budget. Too low allocations to pro poor programs constraints the already burdened problems.
- 3.11 Subsidies has been removed and the lack of increases in social spending continue to hurt the poor. The Government is trying hard to ensure increased budget shares for social spending. The obvious item missing from the budget is significant allocation for the safety net activities. Previously in partnership with NGO's Government has effectively dealt with drought (1992) but has not yet created an effective safety net.
- .3.12 `The significant reallocations and improvements in budgetary efficiency are only taking off currently. This programs are underway and sectoral reforms in Agriculture, Health and Education are advancing so there is a hope for the future.
- 4.0: PUBLIC WELFARE ASSISTANCE SCHEME( PWAS).
- 4.1 PWAS is the GOZ's attempt to help destitute people in rural and urban wards of the country. As per estimates of PAG currently 2% of the population are destitute. Following groups are entitled to the service by the scheme: the aged, the handicapped or ill and unsupported women and children; Indigent persons awaiting repatriation or Zambians returning from abroad or other displaced persons; Other persons who are victims of disasters such as fire, floods, droughts and robberies.
- 4.2 Main supports that are provided through this scheme are as follows: food, school requirements, clothing, small business etc. It works through social assistance committee at the ward level which is composed of ward councilor, NGO, traditional ruler, Min of Health and Agriculture, church, Min of Education, MP appointed, MCDSS total number of members is eleven.
- 4.3 PWAS work is also complemented by charity of neighbor's, relatives, kinsmen and women, church, welfare NGO's, and definitely by their own effort.
- 4.4 Funds are not sufficient and management is poor;

## All this has impacts on the living of the poor

- 5.0 Seasonal variation of labor demands
- 5.1 It should be noted that there is a period of general stress between November and February when severe problems of health ( malaria ), food supply and heavy expenditure demands ( school fees and related costs, purchasing emergency stocks of food, festivals, health fees) combine with the period of maximum labor demand in farming. As the labor is the key input to success in farming systems that have a relatively low level of differentiation in terms of capital inputs the poor health status of communities in this period is a major issue in terms of their productive capacity. Besides, the stress periods for men and women does not coincide and the burden of labor is always considerably greater for women than for men. A particular variable which underlines this difference is the location and quality of the nearest dry season water source. If this is distant it places massive extra stress on women in that period.
- 5.1 For the incapacitated poor in rural and urban areas the general lack of growth and the increase in cost of living has meant a decrease in private transfers, public expenditure cuts have meant fewer resources for social services and increased user fees, and the removal of the maize subsidy has not been replaced with a fully functioning safety net.
- 5.2 For the low productive capacity households in the rural areas, constrained by isolation and poor human capital, the elimination of pan- territorial pricing and the input subsidy

- meant lower cash incomes. As with the indigent poor, cost sharing and less resources for social services and infrastructure have limited their potential further.
- 5.3 For the urban low productive capacity household, the main negative impact has been the increase in food prices compounded with less and more costly public services.
- For the net producer but vulnerable household in rural areas the falling maize producer price was a major problem in 1993 compounded by cuts in public spending.

## 6.0 Urban poverty

- 6.1 The erosion of economy has brought devastating effect on all urban dwellers. The neglect of peri-urban areas has roots in colonial times. Peri-urban areas were always regarded as temporary living places for manual labors ( mainly man) brought in from their permanent sites of living to service the formal sector. The central parts of urban areas where formal sector employees were meant to live were well-provided with urban services, just as the employees were paid high salaries and received subsidies such as lower food prices. This better standard of living in central urban areas, and the expectation of temporary workers to gain benefit from it meant that more and more of them stayed and established homes in illegal settlements on the outskirts of the town. However since there was never a policy to foster entrepreneurship and to improve living conditions outside of the formal settlements; many of the settlements around the major centers are still illegal; Public services were never provided to these areas as they were temporary or illegal and no effort was made to facilitate the build-up of human capital for the residents, as they were only considered to be a labor pool. Formal sector employment has fallen and employment in urban areas is now concentrated in informal small-scale activities that are severely constrained by the regulatory environment.: nearly eighty percent of work force currently works outside of the formal sector. Declining services and infrastructure in turn have a reinforcing negative impact on the potential growth of the urban economy and the productivity of urban residents. In the face of falling wages and employment individuals must invest time and money to compensate for the declining service provision. Institutions remained centralize and unresponsive to demands of their staffs; salaries have been eroded and the financing of recurrent expenditures are never sufficient. household level the decline in formal employment has meant that an increasing number of people in the household depend on fewer providers that are earning less. Women have entered the low end of the informal sector in great numbers but are earning very little. Poorer urban households are becoming increasingly large in size as generation's "double up" and their difficulties are compounded by the burden of disease and AIDS in particular.
- 6.2 Within this bleak picture poor households are adapting to changed circumstances and some of their strategies in small scale economic activity show good potential for expansion. But realizing this potential will require removal of critical constraints. First poor's asset base is very weak. The quality of their human capital has been eroded by poor health and nutrition and limited access to quality primary education. The poor is hampered by the difficulty in gaining access to land and in establishing clear property rights to the land where they live. The official policy still says that where they are living is illegal. Secondly returns to assets are low due to poor access to good infrastructure and transportation services and to related institutional and regulatory frameworks which make the cost of operating business prohibitively high. Institutional constraints include

the continued insistence on applying formal sector rules to small enterprises and the lack of participation and consultation in the provision of services.

6.3 In the context of declining formal sector employment the informal sector is growing rapidly; Median incomes in the informal sector are 63 percent higher than in the formal sector; Within metropolitan urban areas dynamism in the informal sector is evident, with certain communities showing increasing economic activity across a range of enterprise or sectors. The reason for this dynamism is the improvement in access to amenities and to employment opportunities. These communities draw in labor from nearby poorer communities. The growth of economic activities if not always successful has been concentrated among women making their explicit inclusion in any strategy important.

#### 7.0 Informal sector

- 7.1 After Zambia's independence the informal sector was at best neglected. Informal sector development was impeded by restriction's and all of the below mentioned continues to persist till date. 1.Restrictions on activities in residential and non-market places. 2. Limitation's on security of tenure 3. In appropriate building health and safety regulation's 4.the requirement to obtain multiple operating licenses and permits 5. Local council regulation's and taxes 6. Price control 7. Difficulty in accessing production inputs, credit, and tax incentives enjoyed by the formal sectors.
- 7.2 Some of the acts which are affecting the poor are listed below:

The town and country planning act: A zoning ordinance that separates residential and industrial areas and thus does not allow manufacturers to operate in compounds and effectively excludes them from acquiring / developing land.

Land acquisition act: Vests all land ownership in the president, making it difficult, to treat land as a commodity to be bought, leased, sold etc. The Act further allows for eviction of squatters without compensation.

The local administration act: Allows for local (often in addition to national) administration of land use and business operation. It is often arbitrary and non transparently administered.

Trade licensing act: Requires all business to secure a license. Since the time and cost to secure one is regarded as prohibitive and most informal/ small enterprise do not have a trade license and thus face administrative harassment.

Local authority market regulations and Hawkers act: Restrict sales of certain goods within a market and close to markets. The main difficulties lie with the discretionary nature of the approval process.

The Public health act: Covers health and sanitation issues, particularly relating to manufacturing and food processing. The provisions are considered unrealistic and if enforced in the informal / small enterprise sector would bring about closure of many operations.

7.3a The informal sector is extremely diverse; The results of informal sector operators running business showed that in Zambia 44.7 percent of them are engaged in retailing businesses. The second highest concentration of operators run farming, fishing, and hunting businesses which is 36.7 percent. Agriculture employment dominates the

employment sector. Some of the informal sector activities are as follows: selling charcoal, Blacksmiths, Brewing Beer, Carpentry, Knitting, Petty trading stores stone crushing etc.

## 7.3 Government response

In view of the deteriorating economic environment and rise of poverty Government decided to establish few institution's to cope with the situation.

Village Industries Service (VIS) was established in 1976 the small Industries Development Organization (SIDO) in 1981 and Small enterprise Promotion program (SEP) in 1982.

- 7.3.1 VIS is a quasi official NGO that was originally established to assist village and cottage industries in rural areas. Over time it moved to Peri- urban areas. Its aim was to provide: credit, technical support, project design, development and implementation assistance, input and marketing assistance; technology transfer. And develop physical sites.
- 7.3.2 The Act of SIDO encompasses followings :policy , research, training, consulting services, promotion of investment, procurement of equipment's and raw materials.
- 7.3.3 SIDO and VIS registration has been required for eligibility for various small scale incentives and services.
- 7.3.4 SEP was established to support Development of Zambia with the means to make equity injections into small scale enterprises. Its performance was poor following a very negative review now it started operating more commercially but because of failures it was liquidated in 1996.
- 7.3.5 There is a serious lack of institutional capacity for informal sector small enterprise intervention's whether it be for sub sector development or for poverty reduction. The three government related agencies SIDO, VIS AND SEP with informal/ small enterprise development all have been ineffective.

#### 7.4 NGO/ Community response

- 7.4.1 At the community level a combination of historical political and economic factors has resulted in weak institutional networks. Non- Governmental organization's in general have limited scope and expertise in the informal sector/ small enterprise development a direct result of earlier government centrally administered economic plans and policies.
- 7.4.2 However a number of NGO initiatives do exist. These includes OXFAM's program in Mufulira, World Vision's activity in Chainda and Irish Aid in Kamanga, NORAD funded Northern Province small enterprise fund, YWCA Small enterprise development program assisted by Irish Aid. Besides, CARE's PUSH and PULSE, PAP under Ministry of Finance, Micro Bankers Trust presents an important bodies of experience on which to build.
- 7.4.3 Economic production unit (established 1985) provides support through a revolving fund These loans include micro loans up to K 10,000 with 8 percent interest. K 15000 with 10 percent interest and K 20,000 at 12 percent interest. Conditions of securing loans are stringent and beyond the means of most (property worth more than K 15000 and a relative with steady income of more than K 10,000 per month).

#### 8.0 NGO movement in Zambia

- 8.1 NGO movement were not very prominent in Zambia before 1991. But after 1991 in conjunction with change of Government policy since than Zambia witnesses proliferation of NGO's in Zambia. As per NGO directory published in 1996 there are more than three hundred ninenty registered NGO's.
- 8.2 Increasingly NGO's as flexible entity's and specialized in community development are becoming more active partner in supplementing Government policies and programs. This has become more important because mass poverty produced as the result of vigorous implementation of ESAP by GOZ. As per estimates of researchers almost five percent of the population are now covered by NGO programs. NGO sector is becoming more and more prominent in development sector of the country.
- 8.3 With NGO's initiative a campaign against poverty has been spearheaded. NGO's are focusing that GOZ of Zambia has committed towards the goal of eradicating poverty through decisive national actions involving all the stakeholders; Main NGO's involved in this program is NGOCC an umbrella organization, covering more than 54 organization in its fold. This program looks forward for following action's:
  - \* TV and Radio discussion on problem of poverty and its possible way-outs.
  - \* Lobby for policies and actions to eradicate poverty.
  - \* Research on poverty.
  - \*To facilitate networking with all the stakeholders i.e. GOZ, NGO, Church and other interested groups. in order to proceed towards a common action against eradicating poverty.
- 8.4 But it should be noted that there are few NGO's who have country wide network mostly fragmented and still do not have that much effective influence on the action and policy formulations of the Government. Organization's who are now at the forefront of the activities are International's like CARE International, OXFAM, Irish Aid, World Vision, YWCA and others. National NGO's like Women for change, HUZA, Women Finance Trust, are also pursuing a good deal of work. Three NGO network are currently active as umbrella organization's i.e. NGOCC, NGO forum, and Zambia association for social development. Among this networks Zambia association for social development was initiated long ago but now lacks focus and currently less active. Other forums like NGOCC and NGO Forum are active and covers a good number of membership.
- 8.5 NGO registration procedure are not difficult and simple steps are to be taken to register the organization with department of Charity. Organization's who are interested to carry forward micro-credit activities should be registered with the State Bank of Zambia.

#### 10.0 Situation analysis of some of the Peri- urban compounds

Lusaka urban district is located in Lusaka province. The city boundaries now covers almost 360 square kilometers. Present estimated number of population is around 1651300 (LUDHMT Action plan 1998). Administratively Lusaka urban district is divided into thirty two wards. Each ward is represented by a Councilor. Councilors are elected by the population of the city of Lusaka through direct vote. Mayor of the city is elected by the councilors. Chief executive of the Lusaka city council is Town Clerk. There are thirty three legal and nine illegal Peri -urban compounds in Lusaka city. As per information provided by Housing department of LCC, government has no plan to bulldoze illegal settlements but it is looking forward for in-situ up-gradation of this settlements in future.

- 10.1 Chawama complex
- 10.1.1 The Chawama complex is located in Lusaka some 8 kilometers from the central business district. Initially a farm area it was leased to companies for quarrying in the 1940s. African workers were accommodated near the quarries in makeshift structures and allowed to remain as tenants after quarrying ceased in 1961. The community was incorporated in the city in 1970 and in 1974-78 squatters were leased plots to build houses or given permits to remain where they were, while home owners were given thirty year occupancy permits. The government introduced public services in Chawama in the late 1970's but has failed to maintain them adequately. The formal sector has been contracted and in recent years almost two thirds of CHAWAMA's working men are involved in informal sector. But almost half the workforce earned income self employment mostly in market trading. Among local organizations churches are involved in welfare activities in the community and a local NGO the Family Health Trust provides assistance to HIV/ AIDS patients.
- 10.1.3 As of present CHAWAMA has 95578 (LUDHMT Action plan 1998) population. Half the residents are urban borne; The median population is young (18.1 years JICA/LUDHMT base line survey) Legal home owners are 37.9 (JICA/LUDHMT base line survey) percent of the population and had lived there for more than thirteen years on average. Percentage of tenants are figured at the level of 61.2%
- 10.1.4 In 1973 the World Bank selected Chawama for an upgrading sites and services project. Electricity was first introduced in 1979 through standard lighting near the main road and piped water was provided one tap for every twenty five plots. 88.4 % of the population are using Public Taps (JICA/LUDHMT base line survey 1998) but no sewerage system. Most of the population are using pit latrines in the area ( 97.6% JICA/LUDHMT base line survey 1998).
- 10.1.5 Garbage disposal or Solid waste management seems to be neglected by the city council in the area and recent survey shows that 68.4% of the population dump the waste at the dumping site and 24.8% of the population bury wastes outside in the courtyard.
- 10.1.4 Declining employment in the formal sector for Chawama inhabitants has resulted in growth in the informal sector with high profit margins for some male traders and residual income for female street sellers.
- 10.1.5 After providing public services in the 1970's the Government has failed to adequately maintain them with adverse effects on the productivity of the poor.
- 10.1.6 Survey data indicates that more than thirteen percent of the community members are willing to participate voluntarily in the community development work.

## 11.0 George compound

George compound is 9 kilometers away from central business district. It is occupying an area of 1.5 kilometers. In 1975 the World Bank selected George for an upgrading sites and services project. Electricity was brought to the locality and security lighting was provided. Bulk of the population are in the informal sector.

- 11.1 Population is near about 138450 (LUDHMT Action plan 1998). Median age of the population is 18.3 years (JICA/LUDHMT base line survey 1998). Almost forty percent of the population are owners and 58.1 percent are tenants.( Settlement information chart, LCC, 1994).
- 11.2 A water supply provision was established with the support of JICA in 1996; which provides piped water— one tap for every twenty five plots ;on pay and use basis. community should pay K 1500/month/per household. In this community 80.9% of population uses public tap; apart from that some households are supplied with piped water and some are using public bore-holes (10.7%). (JICA/LUDHMT base line survey 1998)
- 11.3 Bulk of the population uses pit latrines (97.7%). There is no sewerage system in the community. (JICA/LUDHMT base line survey 1998)
- 11.4 Survey data shows that literacy rate is at the level of 82.5% in the community.
- 11.5 Recent data indicates that 67.4 percent population are dumping wastes at dumping sites. On the other 27.9% are dumping outside inside the courtyard.
- 11.6 Survey data indicates that only three percent of the community members are willing to participate voluntarily in the community development work.

### 12.0 Chaisa compound

- 12.1 Chaisa compound is 3.5 kilometers far from central business district. This is legal and recognized. A site and service scheme was executed in the year 1975.
- 12.2 Around thirty one point nine (31.9) percent of the population in the community are owners of the land. On the other more than sixty five percent of the population are tenants.
- 12.3 More than ninety five percent of the population are using communal tap water for household consumption. But some of the households are covered with piped water supply. There is no sewerage system in the area most of the households do use pit latrines (94.4%). Some of the households do have shared flush toilets (1.4%).
- Majority of the households dump solid wastes at the dumping site (75.0%). On the other more than twenty three percent of them bury at the court yard.
- 12.5 Survey data indicates that more than twenty percent of the community members are willing to participate voluntarily in the community development work. NB:A list of compounds with some basic information's has been annexed with this report.
- 13.0 Current status of micro-credit activities in different Lusaka urban compounds through NGO's

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- 13.1 In the course of activity of the consultancy many institution's were visited and some of them merits attention:
  - 1. CARE International projects PUSH and PULSE.
  - 2. Irish Aid project at KAMANGA
  - 3. HUZA
  - 4. Micro Bankers Trust
  - 5. Donors group on Micro-finance
  - 6. Oxfam project at MUFULIRA
  - 7. Women's Finance Trust
  - 8. Poverty Alleviation Project (PAP)
  - 9. World Vision project at CHAINDA
  - 10. Progress Financing

## 13.2 CARE International project PUSH and PULSE

PUSH Peri- urban self help was initiated by CARE as a component of a World Food Program sponsored food-for -infrastructure project. In this program target groups were those women involved in FFW activity. Credit delivery system was as follows: The project extended small loans ranging between K 50,000 to 200,000. In order to be eligible to access credit applying person should be a member of FFW program. In order to understand the rules and procedures of the program participant or prospective borrower must undergo an one week training program This training sessions were carried out for eight hours/ day for one week. Loans were available for petty trading and some other businesses. Interested participants should form group of five and should attend weekly group meetings. Savings were made compulsory and fifty percent of the requested amount should be deposited to project in advance on weekly basis. Loan was given for a five months period and should be paid back to the project through weekly installments. Interest was charged on commercial basis forty percent per annum. Each group has to register with the appropriate authorities and deposit their savings amount to Bank themselves. Apart from that it was a FFW related program that was one of the basic reason why people apply because they were interested to receive food ration's . Total 72 groups were formed. However repayment rate was estimated to be at the level of 91 percent.

In the next phase food for work was gradually phased out; participants received training saved \$ 20,000 and received loans worth of \$ 7000 with over ninety percent repayment rates. In the process of mobilizing the community CARE facilitated development of Area based organization's (ABO) who will be managing and maintaining basic infrastructure and other services with particular emphasis on vulnerable individuals.

Having based on above positive experiences CARE have been embarking on new project which is named as PROSPECT. In this project they will further try to consolidate capacities of ABO's and spread in other twelve compounds of Urban Lusaka further carry on with savings, credit, water and sanitation. Membership shall grow up to twelve thousand in this period. One of the basic thing is CARE basically follows GRAMEEN model in developing their savings and credit program in Urban Lusaka. Peri urban Lusaka Small Enterprise PULSE.

In view of experience gained in PUSH CARE, organization decided to embark on a pure credit targeting a larger clientele base than PUSH. In this exercise project extends small loans to its borrowers in the range of K 50,000 (\$ 33)- 500,000 (\$330) for first time borrowers, K 1000,000 (\$ 660) to second time borrowers and K 1500,000

(\$1000) to third time borrowers. Loan period for first time borrower is six months, for second time borrower is one year and for third time borrower is 18 months. The repayment of installments is on weekly basis and by-weekly for second time and third time borrowers. Commercial interest rates are charged on disbursed credit. Prior to receiving loans participants are requested to raise a minimum 10% of the requested loan amount and this amount is deposited in the Bank account. The project has a lien on this savings as long as individual borrowers are still members of the scheme. Repayment rate of this project is around 98% as of July 1997.

## 13.3 Irish Aid project in Kamanga

This project was undertaken in 1991. LCC provided support to site and service scheme. Under the initiative Roads were developed, public water supply through installation of boreholes were constructed. Total three hundred land plots for Housing was developed and handed over to the community. Under the scheme a school building was also renovated. While LCC decided to start the project Irish Aid also join their hands to support community mobilization efforts and facilitate savings and microcredit activity. In line with this they supported a project activity where training facilities for Group organization, business planning and management courses were developed to support credit projects in the community. Basic design of credit projects were as follows: project supported a business management course; course duration was for four weeks. All the participants had to develop a business plan and a cashflow as outcome of the training. Project supported development of a society a membership fee of ten thousand kwacha per annum was introduced for that purpose. Members of this society are eligible to apply for credit. Credit application's are screened by a board composed of representation from RDC, two project staffs, and independent professional member from the community (Banker); As per rule board members were given a bar to apply for the loans. In 1995 Irish Aid placed K 1.5 million for loan activities. Community association decided that highest ceiling of loan will be K 250,000; Loan have been forwarded for six months period; mode of repayment was fixed as equal monthly installments. Interest rate was fixed as four percent per annum. Apart from a special loan scheme was developed for more vulnerable section of the society. Ceiling of this was K 50,000 and repayment period three months. Interest rate was same four percent. If members failed repay in time they are penalized. Usually people applying for loan should indicate amount of security to the project. This is verified by the loan approval committee and report back to the board before issuing loan. Presently Irish Aid after evaluating maturity of the community association has pulled out from the direct management of the credit activity. Association is independent to continue their activity. Association members meets every week to discuss progress and problems of the credit society. Usually loan approval committee meets in every quarter. At the start membership of the association was high almost 596. But later many members were dropped currently membership stands at two hundred. Repayment rate is near about 85%. After first initial capital Irish Aid has not forwarded any other new investment capital for the project. Because of interest and membership fees and initial capital total amount of capital has raised up to 3.5 million. Ceiling of maximum loan has been refixed up to K 300,000. One borrower can apply to the project for three times. If he or she has repaid the amount regularly after completion of loan repayment he /she has to wait; project management have to evaluate loan utilization of the member borrowers; following evaluation he/she can place a loan application for consideration.

## 13.4 Human Settlements of Zambia - HUZA

A Zambian NGO which is pursuing different program activities in Chawama compound. They provides training to target people in following field i.e. Boutique tie- die, Block making, carpentry, Tailoring, saving credit etc.

Loan approval procedure: HUZA works through loan approval committees; This committee screens proposals submitted by the prospective borrowers. Range of loan is between K 50,000— K1million. Loan is given for three months. HUZA for the first loans do not charge any interest. If borrowers defaults then they are penalized. Ten percent interest are levied on the defaulters. After initial stage borrowing and repayment borrowers may apply for scaling up. In this case HUZA charges 20% percent interest on scaling up loans; loan period is six months. If borrowers defaults then they are penalized charging a flat 25% interest on the amount borrowed. HUZA discourages multiple borrowing; A member is allowed to borrow four times in total. Usually HUZA asks for securities for loan from the prospective borrowers, usually all this are not taken away but listed by the staffs of the project during screening of loan application. Till late December 1997 HUZA covered 2004 borrowers and eighty percent of the borrowers were women. As project coordinator pointed out that HUZA do not have any repayment problems as yet. In order to identify the viability of the loan application's usually HUZA goes through following procedures. Registration of the prospective borrower with HUZA , feasibility study of the proposed activity and finally the screening of loan approval committee. As it appeared that HUZA do not follow group methodology; Treasurer of the Group moves door to door to collect the installments and deposits to Bank account of the group. Which is being checked by credit officers and assistant credit development officers. There is no savings component in the project.

#### 13.5 Micro Bankers Trust

This was the result of a consultation between GOZ and European Union to channel funds for micro-credit activities to the NGO's and private institution's involved in the field of micro-finance. As result of that process Micro Bankers Trust was found in July 1996 having eight founding members. They are companies like Credit Management Services, Country services, Progress Financing, Women Finance Cooperatives and NGO's like CARE International, World vision, YWCA and Catholic Secretaries i.e. CARITAS. Apart from that founding members agreed to set up a Trustee current trustees are as follows: Farmers union, Christian council, Economic association of Zambia, Law associates, NGO consultative forum, Government of Zambia represented by Ministry of Social welfare. In order to be a member of the Trust or to join as Financial Intermediary Trust applies criteria's advocated by CGAP (Consultative group to assist the poor) i.e. Business plan ( objectives and mission of the organization), Credit methodology, past performance, appropriate interest rates, and tangible securities. At present MBT is providing funds for on lending purposes and for cash flow deficits. MBT charges 24% interest on the fund for on lending and 21% on the fund to meet cash flow deficits. According to agreement it provides funds to recipient organization it meets the loan requirement for one year period and approved fund is disbursed in four installments. Loan is provided for three years period first year is grace period and total capital is being paid back to MBT in equal twenty four installments with interest. MBT requires monthly reporting and regular repayment. It has started lending in June 1997 and so far has lended K 770 million. Of this total amount half was for cash flow deficit and half for on-lending purposes. In MBT's opinion some of their members are mixing up grant projects with revolving credit which is one of the reason of failure of different projects. Apart from that clear focus of microcredit project was not followed by some partners which has lead them to some difficulties. In general most of the MBT members follows GRAMEEN method; MBT do not interfere in the approach and methodology of the partner organizations. It has no prescribed suggestion's regarding credit methodology for its partner members. As per discussion NGO's and other financial institution's are applying almost hundred percent interest to their clients. Apart from asking securities and lien on savings high interest rates are explained because institution's are new and not confident on communities, weak credit culture, community mobilization process are not strong, very low coverage, and overheads are very high, It was revealed that for deposit of savings Bank of Zambia provides an interest of five percent per annum. But for larger volume this is negotiable. MBT plans to support other technical needs of their partners such as in the field of training, trouble shooting; specifically it aims to organize training of credit officers of its partner organizations. But it also can provide some other training on request of its members i.e. financial management and others.

## 13.6 Donor working group on Micro-finance

Currently a group on Micro-finance has been formed and working in Lusaka. Usually group meets in every six weeks. Main purpose of the formation of this group is to disseminate experience about different Micro-Finance projects currently executed by local implementing agencies. Group also is interested to disseminate information's about up coming activities undertaken by the different donor group;

Present membership is as follows: PAP, USAID, GTZ, SIDA, MBT, JICA, EU, ILO, ECA, The Royal Netherlands Embassy.

## 13.7 Oxfam supported project at Mufulira

13.7.1 OXFAM has funded Mufulira Peri-Urban Development Frame Work (MPUDF) since 1985. This is an apex body of nine community based organizations. Main activities of the MPUDF is as follows:

Community self help program involvement.

Social development promotion.

Agricultural promotion to eliminate poverty.

Promotion of livestock rearing.

Promotion of gender awareness.

Training on simple accounts, agriculture, leadership and strategic management.

Skill development for youths.

Management committee of the organization is formed by two members from each founding member CBO. Management committee decides policies, formulates the action plan of the organization and appoints staffs.

Revolving credit program supported by MPUDF

- 13.7.2 MPUDF do not do the credit program by itself. Organization provides loan fund to its member CBO's on four percent interest per annum.
- 13.7.3 Luansobe 1 community based organization is one of the member organization of MPUDF. Currently their are sixty member in the organization; Office bearers are elected for two years period. Membership fee is K1000 per annum. CBO on lends this soft loans to its members in the range of K 5000- 25000/ for two months period on two percent interest. Usually members meets in a regular weekly meeting in local church; where members discusses Financial report of the loan program, apart from that it discusses activities of other sub-committees i.e. Nutrition, Agriculture, women development etc. Some of the main activities cited were Fish selling, Beans selling, Baking bread, Charcoal burning, selling of home made soft drinks etc. Loan is being

approved by the steering committee of the CBO up on receipt of application from its members. Usually a pledged amount of security is being placed such as household furniture and other home appliances after approval of loan amount a memorandum of understanding/ or an agreement is being signed by the both sides. Main guiding principles for providing loan are borrower should participate in community work, follow rules and regulation's of the CBO, should be resident of the Peri urban compound, main target of the activity is poor households. Initial membership was twenty and it gradually rose to sixty. Community members commented that this exercise has been benefitfull and profitable for them. Money lender in the community charges 100% interest/ month. If any of the members have been found involved in money lending business using project fund they are suspended and severely penalized. If there is difficulty borrowers may pay in kinds to the project management and they arranges sale of this products into the market and realizes amount of loan disbursed. So far there is no defaults and repayment rate is hundred percent.

#### 13.8 Women Finance Trust Zambia

WFTZ started its credit activities in October 1994. A funding agreement was reached between Dutch Government and the organization. Which covered the activities for three years period. In the beginning of 1995 top management team went to Bangladesh for a study tour. Lending activity was started in April 1995. Basic methodology of providing credit is as follows:

- Organization lends through groups. A group is composed of five members.
- This is a membership organization. In order to access credit a membership fee of K 2500 plus K 2500 for subscription per year and K5000 as savings should be deposited.
- Apart from that ten percent of pledged amount should be deposited to the organization before loan approval.
- Average loan size ranges from K 200,000 K 500,000; Maximum loan limit is K 500,000
- Scaling up fifty percent per year.
- Members should deposit weekly savings depending on their will and ability and meet regularly in weekly meetings.
- Repayment on monthly basis. Grace period is one month
- Target clientele is low income women entrepreneurs. They should have business and small assets. Focus is on women.
- Interest rate is fifty percent per annum. Apart from that organization reserves ten percent from pledged account.
- WFTZ provides GOZ BANK interest to its clients savings deposit.
- Loan period is six months to one year. Usually at the time of receiving loans borrowers savings on an average stands at K 50,000.
- Total number of borrowers are 820 as of December 1997.
- In last three years organization has disbursed K 553 millions. Outstanding stands at K 122 million.
- Repayment rate has been 90-98%.
- Amount of savings K 63 million.

#### 14.0 Poverty Alleviation Project (PAP) under Ministry of Finance

This is a project under the supervision of the Ministry of Finance GOZ. Main funding support is coming from African Development Bank (ADB). Estimated volume of

expected funding is \$ 4 million ten percent of this fund is earmarked for administrative costs. In identifying prospective financial intermediaries project is searching for projects which have sustainable plan of operation and meets the viability criteria in long run. Currently consultation is going on with Swedish Government agencies to cover administrative costs of prospective intermediaries and loan fund will be supported from this project. Till date concrete date of project practical operation has not been decided.

## 14.1 World Vision of Zambia (WVZ) project at Chainda

Chainda is one of the illegal settlement in Peri -urban areas of Lusaka urban district. WVZ works through groups; It organizes groups of 25-30 in the compound. At present moment there are 163 member borrowers (112 women and 51 men) under this scheme. Before recognizing them as group members, people interested in this type of activity should undergo an eight weeks training program; Training program is divided in two phases in first phase prospective clients are trained in group methodology and credit mechanism rules and procedures for four weeks. In second phase members under goes training in business methodology and develops a business plan. About 25% of pledged loan amount should be deposited to the Loan insurance fund of the project; This amount should be deposited within 25 weeks after entering to the project as member. This deposited amount is refundable. Project ask for Household security for requested amount of credit. Interest rate is 60% per annum. Apart from that WVZ charges 5% interest for the service. Support for credit activity was made available from European Union through Micro Bankers Trust; Under this arrangement project received \$ 80,000. The total amount of loan disbursed is \$ 38077. Repayment rate is 50%. No savings component in the design.

## 14.2 Progress Finance

In Zambia many of the private companies are active in the field of micro-finance and are trying to develop this is an area of good business and profit. Progress finance started doing micro-credit activity in 1994. Profit making is the main objective of this organization. Loan procedures are as follows:

- In order to apply for loan an individual needs to buy a prescribed loan application form @ of K 3000 from the company.
- Person applying for credit should pledge household amenities as collateral to the company. Amount of collateral must be more than requested capital.
- Following submission of application progress finance will carry out a detail appraisal of loan application. Loan processing/ appraisal fee is five percent of requested amount of credit.
- some of the criteria's applied by the company for selecting client's are as follows: focus on women, person applying should be in a business, should have an address, new entrants are also allowed.
- Loan application's are screened by a loan approval committee; Loan approval is dependent on appraisal reports committee specially looks at the viability of the project.
- Before disbursement of loan client is asked to deposit 10% of requested amount to progress Finance. This amount is not refundable, which is termed as development fund.
- Loan period is two months, six months, twelve months and two years period.
   repayment done on monthly basis. Interest rate is 60% per annum. Service charge is 60% per annum.
- Company is active in Lusaka, Muanza and Mazabuka.
- Repayment rate is 96% and current number of active client is 576.

- Company supervises and monitors its clients through loan officers closely.
   But it does not follow group methodology.
- It provides training to its clients it is a one day training on credit methodology, simple accounts and business planning. Training fee is K 5000.
- Company discourages loan for seasonal agriculture. It has provided loan for trading and small scale manufacturing i.e. Carpentry, Tailoring, Knitting, Restaurant's, catering and services. It also provides loan for poultry, raising Pigs etc.
- Loan range is K 50,000 500,000
- It strongly suggests to start micro-credit activity with small loans and increase coverage slowly and pursue vigorous monitoring and supervision of clients.

## 15.0 Analysis and Recommendation's

- As country is being practicing ESAP so a safety net concept was put forwarded in order to ease the sufferings of the population. Micro-credit and other anti poverty programs are tools of this safety net approach. Unfortunately people who are involved in the implementation part of the exercise are not very much aware about fine tuning between sustainability and burden of whole exercise have been passed on the shoulder of people living under poverty.
- ⇒ It was observed that as country is in transition from one particular form of governance to another at this stage formal and informal sector employed population finds it difficult to meet the ends of their family expenditure. It was also observed that middle class has been vanished from social composition as societal group; As result of the process there is proliferation of large informal sector; Because of the hardship there is shrinkage of large families. Many families are practicing reduction of meals per day. This has influenced rise of tension, crimes and number of sex workers in the society.
- ⇒It was noticed that many people and organizations believes that credit culture is not strong in this country because of the past legacy, there is certain risk in going forward with collateral and security free credit facilities. Non payment of credit may be the result of poor inefficient administrative net work, and also ethnicity might play certain role.
- ⇒ Key to successful program is participatory development programs; It is recommended to use participatory tools and techniques in the operation of this project.
- ⇒ Effective participation of the community depends on its access from planning to implementation of the project. Mobilization of the community is crucial and vital to the successfulness of this project. It is recommended to put major emphasis on community mobilization in the whole process of this project.
- It is known that community mobilization is very strong around micro-credit led community activity. It is rationale to start mobilizing communities using group methodology. A strong community mobilization is needed for a community based project to succeed. From this point of departure start of micro-credit activities is highly recommended.
- This was noticed that many of the International and Zambian NGO's are providing microfinance services to the population living in poverty. Most of them are following Grameen methodology with some adjustments. One of the problem felt was inflation rate in the country; currently which is around 18.6 %; But economy shows tendency of decline in inflation rate and interest rate of Bank of Zambia is also going down.

- Another point of observation was interest rates charged by the private and non governmental organizations to its clienteles. Interest rates are pretty high in some case more than 100% and all this was justified in the name of sustainability. In some cases mode of profiteering could not be excluded (Progress Finance).
- It was noticed that securities were charged against requested amount of credit by the projects. It may be interpreted in away that most of the credit providing institutions are new and lacks experience. Community mobilization process facilitated by the institutions are very weak and those institutions are not confident on community strength, skills and capacity.
  - In order to be effective in project implementation and to reach good outputs project should be sustainable. This is ensured by the core mechanism of revolving credit program.
- One of the major weakness in organization's providing credit is there outreach; which is very low; overheads are very high; Salary structure in NGO's are high in comparison to Government structures.
- One of the major point in the project is sustainability of other health components of the project. This are health training, water and sanitation services and solid waste management. There is a high possibility of success if mobilized communities in the microcredit scheme are involved for above purpose. It is strongly recommended to use microcredit led community mobilization process for above purposes.
- This should be noted that other health activities may be adjusted in such away that communities are well motivated and convinced that some important non financial services are also essential in day to day life and it is impossible to provide those services free of charge. This is also in the benefit of the community that maintenance of the services are shouldered by the community.
- In order to achieve increased health care access of the population in one of the compounds of Lusaka blending health with income enhancement is recommended.

## Specific recommendations

- 1. It is preferable to start with community mobilization targeting micro-credit activity. This activity will comprise of selection of compounds, recruit and training of staffs, setting of office, preparation of a training manual, constitution for the members, training of members and observation. All this activities are possible to complete in six months period. A review of the community mobilization activity should be carried out after six months period.
- 2. As GRAMEEN BANK methodology is already in practice we also recommend to use GRAMEEN methodology. We arrived at flat 45% interest rate considering inflation rate ( 18.6% source Poverty Profile workshop 18-20 February 1998) ,cost of fund and keeping in mind securing comparative comfortability for people living in compounds. Because of inflation we are not comfortable to use diminishing method in calculating interest. Current commercial interest rates are as follows as of February 20 1998 (source Bank of Zambia):

Saving	s Rate (%)	Lending Rate (%)	
Less than K 100,000	More than K 100,000		
12.9	16.0	45.7	

Operational cost of the project per month in the first year will be as follows:

Manager	\$ 200
Accountant	\$ 150
Field staff No 2 \$ 100/ head	\$ 200
Maintenance (Rent, travel etc.)	\$ 200
Total	\$ 750 / month x 12 = 9000/year

## Income of the project

- 1.  $$50000 \times 1.5 \times 45 \% = 33750 @ 100\%$  recovery rate
- 2.  $$45,000 \times 1.5 \times 45 \% = 30375 @ 90\%$  recovery rate.
- 3.  $$375000 \times 1.5 \times 45\% = 25312.5$  @ 75% recovery rate.

This is a revolving credit program effective interest earning will be higher because Credit utilization index should be in the range of 1.5 and hence income will be higher; It is recommended to keep over head costs low and repayment rate above ninety percent.

This projection has been calculated on the basis of the fact that project will access concessional funds. Even if project borrows money with interests and has to pay cost of fund still it is sustainable because it has enough margin of income.

- 3. Loan amount for first year should be \$100 and scaling up in next years is as follows: second year borrower: \$ 200 and third year borrower: \$ 300. As of now range of loan shall be in between \$ 100 \$ 300. Which should be reviewed after one year.
- 4. Credit should be disbursed after reviewing community mobilization strength, discipline, savings, maturity and level of understanding of group organization and credit methodology by the organized groups.
- 5. Dissemination of health knowledge to the organized groups may start after six months period.
- 6. Water supply and solid waste management activity may be undertaken with the support from health centre and should be managed by separate staffs. What is important that we are in position to facilitate this exercise with support and participation of already mobilized community around credit program.

## Operational plan for implementing a microcredit program

# How to start : Structure of a micro credit program Social survey

Before embarking on to a micro credit program in one of Lusaka urban compound Manager responsible or assigned for the purpose should develop a report covering following socio-economic aspects:

- 1. Map of the compound with indication of zones.
- 2. Main economic activities in the area.
- 3. Local power structure and CBO's.
- 4. Condition of infrastructure (roads) and accessibility of local population to markets.
- 5. Approximate number of people living under poverty line.
- 6. Availability of formal banking services.
- 7. Role of local elite's i.e. teachers, doctors and local healer in the societal life of the local community.

## Projection meeting

At the start a projection meeting should be convened in the project site inviting representatives from resident development committees, churches, NGO's, officials from Lusaka City Council and the community members. Project manager will explain objectives, goal, purpose and methodology of project operation. In this meeting all actors of the compound life should be invited; Meeting message should make it transparent that who will be the target beneficiaries of this economic activity; thus it will make clear that this program is not destined for effluent or richer section in compounds. This will be poor people specially women from peri urban compounds who lacks necessary capital for self employment. In order to give strong impression about full backing of such activities by the Government Lusaka City Council representatives should be invited to chair the meeting.

## Clientele criteria:

- 1. Economically depressed women.
- 2. Monthly income ranges K50,000-150,000/month
- 3. Living in the same compound at least for two years.
- 4. Same economic background.
- 5. Age between 18-45.
- 6. One from each family.
- 7. Widow and Returnees.
- 8. No criminal record or outstanding debt.
- 9. women with business skills are encouraged.

## Organizing groups:

Having based on above criteria's field level community workers will invite interested women to join as member of the formative group.

## **Admission fee**

In order to be recognized as groups members they will require to pay a fee of K 5000. This is not refundable.

#### **Basic Training:**

In order to make compound people understand about rules and mechanism of credit operation a six days training program should be organized. Every day participants will learn for an hour about rules and regulation how to manage a community based organization in a disciplined way. They will also learn about methods and mechanisms of borrowing and repayment. Discipline in the group sitting style etc. Guarantee system and peer pressure. About mandatory savings procedures. Their rights and responsibilities as group member.

#### Socio-economic survey:

In order to understand level of income of the target group a means verification survey will be carried out using prescribed format. Which has been attached with this report.

## Group (SANO):

A group is composed of five members. They elect their own representatives.

#### Centre (GULU):

Two to six groups are federated into a centre. A centre is guided by a centre chief who is elected by the group members.

Functional unit for a revolving credit program will be a centre.

## Group recognition:

Following successful training an oral examination will take place to verify the understanding and knowledge of the group members; members and groups who will pass the screening procedure will be recognized as groups affiliated with the project.

#### **Election of offices:**

Each centre members will elect centre chief and an assistant chief through direct vote for one year period. Apart from this each group will also elect representatives of the group through direct vote.

## Regular centre meeting:

Each centre will hold its regular one hour meeting every week at specific date; place may be in the courtyard of member's house/ church at a specified time schedule. All members must attend meetings regularly. Contribute savings at this stage is mandatory.

Following recognition a centre shall meet every week regularly at a certain time and place. During centre meeting every group member should sit in a row and not mix with other group.

#### **SAVINGS**

Every week they should make a voluntary deposit of K 1000 and above enabling their access to credit. This saved money will be deposited to bank through PROJECT. Project will provide savings deposit interest to member as per rate of State Bank of Zambia.

All the members will receive a pass book where entries will made about his savings deposits. In case of voluntary withdrawal from the group, member will be able to withdraw his savings if all his dues are found clear. If there is certain amount of dues or unpaid installments that amount will be first adjusted and remaining sum (if there is any ) will be refunded to the group member.

**Group Tax**: Five percent of the requested credit amount should be deposited to the project before loan amount is passed to the borrower. This is a kind of insurance for the disbursed loan. Following successful repayment this amount is refundable.

## Observation period (Monitoring of group functioning): Three months.

Centre functioning i.e. discipline, regular savings, business plan preparation and understanding of credit delivery mechanism will be monitored for three months. If screening and observation are satisfactory then credit will be disbursed.

Business proposal

It should be made clear that specific business ideas should flow from prospective borrower himself. During three months observation period he/she should be able to develop a business idea and justify it before the centre and project management.

## Procedures for credit disbursement

In each group credit will be disbursed as per 2-2-1 formula. Which means that at first two members of each group will receive credit; they will be in observation for next four weeks; then next two members of the group will be eligible to receive the credit and observed for two weeks and finally leading members will receive the credit; as per policy office bearers i.e. group representative and centre chief's will receive the credit after all.

## 2. Lending procedures:

In order to apply for credit following methods will be followed:

a) Loan Application from the recipient elaborating his needs for credit. He / she may apply if initial amounts of regular weekly savings are in place and he/ she has attended weekly meetings regularly. Member also have to place a security placing household amenities as pledged. Group members should give their positive consent regarding application of individual member.

## Loan approval

- b) Following simple appraisal Centre chief must forward this application to field worker with positive recommendation's.
- c) On receiving this field worker fills up a prescribed printed form and attaches recommendation of centre chief and members passport size photo and forwards it to Manager with his own recommendation's. (annex)
- d) Before making decision on loan proposal manager verifies the proposal visiting applicant's household personally and makes his decision.

## Grace period

e) Recipient or loanee is allowed a grace period for two weeks and after that he starts paying his installments on weekly basis.

#### Interest rate:

Interest rate is 45% flat per annum; This is commercial rate which is meant to protect the fund from depreciation as a result of inflation.

#### Repayment:

Loan amount for certain specific activity must be repaid through fifty equal weekly installments; But one might decide to borrow for six months period which is allowed.

## Disbursement of second loans:

where all the members of centre has repaid their borrowed amount; then members of this centre will be eligible to apply for further or second time loans.

#### Default and risks:

This might arise as a problem during program execution because of weak performance of discipline in the group. It should be recalled that loan disbursed in this kind of program is a collective responsibility; Field workers will not advice or suggest on the purpose of borrowings; this is the borrower who himself with his fellow borrowers should decide for what purpose will he/ she borrow; thus any default in repayment is the collective responsibility of the group and centre. In case of default defaulting borrowers savings and group tax will be liquidated. If this is not sufficient the group savings and tax of the group will be used to cover the gap. If that amount does not match the debt, the savings and group tax of the whole group will be used to cover the debt. It is through this peer group pressure they will ensure near hundred percent repayment rate. That is the cornerstone of success in collateral free credit program. So close monitoring of the group discipline and timely intervention from the managing organization is an effective tool for the success for this kind of revolving credit activities.

## Guidelines for reducing loan defaults:

Lending must be initiated to meet the bankable demand for credit. Careful selection and screening of clients. Character references and groups could offset the lack of information about potential borrowers. Acceptance of alternative forms of collateral's such as collective liability.

**Branch**: A branch office should be set up in a compound covering an area of six kilometer radius. A branch gradually will cover a load of one thousand five hundred borrowers. A branch in one of Lusaka compound will cover 500 member borrowers in first period; Seven hundred borrowers in second year period and three hundred new members in third year period

Staffing:

A branch is staffed in following way: Branch manager: 1. Accountant: 1 Field Staff: 1 per 250 borrower. Messenger: 1. Initially a branch starts with branch manager and gradually recruits other staffs. Staffs should be given incentives on quarterly or six monthly on the basis of their performances.

Staff position	Qualification/ Experience	job responsibility
Manager 1	Graduate/ Masters accounting background and experience of work with the community will be preferred.	Management of the unit. Training of new staffs. Liaison with Government, NGO's, donors; writing monthly and situational reports. Ability to provide motivation and Supervise MIS.
Accountant 1	Twelve class certificate and diploma in accounting/ Graduate with major in accounting. Experience in community development work will be treated as extra qualification	Maintain books of accounts, transaction with the banks. Able to prepare monthly reports using prescribed format. Regular reconciliation of pass books with office accounts.
Field staff	Twelve class certificate. Experience of work with the community will be treated as extra qualification.	Group formation, training of groups, regular collection, regular entries to pass books and collection sheets follow directives of higher management.

## Logistics

In order to be efficient and effective in the management of micro-credit mobility of the staffs is very important. In view of that project should be equipped with a Motorcycle and four BI-cycles. Apart from that considering development of efficiency from the start all the financial transaction's and operation's should be computerized. Project should also have access to

e-mail and Internet in order to be able to provide information's to other interested stakeholders and readily access advise and service from consultants and practitioners.

## Financial transactions at the project /Branch office level

Project /Branch office operates all functions through a bank account; it maintains a general cash book, a general ledger for credit, subsidiary ledger, ledger for savings, collection sheets maintained by the field staffs and voucher gird files.

## Monitoring:

Project /Branch office level

Every month project office reconciles pass book which are at the hand's of borrowers with collection sheets, subsidiary ledger and general ledger. This procedure helps project staffs to maintain a very transparent account of the credit program.

#### Field monitoring:

This is the duty of the project manager to visit borrowers at the household level and witness how borrowers are using money in their income generation activities;

To visit centre meetings whether these meetings are running on time and whether borrowers are repaying and attending meetings regularly; what is the situation of group discipline. Whether members could devote some of their time to some other development issues.

## Staff and incentive policies

In order to operate the project skillfully presence of efficient and well motivated staff is mandatory; Staffs are given an one month training at office combined with class room lessons as well as field trips, and on the job training for next three months;

#### Cooperation with local authority:

Entire program should be executed in close collaboration with local authorities.

## Management information system:

A good MIS should at least provide following information's:

- \* The financial performance of the overall institution.
- \* The performance of various products, especially in loan collection and arrears.
- \* Individual branch and staff performance, which may be required as input for the staff incentive system.
- \* Repayment performance of the individual clients or groups. This will enable staff at the branch level to award incentives to customers or investigate problems and either reschedule loans or implement punitive measures. Customer profiles could also be developed to improve future loan selection and screening.

#### Reporting requirements:

Each branch should prepare a report using a prescribed format which will reflect weekly disbursement, weekly volume of repayments, project income and expenditure, Apart from this it will also provide information on volume of savings collected and percentage of members present in the weekly meetings. Withdrawal of savings and drop out of members. ( please see annex)

#### **Evaluation:**

Evaluation of the activities could be done in following ways:

- 1. Reconciling project accounts with borrowers pass books and bank accounts.
- 2. Observing discipline of the group at the field level;
- 3. Comparing improvement of the quality of life and income between start date and evaluating time;

## Containment of administrative cost:

When analyzing administrative costs the nature of services provided by the micro credit program should be considered. Such as mobile banking services, savings mobilization, social inter mediation and other technical and non-financial services. High transaction costs can reduce outreach and render a micro-credit program un-competitive, or increase subsidy dependence if the on lending rates not adjusted properly.

Budget

Component	Year 1	Year 2	Year 3
Capital investment		New	New
\$ 100/ person/year 1	\$ 100 x 500 = 50,000	\$100 x 700 = 70000	\$ 100 x 300 = 30,000
\$ 200/ person/ year 2		\$200 × 450 = 90000	\$ 200 x 630 = 126000
\$ 300/ person/ year 3			\$ 405 x 300 = 121500
Equipment's	\$ 5000	•	-
Computer printer ups			
Printing	\$ 5000	\$ 5000	\$ 5000
pass book, books of			
accounts, formats,		,	
collection sheet,			
Stationaries etc.			
Furniture	\$ 5000	(ad	<b>39</b>
Vehicle			-
Motorcycle 1	\$ 4000		
Bicycle 4	\$ 200 x4 = 800		
Program support staff			
Manager 1	\$ 200/mox12 = 2400	\$ 200/mox12 = 2400	\$ 200/mox12 = 2400
Accountant 1	\$ 150 / MO x 12 =	\$150 / MO x 12 = 1800	$$150 / MO \times 12 = 1800$
	1800		
Field staff	\$100/mo x 2 x12 =	\$ 100/mo x 3x12 = 3600	\$ 100/mo x 1x12 = 1200
250 borrower/ staff	2400	\$125/mo x 2 x12 = 3000	\$ 110/mo x 3x12 = 3960
			\$120/mo x 2 x12 = 2880
Office rent	\$ 500/mo x12 = 6000	6000	6000
Travel and	\$ 100/mo x 12 = 1200	150/mo x 12 = 1800	200/ MO x 12 = 2400
Miscellaneous			
Total	\$ 83600.00	\$ 183600.00	\$ 303140.00

As per nature of the credit program sustainability of the credit operation depends on revolving character of the fund which in turn depends on repayment rates;

Taking into account adversity of the situation, high inflation rates, weak micro-finance institution, credit utilization index possibly will be in the range 1.5/ per year; Therefore actual need of funds for capital investment in second and third year will be in the range of \$ 113334 and \$185000; other costs remains unchanged.

Eighteen months	s Work p	lan			Mont	hs	
Activity	1	2	3	4	5	6	6-18
Staff recruit							
Office set up	4.5						
Training of							
staffs							
preparation of							
Constitution							
Projection							
meeting							
Training of							
members							
Centre meeting							.,
Savings							
Observation							
preparation of							
credit							
application					<u> </u>		T BORGO AND SOA BOGO OF TAXABLE OF
Credit							
disbursement				(*   * * * * * * * * * * * * * * * * * *			
Reporting							

## Improving Water supply in the community

- 1. At the start it is necessary to assess the acuteness of water supply to that community.
- 2. Later it is important to organize a projection meeting; In this meeting people from all section of the community is invited to discuss and pass their opinion regarding establishment of water supply in the community.
- Before organizing the meeting project discusses the problem with the member 3. borrowers, and gets their views how community is willing to participate in the process? What is their real problems in exercising access to water? Generally it is the fact that community has to fetch water from long distances and had to spend long hours in queues.
- In taking stock of the situation and armed with strong leverage of support of member borrowers, project embarks on to discussion with wider participation of the community. All section of community are usually invited to participate in the meeting.
- In the meeting project manager gives clear understanding about how water situation is going to improve and what is the responsibilities of the community people in this connection.
- 6. Following first projection meeting there are small group meetings involving community leaders where following question's are sorted out such as formation of water point management committee, cost of maintenance of the water point and civil works, operational cost of water supply and mode of repayment to water and sewerage company.
- 7. Say for example if we start with Chawama where water supply situation is precarious and water points are vandalized and went out of order and are causing much difficulty to the First a community action plan meeting should be organized to identify residents. problems and possible solution's and then community members should agree on possible budget and civil work costs and repayment of operational costs on monthly basis.
- 8. In this approach group organization developed in the process to provide credit to the depressed women from the community do provide better environment of understanding community and scope for motivation of community members and develop the project on a participatory model.
- 9. In view of the all above following concrete action's are recommended:

- Discuss the issue of water and sanitation with the credit group members. Draw a plan of action and to do certain ground preparation.
- Organize a projection meeting in the compound involving community members, RDC representative and other stakeholders;
- Develop a community action plan covering problem identification, possible solution, budget for civil works, a work plan and mode of repayment by the community. At the same time facilitate formation of community management committee for water points generally consisted of women.
- Approve loan for above purposes. It is recommended civil works loan may be landed
  for thirty months period including a grace period of six months. Currently World Bank
  urban restructuring and water supply section is willing to support with funds for civil
  works for water, provided community mobilization is in place and model definitely
  shows element of sustainability. Tap those resources in the benefit of the community.
- Put strong emphasis to complete the work procedures as per work plan.
- Continue regular supervision and monitoring of the activity by the community leaders as well as from the project.

## Solid waste management in the community

This is stated that in 1996 total quantity of waste generated in Lusaka was about 243,000 tons/year. Almost half of the generated commercial waste is composed of paper and cardboard. The total quantity of solid waste generated in Lusaka is estimated at 219000 tons per year. Bulk of the solid waste are produced by Peri-urban dwellers.

## Economics of solid waste

This should be mentioned that recycling of solid waste has now being regarded as an industry and many people through out the globe earning their breads out of solid waste. It should be mentioned that recycling of plastics, waste papers and bottles has gained considerable momentum in these days. Apart from that dumped waste materials are good material for very high quality manure's.

## action at the community level

- 1. In view of the above following concrete action's are recommended:
  - Discuss the issue of solid wastes with the credit group members. Draw a plan of action and do certain ground preparation.
  - Organize a projection meeting in the compound involving community members, RDC representative and other stakeholders;
  - Develop a community action plan covering problem identification, possible solution, budget for civil works, a work plan and mode of repayment by the community. At the same time facilitate formation of community management committee for water points and solid waste management generally consisted of women.
  - Approve loan for above purposes. Currently World Bank urban restructuring and water supply section is willing to disburse funds for civil works for water supply and waste management services provided community mobilization is in place and model definitely shows element of sustainability. Tap those resources in the benefit of the community.
  - Put strong emphasis to complete the work procedures as per work plan.
  - Continue regular supervision and monitoring of the activity by the community leaders as well as from the project.

## Health awareness training

Community mobilization strength around credit program provides good opportunity for health awareness training to community members especially to women. In the credit program there are small groups of women who are well organized and this community based organization's are ready to interact. It is easy to organize community meetings and there is a scope to train CHW's targeting leaders in this community groups. Further credit program itself can provide certain incentives from its earned service charge to CHW's to carry forward dissemination of health knowledge on regular basis. It is possible to standardize health information manuals and chalk out certain concrete plan to carry forward it in the community and cross check it or evaluate the improvement in understanding of health hygiene behaviors of the population through a random rapid survey. This is sustainable because it is operating on the backbone of micro-credit led community mobilization process. As credit program will run for long time and health training will also continue. Only question is to set it up with commitment and in accordance to the need of the target population in the community.

#### Conclusions

Basic idea behind this assessment was to find current practice of micro-credit in Zambia specifically in Lusaka. It was also necessary to identify Government rules and regulation's and practices in relation to micro-credit and informal sector.

As part of the process current trend in Zambian economy was also necessary to understand. Basically assessment has tried to figure out feasibility of micro-credit operation in Lusaka compound and figure out possible areas of its cooperation with components of health care.

One of the basic conclusion will be to advise start micro-credit activities in the first phase which will require about six months to set up and there after disbursement and effects of credit intervention will be possible to review after one year period.

In this period a health training activity is possible to develop with active participation of the community.

After six months period it is also possible to start community mobilization for safe drinking water. This may follow design mentioned in earlier section of this report. But water supply activity must be supported by the staffs of Health centre; Credit staffs will not be able to pursue it while pursuing credit activity at the same time.

It is recommended to start program on solid waste management after one year period when communities are organized and consolidated and their perception's are more clear in all this direction's.

After all this procedures a review of the situation should take place and go for replication in other compounds of Lusaka district.

## ANNEX 1

# Means verification survey Revolving Credit Program JICA PHC/ AMDA-International

1. Na	ime						
2. Ag		3. P	rofession			4. M/F	
_	ther /Husband's nam	ne:					
	esent address :						
	rmanent address :						
	of family members	•	M/F				
	me of family head						
	arital status : unmarri	ed / marrie	d / widow/ di	ivorce /	separ	ated	
	scription of family m						
	,						
Serial	Name	Age	Relation	with	Edu	cation	Profession
No.			family head	Ė			
1							
2						,	
3							
4							
5							
6							
7							
8							
9							
10							
	of earning members:			lale:	]	Female:	
	tal monthly income of	the family /	annual incom	e :			
14. Ar	nount of land :						
		<u>.</u>				T	
	Own lan			Take		Taken as	
Cultivable	Non cultivable	Leased	Rented	Rent		Lease	Land
		1					
_			<u> </u>			ļ	
45 N	of household anin	noile					
	Goat	Sheep	Ducks	Chick	00	Buffalo	Others
Cow	Goal	Sneep	Ducks	Chick	en	Dullaio	Others
		L		L			

# 16. Description of house:

	Wall								Roof	
Jute stick	Bamboo	Hay	Leaves	Soil	Tin	Others	Straw	Hay	Tin & Hay	Others

# 17. Other physical facilities:

		Land		House			
Govt	Non. Govt.	Buying	Rent	Without Expenditure	Own	Rent	
					Made Cost	Monthly Rent	

		House	Roof				Edge		
Pucca	Tin	Bamboo/ Plastic	Hay/ Plastic	Others	Brick	Tin	Bamboo	Wood	others

## 18. Other family assets:

a)	Wa	ter Supply					Electric	
Pond/river	Tube- well	Tube- Supply by		None Expe nses Mon. / Yr.		No	Ехр	enditure
							Month	Yearly
c)		<u> </u>		<u> </u>	d)			
<u> </u>		Gas					Latrine	
Have	No	Expenditure			Have		Katcha/ open	Slab
	<u>.l.</u>	Monthly	Yearly	,				

19. Approximate selling price :

	, .bb,		<u>-</u>						
TV	Radio	Cycle	ornaments	Bed	Almirah	Chair	Table	Utensils	Others
			}						

19	Amount of debt and
	credit:

Ref.

Relatives /Friends/ Money lender/Zaminder/house owner/Shopkeeper /Others

#### Amount

Debt Credit

20. Annual interest rate

Total debt

Credit

- 21. Profession /Work description:
- 22. Are you suffering / Suffered from any major illness:
  - a) What is the disease:
  - b) Duration of disease:
- 23. At white time of the year your income is lowest:

Name and signature of interviewer Revolving Credit Program

## ANNEX 2

# **Revolving Credit Program**

# Credit application form

				Loanee Number Amount Date of application	:	
A.	Descr	iption of Application				
	1.	Name of Applicant :				
	2.	Father /Husband's Name	:			
	3.	Address	:			
B.	Amount of Loan		:			
C.	Purpose of Loan		:			
Signat	ture of I	Field Worker		Signature of A <sub>l</sub> Group No. : Centre Name		Center No.:
Loan a	approva	al information :				
1. 2. 3.	Appro	approval ref. and date oved amount rsement date				
				Signat	ure of P	roject Officer.

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#### Annex3

#### **OBJECTIVES OF THE ASSIGNMENT**

- 1. To design and conduct a survey that would assess the possibility of success of micro-credit activities in compounds of urban slums.
- 2. To develop an operational plan for a micro-credit program with the highest probability of success in the target areas.
- 3. To provide other technical assistance to project coordinator on request.
- 4. Final report of the assignment.

Period: February 6 1998 --- March 6, 1998.

B

Work plan of the assignment

Components	week 1	week 2	week 3	week 4	week 5
Travel to AMDA					
HQ JAPAN					
Briefing at AMDA					
HQ					
Travel to Lusaka					
Meeting with					
project					
coordinator JICA					
PHC					
visit compounds					
in LUSAKA					
Meeting with					
JICA PHC Team					
Leader					
Discussion with					
all stakeholders					
і.е. ЛСА РНС					
Team, CBO's,					
NGO's, local					
authority Community					
dwellers, DHMT.					
AMDA-Zambia,					
Water and					
Sewerage					
company .					
Presentation	***************************************		***************************************	1480116161411111111111111111111111111111	
on Micro-credit					
Draft report/					
operational plan					
covering Micro-		1			
credit activity					
Final report					
Depart Lusaka					

#### ANNEX 4

#### Main briefing directions at AMDA HQ

- AMDA is presently involved with JICA PHC project at Lusaka urban district in Zambia. This is the first project where official Japanese ODA is going to implement a project in partnership with a NGO.
- 2. Because of transition from centralized controlled form of governance and drop in prices of Copper in the world market Zambia has been passing a painful process of social transition. One of the sharp manifestation is widespread poverty of the population.
- 3. In the overall frame of this project focus will be given on community participation and its involvement from the decision making phase to implementation of the projected activities.
- 4. One of the very important aspect of this project activity will be inclusion of microcredit component.
- 5. Apart from that an advanced team from JICA/AMDA had visited different compounds at Lusaka earlier. Which has passed the opinion to start work with CHAWAMA compound community in first phase.
- 6. A community based piped water supply project was constructed in GEORGE compound by JICA in the year 1996. One of the default in the project at GEORGE compound has been lack of community initiatives and participation and low repayment rate for the service provided.
- 7. On the other CHAWAMA lacks proper water supply and sanitation and community is willing to pay for services provided that is dependable.
- 8. Another major challenge in this project is to identify modalities to blend health care (including water and sanitation ) and community initiatives for income enhancement ( covering marketing, maintenance repayment) in such a way which will be in a position to address long-term sustainability of the project in the benefit of people living in slums and squatters.
- 9. Previous point also focuses to develop a replicable design in first phase which will provide opportunity for future replication of such initiatives in other compounds of Lusaka district.
- Another focus of the project activity is to find out rationale steps and design for collaboration with NGO's who are already active in these areas. Namely local NGO's like HUZA, SEPD and others. On the other there are resident development committees in all these peri-urban areas they themselves represent a kind of CBO's who are also active in the localities. Apart from all this there are international NGO's who are also carrying out different development activities in the compounds ( CARE, CONCERN etc.)
  - According to information's and reports provided by previous team it was evident that main prevalent diseases were: Malaria, Diarrhoeal disorders, AIDS, Respiratory tract diseases etc.
- 11. In nut shell project was looking to proceed with PHC activities (i.e. water sanitation, solid waste management, building of health awareness through training) with active community participation.

Annex 5.

# Population of different urban compounds as of 1997 <u>Lusaka Urban District Townships</u> Central Statistics Office Lusaka Zambia.

No	Name of Settlements	Population
1.	SOWETO	14887
2	GEORGE	. 74980
3.	MATERO	42569
4.	CHUNGA	24682
5.	LILANDA	12664
6.	PARADISE	6928
7.	DESAI	14887
8	CHAISA	43547
9.	MANDEVU/ MARAPODI	42291
10	CHIPATA	89391
11.	CHAZANGA	12876
12.	KABANANA	16393
13.	N'GOMBE	9442
14	KAUNDA SQUARE	17377
15	.KAMANGA	5281
16.	CHAINDA COMPOUND	3639
17.	GARDEN	50,800
18.	NEW KANYAMA	37156
19	OLD KANAYAMA	51619
20.	CHIBOLYA	2324
21	JOHN LAING	11173
22.	MISIS	13280
23.	FRANK	9593
24.	KALINGALINGA	20140
25.	MTENDERE	53314
26.	KALIKILIKI	11782
27.	BAULENI	14799
28.	JACK	7243
29.	COOK	13718
30.	KUOMBOKA	1632
31.	CHAWAMA	69174
32.	JOHN HOWARD	20,409
33.	LILAY	10,363
34.	FREEDOM/CHILANGA	8254

#### Annex 6

#### A short note on water supply project supported by World Bank

- 1. Urban Restructuring and Water supply project now in the process of developing community based water supply projects in six towns of copper belt. Project is being implemented via Ministry of Local Government and Social services. Physical implementation of the projects may start in May- June of current year.
- 2. Under this project there is a component to improve water supply provision in Lusaka peri- urban compounds. Total fund available for this purpose is around \$ 5 million. But initiation of the project for urban compounds of Lusaka depends on Lusaka City Council. In order to inquire possibility of joint action in water supply consultant had visited World Bank, and NOR -Consultants and there response was positive.
- 3. A Norwegian consulting farm NOR- consultants has been appointed to assist in technical preparation of the project.
- 4. Demonstration of community participation is also one of the goal of the project.
- 5. It should be noted that cost of piped water supply is high in Lusaka and most of the residents do not access water supply service round the day. There are leakage in the water supply mains and considerable quantity of water is thus wasted.
- 6. According to NOR consultants many workshops and meeting held between the team and LCC about improvement of water supply in peri urban compounds but still consultants are in waiting for a proposal from council's side.
- 7. A JICA/ PHC project is going to start a community based health activity and it is possessing fund for community training and meetings; this is advisable to take a joint project with WB, LCC and water sewerage company developing a demonstrable sustainable water supply services to the community. In this case fund for community mobilization may be covered by JICA PHC and civil works might be covered by WB fund channeled via LCC. water supply is precarious and many of the community taps are vandalized and some are non functioning in CHAWAMA compound on the other survey carried out recently shows that community is more willing to participate in community development activities in CHAWAMA in comparison to GEORGE AND CHAISA, so it might be a good candidate for above project.
- 8. This is proposed because through this it will be possible to convince local community about the advantage of the project and sort possible way of repayment of operational costs. Specially this will be possible because of strong community mobilization component around micro-credit.
- Another thing should be reminded that present consultants and Bank do not have experience in doing such exercises and there is good scope of forging an alliance covering LCC-RDC, WB, COMMUNITY, NGO, JICAPHC/LDHMT and CONSULTANTS.
- 10. It is recommended to continue discussion in this line with WB and NOR-Consultants; open a dialogue with LCC and water and sewerage company; proceed forward to primary meeting of all the parties in order to agree on the procedures for a demonstration project and embark on to a concrete activity.
- 11. Entry point for the discussion might be Ms MUUKA, COMMUNITY DEVELOPEMNT specialist for NOR consultants she is based at KITWE (02- 229337) and currently organizing this activities there with participation of CARE International and another private organization. Side by side Mr. CHISANGA of JICA PHC also may be instrumental in organizing this activity at Lusaka, keeping in mind his experience in facilitating water supply in chipata compound on cost recovery basis..

#### **O**rganization and people visited

- 1. Breadmore Richard, Deputy Resident representative, Zambia Resident Mission World Bank, 74 independence Avenue ,Lusaka. Tel: 260-1-252811 Fax: 260-1-254283 e-mail: rbeardmore@worldbank.org
- 2. SAM SIMON SAKALA Regional Operation's Manager ( south) World Vision Zambia, Lusaka, Zambia Tel: 260-1-260722/30 Fax: 260-1-264406
- 3. Dr. Munkombwe Executive Director, Chainama Hills College Hospital Fax: 260-1-291754 Tel: 292444-6 Cellular: 750407.
- 4. Mr. Hitoshi Igarashi Director, SCDP, Lusaka Zambia. cellular : 702285 e-mail : scdp@zamnet.zm
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- 18. Darren Hedley PUSH Project Manager CARE International Tel: 260-1-220136/7 Fax: 260-1-227108.
- 19. Anayawa M. Siamianze Training Officer NGO CC Tel: 260-1-253203. E-mail:ngocc@zamnet.zm
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- 21. Mr. KAKUA Director Planning, Ministry of Community Development and Social Welfare. Lusaka, Zambia.

- 22. Dr. John T. Milimo Participatory Assessment Group Tel: 260-1- 255182 Fax: 260-1-254801.
- 23. Austin A K Mwapa Assistant Director, Regulatory Policy and Financial Analysis. Bank of Zambia PO, Box 30080 Lusaka, Zambia. Tel: 260-1-221392 Fax: 260-1-225656.
- 24. Svein Stene- Johansen project Manager, DISS consultancy Ministry of Local Government and Housing Tel: 260-1-250345/252368 Fax: 260-1-252335, e-mail:SSJ diss@zamnet.zm
- 25. Michael c. Soko Assistant Resident Representative UNDP, Lusaka Zambia. Tel: 260-1-250800 Fax: 260-1-253805 e-mail : mike.soko@undp.zm ( important for MICROSTART)

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#### **Abbreviations**

- 1.CBO: Community based organization.
- 2. CHW: Community Health Worker.
- 3. MIS: Management Information System.
- 4. FFW: Food For Works.
- 5. NGOCC: NGO Coordinating Committee.
- 6. U5MR: Under five mortality Rate.
- 7. MMR: Maternal Mortality Rate.
- 8. LCC: Lusaka City Council.
- 9. K: Kwacha (Zambian currency).
- 10. RDC: Resident Development committee.
- 11. ESAP: Economic Structural Adjustment Policy.
- 12. GOZ: Government of Zambia.
- 13. PUSH: Peri Urban Self Help.
- 14. PULSE: Per Urban Lusaka Small Enterprise.
- 15. HUZA: Human Settlement of Zambia (NGO).
- 16. AIDS: Acquired Immune deficiency Syndrome.
- 17. JICA: Japan International Cooperating Agency.
- 18. VIS: Village Industries Service.
- 19. SIDO: Small Industries Development Organization.
- 20. SEP: Small Enterprise Promotion Program.
- 21. NGO: Non-Governmental Organization.
- 22. LUDHMT: Lusaka Urban District Health Management Team.
- 23. PAP: Poverty Alleviation Project.
- 24. ABO: Area Based Organization.
- 25. MBT: Micro Bankers Trust.
- 26. EU: European Union.
- 27. GTZ: German Technical Assistance.
- 28. SIDA: Swedish Development Agency.
- 29. ILO: International Labor Organization.
- 30. USAID: United States Agency for International Development.
- 31. AMDA: Association of Medical Doctors of Asia.
- 32. CSO: Central Statistics Office.
- 33. ADB: African Development Bank.

## マイクロクレジット

### 調查報告書·邦訳版 (要約)

1998年3月

JICA ルサカ市PHC プロジェクト Dr.DIBALOK SINGHA著 JICA NGO 連携強化費

#### 1. はじめに

ザンビアは主要生産物である銅の国際価格の低下により財政は悪化の一途をたどって いる。

1991年以降、計画経済から市場経済への過渡期にあって雇用が減少し貧困が農村部、都市部で増大している。

また構造調整政策(ESAP)を実施しているがこれによってフォーマルセクターの雇用が縮小しこれが一層の貧困を生み出している。

こうした背景のなかで JICA PHCプロジェクトは「住民参加」「貧困と健康」を キーワードとしてNGO (AMDA) との連携で開始された。

#### 2. 国の背景

- (1) 面積 752,614 平方キロメートル
- (2) 人口 950 万人 都市に37%、農村に63%が住む。1世帯当たりの平均家族数は 5人(都市5.3)
- (3) 5歳以下の幼児死亡率 202 (ZDHS1996では 197)
- (4) 初等教育率 90%(1985)1992年のデータでは90%をわずかに下回る。
- (5) インフレ率 18.6% 3分の2の国民は貧困レベル以下の状態にある(約600 万人)

#### 3. 経済政策

- (1) 市場経済への移行期
- (2) 食糧補助金の廃止
- (3) 経済の自由化が多くの貧困家庭を生み出している。
- (4) メイズの価格の自由化により貧困家庭を直撃している。これらの家庭では食費が全収入の3分の2を占める。
- (5) 軍と外務省以外は十分な予算が割り振られていない。
- (6) 農業、保健、教育の行政改革は始まったばかりである。

#### 4. 社会保障

PAGは現在2%

#### 5. 貧困者へのインパクト

- (1) 11月から2月は雨季にあたりマラリヤの多発、食糧の端境期、耕作に労働力が必要、教育に出費が嵩むなどの理由でストレスの強まる時期である。
- (2) 伝統的に女性への負担が重い。
- (3) ゼロ成長と生活コスト増大

#### 6. 都市の貧困

- (1) ルサカ市の人口の3分の2はペリ・アーバン (コンパウンド) に居住している。これは植民地時代に安価な労働力を供給する地区として設置されたため住環境はきわめて劣悪である。ほとんどの地区でインフラへのアクセスは少ない。
- (2) 現在は80%近くがインフォーマルセクターで働く。
- (3) フォーマル雇用の低下にともないインフォーマルセクターが都市の貧困者(とりわけ女性)に生きる糧を見出す道を提供している。
- (4) AIDS、結核など疾病の蔓延
- (5) 小規模ビジネスを営む為の資金の欠如(銀行は貧困者に貸し付けの途を開いておらず、コンパウンド内の貸し金業者の利子は高い。/月100%)
- (6) 人間資源は栄養失調と教育の欠如でむしばまれている。

#### 7. インフォーマルセクター

- (1)独立後の状況
  - ① 適切なマーケットの場所がない
  - ②土地の保有の制限
  - ③保健状態悪化
  - ④地方政府の規制、課税
  - ⑤価格統制
  - ⑥工業地の規制
  - ⑦商業許可制
  - ⑧マーケット内扱い商品の規制
- (2)現在、インフォーマルビジネスの44.4%が小売業、36.7%が農業、漁業
- (3) スモールスケールインダストリアルサービス (SIDO) の設置
- (4) スモールスケールエンタープライズプロモーション (SEP)
- (5) NGOのマイクロクレジット活動
  - ① OXFAM
  - 2 World Vision
  - ③ Irish Aid
  - 4 NORAD (small enterprise Fund)
  - ⑤ YMCA (Irish Aid)
  - 6 CARE 'PUSH
  - ⑦ CARE 'PULSE

  - Micro Bank Trust
  - ⑩ Economic Production Unite (マイクロローン実施)

- 8. ザンビアにおけるNGOの活動
- (1) ESAPによってNGO活動の必要性が増大している。
- (2) ザンビアの人口の5%がNGOプログラムによってカバーされている。
- (3) 連合組織としてNGOCC、NGO Forum , ZASDがある。
- (4) NGO登録は、Department of Charity に簡単に行う事ができる。
- (5) マイクロクレジット実施する組織は ザンビア国営銀行に登録する。
- 9. ペリ・アーバンコンパウンドの状況(省略)
- 10. 各団体のマイクロクレジット活動 (別紙)
- 11. 分析とリコメンデーション
- (1) 構造調整政策下にあってマイクロクレジットは貧困対策の手段として有効であるが、 サステナビリティ確保のためには利子を高くすることが求められ、借り手の負担と の調整が重要である。
- (2) ザンビアは過渡期にあり国民は世帯の出費に苦しんでいる。食事の回数を減らすなどして対応している現状にある。(政府の調査では600万人が貧困レベル以下にある。現在の食費必要額は186,000クワチャ、約120\$)
- (3) 国民性からクレジットを返す義務への認識が弱いため、適切な返済管理が重要である。
- (4) 成功のカギは参加型開発プログラムの導入にある。
- (5) マイクロクレジットによる住民組織化、コミュニティ活動は住民の意識改革に大きな効果を発揮する事が知られている。
- (6) ザンビアでは多くの国際NGO、ローカルNGO及びコマーシャルベースの会社が クレジットをおこなっている。インフレ率は18.6%(年)である。
- (7) 各種実施団体の貸し付け利子は極めて高く、年100%を超えるものもある。
- (8) コミュニティ活動の弱さを補うため担保を取るケースもある。
- (9) 保健教育活動等の普及にマイクロクレジット組織を使用する事もできる。
- (10) コミュニティの各種サービス (ゴミ収集、給水等) は無料ではない事を教育する 必要がある。
- (11) ヘルスケア活動とインカムジェネレーションを結合して効果をあげる事が適切と考えられる。
- (12) 実行政策の推奨
- ① 最初の6ヶ月かけてスタッフの雇用、スタッフの研修、オフィスの準備、研修教材の作成、規約・規則の作成、借り手の募集、研修、観察を行う。

4

- ② その後コミュニティに対する働きかけの見直しをおこなう。
- ③ グラミンバンク方式を採用する事が適当である。貸し付け利子は45%とする。(1998年2月インフレ率18.6%)
- ④ セービング (貯蓄利子12.9% K100,000未満、16.0% K100,000以上)
- ⑤ マネージャー給与\$200(月)、アカウンタント\$150、フィールドスタッフ\$1 00×2人
- ⑥ メンテナンス費用(事務所費、交通費) \$200(月)
- ⑦ 管理費用合計\$750(月)、\$9,000(年間)
- ⑧ 収入 50,000 ドルを年利45%で(合計500人に)貸し付けた場合

回収率100%の場合 \$33,750

90%

\$30, 375

75%

\$ 25, 312. 5

- ⑨オーバーヘッドコストを極力少なくし、返済率を90%以上に保つ。
- ⑩当初は無償資金を使うことが望ましいが、有利子の借入金によっても収入が得られるだけのマージンがある。
- ①最初は一人100ドル程度から開始し、保健教育は6ヶ月後から開始できる。

#### 12. 実行計画

- (1) マネージャーの調査すべき事項
- ① コンパウンドのゾーンごとに区分けされた地図を作成する。
- ② その地区の主要な経済活動を調査する。
- ③ 地区の権力者の状況とCB〇(各種組織)の状況を把握する。
- ④ インフラの状況と地域の住民のマーケットへのアクセスを調査する。
- ⑤ 貧困レベル以下の人口を把握する。
- ⑥ 公式な銀行の利用状況を調査する。
- ⑦ 社会生活上のリーダー (教師、医師、伝統的治療師の役割) を調査する。
- (2) 開始前に関係する団体の代表 (RDC、教会、NGOs、ルサカ市役所)を招き趣旨を十分に説明し協力を得る。地方政府、政治家のバックアップがある事を地域に十分知らしめる。
- (3) 貸し付け申込者の基準
- ① 経済的に困窮している女性
- ② 月収K50,000から K150,00程度の住民
- ③ コンパウンド居住年数2年以上
- ④ これらと同様な条件に合致するひと
- ⑤ 年齢18から45歳
- ⑥ 1家族から1人まで

- ⑦ 夫を失った女性
- ⑧ 犯罪暦、負債のある人を除く
- ⑨ ビジネススキルのある女性を歓迎する
- (4) 研修項目
- ① 1日1時間ずつ6日間おこなう
- ② 貸し付けの手順、規則、罰則、返済期限、返済方法、保証システム(仲間の連帯保証 圧力)、義務的(強制)貯金、グループメンバーとしての権利と義務
- (5) グループの承認

研修後の口頭試験にパスするとグループは加入を承認される。グループは代表者を選挙する。

(6) 定期ミーティング

センターは毎週1時間のミーティングをメンバー宅の中庭で開く。これには全員が参加 する義務があり、また貯金の義務がある。グループごとに分かれてまとまること。

(7) 貯金

メンバーは毎週K1,000以上貯金すること。セービング手帳をもらう。貯金した金はプロジェクトを通じて銀行へ入れる。所定の利子が付く。

(8) グループTAX

希望貸し付け金の5%に当たる金額がデポジットされてから借りられる。 (これは後に 返還される)

(9) 観察期間

3ヶ月間は規則、定期的貯金、ビジネスプラン、クレジットシステムの理解が出来たかどうかの観察期間であり貸し付けは受けられない。ビジネスプランは借り手自身の手で作成されること。

(10) 貸し付け手続き

最初は2人が借りて4週間観察される。その後2人が借りて2週間観察される。最後に 代表者が借りる。家財等の担保を登録する。

- (11) 貸し付け許可手続き
- ① センターの主任がフィールドワーカーに推薦する。
- ② フィールドワーカーはこの推薦状とメンバーの写真をつけてマネージャーに推薦する。
- ③ マネージャーは家庭に出向き確認後貸し付けを決定する。
- (12) 債務不履行
- ①不履行はグループの規律に問題があるものとして考えられる。
- ② フィールドワーカーは借り入れの目的に何らアドバイス、提案をしないものとする。 したがってすべての債務不履行は借り手本人とグループメンバーの責任である。
- ③ 負債はグループの貯蓄及びグループTAXをもって弁済される。

- ④ 仮に所属するグループだけでは弁済額が不足する場合は、全グループの貯蓄、TAX をもって精算される。このグループ連帯責任が無担保貸し付けの100%返済を保証する成功の土台である。
- (13) ブランチ

ブランチは半径 6 Kmをカバーする。最初の1年で500人、2年目でさらに700人、3年目で300人、合計1500人に貸し付けを行う。

- (14) スタッフ
- ① ブランチマネージャー 1人
- ② アカウンタント 1人
- ③ フィールドスタッフ 2人
- (15) 帳簿類の管理 (略)
- (16) モニター

プロジェクト事務所にて毎月帳簿、証拠書を照合し透明経理を確保する。 プロジェクトマネージャーは家庭を巡回訪問しまた、ミーティングに出席しモニターする。

- (17) 管理情報の収集
- ① 全体の財務状況
- ② 貯蓄、返済等の各種成績、滞納情報、各ブランチ及びスタッフの成績(評価に使用)
- ③ 各個人、グループの返済成績 これによってインセンティブを与えたり罰を与える。また将来のローンの実行情報となる。
- ④ 各ブランチは統一フォームで毎週報告する。
  - (18) 評価方法
  - ① プロジェクト会計簿、貸付金帳、銀行簿との照合一致
  - ② フィールドレベルの規律の観察
  - ③ 生活の質の改善状況及び収入の増加傾向

#### 13. 保健教育

- (1) マイクロクレジットによるコミュニティの組織化(動員) は保健教育とりわけ女性 の自覚化に有効である。
- (2) 女性の小グループはコミュニティに根ざしており相互に影響しあい自ら発展してい く。 (クレジットに集まった女性の保健問題をCHWに紹介していく)
- (3) コミュニティミーティングが定期的に開かれており各種のキャンペーン普及に有効である。
- (4) CHWリーダーを養成する背景となりうる。

- (5) クレジットのサービスチャージの一部を常時CHWの普及インセンティブに使用できる。
- (6) 長期に継続するマイクロクレジットの運営を基盤としていくので、コミュニティ保 健・衛生教育もサステナビリティが確保される。

#### 14. 政府の規制と登録

- (1) 現在マイクロクレジット実施団体はバンク・オブ・ザンビアに登録する建前になっているが実際には規制されていない。
- (2) 金利の上限規制がないため商業的マイクロクレジット業者の高金利も野放し状態にあり近く規制が実施される見込みである。

以上

(付録)

マイクロクレジットに関する調査 要約

#### 0. 要約

- (1) JICA PHCプロジェクトの重要な概念の一つとして「住民参加」があり、これがNGO (AMDA) との連携をする理由の一つとなっている。
- (2) 保健と収入改善は重要な関係をもっており、これが保健ケアとマイクロクレジットを並行して実施する理由である。
- (3) ザンビアの人口は約950万人、銅の国際価格低下で国の財政は悪化の一途をたどり、構造調整政策(ESAP)を実施しているが残念ながらこれが一層の貧困層を生み出している。政府の調査によれば600万人が貧困レベルにある。現在の食費必要額は月18、6000クワチャとされる。
- (4) 現在の経済危機は、フォーマルセクターの雇用減少によって中間層を消失させつつ ある。プライベートセクターの雇用吸収力は弱い。
- (5) ルサカ市の人口の3分の2はペリ・アーバン (コンパウンド) に住みフォーマルセクターの縮小は多くの失業をもたらしている。
- (6) こうした背景のなかで、唯一インフォーマルセクターが都市の貧困者(とりわけ女性)に生きる糧を見出す道を提供している。各NGOがマイクロクレジットを実施しているがその数は少なく貸し付け利子は高い。
- (7) ザンビアには300を超えるNGOが登録されておりそのうちのいくつかはマイクロクレジットを実施している。
- (8) ルサカには42のコンパウンドがあるが、これらの多くは植民地時代に安価な労働

力を供給する地区として設置されたため住環境はきわめて劣悪である。JICA PHCプロジェクトはチャワマ、チャイサ、ジョージにおいてベースライン調査を 行っている。セルフ・ヘルプ・コミュニティプロジェクトはチャワマが一番成熟し ていると考えられる。

- (9) マイクロクレジットを実施している団体は、PUSH, PUSH CARE, PULSE CARE, IRISH AID (Kamanga), World Vision, Oxfam, Micro Bank Trust , HUZA, Women Finance Trust & Progress finance, これらはほとんどグラミンバンクの方法を使用している。
- (10) Poverty alleviation Project がADB (アフリカ開発銀行) からの資金でNGOへの貸し付けを準備中である。資金は400万ドル。
- (11) マイクロクレジットの実施デザインは詳述するが、重要なのはコミュニティの教育参加対象者への十分な研修を実行したあとで少しずつ貸し付けを開始する事である。スタッフへの研修はバングラデッシュで行う。また マイクロクレジットと保健教育活動と組み合わせた活動が可能である。
- (12) 最初の6ヶ月でスタッフのリクルート、研修、場所の選定、規定・規約の作成を 行い小額(1人100ドル程度)から開始する。50週かけて毎週返済する。利子 は45%(年)。最初の資金は日本政府かPAP(ADB)またはUNDPのMI CRO STARTを利用する事が考えられる。

こうした活動と並行してマイクロクレジットの利益からCHW、TBAの研修、保健教育活動に必要な資金を出す事も可能である。これらの活動はPHCプログラムと一体となって展開することで良いモデルケースとなるであろう。

#### マイクロ実施団体

団体名	CARE PUSH	CARE PULSE	Irish Aid	HUZA	MBT	OXFAM	women FTZ	World Vision	<b>プログレスファイナン</b> ス	PAP
参加人数	72グループ	4600人	200人	2004人		60人	820人	163人	576人	団体貸付
グループ制	あり	あり		あり		なし	あり		なし	BITT ATT
貸付額	K50,000-200,000	\$20-\$600	k300,000まで	k200,000まで		K20,000	200,000-500,000			
利子	40%	60%	4%	0%-20%	24%	2%	50%	65%	120%	
入会金			k10,000				K2500		K3000	
デポジット	50%	10%					10%	30%	10%	
利子類合計										
返済期間		6ヶ月、1年、18ヶ月	6ヶ月	3ヶ月	1年	2ヶ月	6ヶ月	<del> </del>	2ヶ月-2年	
返済方法	毎週		毎月	週2回		一括	毎週		2//1 27	
強制貯金	あり(利子20%)	あり(利子20%)		なし		あり	あり	なし	-	
ミーティング	毎週	毎週	毎週				毎週			
返済率	91%	95%	85%				90-98%	50%	96%	
研修	1週間(1日8時間)		4週間				·	8週間		
	チパタ、ジョージ、カニャマ	チャワマ、ムテンデレ		チャワマ、ハ・ウレニ	団体対象	ムフリラ	ルサカ全域	チャインダ		
資金規模			\$3.5ミリオン		K770ミリオン		K553ミリオン	\$38,077	商業金融業者	\$4ミリオン
主要ドナー		DFID	アイルランド	ドイツ	EU		オランダ	個人		ADB