

# **Ending Poverty Through Ubuntu**

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A study conducted in 2011 showed that the "rural poverty rates in Zambia have remained very high, at 80%, over the past decade and a half, whilst urban poverty rates have declined, from 49% in 1991 to 34% in 2006". This is from a population of approximately 15, 580,199. Specific accelerators are therefore required in the form of policy changes and targeted rural investments if Zambia is to achieve the target of reducing poverty levels by half in 2015. Extreme poverty in Zambia is concentrated in rural areas. Rural poverty is due to limited access to physical and social infrastructures, such as roads, electricity, and medical facilities, which impede development. In the quest to achieve the millennium development goals, the 6<sup>th</sup> national development plan for the Zambian government which has a theme "sustained economic growth and poverty reduction" was developed offering objectives, strategies, and programs driving towards the achievement of the MDG's. The objectives indicated therein are:

- (1) Infrastructure development;
- (2) Economic growth and diversification;
- (3) Rural investment and poverty reduction; and
- (4) Enhance human development.

It is in the Sixth National Development Plan (SNDP) that the government indicates objectives, strategies, and programmes targeted at improving the welfare of the Persons With Disability (PWD) under the heading "Disability and Development". However, a number of barriers will need to be overcome if Zambia is to be free from poverty especially rural poverty and most of all among persons with disabilities. When Holy Family Centre (HFC) started offering Community Based Rehabilitation services in various targeted communities in line with World Health Organization guidelines the HFC, realised the differences in the social economic situation of people in rural areas as contrasted to those in the urban centres, which was even more pronounced among Persons with Disabilities. This prompted the team to try and find ways of addressing the high poverty levels among persons with disabilities where approximately 70% of the clients have been poor. An inclusive approach by all sectors has been the strategy that HFC is advocating for so that the PWDs are not left behind in the development process. Most emphasised is the concept of *ubuntu* in which all people are viewed as equal and treated like wise in their respective communities. The government of Zambia in its effort to address the issues that surround Disability like most countries took the following steps along with other countries in the world: Zambia signed United Nation Convention on the Rights of Persons with Disabilities (UNCRPD) in 2008 and ratified it in 2010; The government now also has a Disability Act #6 of 2012 following other policies that had earlier been instituted. Implementation of the Community Based Rehabilitation as an effort to meet most of the needs of the persons with disabilities ensured that other than focusing on health alone, the team took interest to address other aspects that affect any given individual. The Human development Report 1996 of the United Nations Development Programme (UNDP) identifies employment as the main bridge between economic growth and opportunities for human development. With the 2015 Millennium

Development Goals (MDG) in mind and the CBR program, Holy Family Centre realizes that for the MDG on reduction of poverty to be met or halved by 2015, there is need to explore other possible options other than employment if we are to have self sustainable and economically secure families, especially persons with disabilities. The poverty situation among the disabled in Zambia is particularly pronounced. This category requires specifically targeted interventions if the poverty levels are to be reduced significantly. As a way to contribute to the wellbeing of PWDs, HFC at local level is engaged in activities that are driven by the need to empower PWD's economically, as well as helping them realise the need for them to be included and be heard at all levels beginning in their families and communities. HFC is using some strategies, such as: (1) raising awareness; (2) advocacy; (3) agriculture; (4) skills development; and (5) community responsibility.

Raising awareness. Raising awareness on the provisions of the Zambian Disability Act of 2012, UNCRPD and the Optional protocol and other relevant documents as applicable to Zambia and the continent.

Advocacy. As a centre we are now working with different organizations in the effort to get various services offered by the other organizations which as HFC we cannot offer. These include the education sector, health, the local town council and other relevant government departments. The government through the social welfare department has a social cash transfer program in targeted districts and this is one of the areas of intervention to have more Persons with disability on the program.

Agriculture. The government of Zambia has a food security pack program to which most Zambians have benefited, the challenge has been to include the persons with disabilities on such a program. It is on such programmes and with other private providers and stakeholders that HFC is linking persons with disabilities to for sustained livelihood projects at household levels thereby enriching the communities.

Skills development. The need for persons with disability to be trained in skills is eminent and its for this reason the centre is considering opening up a skills training centre.

Community responsibility. Key to the success of any project is community responsibility and involvement and it is that the team builds into the members of the community at every chance given so that we achieve the desired effect together.

Particular attention should be paid to entrepreneurial development, timely access to capital investment (such as farming inputs is the case for Zambia), access to information on appropriate technology, development of skills for processing activities and promoting collaborative efforts among operators and ensuring that persons with disabilities are not left out as we press towards reducing poverty levels in Zambia by 2015.

HFC is optimistic that with the continued collaborated efforts of the government, other relevant stakeholders, and the respective communities. It is possible to have inclusive societies and to achieve the MDG's with the persons with disabilities on board. Our focus is on learning from the best practices in Africa and see how best they can be replicated in Zambia as we also try out new ideas. Though the ends are employment, sustainable livelihoods and sustainable human development for Zambia and the African continent as a whole, the means need to be solid and clear as indicated earlier. We realise that everyone needs support—sometimes, some of us need more support than others.

Keywords: ubuntu, disability, poverty, development

#### Introduction

Zambia, landlocked and in the southern part of Africa, is a country that faces challenges as does its neighbours such as high cases of Malaria, Human Immuno Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS), child labour and poverty among others. According to the central statistics office report of 2014 (Government of Zambia, 2014), average life expectancy at birth for a Zambian is now at 53.2%, females stand at 55.5%, and males at 50.9%. The national prevalence of HIV among adults (15–49) is 14.3% with the female standing at 16.1% while males at 12.3%. Urban areas typically have a higher HIV prevalence of (20%) than rural areas (10%).

These conditions and others, such as poor nutrition, low standards of housing, poor health and the lack thereof, poor access to education, water and sanitation have contributed to the levels of poverty that Zambia experiences. The most affected are poor female headed households forced to engage in coping strategies, such as prostitution which in most cases is the driver for the high HIV prevalence rate in women. A study conducted in 2011 showed that the "Rural poverty rates in Zambia have remained very high, at 80%, over the past decade and a half, whilst urban poverty rates have declined, from 49% in 1991 to 34% in 2006" (Chapota, Banda, Haggblade, & Hamukwala, 2011). However, the millennium development goals (MDG) report 2013 for Zambia shows that there has been a decline in the levels of poverty to 43% in 2010. Yet, it will have to decline by 13.3% in the five years from 2010 to 2015 to attain the MDG target. Specific accelerators are therefore required in the form of policy changes and targeted rural investments if Zambia is to achieve the target.

Extreme poverty in Zambia is concentrated in rural areas. In fact, it is four times higher in rural areas (57.7%) than in urban ones (13.1%). Typical rural provinces, such as Luapula (64.9%), Western (64.0%) and Eastern (58.7%) are therefore the worst affected. "Rural poverty is due to limited access to physical and social infrastructures, such as roads, electricity and medical facilities, which impede development" (United Nations Development Program Zambia Office, 2013).

With this background, drastic measures are required if Zambia is to get on course towards poverty reduction as well as achieving International Development Goals (IDGs) set for 2015, which are:

- (1) MDG 1 | End Poverty and Hunger;
- (2) MDG 2 | Universal Education;
- (3) MDG 3 | Gender Equality;
- (4) MDG 4 | Child Health;
- (5) MDG 5 | Maternal Health;
- (6) MDG 6 | Combat HIV&AIDS and Malaria;
- (7) MDG 7 | Environmental Sustainability; and
- (8) MDG 8 | Global Partnership.

In the quest to achieve these goals, the 6<sup>th</sup> national development plan for the Zambian government which has a theme "sustained economic growth and poverty reduction" was developed offering objectives, strategies, and programs driving towards the achievement of the MDG's. The objectives of the Sixth National Development Plan (SNDP) are "to accelerate:

- (1) Infrastructure development;
- (2) Economic growth and diversification;
- (3) Rural investment and poverty reduction; and

## (4) Enhance human development" (Government of Zambia, 2006).

It is in the SNDP that the government indicates objectives, strategies, and programmes targeted at improving the welfare of the Persons With Disability (PWD) under the heading "Disability and Development".

However, a number of barriers will need to be overcome if Zambia is to be free from poverty, especially rural poverty and most of all among persons with disabilities. Development ideas and strategies are at the centre of the Zambian government agenda as indicated in the SNDP which mostly manifest in programmes, such as making of a good road network, subsidising on farmers inputs, and the re-entry policy of the girls back into school after they fall pregnant, these are all ultimately aimed at reducing poverty in Zambia. Despite these positive advancements, PWDs are still left out in making decisions that will impact on their lives. A few isolated cases of advocacy and action are fostered by Disabled Peoples Organization (DPO)'s who themselves do not cover a vast area as they need may be, yet the vast majority in the rural areas remain not knowing even the provisions put in place for their wellbeing by the government.

Speeches containing phrases, such as "disability is not inability" and "nothing about us without us" are heard, yet what most speeches do not answer is "how and when". If the PWDs are to be self sustainable and financially secure, how they achieve this is not often discussed in that spar of a moment. The responsibilities of the different groups in ensuring that this is achieved are not shared.

It is with this background and the provisions of the Community Based Rehabilitation (CBR) guidelines and matrix indicated below, that Holy Family Centre took keen interest in the socio economic status of PWD in their natural environment.

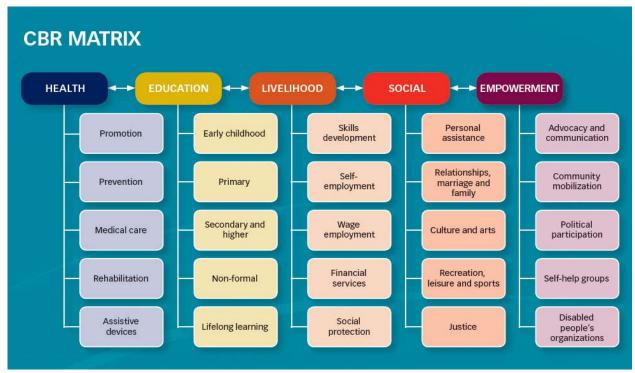


Figure 1. World Health Organization (WHO).

This paper therefore, is going to look at the concept of inclusive development in the quest to reduce poverty among persons with disabilities, how practical is it? Focus shall be on the component of livelihood and

how it contributes to poverty reduction in an inclusive way. It further touches on the importance of community responsibility *ubuntu* will always see people through any situation.

## **Definitions of Key Concepts Contextualized**

## **Inclusive Society**

A socially inclusive society is defined as one where all people feel valued, their differences are respected, and their basic needs are met, so they can live in dignity. Social exclusion is the process of being shut out from the social, economic, political, and cultural systems which contribute to the integration of a person into the community (Victorian Government, 2005).

#### **Poverty**

Poverty, destitution, need, and want imply a state of privation and lack of necessities. Poverty denotes serious lack of the means for proper existence.

#### Ubuntu

The African continent has long been knew to feel for the other. Celebrations and funerals are a perfect example of communities working together to achieve a common goal, it is that the writer finds holds African communities and is key to bringing change and development for PWDs.

#### Main Body

For poverty levels to be reduced among PWDs, there is a need to take an inclusive approach by all sectors so that the PWDs are not left behind in the development process from planning to implementation. It is often common to find PWDs left out in many a processes affecting their live, to be it at decision making level, most decisions are made for them. It is also true that "People with disabilities are particularly vulnerable to unemployment, are often poorly paid and in many cases occupy the lower ranks of the occupational performance on the job" (Schaefer, 2008). This situation also contributes greatly to many PWDs or their families to continue living in poverty. To change this phenomenon, deliberate approaches that are consistent and firm need to be used.

The government of Zambia in its effort to address the issues that surround Disability like most countries took the following steps:

- (1) Zambia signed United Nation Convention on the Rights of Persons with Disabilities (UNCRPD) in 2008 and ratified it in 2010; and
- (2) Persons with Disabilities Act passed in 1996 revised in 2012 to domesticate the UNCRPD—now called Act # 6 of 2012.

In the governments effort to ensure that the policies directed towards the PWDs are acted upon, the government of Zambia since 2011 has been running the Community Based Rehabilitation program which started its pilot projects in Zimba, Livingstone and Kazungula districts of southern province with the support of Norwegian Association of Disabled (NAD) and the Norwegian Association for Persons with Developmental Disabilities (NFU). NAD and NFU formed the Norwegian Disability Consortium (NDC) through which they support the program to promote the rights of persons with disabilities in Zambia. The program has the following operational offices:

(1) Opportunity Zambia (OZ) (since 2009) are responsible for capacity building and strengthening of DPO's and promoting collaboration and common action among DPO's; and

(2) CBR/CBID Zambia Support Program (CBR program) which since 2011 works with Ministries to scale up CBR/CBID programs in the three districts indicated earlier.

Holy Family rehabilitation centre in partnership with the CBR Zambia support office started the CBR program in 2014 with the support of Misean Cara as a scale up from the outreach programme which was started in 2009 in Monze Diocese.

#### **Community Based Rehabilitation in Monze (Experiences)**

The Holy Family Centre (HFC) in Monze runs a rehabilitation facility for children and adults with various forms of disability offering therapeutic and educational services to people from different provinces of Zambia. In 2009, the centre conducted a needs assessment which showed the need for services to be offered at community level, this prompted the HFC to take the centre based activities to communities that where within the Monze diocese with an initial start of nine communities located in different rural areas of Monze diocese.

The rationale was to take the services offered at the centre as close to the people as possible. Realizing, the different needs of people and the provisions of the CBR guidelines, in 2014, the centre scaled up the program to CBR in an effort to meet most of the needs of the persons with disabilities. With the help of the guidelines offered in the CBR guide, UNCRPD, the Zambian Act #6 of 2012 and other relevant documents, the staff realised the need to not only treat or offer solutions to physical ailments but also look at other issues surrounding PWD's with particular interest on the challenge of poverty as most of the clients the staff came in contact with lived on less than 2 dollars a day and could hardly afford the cost of the basic food basket as tabulated by Jesuit Centre for Theological Reflection (JCTR)—Zambia (See appendix).

Of the 2629 clients, we currently have on CBR program, more than  $2/3^{rd}$  of the number do not live according to the JCTR minimal food basket. This is mostly because of the situations that prevail in the communities where families to PWDs are negatively affected due to some of the situations they find themselves in, such as indicated below:

- (1) Not been able to grow enough food because either they have no money to use for farming inputs; or
- (2) Much time is spent on caring for the PWD in the family; or
- (3) Any other reason that may be prevailing at the time.

The Human Rights Watch indicates that "of the poor adults who do not work, most are ill or disabled" (Fleischman & Csete, 2002) and these are the bread winners of their respective families. When this is the case, we then find a raise in female headed households and/or child headed households, this situation perpetuates poverty and their by making families to be unable to meet the basic necessities of life, and if they work, they are in less paying jobs that do not even meet the basic salary scale as set by the Zambian government.

This situation and other conditions that prevail prompted HFC team to raise awareness on the need to improve the socio economic status among community members especially PWDs with key interest in helping the community realise the potential that it has and then help itself using the locally available resources to change their current situation for the better with minimum external help where there is need.

#### **Activities and Impact**

The Human Development Report 1996 of the United Nations Development Programme (UNDP) identifies employment as the main bridge between economic growth and opportunities for human development. And as civil societies, we are united in our conviction that one fundamental task of the poverty reduction strategy we

should be able to create, advocate for, and sustain high rates of productive employment that it is formal or informal in cities or rural areas.

For HFC to implement some of the programmes aimed at reducing poverty, we followed the CBR Matrix which gives proposed ways of ensuring that the PWDs are assisted to achieving the highest possible full and productive life.

We take keen interest in considering the aspect of better livelihood as we contribute to creating an inclusive society. This is also because Article 28 in the Zambian Act states that "States Parties recognize the right of persons with disabilities to an adequate standard of living for themselves and their families, including adequate food, clothing and housing, and to the continuous improvement of living conditions, and shall take appropriate steps to safeguard and promote the realization of this right without discrimination on the basis of disability" (Government of Zambia, 2012).

Therefore, sustainable livelihood requires that a person be financially independent offering avenues to get financial security through these ways: wage pay, self employment, skills development, financial security, and social protection. The PWDs themselves or the guardians to the PWDs depending on the situation can be helped to attain sustainable livelihoods if given a chance, support, and adequate information. Our interest in this area is also fostered by the needs that arise when the PWDs have to go to other institutions for further management and they fail because they cannot afford to raise money to be used for transport and the difficulties they find in meeting other necessities that are essential to their wellbeing, such as accessing assistive devices which are not always free in Zambia, getting diapers in cases where they are needed and nursing care.

The poverty situation among the disabled in Zambia who make up 9–10% of the total population is particularly pronounced. This category requires specifically targeted interventions if the poverty levels are to be reduced significantly.

In an effort to answer the above situation, the Zambian government put in place policies to prioritize the creation of job opportunities for the PWDs and even emphasize mainstreaming Disability in all sectors, however, even with this the trend still remains the same; that of many PWDs having no access to employment formal or informal.

This situation is not only attributed to the physical challenges that any given person with a disability may have, but largely because of how the person is viewed by the family and immediate community. In my country Zambia, we have an adage that implies that raising a child is not a responsibility of the sole parents, but of the community, yet many a time, the same community has shunned helping the child with a disability prepare and attain full life were possible, this is why we are coming in to remind the community of the concept of *ubuntu* after all, just as we feel for others so can we feel for this group of persons with disabilities and evidence has shown that in communities where the feeling of togetherness and helping each other has been reborn and community responsibility has been taken up, evidence shows a happier community, more successful individual, and shorter healing periods for children and adults under rehabilitation. It is not uncommon to find disability attached to with craft which is a major reason that leads to apprehension by other community members and a lack of interest to help, in situations where the cause of disability has been explained to the community members and the family, positive action is seen as the family receives support and thereby bringing in the idea of *ubuntu*.

As a way to contribute to the wellbeing of PWDs, HFC at local level is engaged in activities that are driven by the need to empower PWDs economically, as well as helping them realise the need for them to be included and be heard at all levels.

Some of the activities that we are involved in and which are proving to be showing impact of positive change in the lives of PWDs are: (1) Raising awareness; (2) Village Savings and Loan groups (VSL); (3) Agriculture-Out grower scheme facilitated by Munzuma Agro; (4) Skills development; and (5) Advocacy.

Raising awareness. Raising awareness on the provisions of the Zambian Disability Act of 2012. Though the Zambian Act was enacted in 2012, it is not surprising to find that approximately 90% of persons in each community you go to in Zambia have no idea that such an Act exists. The vast majority of even the elite and employed in government departments do not have a copy of the Act and needless to say read it even. So as Holy Family Centre, we have taken initiative with the help of the CBR Zambia support office based in Livingstone to talk about the Act and its provisions. Through this we have come to see that PWDs are children or adults and now are getting involved at different levels of decision making, such as in education and employment. The Zambian Disability Act provides avenues that can foster inclusiveness; the problem is not read by the expected providers or actors. We are not only creating awareness at community levels but also providing the copy of the Act to government officials and helping them understand the role they need to play especially in improving the lives of PWDs and their families as we together drive towards an inclusive society.

Village Savings and Loan groups (VSL). This is a concept that HFC adopted from World Vision and is implementing it in four of its sites currently as a pilot project. The aim is to empower guardians to PWDs and PWDs themselves to have access to soft loans that they can get within themselves and do an income generating activity. The program helps the mothers (who are the main target) to save some money which they then get out as loans to start or boost their business. This has helped them be able to provide for their families and the group as at the time of returning the loan, interest is added. This increases the income they are saving. The savings are then shared at an agreed time to which mostly it is at the end of each year (see video clip).

Agriculture-Out grower scheme facilitated by Munzuma Agro. In this activity, a selected number of households with persons with disabilities are given seed to plant. The initial group in one of our nine sites was given 5kgs of cowpeas which they planted. From each field, the minimal harvest was calculated at 4 X 50kgs per person, which has to be subdivided in the following manner. Of the 4 X 50kgs bags harvested, 1 X 50kgs seed is then put into the bank, another 1 X 50kgs is soled for immediate income, 15kgs of seed is paid back to the giving organization, the household keeps 10kgs for the next planting season as seed (they have received help in preserving the seed), which is an increase as compared to the initial seed. Then they give the next pre identified household of a person with a disability 5kgs to start the whole cycle while the remaining which is about 60kgs that is kept for food. This has ensured that there is a constant supply of seed and nutritional food as the seed planted is not restricted to only cowpeas but other varieties of food seed are been planted as well. The goodness of this program is that while it provides food, it provides income and ensures communal food security as the seed rotates within the community. So far 30 households have benefited and in this coming season, we hope to have more households getting the initial seed capital. One of the challenges that HFC has noted in the communities are malnutrition cases that are common especially among children with Cerebral Palsy (CP), but most importantly is the lack of nutritious food which is not readily available due to poverty. The staffs are also teaching mothers the best foods they can give and also how to prepare it. This is in an effort to improve the nutritional status and also that guardians may use the local available foods to the maximum. This farming season 2015, we have 50 new families on the scheme.

Skills development. Together with the department of community development, the HFC has identified five PWDs (so far) that are able to learn a skill in tailoring and have recommended these for training in that area at

the Skills Training Centre run by the department of community development. This is with an aim to create self employment. They are due to start the program in July.

Advocacy. As a centre we are now working with different organizations in the effort to get various services offered by the other organizations to the persons with disabilities in respective communities. Targeted are organisations offering various services be it government departments or nongovernmental organizations. The capacity of self advocacy is also built in persons with disabilities and communities that represent them. This is because we know that they are in the best positions to advance their needs and make them heard to the outside world than we are. We are a conduit but they are better placed to advocate for themselves.

## **Development of Inclusive Practices**

We do realise that inclusive developmental practices can only be achieved with the inclusion of PWDs themselves, this is why at every level, the staff of HFC does discuss issues that concern the PWDs. In cases of starting projects, the PWDs together with their community committees have been the drivers of these projects, the role of HFC is just to give guidance and connect them to more appropriate agencies depending on the type of project they decide to do. However, below are a few suggested activities that we are considering as we aim at improving the lives of PWDs: (1) Focussing on micro and small enterprises; (2) Women as an option to development; and (3) Support to the agriculture and rural development strategies.

Focussing on micro and small enterprises. We realise that this should be done mainly through coordinating efforts that offer assistance to micro and small enterprises. Particular attention should be paid to entrepreneurial development, timely access to capital investment (such as farming inputs as is the case for Zambia), access to information on appropriate technology, development of skills for processing activities, and promoting collaborative efforts among operators. With the free market that Zambia enjoys, it is possible to achieve this and it would be an avenue for the households of PWDs to be able to access financial stability without the risk and beaurocracy of high lending institutions.

Women as an option to development. Women are mostly the ones that are breadwinners in most of the households we came across, the responsibility of looking for food is largely left to them as is the responsibility to look after the sick. It is with this in mind that we consider the engagement of Women and Persons With Disabilities as an avenue to development through entrepreneurship enterprising, if we empower these, we are sure that the profits realized will help the children and other family members that are in most dare need of food while improving their economic status. In Zambia, we have seen an influx of people from the rural areas coming to urban centres to sale what they may have produced. This is costly on them, because they have to spend money and go back home with little to spare. We know that if strategies are laid to ensure that commodities are accessed by the buyers within their communities, it would save on time and money for them as the case for the maize crop bought by the Zambian government from within the rural communities.

Support to the agriculture and rural development strategies. Within this broad agenda, the building of rural feeder roads and supervised agriculture production are particularly important to employment and sustainable livelihood, especially if undertaken using labour-intensive methods. At present, the Zambian government took to task to make roads accessible in almost all the towns in Zambia, Monze inclusive. Of the contractors in Monze, a simple survey shows that none has employed a PWD. However, on agriculture, the government offers a subsidized farming input program, which is a good idea, but most of the intended beneficiaries are sadly not

able to raise the needed amount because already what is asked for as payment, they can hardly afford to meet the target.

The above are not an end in themselves.

Some of the values to think about that can help us implement inclusion at all levels and at whatever time as individuals and organizations are: (1) Everyone is ready; (2) Everyone can learn; (3) Everyone needs support; (4) Everyone can communicate; (5) Everyone can contribute; and (6) Together we are better.

Everyone is ready. None of us has to pass a test or meet a set of criteria before we can be included, inclusion should come naturally for everyone regardless of physical ability.

Everyone can learn. As human beings, we all grow and change and make mistakes, and we are all capable of learning, every child is born ready to learn, how they develop is determined by what we teach them. Therefore it is us that restrict what differently abled people learn.

Everyone needs support. Sometimes some of us need more support than others. We also need more patience than others do. It takes a community to give support to the individual who is differently abled and to the family that has to learn to include and teach the family member.

Everyone can communicate. Not using words doesn't mean we don't have anything to say. All we have to do is listen so that we understand. A saying goes that even graves laying in state are communicating.

Everyone can contribute. We need to recognise, encourage and value each person's contributions—including our own, when we realise what we bring to other lives, we will work hard to even create better change. I have seen communities work even harder after realizing that their efforts are producing positive impact. Hence the concept of *ubuntu* continues.

Together we are better. We are not dreaming of a world where everyone is like us—difference is our most important renewable resource (Bell, 2005).

It is this difference that we need to nuture, because variety makes life go on. Amazing things have been done by persons that are differently abled like Albert Einstein and George Washington, more so others are in my own country and community and these are the examples I give when I go out to give inspirational talks because they can relate to them. What is in common with all these people is the support—*ubuntu* they received from those around them.

## **Summary**

"I am what I am because of who we all are" is an ideal phrase. The need for us is to make this a reality through embracing the persons with disabilities and making them own this statement. This is only achievable if we act on the theories of inclusion as a way of achieving development in our personal settings. Devising appropriate policies that target both economic expansion and direct intervention, which can facilitate sustainable and broad based employment generation is a great idea. Yet, we should be ready to implement, monitor and foster such ideas if we are to get an economically inclusive society for all. All policies, including liberalisation and privatisation, are only means and not ends in themselves. The ends are employment, sustainable livelihoods, and sustainable human development for Zambia and the African continent as a whole. Our role is to identify our audiences, take appropriate measures and work as a team. What better team than that created with the people that are constantly staying with the persons that are differently abled. After all, they spend the most time with them and understand them better. It is the individual community that understands the challenges given family goes through and hence are better placed to help.

Policies are good, strategies are better. Yet, implementation is key to achieving the goal and this is only achievable if we go back and make people own their personal change.

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# JCTR BASIC NEEDS BASKET: MONZE MARCH 2015

MARCH 2013															
(A) COST OF BASIC FOOD ITEMS FOR A FAMILY OF FIVE IN MONZE															
Comm		Kwacha Quantity			Total			Kwacha							
Mealie	e meal(br	eakfast)			66.75			2 x 25Kgs 133.50			3.50				
Beans		17.81			3 Kgs 53.			3.43							
Kapen	ta (dry)				71.3			2 Kgs 142			2.68				
Bream	(dry)				19.0			1Kgs 19.0			9.00				
Beef, 1	mixed cu	t			20.75			4 K	gs	83	83.00				
Dark g	geen veg	etable						4 Kgs			1.12				
Tomat	oes				2.39			4 K	gs	9	9.56				
Onion	, large							2 Kgs 24.7			1.72				
Cooki	ng oil (2.	5 Ltrs)			45.30			3 li	tres	54	54.36				
Bread				l loaf/day		180	180.00								
Sugar						18.50			gs	5	5.50				
Milk (	fresh)				4x500ml			1.52							
Tea, p	owder	49.00			1 K	gs	49	9.00							
Eggs			10.00			2 Units		20.00							
Salt			5.00 1Kgs 5.0					5.00							
Sub T	otal												875	39	
(B) COST	OF ESS	ENTIAL	NON-FO	OD ITE	MS										
Charco						99	.00	2x	90Kg ba	zs 198	3.00				
Soap (	Lifebouy						Tablets		5.00						
	soap (Bo	-	,		6.25 4x400g 25.00										
	e.g Vasel		13.75 1x500ml 13.7					3.75							
	city (med		sitv - fix	ed)		175.00 175.00									
Water	)	106.40					5.40								
					•	850	00			850	0.00				
	Housing (medium density - 3 bedroom) 850.00 850.00 1,413.15														
													•		
	or Basic	Needs I	Sasket					_					2,288	.54	
Totals from previous	F-1-44					Jul 14			c	0-11	Nov 14	D 44	1 45	F-1-4F	
months	Feb 14	Mar 14	Apr 14	May 14	Jun 14	Jul 14	Aug	14	Sept 14	Oct 14	140V 14	Dec 14	Jan 15	Feb 15	
							╬—							1	
Amount (K)	2,266.13	2,240.32	2,251.48	2,260.66	2,320.77	2,335.33	2,33	1.53	2,281.83	2,281.83	2,255.85	2,179.28	2,239.95	2,283.48	
	ME OTH	ER ADD	ITIONAL												
_	tem	K			Item				K						
	ducation				Health				_						
	Grades 1	K150.00	-195.00		Consultation Fee				Free						
	Grades 8	K240.00	-K450.0	0	Mosquito Net (pregnant /				/ 15) Free						
	Grades 1	K240.00	-K420.0	0	Lab tests (e.g., malaria)				Free						
	School U	K140.00			Fuel (cost at the pump)										
т	ransport	(bus fan	e round t						Petrol (per litre)				K7.60		
	Cir. S. C	W.C. 0.0					(per nue		TEC 50						

# (D) A COMPARISON OF COSTS (In Kwacha) OF BASIC NEEDS ACROSS ZAMBIA IN MARCH

K5.00

Site & Service

Manungu

Lusaka	Kasama	Mansa	Mongu	Ndola	Solwezi	Monze	Chipata	Mpika	Luanshya	Kitwe	Kabwe	Livingstone	Choma	Chinsali
3,797.55	2,604.48	2,408.43	1,936.39	3,544.95	3,251.48	2,288.54	2,266.68	2,076.86	2,729.35	2,776.53	-	3,004.85	2,833.69	1,969.63

Diesel (per litre)

Kerosene (per litre)

K6.59

This survey was conducted from 24th to 28th March, 2016 by the Social and Economic Development Programme of the Jesuit Centre for Theological Reflection. Average prices were calculated on the basis of surveys conducted at Main Market, Town centre, Manungu Market, and Site and Service Market. Additional Information was obtained from ZESCO, the Southern Water and Sewerage Company and schools, clinics and houses around Monze. The March Basis Needs Basket is approximately US\$301 based upon an average exchange rate of KT.5907 per US\$ prevailing on the days of data collection. Please note that other monthly costs would include personal care, clothing, recreation, etc.

data collection. Please note that other monthly costs would include personal care, ciothing, recreation, etc.

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