



# CBMS

## MONITORING THE ATTAINMENT OF MILLENNIUM DEVELOPMENT GOALS IN ZAMBIA



Measuring Progress towards Attainment of the Millennium Development Goals in Fifteen Wards

Community-Based Monitoring System (CBMS)

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## Foreword

The lack of appropriate local information about the poor hinders development planning and programs, and constrains efforts to monitor change in Zambia. The Zambia Research and Development Centre (ZRDC) has developed, tested, and implemented the Community-Based Monitoring System (CBMS); and is now in the process of institutionalizing CBMS in all Councils. CBMS has showed that good public policy choices for empowering and uplifting the poor are best made when local authorities and communities work together and are guided by sound data and evidence-based analysis. This is key to ensuring effective public spending and greater public accountability.

CBMS is an organized way of collecting ongoing or recurring information at the local level to be used by councils, local governments and local community for planning, budgeting, and implementing local development programs. It is a tool for improved local governance and democratic decision-making that promotes greater transparency and accountability in resource allocation. CBMS implementation is an Eight-Step Process: Step 1 – Advocacy/organization, Step 2 – Community Capacity Building, Step 3 – Data collection and field editing, Step 4 – Data encoding and map digitization, Step 5 – Processing and mapping, Step 6 – Data validation and community consultation, Step 7 – Knowledge (database) management, Step 8 – Dissemination

The main objectives of CBMS are: To diagnose the extent of poverty at the local level (particularly at ward level), Formulate appropriate plans and programs to address problems, provide the basis for rational allocation of resources, identify eligible beneficiaries for targeted programs, Monitor and assess the impact of programs and projects. The distinctive features of CBMS are that: It is a census of households and not a sample survey, it is rooted in local government and promotes community participation, it uses local personnel and community volunteers as monitors, it has a core set of simple, well-established indicators, it establishes a databank at all the geo-political levels.

Enabling Conditions for CBMS implementation are: Decentralization facilitates the adoption of CBMS, Political commitment is key to sustainability, Public participation is important, CBMS is cost-effective. CBMS empowers the community by building its capacity to participate in diagnosing the problem and offering solutions, CBMS improves the allocation of resources by making it easier to prioritize interventions, CBMS increases equity in resource allocation, CBMS helps to monitor the impact of projects and programs, thus contributing to poverty-reduction efforts. CBMS data can be used for: Monitoring public expenditures and donor programs, Enabling gender-responsive budgeting, Tracking progress toward the MDGs, Better targeting of program beneficiaries, Sounding an early warning.

CBMS therefore; increases transparency and accountability of local governments in resource allocation, thereby improving governance. The CBMS process is not just about the flow of community and household information to local government planners, but also of information about policies and programs to communities, about government capacities and limitations, and about accountability.

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## INTRODUCTION

### The Community Based Monitoring System (CBMS)

Community Based Monitoring System (CBMS) is an organized way of collecting ongoing or recurring data at the local level to be used by local governments, local community for planning, budgeting, and implementing local development programs. It is a tool for improved local governance and democratic decision-making that promotes greater transparency and accountability in resource allocation.

The lack of appropriate local information hinders development planning and the implementation of appropriate programs, and constrains efforts to monitor change. In this regard, Zambia Research and Development Centre (ZRDC) has developed, tested, and implemented CBMS for public accountability, poverty reduction and sustainable development.

Community Based Monitoring System has showed that good public policy choices for empowering and uplifting the poor are best made when local authorities and communities work together and are guided by sound data and evidence-based analysis and this is key to ensuring effective public spending and greater public accountability. Therefore, CBMS is developed to support sustainable development through participatory poverty reduction strategies and poverty mapping as well as demonstrating the importance of community involvement in poverty reduction.

Carried out at regular intervals, CBMS provides accurate disaggregated data that enables local government planners to effectively and efficiently target socio-economic programs — with attention to gender and social equity considerations — and monitor progress. It also enables them to do so relatively easily in partnership with their constituencies. Furthermore, it gives communities a simple tool for holding Governments accountable, thereby fostering good governance.

### **Distinctive features of the Community Based Monitoring System**

The points on the next page outlines the distinctive features of the community based monitoring system (CBMS) unlike other research based projects:

- ❖ The Community Based Monitoring System is a census of households and not a sample survey.
- ❖ It is rooted in local government and promotes community participation.
- ❖ It uses local personnel and community volunteers as monitors.
- ❖ It has a core set of simple, well-established indicators.
- ❖ It establishes databank at all geopolitical levels.

### **Objectives of the Community Based Monitoring System**

Stated below are the specific objectives of the Community Based Monitoring System (CBMS)

- ❖ Diagnose the extent of poverty at the local level
- ❖ Monitor and assess the impact of programs and projects
- ❖ Provide the basis for rational allocation of resources
- ❖ Formulate appropriate plans and programs to address problems
- ❖ Identify eligible beneficiaries for targeted programs.

In this regard, enabling conditions for the implementation of the Community Based Monitoring System (CBMS) is vital on grounds that decentralization facilitates the adoption of CBMS. Political commitment is also essential for sustainability and public participation is important.

### **Implementation of Community Based Monitoring System**

Implementation of the community based monitoring system requires strong partnerships between researchers, local government officials, and communities within local administrative units and it is also important to indicate that enlisting and orienting the community determines success from the outset.

The implementation of community based monitoring system involves the selection of indicators as well as development of survey tools. Therefore, adequate training of researcher should not be underestimated to ensure that quality data collection, processing and validation of results are done with greater precision as well as dissemination of results.

Results generated from community based monitoring system have wider application and can be used within local administrative units for implementation of sustainable planning, budgeting,

monitoring and evaluation of programs implemented in the communities, transparency and accountability in resource allocation.

### **Benefits of the Community Based Monitoring System**

CBMS empowers the community by building its capacity to participate in diagnosing the problem and offering solutions, improves the allocation of resources by making it easier to prioritize interventions, CBMS increases equity in resource allocation as well as helping to monitor the impact of projects and programs, thus contributing to poverty-reduction efforts. When compared to other data collection and research based projects, CBMS is cost-effective and the results are timely.

### **Uses of Community Based Monitoring System (CBMS)**

Community Based Monitoring System can be used to Monitor and Evaluate public expenditures and donor programs implemented in the communities. CBMS data can be disaggregated by sex of respondents thereby enabling the implementation of gender-responsive planning as well as budgeting.

On account of the scope of CBMS, the findings can be used for tracking progress toward the achieving the Millennium Development Goals in Zambia. It is also clear that better targeting of program beneficiaries is enhanced in community based monitoring system unlike in other research projects and resulting from the fact that CBMS collects both routine as well as periodic data, it can be used for sounding an early warning so that appropriate measures can be put in place before the situation occurs.

### **In a nutshell**

In conclusion, the Community Based Monitoring System (CBMS) is designed to increase transparency and accountability of local government units in resource allocation thereby decentralizing and improving local governance. The community based monitoring system is not just about the flow of community and households information to local government planners but also of information about policies and programs to communities, governance capacities and limitations as well as transparency and accountability.

## Application of the Community Based Monitoring System (CBMS) in Zambia

The community based monitoring system is basically an evaluation program intended to monitor and assess the effectiveness of developmental projects that are implemented with a view of up lifting socio-economic conditions in the Zambian society. This system is very vital in a developing country like Zambia because it improves the socio-economic and political data base of the country so that policy makers can have adequate information when making decisions.

Since the national census is the major source of information in Zambia, it is usually untimely thus it cannot capture the dynamics of the population. Therefore, there is need to allocate more resources towards this system in order to supplement other data gathering techniques that are available in the country and fill the gaps in data needs because it is more detailed in terms of the data it captures and timely.

Compared to other monitoring systems, the specialty of CBMS is that it is based on a partnership between local communities, local governments, and trained local researchers in an institutionalized system of regular data collection, validation, and analysis for local program development. Furthermore, it not only builds the capacity of local governments to use poverty statistics in formulating development plans and poverty-reduction programs but also of local communities in generating and using information.

## Definition of Concepts in Community Based Monitoring System

### Household



A household is a group of persons who normally live and eat together. These people may or may not be related by blood, but make common provision for food and they have only one person whom they all regard as the head of the household. A household may comprise several members and in some cases may have only one member.

**Head of Household:** This is the person whom all members of the household regard as one who normally makes day-to-day decisions concerning the running of the household. The head of the household could be male or female.

**Usual member of Household:** Like in most researches, a usual member of a household was considered to be one who had been living with a household for at least six months prior to the survey. In this study, newly married couples and newly born babies were given the same status as well as members of households who were temporarily away from the households for some reasons at the time of data collection.

**Average Households Size:** This is one of the demographic measures used to estimate the number of household members expected to live in each household and it varies by regions due to the interaction of demographic and socio-economic factors.

### **Demographic Characteristics of the Population**

Demographic characteristics of any population are important as this information provides a basis for the analysis of other population characteristics and their relationships with other determinants of population change.

#### **A. BACKGROUND AND DEMOGRAPHIC INFORMATION OF THE SAMPLE**

In any research project, background and demographic information of a sample or population under investigation is very important because it forms the basis for analysis of population dynamics and has it has great bearing on the findings.



Therefore, background and demographic information helps researchers to fully understand and provide justification for the characteristics of the population under investigation because it leads to the acquisition of knowledge concerning probable factors which influence the prevailing demographic, socio-economic and political conditions.

Background information is necessary for the understanding of other aspects of the population such as socio-economic and political conditions and this data is made more useful to decision makers when disaggregated by demographic characteristics such as age and sex of the members of households. Demographic characteristics of any given population are important because this



information provides a basis for the analysis of other population characteristics and their relationship with other determinants of population change.

In this regard, this section establishes the background and demographic information of the wards which were captured in the sample and table 1.1 below provides details of the geographic and demographic information of all the wards which were considered for analysis in this study.

**Table 1.1 - Geographic and demographic information**

Demographic Information							
Ward	constituency	District	sample population	Male (%)	Female (%)	Households sampled	Average HH size
Kabwata estate	Kabwata	Lusaka	394	50.9	49.1	100	3.94
Lubuto ward	Kabushi	Ndola	488	46.5	53.5	100	4.88
Kanyama ward 10	Kanyama	Lusaka	468	44.4	55.6	100	4.68
Roma ward 17	Mandevu	Lusaka	487	53.5	46.5	100	5.87
Masakanya	Mpika Central	Mpika	577	47.1	52.9	95	5.8
Mazabuka Central	Mazabuka Central	Mazabuka	506	46.1	53.9	100	5.06
Mwembeshi (28)	Matero	Lusaka	520	49.7	50.3	100	5.2
Fibobe	Chifubu	Ndola	559	47.6	52.4	100	5.59
Ibenga	Masaiti	Ipongwe	548	48.2	51.8	100	5.48
Mapalo	Ndola Cental	Ndola	560	50.4	49.6	100	5.6
Bundabunda	Rufunsa	Chongwe	467	45.2	54.8	100	4.67
Mulambwa	Mongu Central	Mongu	372	48.9	51.1	100	3.72
Nyika	Chipata Cental	Chipata	502	48.9	51.1	95	5.23
Chilenje wards	Kabwata	Lusaka	467	41.0	59.0	100	4.67
Kalonga ward	Kabwe Central	Kabwe	549	51.2	48.8	99	5.54

Table 1.1

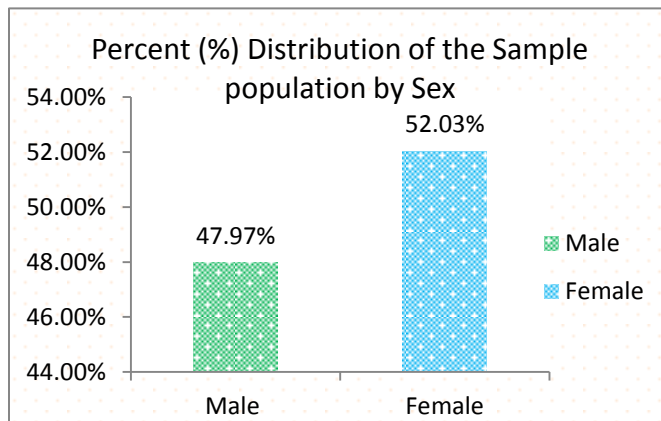
The table above provides information on the geographic as well as demographic information of the wards that were sampled and it can be observed that the majority were based in Lusaka followed by those in Ndola district. In this study fifteen wards were sampled and in each ward 100 households were targeted however there were some non-responses in other wards hence the target could not be reached.

In each ward the sample population was based on the population within the households and the table also provides information on the percent distribution of sex of the members of households.

It can also be observed that the majority of the wards had slightly more females than males, only few wards had slightly more males than females for example, Kabwata estate, Roma ward 17, Mapalo and Kalonga wards showed that there were slightly more males than females.

**Figure 1.1 - Overall Percent (%) Distribution of the Sex of Members of Households**

The figure below shows the percent distribution of the sex of the members of households including head of households and it can be observed that there were more females than males. Females made up 52.03% while males 47.97% of the overall percent distribution by sex.



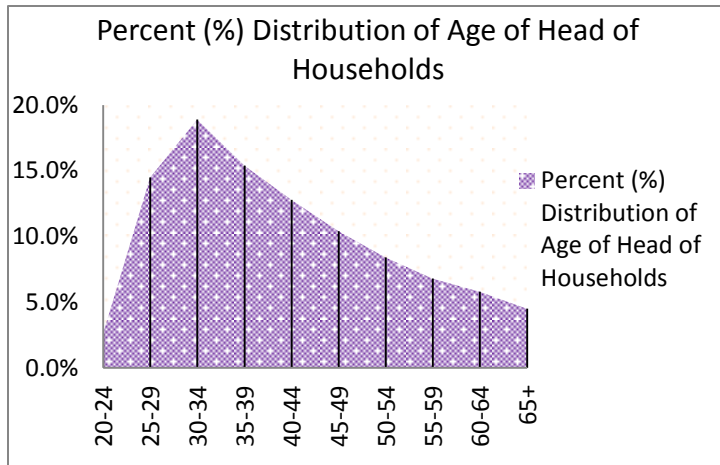
Evidence for the above observation can be drawn from the 2010 preliminary report which established that the population count from the 2010 Census of Population and Housing for Zambia was 13,046,508 as at October 2010. Of the 13,046,508 persons, 6,394,455 were males while 6,652,053 were females (CSO; 2011, P.1).

From this evidence it can be noticed that there were more females than males making 50.98% and 49.01% respectively. Considering that the census was done at national level, the findings of this study on this aspect reflect the same phenomena that there are slightly more females than males in Zambia.

Another research which was done by Zambia National Malaria Indicator Survey stated the following in their findings: Data showed that there were slightly more women in Zambia than men, comprising 52.4% and 47.6% of the population respectively (Zambia National Malaria Indicator Survey 2012; P.7).

**Figure 1.2 - Percent (%) distribution of the Age of the head of households**

The figure on the next page shows the percent distribution of the age of the head of households and it can be seen that the majority of the head of households were in age group 30-34 making 18.9%. These were followed by those in age group 35-39 who made up 15.4% as well as age group 25-29 which made up 14.5% of sample.



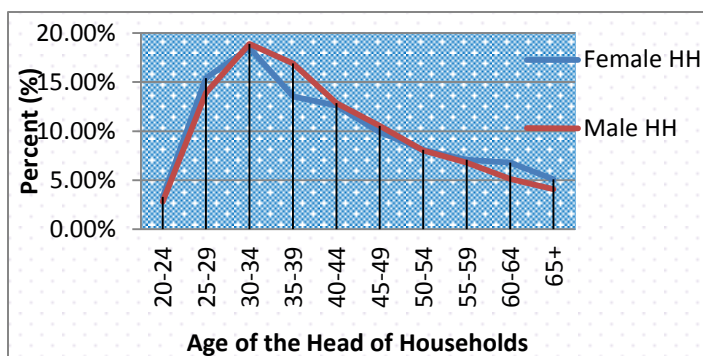
The shape of figure 1.2 shows that the formation of households was increasing with age for those below 30 years and headship declines steadily after 30 years of age.

The smoothness of the curve depicts the representativeness of the data that was collected as well as its' accuracy.

This information can be verified with the survey findings that were obtained by the Living Conditions Monitoring survey under the Cental Statistical Office and below is a quote from the findings in the executive summary: The results showed that the age group with the highest percentage of household heads was 30-34 with 17 percent. The majority of the household heads were in the age range 25-49 with about 67 percent (LCMS; 2006, P.xvii). In order to try and compare, in this study the percent of head of households who were below 20 years was negligible (below 1%), head of households who were in the age range 25-49 made up 71.8% while households headed by those above 65 years made up 4.6% of the overall distribution on age while age group 30-34 made up about 18.5% as shown in the figure.

**Figure 1.3 - Percent (%) Distribution of the Age of Head of Households by Sex**

The figure 1.3 below shows the percent distribution of the age of head of households by sex and this study has shown that amongst male headed households the majority tend to be in the age groups 30-34 and 35-39 while amongst female headed households the majority tend to be in the age groups 30-34 followed by 25-29 making about 18% and 15.4% respectively.



It can also be observed that there were slightly more females in the age groups below 30-34 than males, after age group 30-34 males tend to form more households and reduce below females after age 50-54.

**Figure 1.4 - Percent distribution of the sex of head of households**

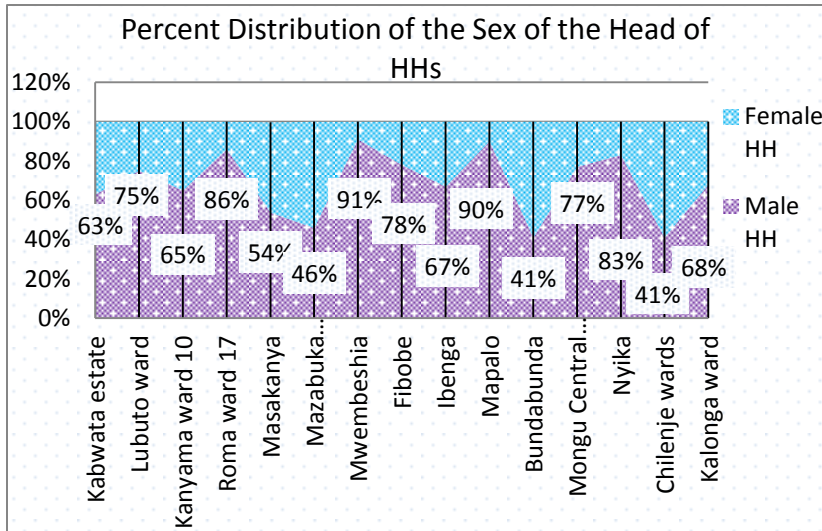


Figure 1.4 shows the percent distribution of sex of the head of households. It can be seen that Mwembeshi ward had more male headed households followed by Mapalo and Roma ward 17 having 91%, 90% and 86% respectively.

This study found that the majority of the head of households in almost all the wards were male and figure 1.5 below shows the percent distribution of the head of households with regard to sex.

**Figure 1.5 - Percent (%) Distribution of the Overall Sex of the Head of Households**

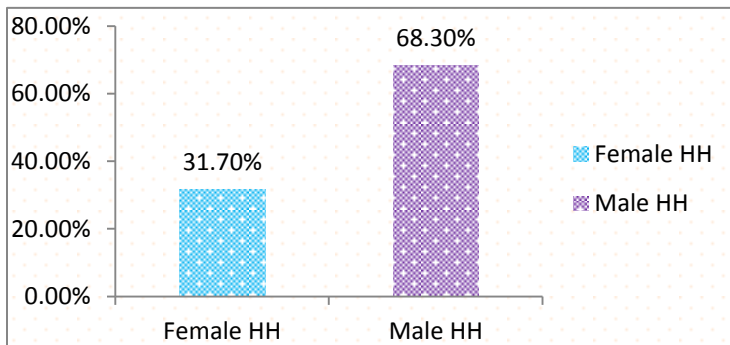


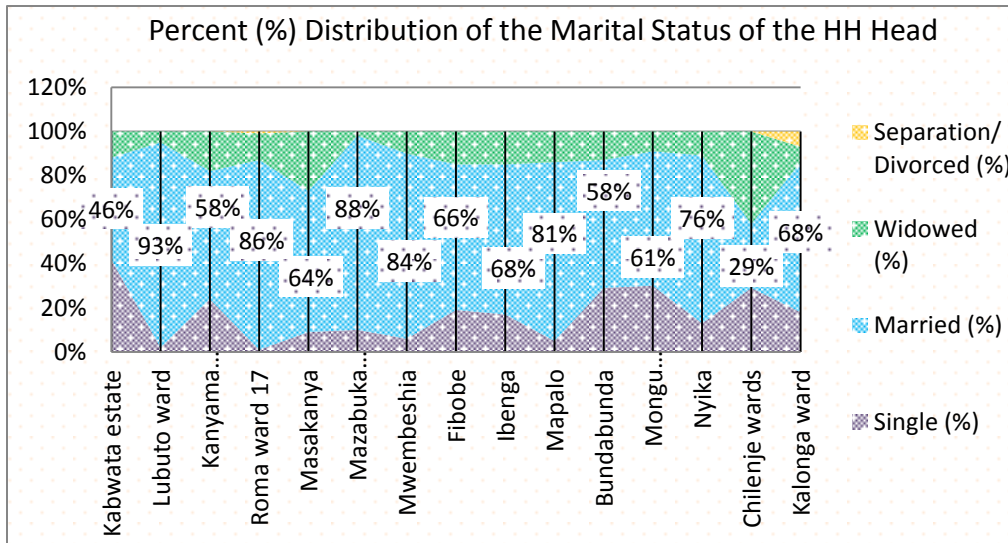
Figure 1.5 shows that the majority of the households in this sample were headed by males making 68.3% while females made up 31.7% as shown.

This information on the percent distribution of head of households presented in figure 1.5 can be compared with the Zambia Sexual Behaviour Survey findings which suggested the following: About one in four households are headed by women. This result was true for both rural and urban areas (ZSBS; 2009, P.7).

Figure 1.6 on the next page shows the percent distribution of the percent distribution of the marital status of the head of households. Therefore, head of households were asked to indicate their marital status in terms of them being single, married, divorced, separated and divorced.

**Figure 1.6 - Percent (%) Distribution of the Marital Status of the head of households**

From figure 1.6 below it can be observed that the majority of the head of households were married and the highest percent was reported in Lubuto ward which made up 93% and Mazabuka central ward was second with 88%.



From figure 1.6 above it can be observed that Chilenje ward had the largest percent of the widowed followed by Masakanya ward. Kalonga ward had some head of households on separation/divorced as well as Roma ward 17 although the proportions are very low.

Amongst the head of households who reported that they were single, it can be observed that the majority were reported in Kabwata estate, Bundabunda, Mulambwa (Mongu central ward), Kanyama ward 10 and Chilenje wards.

**Figure 1.7 - Percent (%) Distribution of the Marital Status of the Head of Households**

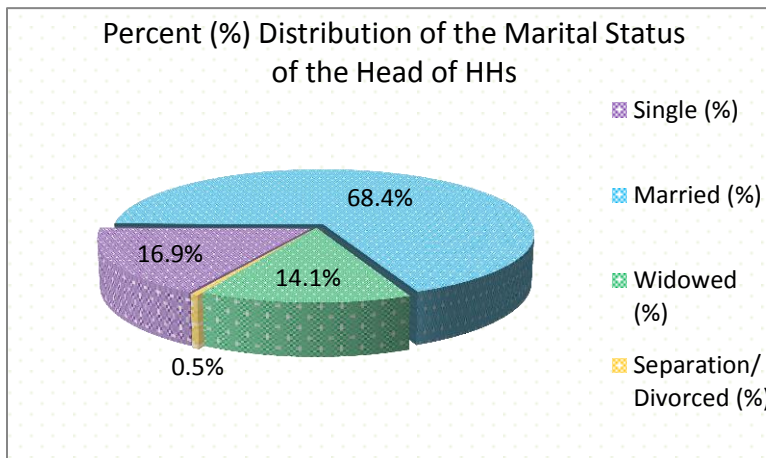


Figure 1.7 shows that the majority in this study were married making 68.4%, 16.9% were single, 14.1% were widowed and 0.5% were separation and/or divorced.

### **Average Households size per ward (5.06)**

Average household size is one of the demographic measures used to determine how large households in a given region are expected to be in terms of the number of household members present. For simplicity, average household size shows the total number of members of households we expect to find in each household including the head of household.

With the onset of the fertility transition in the 1970s and 1980s declines in household size become evident thus household size was also found to be positively associated with the level of fertility (adjusted for child survival) and the mean age at marriage, and inversely associated with the level of marital disruption (John Bongaarts; 2001, p.27).

### **Determinants of Household size**

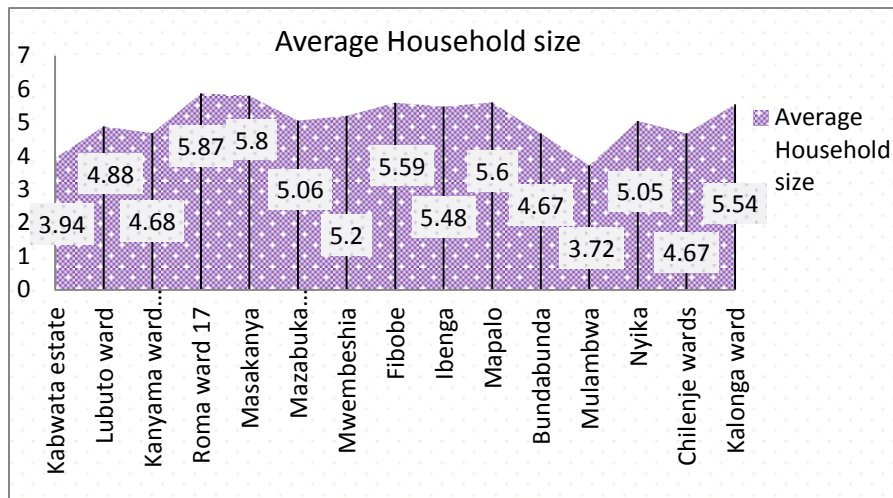
Household size can be influenced by direct as well as indirect factors. Therefore, demographic variables such as fertility have a direct impact on household composition. In contrast, socioeconomic variables such as income do not affect household structure directly but instead operate through demographic and residential choice factors.

These factors can therefore be considered intermediate or proximate determinants. For example, as a society develops, social and economic changes (indirect factors) bring about reductions in fertility (a proximate determinant), and the decline in fertility, in turn, leads to a change in household structure by reducing the number of children.

Bongaarts (1983) proposed six proximate demographic determinants of the size of nuclear households: nuptiality, fertility, adoption, mortality, migration and divorce (John Bongaarts; 2001, p.17).

In 2000, the national average size of agricultural households was 5.5 persons. Compared to the national average size of 5.0 persons for all households, it is apparent that agricultural households tend to be larger. Southern Province had the highest mean household size of 6.5. Central and Lusaka provinces each had average household sizes of 6.1, while Copper belt Province had a mean household size of 5.9. This pattern in mean household sizes is similar to that obtained in the 1990 Census, where the provinces along the line of rail (namely Southern, Lusaka, Central and Copper belt) tended to have higher average household sizes. Luapula Province had the least mean household size of 4.9 (CSO-Agricultural Analytical Report; 2003, P.12).

**Figure 1.8 - Average Household Size per ward**



Average household size shows the expected number of household members in a given ward. Therefore, households in the rural areas are expected to have more members of households.

The figure above shows the average household size of each ward and it can be observed that the Mulambwa ward recorded the lowest while the highest was recorded in Roma ward 17 with an average of 3.72 and 5.87 members per household respectively.

Generally, wards in rural areas had a tendency of having larger households size unlike those in the urban areas for example Kabwata estate, Lubuto, Kanyama and Mulambwa wards as shown above. This study has highlighted an overall average household size of 5.06 persons per household and comparisons are made below.

In 2006, the Living Condition Monitoring Survey showed that the national average household size was 5.1. The distribution by province showed that the household size ranged from 4.9 in Lusaka province to 5.5 in Central province (LCMS: 2011, P. xvii).

In the 2007 ZDHS, the average household size was 4.9 persons, compared with 5.2 persons in the 2001-2002 ZDHS, 5.4 persons in the 1996 ZDHS, and 5.6 persons in the 1992 ZDHS. This shows a modest decline over the past 15 years.

According to the 2000 preliminary report the total population captured was 13046508 with a total of 2635590 households thus giving an average household size of 4.95 (CSO; 2011, P.59).

**Figure 1.9 - Percent (%) Distribution of the Ethnicity of the Head of Households**

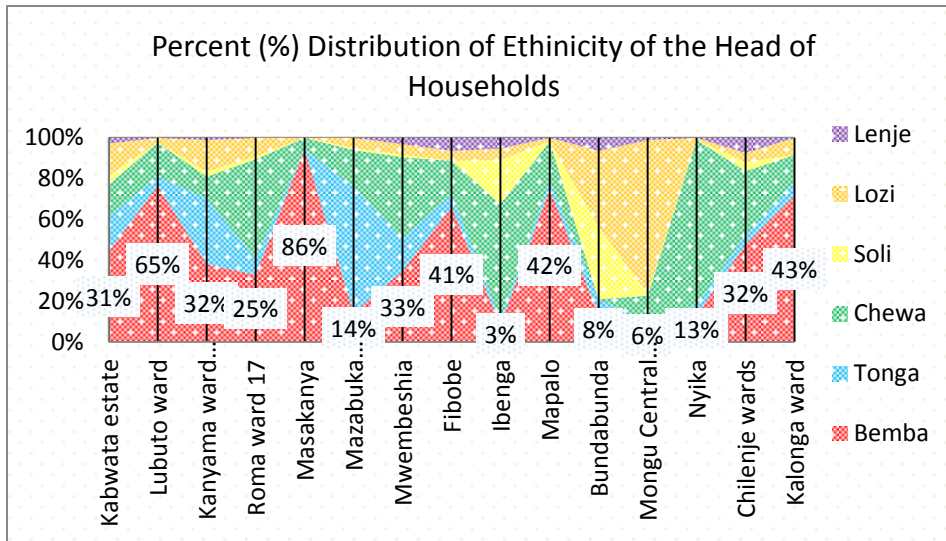


Figure 1.9 above display information on the ethnicity of the head of households making comparison among the predominantly spoken languages in the country highlighted above as Lozi, Lenje, Soli, Chewa, Tonga and Bamba.

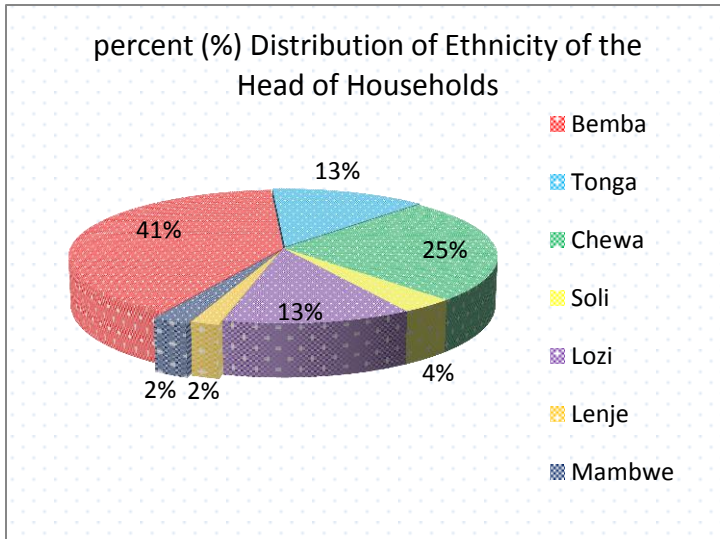
It can be seen that wards which were predominantly Bemba include Masakanya, Lubuto, Mapalo, Kalonga and Fibobe. Chewa was found to be predominant in Nyika and Ibenga ward while being fairly distributed among other wards. Tonga was more predominant in Mazabuka central ward although its' proportions were very low in other wards. Lozi was found to be more predominant in Mulambwa ward (Mongu central ward) and it was also fairly distributed among other wards although its' proportions were very minimal. Lenje and Soli had high proportions in Ibenga and Bundabunda wards and they were the least spoken languages of all the ethnical groupings in almost all the wards in this study.

### **Ethnicity of the Head of Households**

The figure on the next page displays information on the percent distribution of ethnicity of the head of households among major tribal groupings present in Zambia. Considering that Zambia is a very diverse country in terms of ethnicity and cultural heritage. Therefore, analysis was based on the above named ethnic groups which are considered to be the majority. In this study, some head of households reported other ethnic groupings which are not considered above because the proportions were very small.



**Figure 2.0 - Percent (%) Distribution of the Ethnicity of the Head of Households**



From figure 2.0, it is clear that the majority of the head of households in this sample were Bemba speaking making 41% of the households, Chewa speaking households were second and made up 25%, Tonga was slightly above Lozi with 13.2% and 12.7% each respectively.

It can also be seen that the Soli, Mambwe and Lenje ethnic groups were the minority in this sample making 3.6%, 2.4% and 1.9% respectively.

Close to similar results were obtained in the Zambia National Malaria Indicator Survey of 2012 on the percent distribution of women ages 15 to 49 years on background characteristics concerning ethnicity where 33.4% reported being Bemba speaking, 12.6% reported being Tonga, 6.4% were Lozi, 13.7% Nyanja, 2.9% Mambwe, 8.0% from North-western, 5.6% Tumbuka and 17.4% for other (Zambia National Malaria Indicator Survey; 2012, P.13).

**Figure 2.1 – percent (%) Distribution of the Highest Level of education of the head of household**

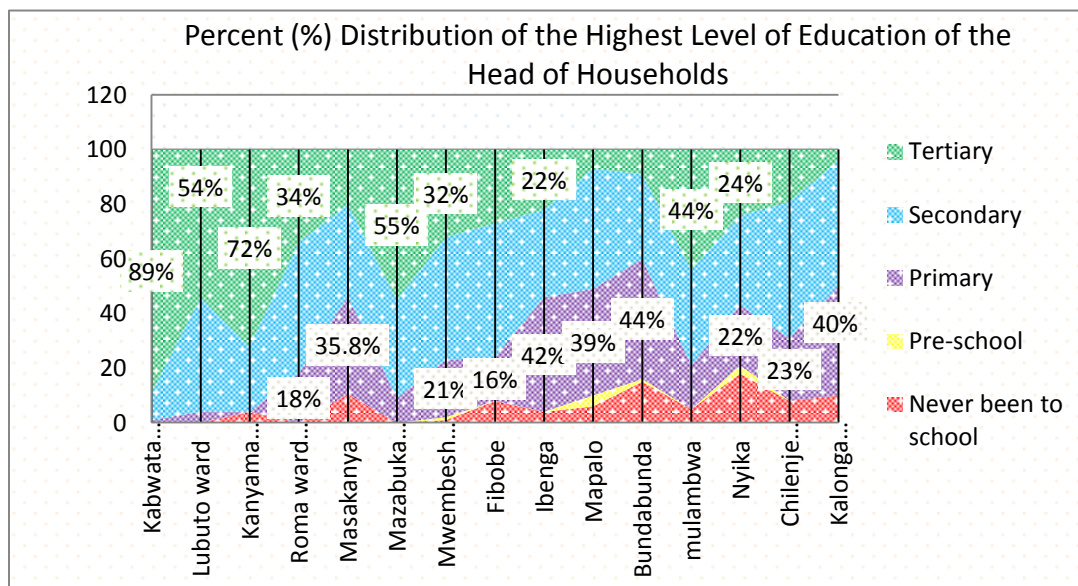


Figure 2.1 on the previous page displays information on the highest level of education of the head of households and it can be observed that the majority in Kabwata estate, Lubuto ward, Kanyama ward 10, Mazabuka central and Mulambwa wards reported having tertiary level of education thus making 89%, 54%, 72%, 55% and 44% respectively. It can also be observed that only Nyika ward, Bundabunda, Fibobe and Masakanya reported having the highest percent of head of households who had never been to school as well as those having pre-school level of education.

With regard to head of households with primary level of education it is clear that Bundabunda had the highest percentage making 44%, these were followed by those in Ibenga ward with 42% and kalonga ward with 40%. It can also be observed that Kabwata estate ward had head of households with only tertiary and secondary levels of education while primary education was almost negligible, this pattern was observed to some extent in Kanyama ward 10 and Lubuto ward. It can also be clearly observed that secondary education was fairly distributed across all wards.

Indeed, education is considered a crucial variable in explaining differences in fertility, mortality, morbidity & health, migration as well as variation in micro- and macro-levels of economic development. But despite the fact that education is a good predictor of most demographic behaviours and economic growth patterns as shown by evidence in many settings, the precise causal mechanisms underlying these relationships are less clear, especially when comparing across countries and time.

**Figure 2.2 – Percent (%) Distribution of the Highest Level of Education of the Head of Households**

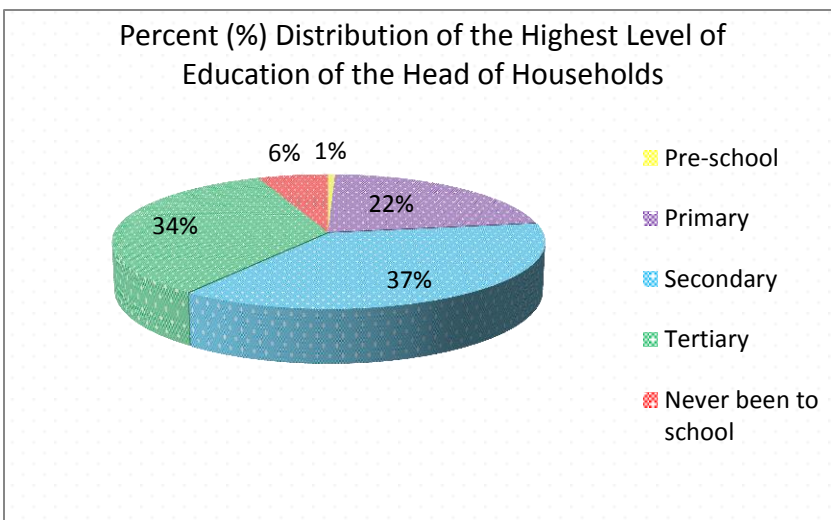


Figure 2.2 on the left shows information on the percent distribution of the highest level of education of the head of households.

From figure 2.2 on the previous page it can be clearly observed that the majority of the head of households reported having secondary level of education making 37% of the households, 34% of the head of households reported having tertiary level of education, 22% had primary, 6% had never been to school and 1% reported having pre-school level of education.

Education still remains a key component in finding lasting solutions to economic problems. Therefore, education attainment of the head of households in most cases influence the livelihood system of the entire household in that it may have an impact on the total combination of activities undertaken to ensure a living although most rural households have several income earners, who pursue a combination of crop and livestock, farm, off-farm and non-farm activities in different seasons to earn a living.

Therefore, Income brought by different household members may be pooled in a common "pot" or "purse" or income earners may hold part of it back for personal spending. Finally, level of education of members of households may have an influence on level of participation in community socio-economic, cultural and political activities as well as the patterns of fertility, mortality and migration within households.

**Figure 2.3 - Percent (%) Distribution of the Main Profession of the head of households**

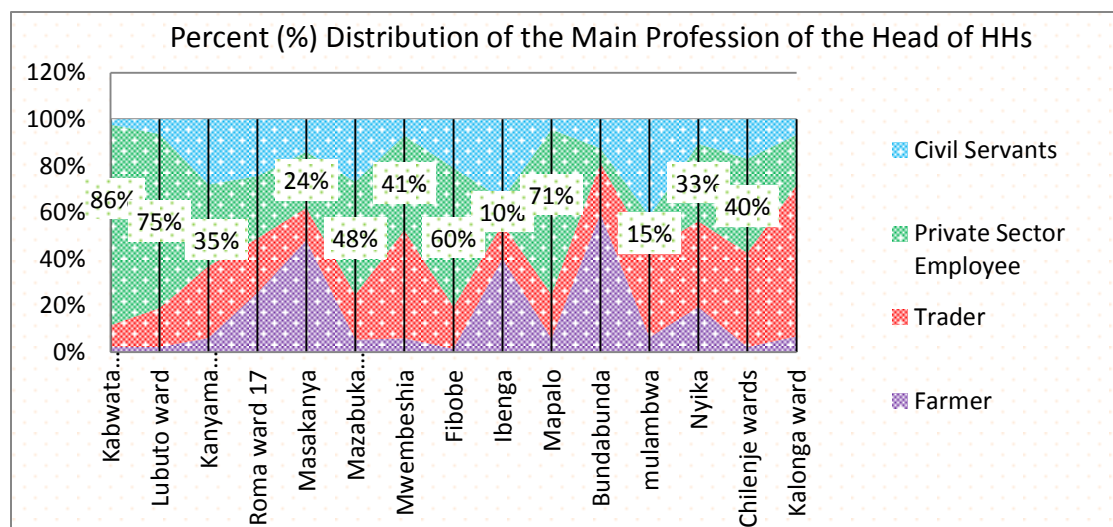


Figure 2.3 above presents information on the main profession of the head of households and it can be seen that the majority among those who were in the private sector were reported in Kabwata estate, Lubuto, Mapalo and Fibobe wards making 86%, 75% 71% and 60% respectively. Those who reported none or other were excluded in this presentation.

From the same figure 2.3 on the previous page it can be observed that the majority of the civil servants were mainly reported in Kanyama ward 10, Ibenga and Mulambwa wards.

Amongst the head of households who reported that they were farmers, the majority were in Masakanya, Ibenga and Bundabunda wards. It can also be observed that the majority of the traders were in Kalonga ward, Chilenje and Mulambwa ward.

The same figure also shows that wards in the rural areas seem to have lower proportions of head of households who were employed either as civil servants or in the private sector as compared to those in urban areas.

Therefore, the head of households in the rural areas seem to engage more in farming and trade because of the prevailing high level of unemployment in the country at large.

**Figure 2.4 – Sample Percent (%) Distribution of the Main Profession of the Head of Households**

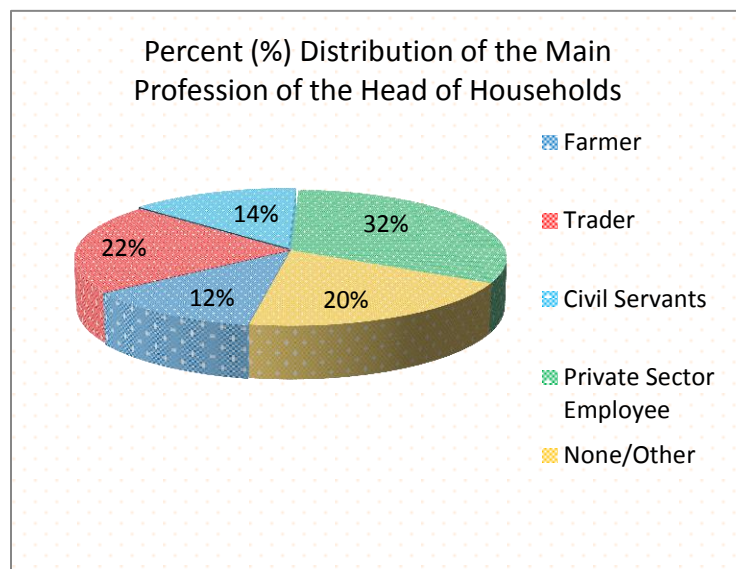


Figure 2.4 present findings on the percent distribution of the main profession of the head of households. The majority of the households were headed by private sector employees making 32% of the households in the sample, 14% were civil servants, 22% were traders, 12% farmers and 20% engaged in other economic activities other than these stated.

To some extent this outlook might have been influenced by the highest level of education of the head of households as has been highlighted in this report under the percent distribution of the head of households' highest level of education in which 34% reported having tertiary level of education, 37% secondary level of education, 22% primary level of education, 6% never been to school and 1% having pre-school level of education.

The pictures below shows the types of business which the majority of the head of households who reported that they were traders engaged in so as to raise income for sustaining their households.



These sites range from local market for charcoal trading, beer drinking places (pub) as well as smaller shops popularly known as ntemba.

The first picture shows a charcoal trading site, the next is a local market trading site, the third one shows an establishment where alcoholic beverages are sold and consumed and the last picture shows the type of business commonly practiced known as ntemba.

These were the widely practiced types of trade or businesses which the majority of household members were engaged in most wards apart from those having well-established big shops as well as those who were trading in market places.

Therefore, since the majority of head of households were not employed, it is imperative that the government through relevant authorities make sure that better infrastructure is created as an alternative for the local residents to earn a living.

## B. SOCIO-ECONOMIC AND POLITICAL INFORMATION

### Political Information (Voting & Elections)

Figure 2.5 - Percent (%) Distribution of the members of households who were Holding Voter's Card & Eligible to Vote, Eligible Voter's Without Voter's Cards and Not Eligible to Vote

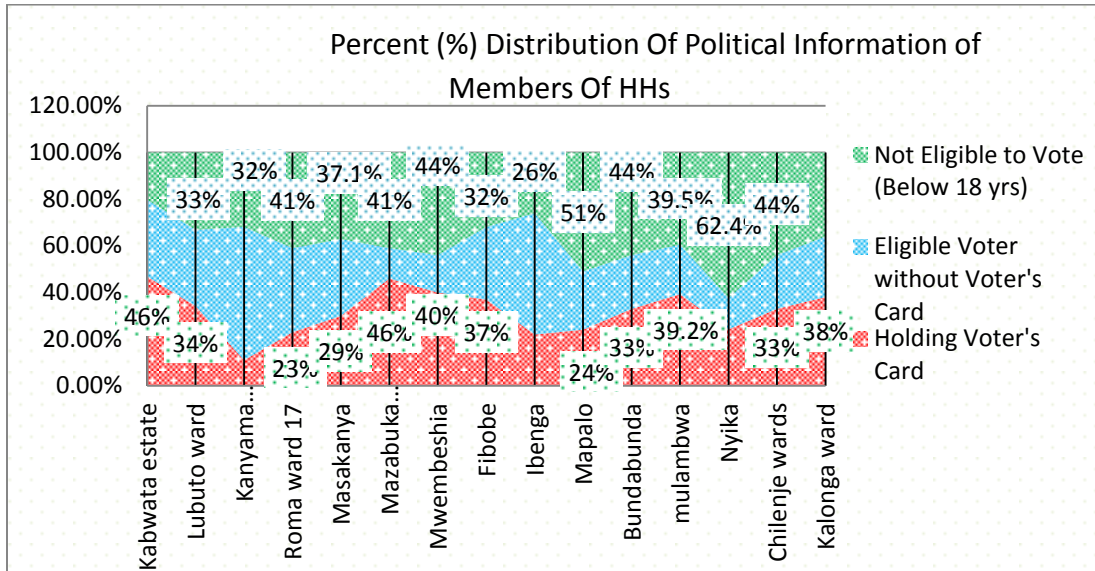


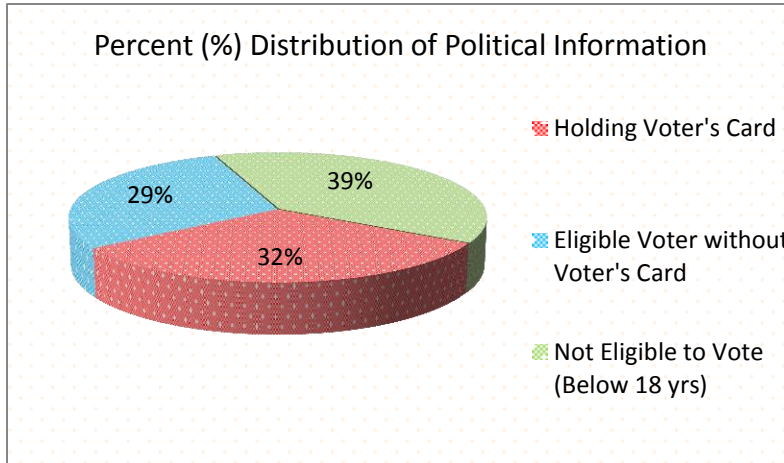
Figure 2.5 above present political information among households in the wards and it can be observed that members of households who were below the age of 18 (not eligible to vote) were the majority in some wards such as Nyika, Mapalo, Mwembeshi, Bundabunda and Chilenje wards with 62.4%, 51% and 44% for each of the remaining wards.

Among the members of households who were holding voter's cards the majority were in Kabwata estate making 46.8% of the entire population in the households sampled, Mazabuka ward recorded 46% and Mwembeshi ward recorded 40% of the population in households holding voter's cards. It can also be observed that the percent distribution of members of households holding voter's cards and eligible to vote fluctuated among wards with some wards having more voters than others.

From the same figure 2.5 it can be observed that the percent distribution of members of households above 18 years: (Eligible to vote but without voter's card) was also huge among the wards. The highest was recorded in Kanyama ward 10 as well as Ibenga wards. Therefore, there is need to increase registration of voter's so that these household members can be issued voter's

card and make them participate in political matters thereby increasing participation of citizens in political matters.

**Figure 2.6 - Percent (%) Distribution of Political Information in Households**



In Zambia since the voting age is 18 years and above, any person who is aged 18 years and above is therefore eligible to vote in any Presidential, Parliamentary and local government elections.

The figure above give a summary of members of households with regard to their status concerning voting and elections and it can be observed that the majority of members of households in the wards sampled were not eligible to vote because they were below the legal voting age which is 18 years and they made up 39% of the population in the sample. These were followed by those holding voter’s cards making 32% of the sample population while 29% were above the legal voting age but without voter’s card. Therefore this implies that there is urgent need to increase registration of voters so as to capture all this population and increase political participation in national matters.

The total number of eligible voters from the 2010 Census was 6,069,753 representing 47 percent of the total population of Zambia. Of the total number of eligible voters in Lusaka province, Lusaka district had the largest share at 81.7 percent. The other districts in the province shared the remaining 18.2 percent share of eligible voters. Kafue had 9.6 percent; Chongwe had 7.6 percent while Luangwa district had 1 percent (CSO: Census Preliminary Report; 2011, P.8).

The paragraph above provides evidence of the fact that the percent distribution of voters fluctuates heavily among districts and wards as was established in the case of Lusaka district. This observation can be used to justify the electoral pattern with regard to voting and elections in this report in that some regions had higher proportions of eligible voters while others have low proportions.

## Victims of Crimes (Crimes experienced in households)

Figure 2.7 - Percent (%) Distribution of the Crimes experienced by households

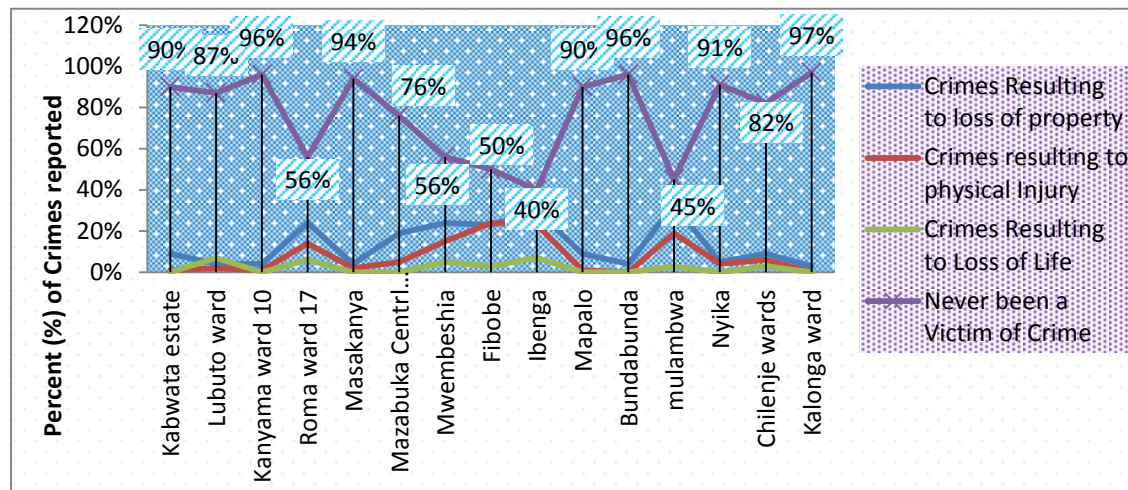


Figure 2.7 above present findings on the percent distribution of the crimes that were experienced in households in terms of loss of property, physical injury and loss of life as well as those who never experienced any crimes.

From the same figure 2.7 it can be observed that most of the crimes resulted to loss of property in almost all the wards and the majority of these were reported in Roma ward 10, Ibenga, Mazabuka, Mwembeshi, Fibobe, and Mulambwa wards. This pattern was replicated when it comes to crimes resulting to physical injury.

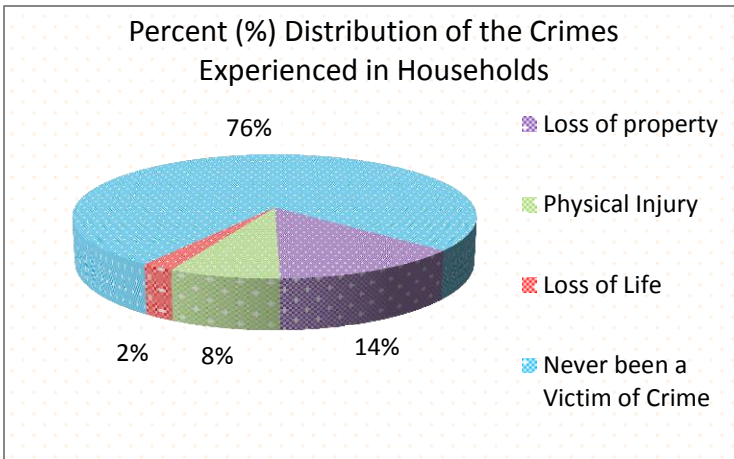
With regard to crimes resulting to loss of life, these were only reported in Lubuto, Roma ward 17, Mwembeshi, Ibenga, Mulambwa and Chilenje wards. Households which never experienced crimes were highly reported in Kalonga, Bundabunda, Kanyama, Masakanya, Mapalo and Kabwata estate wards with 97%, 96%, 96%, 94%, 90% and 90% respectively.

Wards that had very high crime rate include Roma ward 17, Ibenga and Mulambwa with 56%, 40% and 45% of the households who had never been victims of crimes.



**Figure 2.8 – Over-all Percent distribution of the crimes experienced by households**

The figure below shows the percent distribution of the over-all crimes which were reported in households and it can be seen that the majority of households reported that they had never been victims of crimes making 76.35%, 13.5% were victims of crimes resulting to loss of property,



7.79% reported having been victims of crimes resulting to physical injury and 2.27% of the households reported having been victims of crimes resulting to loss of life.

Therefore, there is need to intensify security measures in all the wards in order to reduce crimes.

Loss of property was the commonly reported crime among households making up 13.5% in this study and these were followed by those who reported that they experienced physical injury making 7.79% while 2.27% of the households reported losing a member.

It is therefore necessary that more police posts be constructed in these wards and also in other wards country wide in order to reduce crimes in the country especially in rural areas where there is inadequate presence of the police.

**Figure 2.9 - Accessibility to internet by households**

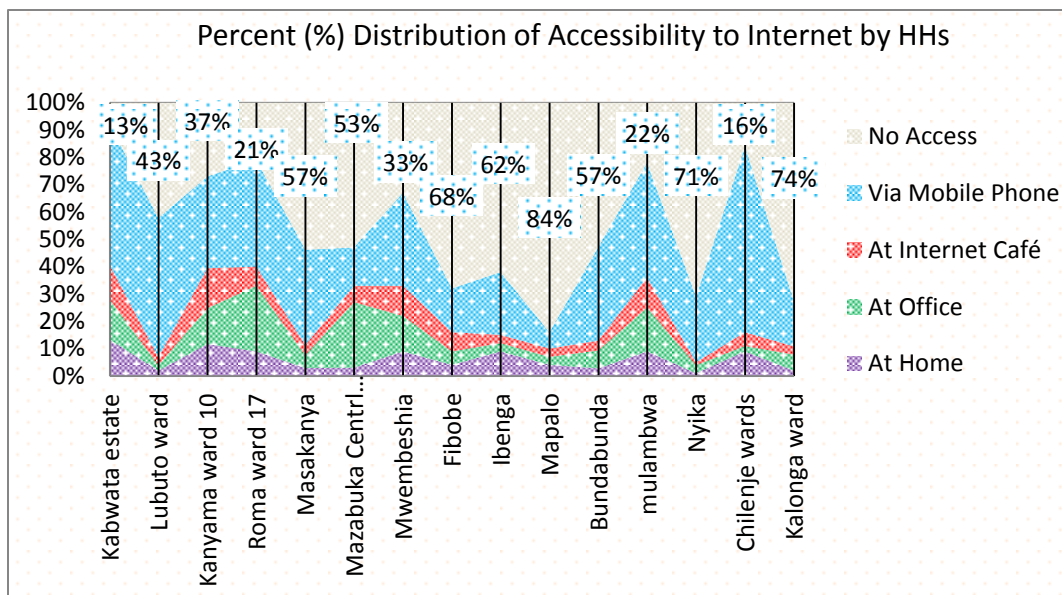


Figure 2.9 on the previous page shows information on the percent distribution of the accessibility to internet by households in terms of them having access through mobile phone, at the internet café, at work places (office) and at home as well as those without any access to internet at all.

From the same figure, it can be observed that the majority of the households no access to internet and most of them were reported in Mapalo, Kalonga, Nyika, Fibobe and Ibenga wards with 84%, 74%, 71%, 68% and 62% respectively.

In this study it was found that among households with access to internet, the majority had access through mobile phones with the majority being reported in Chilenje, Mulambwa, Kabwata estate and Lubuto wards.

From the same figure 2.9 above it is clear that the proportion of households accessing internet at internet café was the lowest and it was fairly distributed among the wards. Among households which reported having access to internet at the work places or office, the majority were reported in Roma ward 10, Mazabuka Mulambwa and Kabwata estate wards.

In this study it was found that among households with access to internet at home, the majority were reported in Kabwata estate and Kanyama ward 10 and that the proportions were fairly distributed among the wards taken in the sample although Lubuto, kalonga and Nyika wards had none of their households having access to internet at home.

**Figure 3.0 – Percent (%) Distribution of the Accessibility to Internet by Households in the Sample**

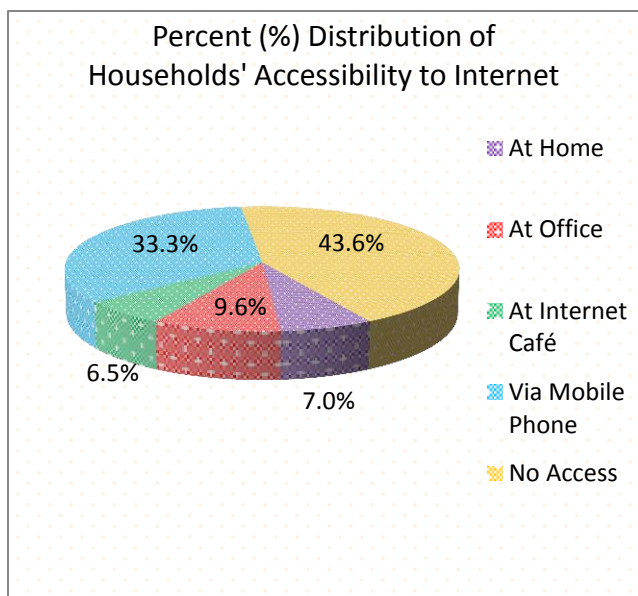
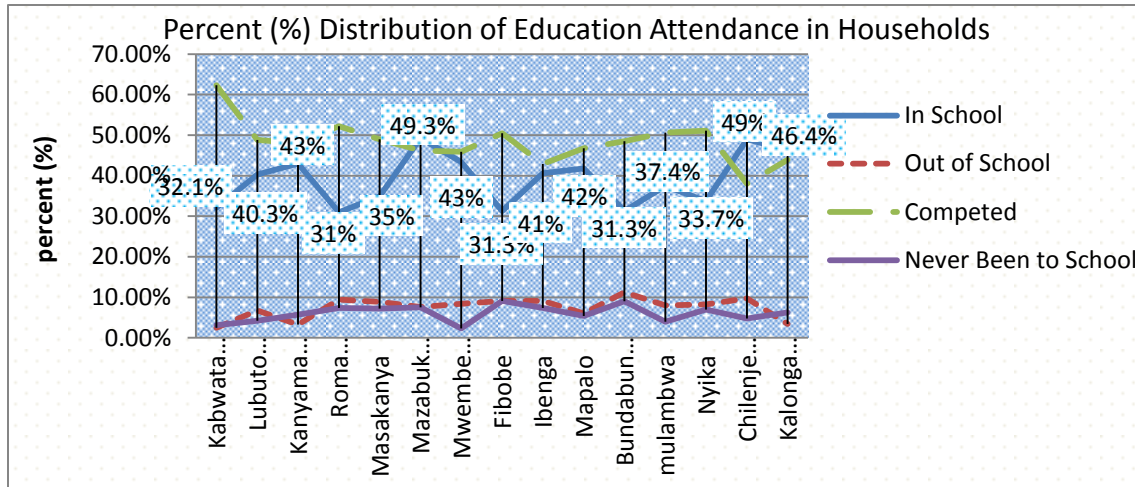


Figure 3.0 presents a summary on the percent distribution of accessibility to internet by households. The majority of the households reported that they had no access to internet making 43.6% of the sample, 33.3% reported that they had access to internet via mobile phones, these were followed by those with access to internet at the office making 9.6%, 75 reported that they had access to internet at home and 6.5% reported having access at internet café.

**Figure 3.1 - Education Attendance in wards**



The figure above presents findings on the percent distribution of the education status of members of households in this study in terms of them being in school, out of school, completed and never been to school.

In this study the majority of the members of households reported that they had completed school with the majority being reported in Kabwata estate, Rama ward 17, Fibobe, Mulambwa and Nyika with 62%, 52%, 50.6%, 50.4% and 50.7% respectively. It is therefore clear that in these wards over 50% of the members of households reported that they had completed school.

Among the members of households who reported that they were still attending school the majority of them were reported in Mazabuka central ward with 49.3%, Chilenje ward was second with 49%, and Kalonga ward with 40.6%. It can also be observed that the percent distribution of members of households was above 30% in all the wards.

Among members of households in these wards who were out of school because of various reasons ranging from lack of school fees, pregnancy and/or marriage, lack of interest and any, other the majority were reported in Bundabunda, Chilenje and Roma ward 17 covering about 11%, 9.7 and 9.4% respectively. In this study the percent distribution of members of households who had never been to school was below 10% in all the wards and this included persons who were below schooling age hence they could not be admitted into schools in their respective wards. It was also found that the majority of those who had never been to school were reported in Fibobe and Bundabunda wards.

**Figure 3.2 – Percent (%) Distribution of Education Attendance in wards**

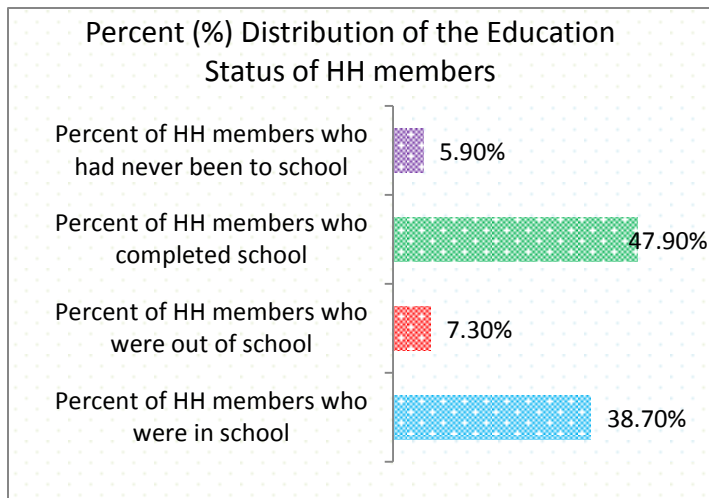


Figure 3.2 shows the education status of the members of households. The majority had completed school making 47.9%, these were followed by those who were still attending school with 38.7% and these included household members who were in still in tertiary education as well.

Members of households who were out of school resulting from many reasons or those which have already been highlighted in this report made 7.3% of the sample population while 5.9% were reported to have never been to school of which the majority of them were below pre-school age in most wards.

**Employment status of the head of households**

**Figure 3.3 - percent (%) Distribution of the Employment status of head of households in the wards**

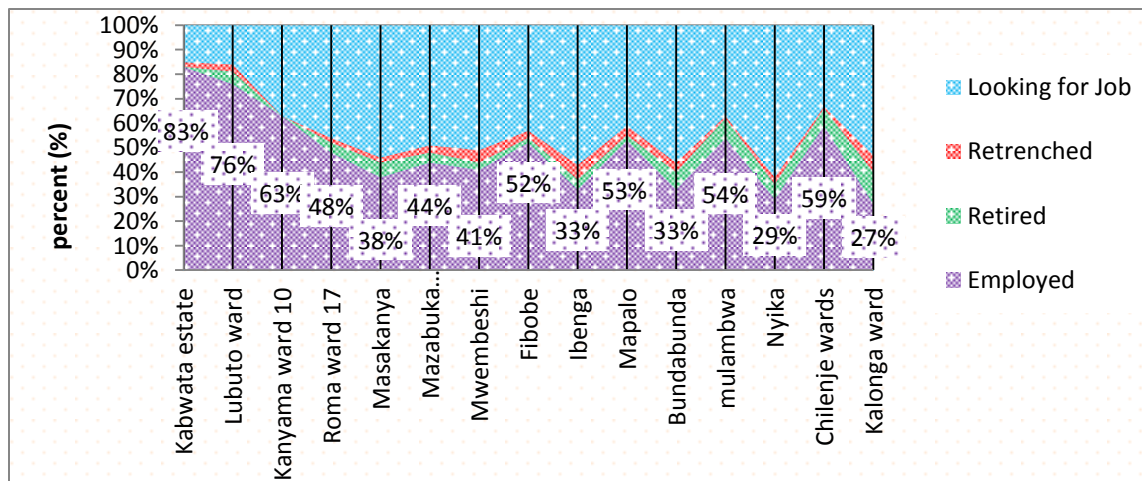


Figure 3.3 above present information on the employment condition of the head of households with regard to them being employed, retired, retrenched or looking for a job. From this figure it can be seen that among the employed head of households the majority were reported in Kabwata estate, Lubuto ward, Kanyama ward 10, Chilenje and Mulambwa wards with 83%, 76%, 63%,

59% and 54% respectively. The majority of these were employed in the private sector as establish under the main profession of the head of households.

Among the head of households who reported that they were looking for jobs, many were involved in agricultural activity as well as business. The figure shows that the majority of these head of households were in Nyika ward with about 62% while the lowest were reported in Kabwata estate ward with about 16% of the head of households.

Head of households who were retired had the highest percent in kalonga ward, Mulambwa, Bundabunda, Masakanya and Lubuto wards. Among the retrenched head of households the majority of them were reported in kalonga, Ibenga and Lubuto wards.

**Figure 3.4 –Percent (%) Distribution of the Employment status of head of households**

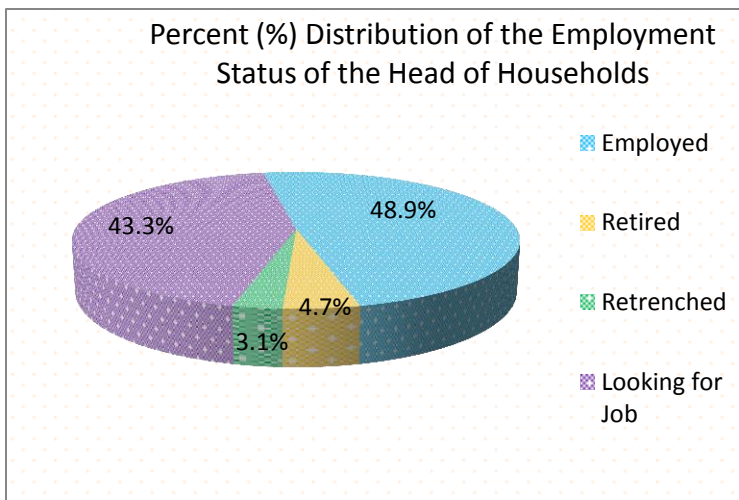


Figure 3.4 on the left side of this page shows the percent distribution of the employment status of the head of households and it can be seen that the majority were employed making 48.9% of the heads of households in the sample.

From the same figure, it can be seen that 43.3% were looking for jobs however the majority of them reported that they were engaged in agricultural activity as well as business. 4.7% of the head of households reported that they were retired while 3.1% retrenched.

In this study, the employed members of households included both those who worked in the private as well as the public sectors.

It was also established that the head of households who were not employed which includes those who were retired, retrenched and looking for jobs were engaged in other economic activity in order to sustain their households. Prominent among the economic activity which these head to households engaged in included business and farming.

## C. ERADICATION OF EXTREME POVERTY AND HUNGER

### Assessment of the Goal to Eradicate Extreme Poverty and Hunger

This section seeks to assess the living conditions within households and to carry out this investigation a number of indicators were used and these include assessment of the number of meals households reported having per day, source of income for the households, source of food for the households, monthly budgetary allocation for food, prevalence of diseases such as malnutrition, prevalence of kwashiorkor and under-weight children below five years of age.

Therefore, this study presents findings of each of these items independently giving comparisons amongst wards in the sample as well as giving findings in general.

**Figure 3.5 - Percent (%) Distribution of the Head of households who reported that their Main source of Income was Employment**

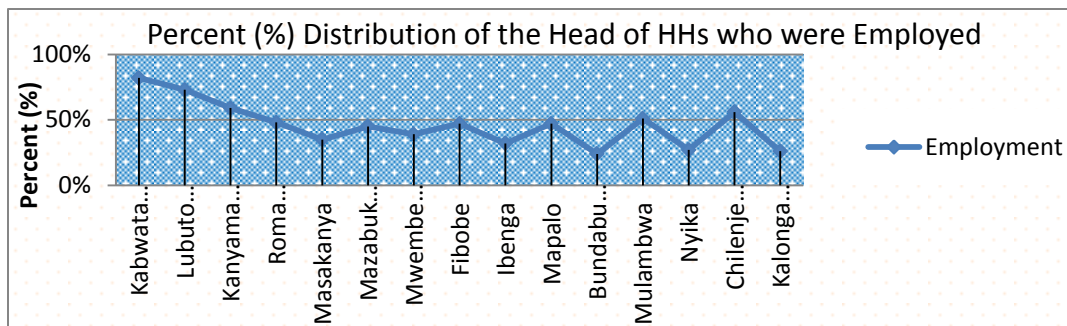


Figure 3.5 on the previous page present findings on the percent distribution of the households that reported having employment as their main source of income and it can be observed that the majority were in Kabwata estate ward with 82% while the Bundabunda ward reported having the minority with 24% and these include both civil servants as well as private sector employees.

**Figure 3.6 - Percent (%) Distribution of Main Source of Income for the Head of Households in terms of Agriculture & Business**

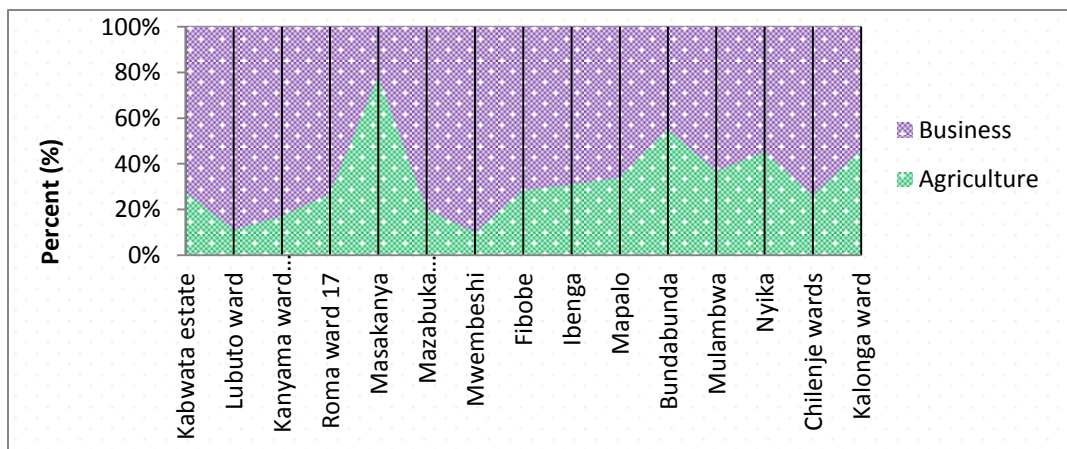


Figure 3.6 on the previous page present findings on the households' sources on income in terms of them engaging in either agriculture or business. From the same presentation it can be observed that among the households that reported having business as their source of income, the majority were in Mwembeshi ward followed by those in Ibenga ward and Mazabuka central ward with 55%, 47% and 44.5% respectively. These were the only wards that reported having households having business as source of income with over 40% of them engaging in it in order to sustain their livelihoods.

From the same figure it can be observed that among the households which reported having their main source of income as agriculture the majority of them were reported in Masakanya, Bundabunda, Kalonga and Nyika wards with 51%, 42%, 34% and 33% respectively. Therefore, since it has already been highlighted that not all head of households were employment, there is need to ensure that households within agro-based regions are considered and given a bigger share of the agricultural inputs in order to enhance productivity and raise the living conditions.

In this regard, households which are not agro-based need to be considered in the area of providing them with economic empowerment in order to raise their living standards.

**Figure 3.7 - Percent (%) Distribution of Main Source of Income for the Head of Households in terms of Employment, Agriculture & Business**

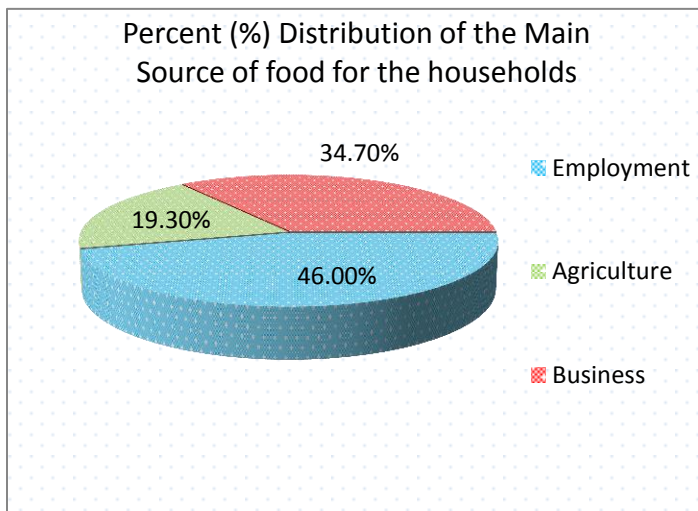


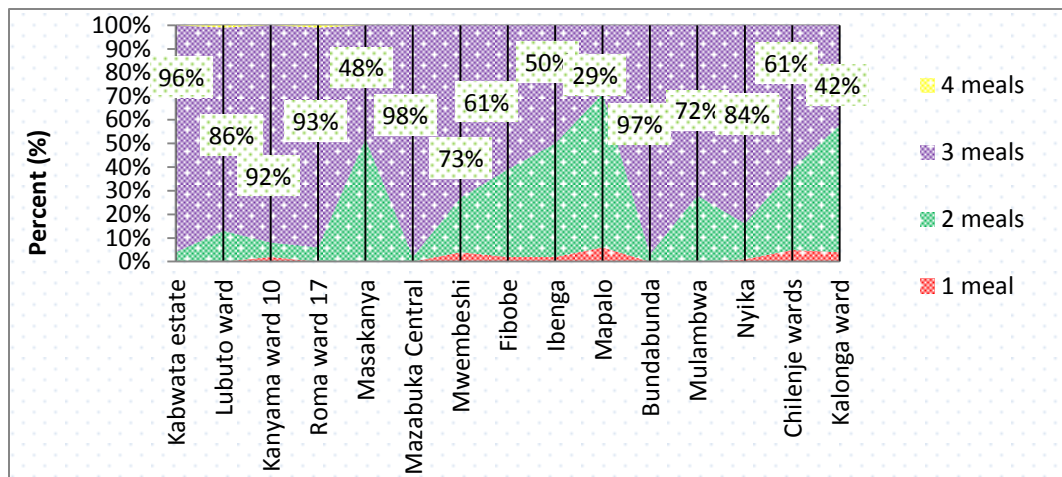
Figure 3.7 on the left shows the percent distribution of the main source of income for the head of households and it can be observed that the majority were employed making 46% of the head of households.

As it has been highlighted in this report the majority of these head of households were employed in the private sector.

This study has brought to light that, from the total number of households that were captured in the sample, 34.7% engaged in business as their main source of income while 19.3% reported being involved in the agricultural sector.

Based on these findings, it is clear that these economic conditions of the households influenced the other variable linked to the eradication on extreme poverty and hunger as will be established below for example the number of meals households reported having per day as well as monthly average allocation for food.

**Figure 3.8 - Percent (%) Distribution of the Number of Meals Households Reported having Per Day**



The figure above shows the percent distribution of the number of meals households reported having per day among the wards that were captured in this sample in terms of having one, two, three or four meals per day.

From figure 3.8 above it can be observed that among the households that reported having three meals per day the majority were in Mazabuka central, Bundabunda, Kabwata estate, Roma ward 17 and Kanyama ward 10 with 98%, 97%, 96%, 93% and 92% respectively.

It can also be observed that among households that reported having two meals per day the majority were in Mapalo, followed by Kalonga, Masakanya and Ibenga wards. It is also clear that only few households reported having one meal per day and that only about 2% in Lubuto and Roma ward 17 reported having four meals per day.

This observed outlook can be justified by the percent distribution in the main sources of incomes for the head of households as shown on page 29 where 46% reported that their main source of income was employment, 19.3% agriculture and 34.7% business.



**Figure 3.9 - Percent (%) Distribution of the Number of Meals Households had Per Day**

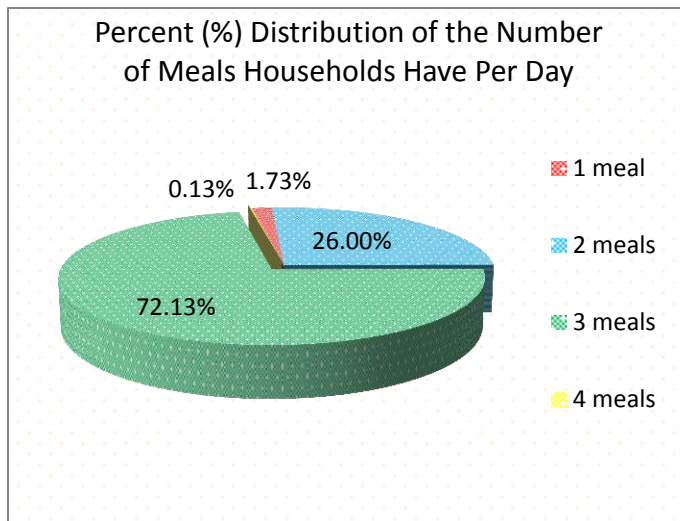
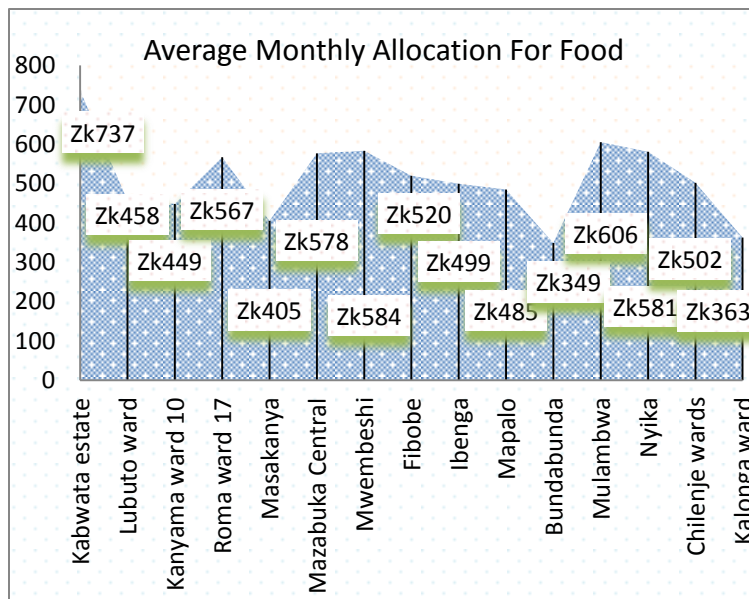


Figure 3.9 gives a summary of the number of meals households reported having per day in the sample and it was found that the majority reported having 3 meals making 72.13% of the households, 26% reported having 2 meals, 1.73% reported having one meal and 0.13% reported having four meals per day.

**Average Monthly Budgetary Allocation for Food by Ward**

This section presents findings on the average budgetary allocation for food by households. Since the main occupation of the head of households varied across wards in that some wards were predominantly agro-based while others had more head of households involved in business as well as those who were employed either as civil servants or in the private sector, this section gives an average of what households allocated as monthly budget for food only.

According to the Living Conditions Monitoring Survey conducted in the year 2006 the following results were obtained on this item: Analysis by residence shows that urban households had a higher average monthly expenditure on food and non-food items (K1, 000,616) than their rural counterparts (K307, 402). This is an indication of high expenditure and income inequalities between rural and urban areas. Households in urban areas spent K377, 974 on food and K623,



301 on non-food items while their rural counterparts spent K200, 570 and K109, 263 on food and non-food respectively (LCMS; 2011, p.96).

**Figure 4.0 - Average Monthly Allocation for Food**

According to this study results, the average monthly allocation for food

was highest in Kabwata estate ward with Zk737 being allocated for food per month, the next was Mulambwa with Zk606. It is clear that these wards had the highest monthly allocation for food and that they had lower average household size with 3.94 and 3.72 respectively as shown under background and demographic information.

Kanyama ward 10 reported allocating Zk449, Roma ward 17 had Zk567, Masakanya had Zk405, Mazabuka central had Zk578, Mwembeshi had Zk584, Fibobe had Zk520, Ibenga had Zk499, Mapalo had Zk485, Bundabunda had Zk349, Mulambwa had Zk606, Nyika had Zk581, Chilenje had Zk502 and Kalonga ward had Zk363 being allocated for food on average per month.

It is therefore clear that the lowest ward in terms budgetary allocation for food was Bundabunda with Zk349 being allocated for food per month on average. Therefore in this study the average monthly allocation for food was found to be about Zk511.9 and \$3.1 per day per household in general terms. Thus in general households were above the poverty datum line.

This average monthly allocation for food was influenced by factors such as the employment status of the head of households per ward, their main sources of income as well as regional characteristics such as whether or not the ward is predominantly agro based as was also found in the Living Conditions Monitoring Survey results.

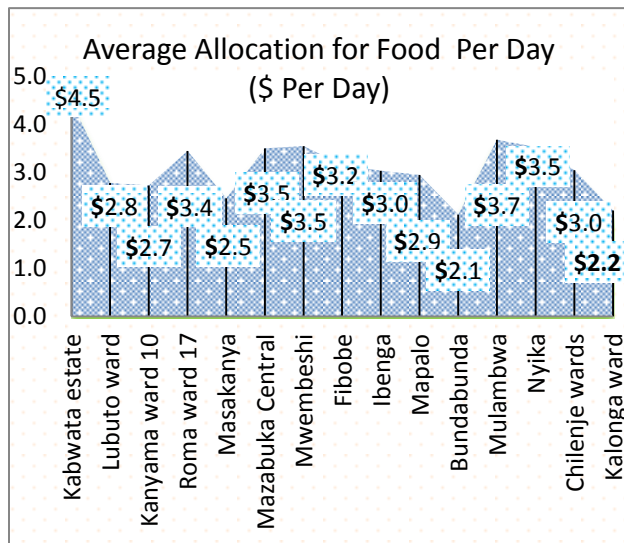
#### **Average \$ allocation for food by households per day**

The figure on the next page shows the average monthly allocation for food by households in terms of \$ per day and it can be seen that the Kabwata estate ward had an average of \$4.5 per day, this was followed by Mulambwa with \$3.7, while Nyika, Mwembeshi and Mazabuka central were at par with \$3.5 being allocated for food on average.

In this study it appears that there is a strong link between the region where the wards are located in terms of being predominantly rural or urban as well as the economic opportunities available such that generally wards that are in urban areas seem to have higher average budgetary allocation for food while those in the rural areas have lower allocation resulting from whether or not the wards are predominantly agro-based.

In this study, it was found that predominantly agro-based wards seem to have lower allocation as compared to those in urban areas where there are more opportunities.

**Figure 4.1- Average \$ daily allocations for food**

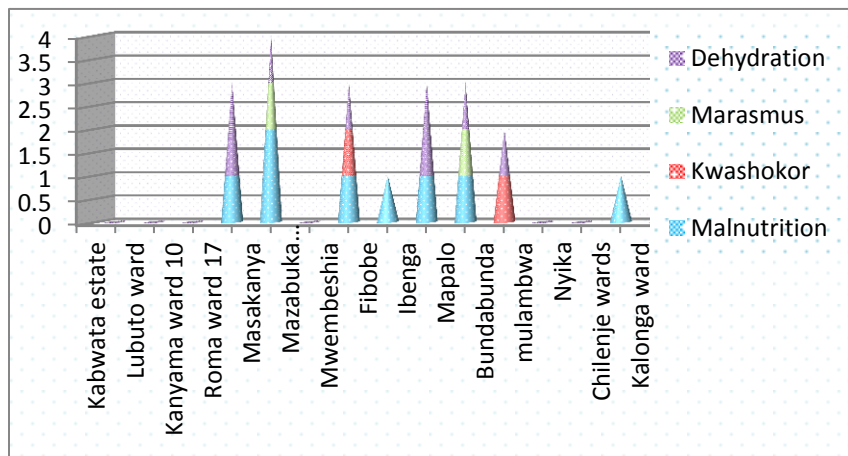


Analysis by residence shows that urban households had a higher average monthly expenditure on food and non-food items (K1, 000,616) than their rural counterparts (K307, 402). This is an indication of high expenditure and income inequalities between rural and urban areas. Households in urban areas spent K377, 974 on food and K623, 301 on non-food items while their rural counterparts spent K200, 570 and K109, 263

on food and non-food respectively (LCMS; 2011, P.96).

**Figure 4.2 - Percent (%) Distribution of the Diseases Reported In Households**

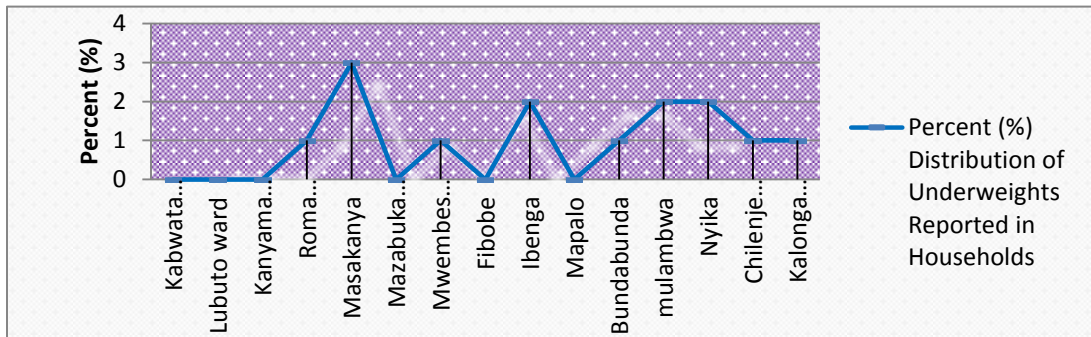
The figure on the next page shows the results on the diseases that were reported in the households at the time of the data collection of this study and it can be seen that there were no diseases reported in Kabwata estate, Lubuto, Kanyama, Mulambwa, Nyika and Kalonga wards in terms with diseases such as malnutrition, kwashiokor, marasmas and dehydration.



In this study, most diseases were reported in Masakanya ward making 4% of the households. Two percent of the households reported having malnutrition, one with marasmas and another with dehydration.

The majority of the diseases that were reported were malnutrition and dehydration as shown in the figure. These diseases were captured at the time of the study and no time frame was assigned hence some wards never had members of households who were sick of any of the highlighted diseases.

**Figure 4.3 - Percent Distribution of Prevalence of Underweight Children below the age of five**



The figure above shows the prevalence of under-weight children below age five at the time of the study. In this regard, households were asked to indicate whether or not they had underweight children in their households and it can be seen that masakanya ward had the 3% of the households with under-weights, Kabwata estate, Lubuto and Kanyama ward 10 reported having none.

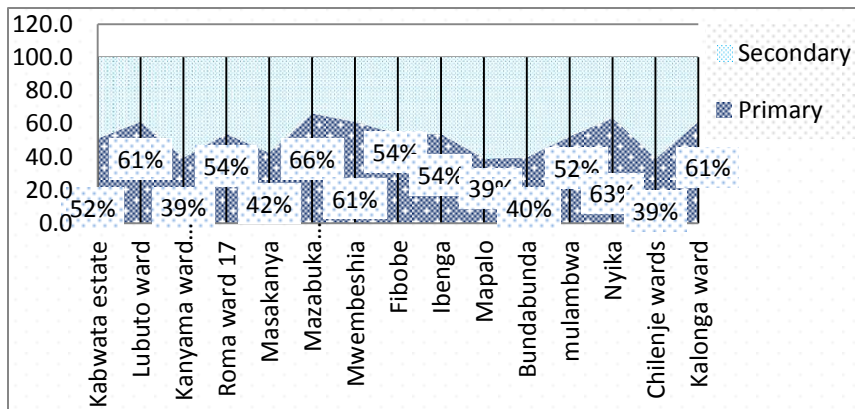
#### **D. ACHIEVE UNIVERSAL PRIMARY EDUCATION**

This section presents the study findings on the achievement of universal primary education within the wards. Universal primary education is one of the millennium development goals to be achieved by the year 2015 therefore this study seeks to give an assessment of what has been done or what is prevailing in these wards that were captured in the sample with regard to the attainment of the above named goal.



The schools shown on the left side are Lukanda Secondary School in Kapiri Mposhi and Tunvwan'anai Basic School in Ibenga ward.

**Figure 4.4 - Percent (%) Distribution of Pupils in terms of Primary and Secondary School**



According to the study findings in figure 4.4 most wards had the majority of the pupils in primary than secondary schools.

Wards with percent distribution above 50% being in primary among those in formal education include: Kabwata estate, Lubuto, Roma ward 17, Mazabuka central, Mwembeshi, Fibobe, Ibenga, Mulambwa, Nyika and Kalonga wards with 52%, 61.3%, 54.2%, 66.5%, 61.4%, 54%, 54%, 52.8%, 63.6% and 61.8% respectively. Therefore the majority of those in primary school were in Mazabuka central with 66.5% of the pupils and the lowest was Mapalo ward with 39.4% of the pupils being in primary school.

**Figure 4.5 - Percent (%) Distribution of Pupils Status in terms of Primary and Secondary**

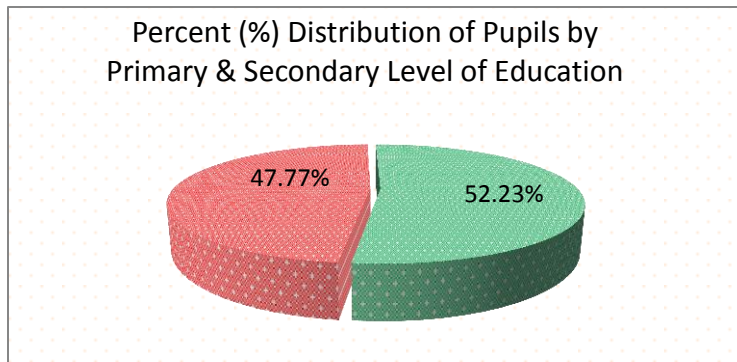


Figure 4.5 shows that the majority of the pupils were in primary school making 52.2% of the pupils captured in the sample while those in secondary school made up 47.8% of the sample on pupils.

**Figure 4.6 - Percent (%) Distribution of the Sex of Pupils in Households Per ward**

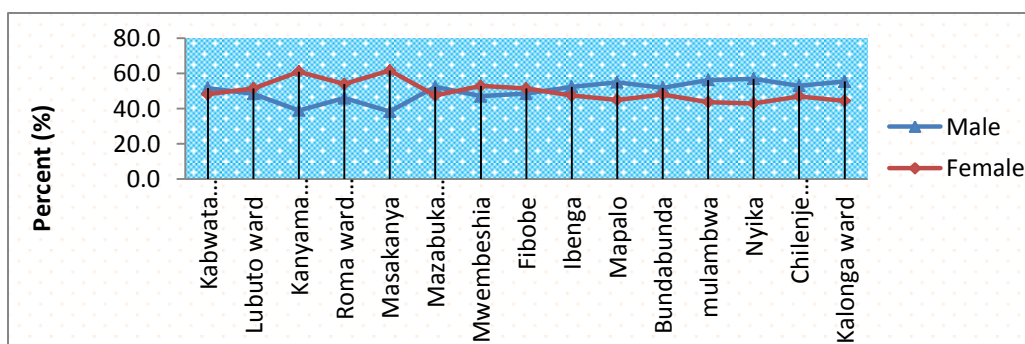


Figure 4.6 on

the previous page present findings on the sex distribution of the pupils in school and it can be seen that there were more females in Lubuto, Kanyama ward 10, Roma ward 17, Masakanya, Mwembeshi and Fibobe wards while the other wards had more male pupils than females.

This could be as a result of the sex ratios in that some wards had more males than females while others had more females than males as shown under geographic and demographic information.

To evaluate this study's findings: Enrolment in Basic Schools, total pupil enrolments in basic schools, i.e. grades 1 to 9 was 3,510,288. Of these, 49.70 percent were females, while 50.30 percent were males, indicating a near equality (Gender Statistics Report – Zambia; 2010, P.4).



To provide an evaluation on this item a study was carried out and it showed that at national level, the dropout rate for females was at 2.71 percent compared to 1.88 percent for their male counterparts.

At Provincial level, the highest dropout rates were observed in North Western Province with 2.9% for males and 4.54% for females. Lusaka Province had the lowest dropout rates with 1.12% for males and 1.28% for females.

The significant reasons contributing to female individuals leaving school include, 'pregnancy' with about 6% and 'got married' with 4%. Among other notable reasons given for leaving school were, 'needed to help out at home' 1.9% and 'Unsafe to travel to school' 0.6% (Gender Statistics Report; 2010, P.7).

## E. PROMOTE GENDER EQUALITY

This section seeks to give an assessment of the attainments towards what has been done to promote gender equality. Gender equality is the measurable equal representation of women and men. Gender equality does not imply that women and men are the same, but that they have equal value and should be accorded equal treatment.



The United Nations regards gender equality as a human right. It points out that empowering women is also an indispensable tool for advancing development and reducing poverty. Equal pay for equal work is one of the areas where gender equality is rarely seen.

All too often women are paid less than men for doing the same work. This is one of the reasons that the majority of the world's poor are women: around 70% of the people who live in extreme poverty, on less than US\$1 a day, are girls and women.

The importance of gender equality is highlighted by its inclusion as one of the 8 Millennium Development Goals that serve as a framework for halving poverty and improving lives. Despite this, discrimination against women and girls (such as gender-based violence, economic discrimination, reproductive health inequities and harmful traditional practices) remains the most pervasive and persistent form of inequality (International Planned Parenthood Federation; 2013).

Differences in housing conditions between male and female headed households in most wards resulting from gender inequality especially socio-economic discrimination of women.

**Figure 4.9 - Percent (%) Distribution of the Education of the women who were reported working**

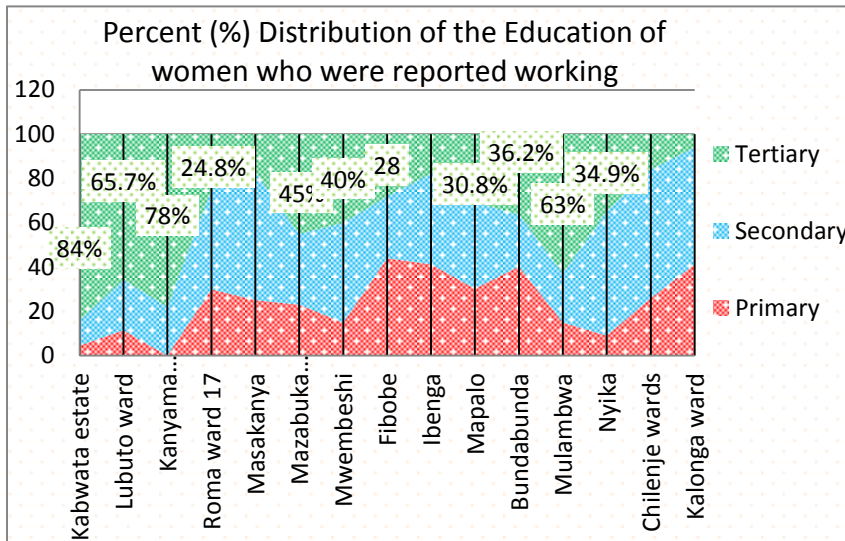


Figure 4.9 shows the percent distribution of the highest level of education of the head of households who were reported working.

From the same figure, it can be seen that the majority with tertiary level of education were in Kabwata

estate, Kanyama ward 10, Mazabuka central, Mwembeshi and Mulambwa wards. The majority with primary level of education were in kalonga, Bundabunda, Fibobe and Roma ward 17 as shown. Secondary level of education fluctuated among the wards with the least being reported in Kabwata estate, Kanyama ward 10 and Mulambwa wards because the majority reported having tertiary level of education.

Since many research findings have suggested that there is a direct relationship between the highest level of education and income, the findings of this study on the average incomes of women who were reported working is likely to be influenced by the highest level of education of these women. For example, wards with women who reported having higher level of education such as tertiary are expected to have higher level of average monthly incomes.

**Figure 5.0 - Percent (%) Distribution of the highest level of Education women**

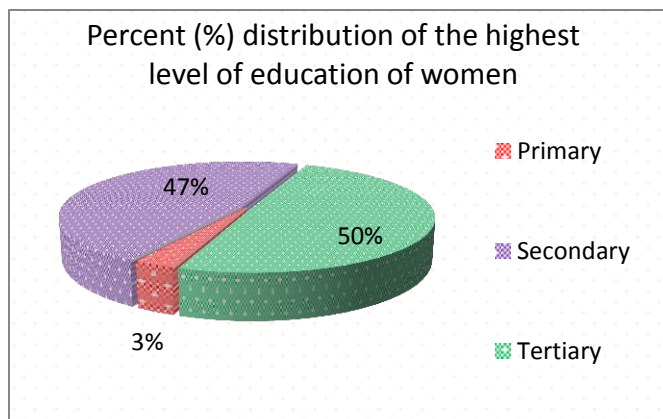


Figure 5.0 shows the percent distribution of the highest level of education of the women who were reported working and it can be seen that the majority reported having tertiary level of education making 39.12%, 37.54% reported having secondary level of education and 2.47% primary.



Therefore, there is need to empower women as well as making policies that enable them acquire higher education in order for them to be more effective and contribute to national development.

**Figure 5.1 – Average Income of females who were reported working**

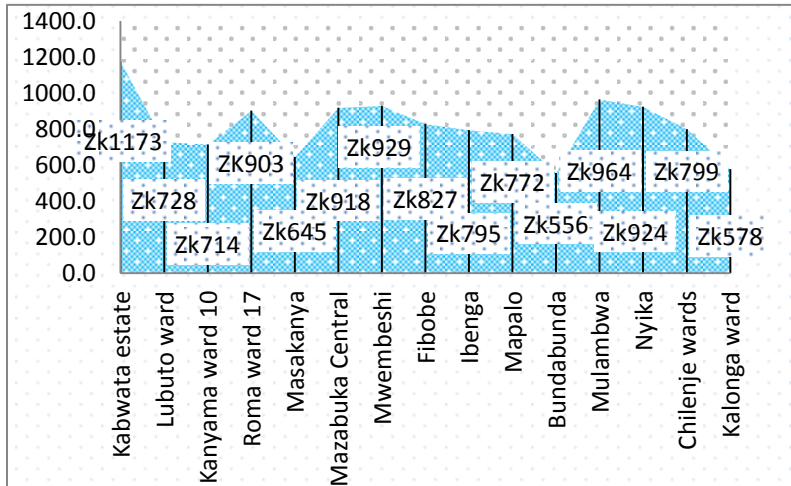


Figure 5.1 shows the average amount of incomes for women who were reported working and it can be seen that Kabwata estate ward had the making about Zk1200 and was followed by Mulambwa ward.

Therefore, there is need to ensure that women are given better

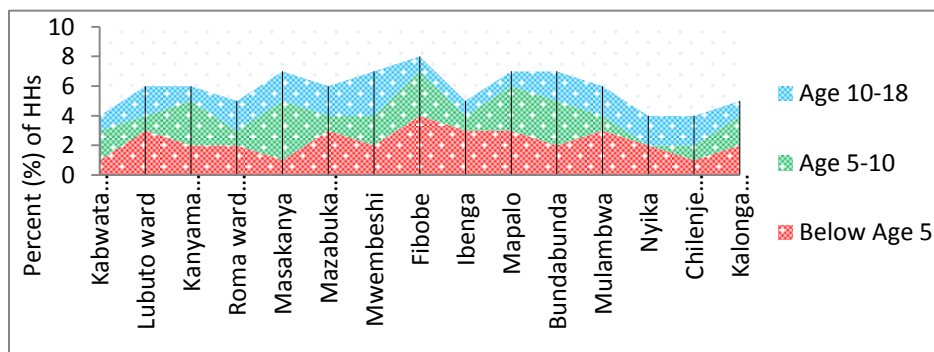
working conditions & wages, and provide them with “on the job training” programs in order to increase their contribution.

**F. REDUCTION OF CHILD MORTALITY**

This section presents findings on the millennium development goal to reduce child mortality. It seeks to assess the mortality conditions, immunization of children and deaths during child birth.

**Figure 5.2 - Percent (%) Distribution of the Mortality Condition in Households by Age**

Figure 5. below shows the mortality conditions in the households with regard to ages below five years or child mortality, age group 5-10 and within age group 10-18 years within one month prior to data collection. In Kabwata ward for example 4 households reported having deaths a month prior to the data collection of this study.



Time reference for these deaths was one month prior to the data collection of this study.

Fibobe ward reported having more of these deaths with 8% of the households reporting these deaths, and least were reported in Kabwata, Nyika and Chilenje wards. Child mortality (below 5 years) was also low in Nyika and Chilenje wards. Child mortality was high in Fibobe, Ibenga, Mapalo, Mazabuka and Lubuto wards.

**Figure 5.3 - Percent (%) Distribution of the Households which reported having a member who died during child birth (Maternal Mortality)**

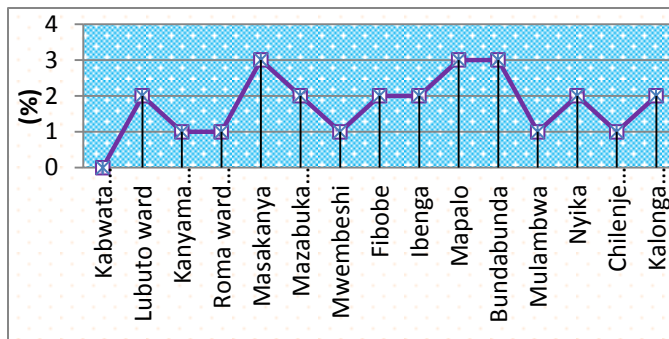
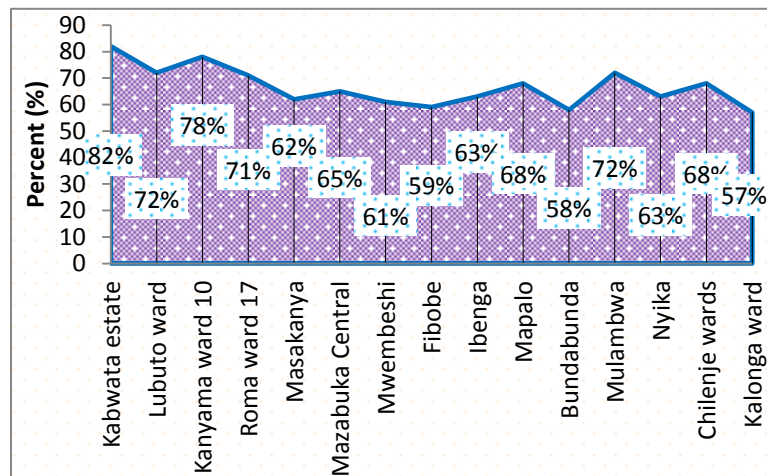


Figure 5.3 on the left side shows percent distribution of the households which reported having a member who died during child birth during the past six months prior to data collection in this study.

**Figure 5.4 - Percent Distribution of Households with Children that were immunized**



From the figure on the left side i.e figure 5.4 which shows the percent distribution of households with children who were immunized prior to data collection and it is clearly marked that the majority were from Kabwata estate, Kanyama, Mapalo and Mulambwa wards.

It can also be seen that almost all the wards had over 60% with households that reported that their children were immunized.

## **G. IMPROVING MATERNAL HEALTH**

At the Millennium Summit in 2000, States resolved to reduce maternal mortality by three quarters by the year 2015. This commitment is encapsulated in the Millennium Development Goals, which derive from the Millennium Summit commitments which have come to play a

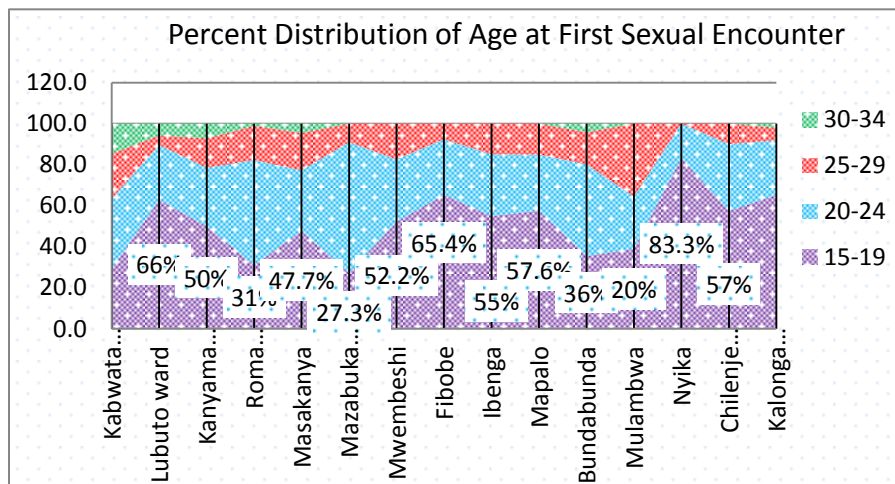
defining role in international development efforts. Therefore, reduction of maternal mortality is an outcome chosen to assess progress in the area of improving maternal health.

Mortality is the permanent disappearance of all evidence of life at any time after birth has taken place while Maternal Mortality is the death of the woman during pregnancy, during delivery or within 42 days after delivery (United Nations, 1953:6).

The major direct causes of maternal morbidity and mortality include hemorrhage during or after birth, infections during delivery, high blood pressure, unsafe abortion which is practiced by many youth to get rid of unwanted pregnancies, and obstructed labour.

Therefore, there is need to develop a basic health care system which can be able to address all these problems.

**Figure 5.5 - Percent (%) Distribution of the Age at First Sexual Encounter within households**



The figure 5.4 on the previous page displays information on the percent distribution of the age at first sexual encounter of women within households

From the same figure it can be seen that the majority reported having their sexual encounters in the age group 15-19 and the majority being reported in Nyika, Lubuto, Fibobe and Kalonga wards making 83.3%, 66%, 65.4% and 64%. It can be observed that the age at first sexual encounter reduced as females advance in their age as illustrated above.

Therefore, there is need to sensitize females on the dangers of early pregnancy and put up obstetric measures to take care of young mothers when situations arise since the majority tend to have their first sexual encounters in the age group 15-19 years in almost all the wards.

**Figure 5.6 - Percent (%) Distribution of the Age at First Pregnancy**

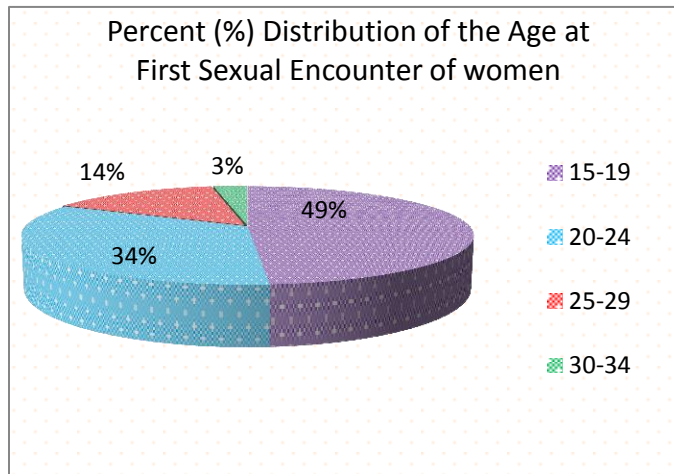


Figure 5.6 shows the percent distribution of the age at first sexual encounters of women and it can be seen that the majority had their first sexual encounters in the age group 15-19 making 48.7%. Those in the age group 20-24 were second and made up 33.8% of the sample, age group 25-29 made up 14.6% and age group 30-34 made up 2.9%.

This means women had their age at first sexual encounters reduced as their age progressed. Justification for this could be as a result of most females who get into marriages because the mean age at first marriage is very low in Zambia.

The median age at first marriage for males in 2007 was 23.5 years which was significantly higher than that of females at 18.4 years. The table also shows that the median age at first marriage among females aged 15-49 years remained constant at about 18 years while that of males was above 23 years in all the survey years.

Comparisons by residence also indicate that the median age at first marriage for both males and females in urban areas is higher than that of their counterparts in rural areas (Gender Statistics Report; 2010, p.2).

In many parts of the world the right to health includes entitlements to a range of health interventions which have an important role to play in reducing maternal mortality.

These include: Emergency obstetric care, a skilled birth attendant, education and information on sexual and reproductive health, safe abortion services where not against the law, other sexual and reproductive health care services such as family planning services and provision of primary health care services.

Therefore, every primary health care system is required to provide these services so as to reduce maternal mortality thereby enhancing maternal health.

**Figure 5.7 - Percent (%) Distribution of the Age at First Pregnancy of the women**

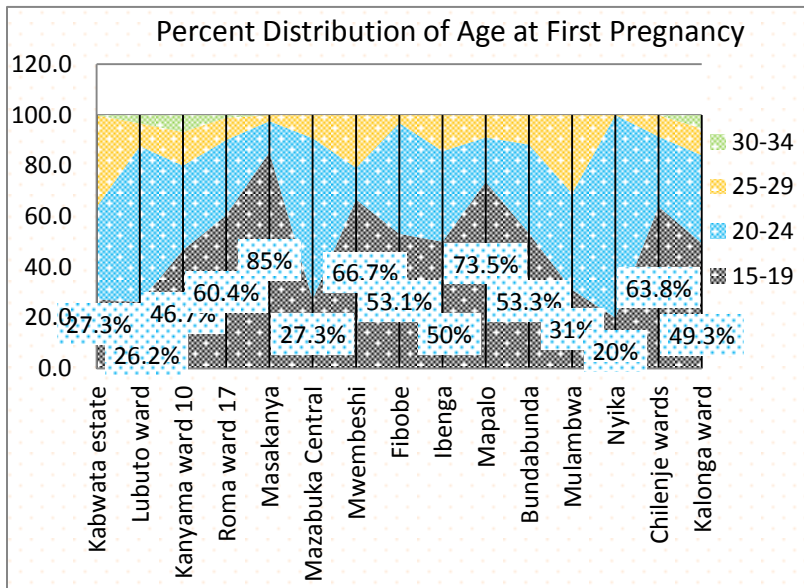


Figure 5.7 shows the percent distribution of the age at first pregnancy of the women and it can be seen the majority reported having their first pregnancy within the age group 15-19 and they were pre-dominated in Masakanya, Mapalo, and Mwembeshi wards making 85%, 73.5% and 66.7% respectively.

It can be observed that the percent of the age of women at first pregnancy was reducing as they advanced through their reproductive span or child bearing period.

**Figure 5.8 - Percent (%) Distribution of the age at first pregnancy**

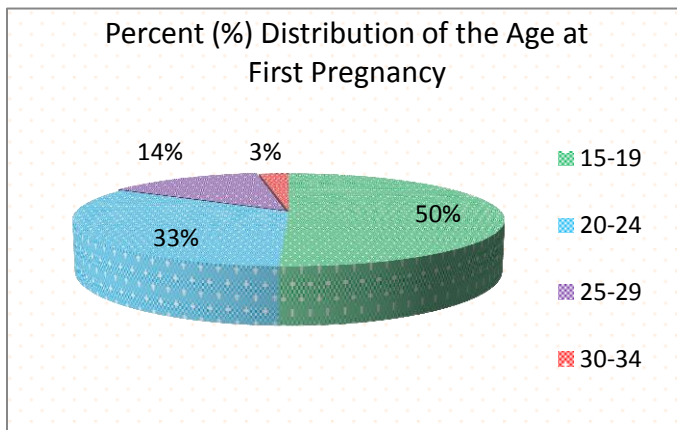
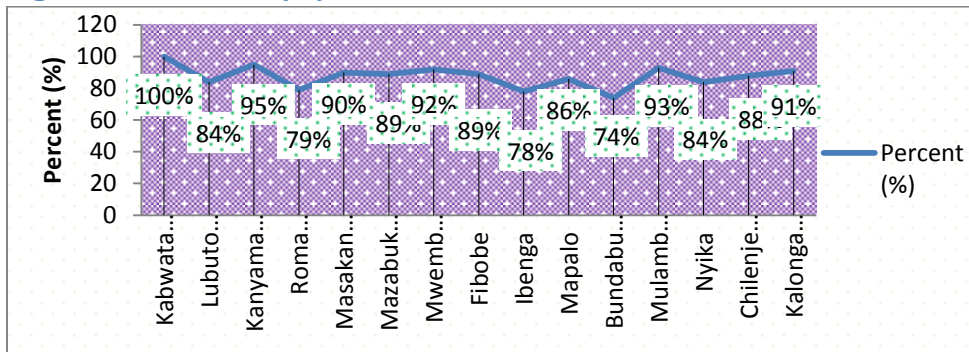


Figure 5.8 shows the percent distribution of the age at first pregnancy and it can be seen that the majority were in the age group 15-19 making 50.59% of the women, these were followed by the those in the age group 20-24 making 32.95%, age group 25-29 made up 13.83% and age group 30-34 made up 2.62%.

Therefore, first age at pregnancy tend to reduce as women advance within the reproductive age group which is taken as age group 15-49 hence the need to put more obstetric measures in place so that young women can obtain help in case of emergency complications since they are the majority who reported having the highest percent of age at first pregnancy.

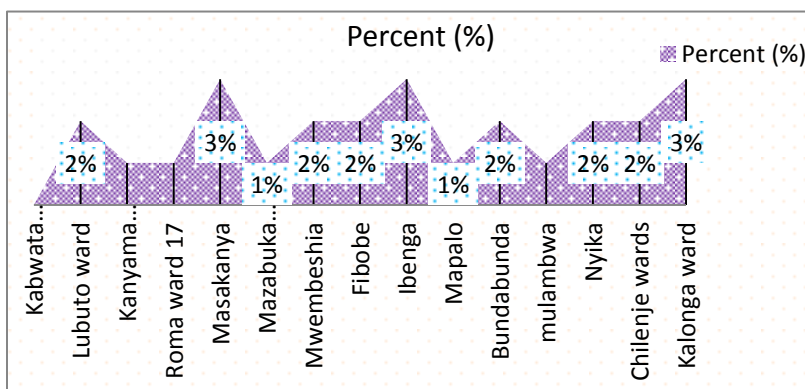
**Figure 5.9 - Percent (%) Distribution of women who received antenatal care**



From the figure above it can be seen that the majority were in Kabwata estate where all the women with children reported having received antenatal care, in Kanyama ward 10 95% reported having received, Mulambwa ward recorded 93% of all pregnant women while Bundabunda reported having 74% of women who were pregnant who received antenatal care and was the lowest. Therefore, there is need to increase sensitization campaigns in order for women to increase their uptake of antenatal care services thereby enhancing maternal health.

To evaluate this item, high percentage of expectant mothers, (93.4 percent in 2001-2 and 93.7 percent in 2007) received antenatal care from a skilled provider. Most of the services were provided by the nurse or midwife (Gender Statistics Report – Zambia; 2010, p.17).

**Figure 6.0 - Percent (%) Distribution of Hholds with members who passed away during Child Birth**



The figure on the left side page shows the percent distribution of households that reported having a member who passed away during child birth within the reference period of one month prior to data collection for this study.

It can be seen that the majority were in Masakanya, Ibenga and Kalonga wards with 3% each while Kabwata estate had none. Kanyama ward 10, Roma ward 17, Mazabuka, Mapalo and Mulambwa wards reported having 1% each. Lubuto, Nyika Chilenje Mwembeshi, Fibobe and Bundabunda reported having 2% each.

## H. COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES

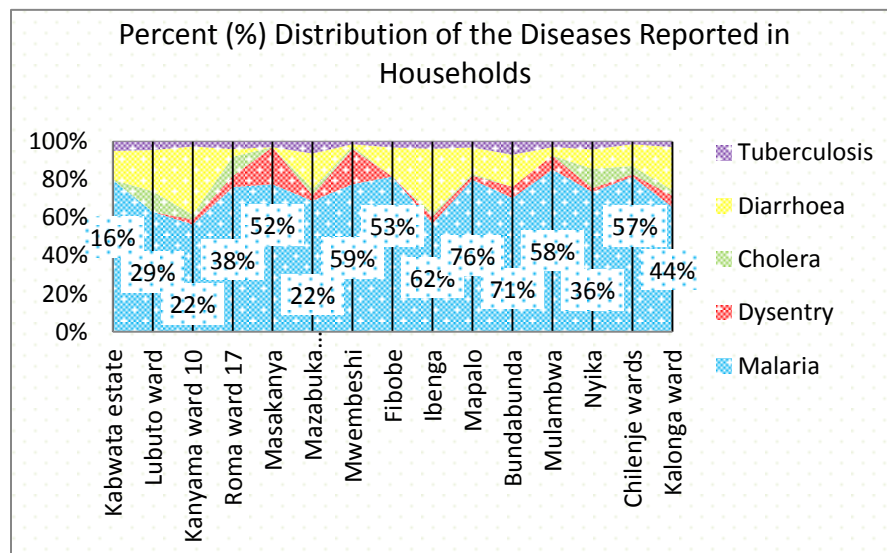
This section seeks to assess the diseases that were encountered in the households during the one month reference period in terms of percent distribution of prevalence of tuberculosis, diarrhea, cholera, dysentery and malaria within households that experienced diseases as well as making comparisons within wards.



It also establishes the percent distribution of cases that were reported to health facilities as well as preventive measures that were put in place to prevent the re-occurrences of diseases in households such as boiling water before consumption, better hygiene, spraying mosquitoes and sleeping under treated mosquito nets.

This section also seek to establish the major HIV preventive measure used by households in terms of correct and consistent use of condoms, regular voluntary and counseling, faithfulness to the other partner and abstinence.

**Figure 6.1 - Diseases that were reported in Households**



The figure on the left gives information on the diseases that were reported in households at the time of data collection as well as within the time reference period of one three prior to the study.

From figure 6.1 above, among the households that experienced diseases, the majority reported that they experienced malaria in all the wards. These were followed by those who experienced

diarrhea, dysentery, tuberculosis and cholera was the lowest because it is said to exist in only some regions of the country because of geographic and natural conditions prevailing.

It can be observed that of all the cases that were reported malaria was predominant in all the wards. Therefore, malaria still stand as a threat in most wards and was the most frequently reported disease in the one month reference period prior to the data collection for this study.

**Figure 6.2 – Summary of the Percent (%) Distribution of Diseases that were reported in HHs**

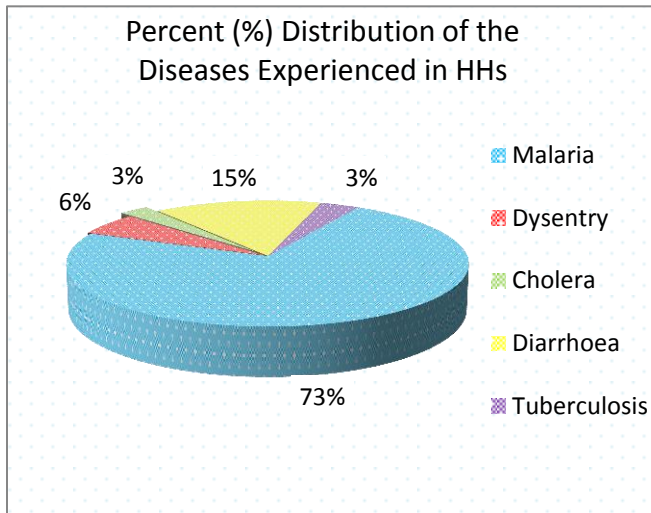
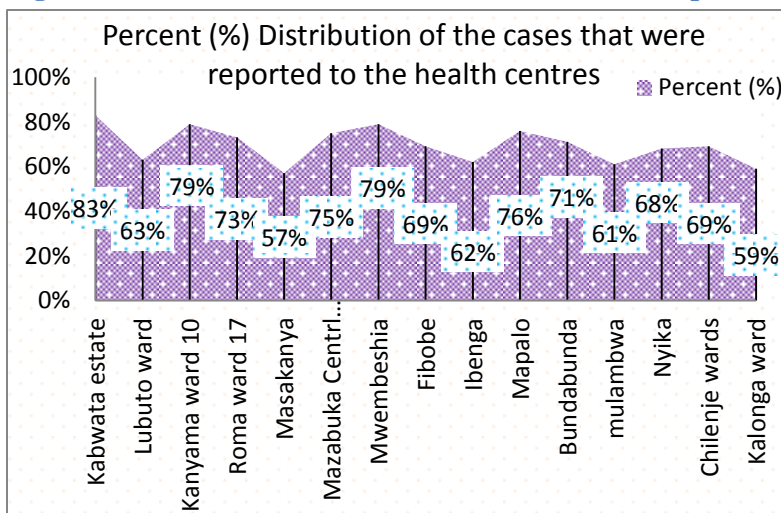


Figure 6.2 shows the percent distribution of diseases that were reported in households. It can be seen that of all the cases malaria was the most prevalent disease making 72% of all reported diseases in the households, this was followed by diarrhea which made up 15.09%, tuberculosis made up 3.56% dysentery made up 5.77% and cholera made up 2.73% of all the reported cases.

**Figure 6.3 - Percent Distribution of Households that reported cases to Health Centres**



The figure on the left shows the percent distribution of the illnesses that were reported to the health centres. It is clear that Kabwata estate had the highest percentage of the cases reported making 83% of the households which reported cases to health centres and the lowest were reported in kalonga wards with 59%.

Therefore there is need to sensitize households on the importance of reporting diseases to health centres so as to reduce loss of lives.



**Figure 6.4 - Prevention of Re-occurrence of Diseases by Households**

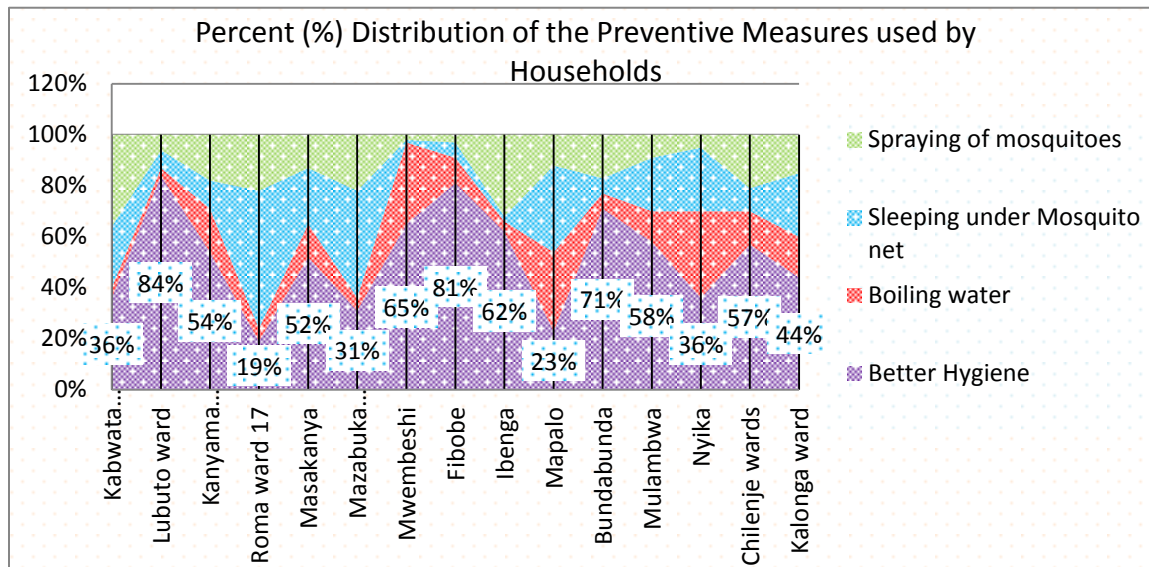


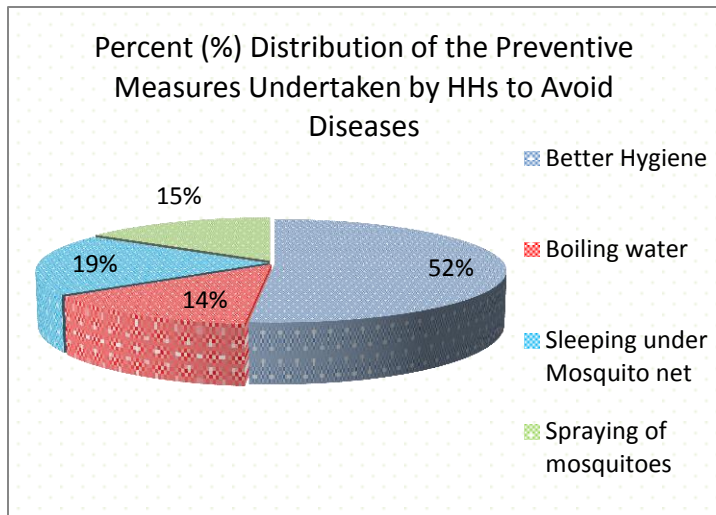
Figure 6.4 above shows the major preventive measures that were taken by households in order to prevent re-occurrence of diseases in the households among the options that were provided which included spraying of mosquitoes, sleeping under a mosquito net, boiling drinking water and better hygiene considering the types of diseases that were reported.

It can therefore be observed that the majority of the households in the ward reported the use of better hygiene and that boiling water especially for drinking purposes was the lowest in most wards.

The use of sprays against mosquitoes was fairly reported in all wards except in Mwembeshi, Fibobe, Nyika and Lubuto wards. Sleeping under mosquito net was very low in Ibenga, Fibobe Mwembeshi and Lubuto wards.

It is assumed here that the type of preventive measures taken by households were directed towards responding to diseases that were encountered by the households for example diseases such as diarrhea, dysentery and cholera need better hygiene, malaria can be reduced through spraying and sleeping under mosquito nets.

**Figure 6.5 – Percent (%) Distribution of Preventive Measures taken to Prevent Re-occurrence of Diseases by Households**



From figure 6.5 it can be seen that the majority of the households reported better hygiene as a preventive measure against the diseases that were encountered making 51.5%, 19.3% reported they were sleeping under mosquito nets & 15.5% indicated that they were sprayed their households against mosquitoes.

reported that they were sleeping under mosquito net, 15.5% of the households indicated that they were spraying their households against mosquitoes and 13.7% indicated that they were boiling their water especially drinking water to prevent diseases such as diarrhea.

**Figure 6.6 - HIV/AIDS Preventive measures Undertaken by Households**

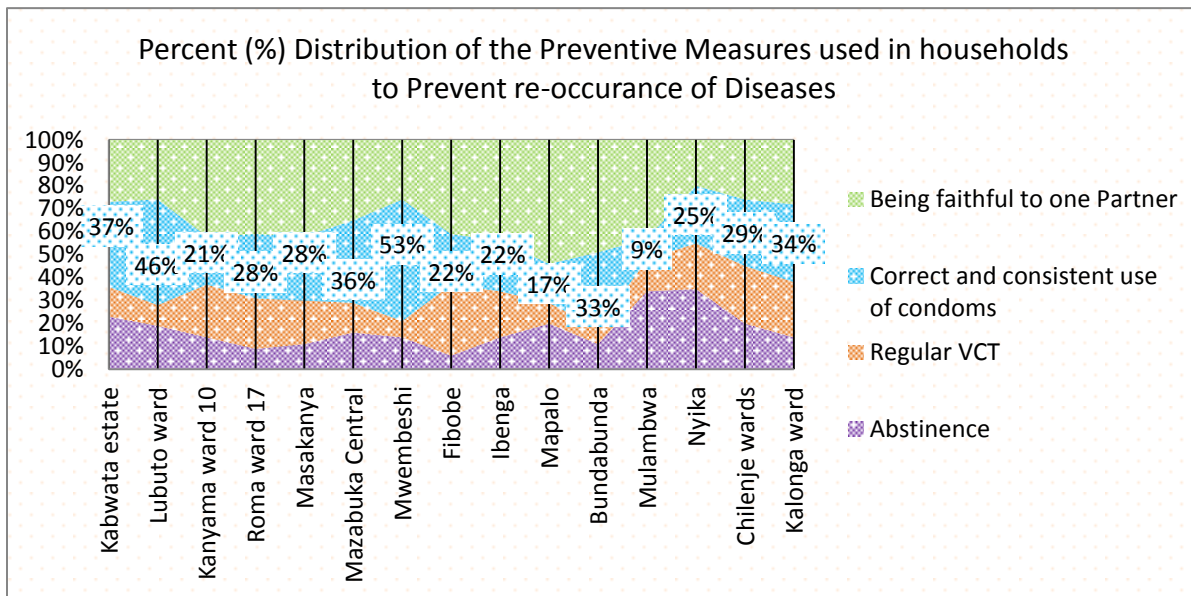


Figure 6.6 on the previous page shows the percent distribution of the of the HIV preventive measures that were used by households in terms of being faithful to one partner, correct and consistency use of condoms, regular voluntary counseling and testing and abstinence.

From the same figure it can be observed that the majority of the households were being faithful to their partners in almost all the wards, correct and consistency use of condoms as a preventive measure fluctuated among wards and the majority of the households that reported using this were in Mwembeshi ward making 53% of the households, Lubuto ward made up 46%, Kabwata estate ward made up 37% and Mazabuka made up 36% of the households.

It can be observed that Mulambwa ward reported having the lowest percent making 9% of the households because the majority of the households reported being faithful to their partners as well as abstaining.

Among the households that reported using abstinence the majority were in Nyika and Mulambwa wards and when it comes to regular utilization of voluntary counseling and testing the percent distribution was fairly distributed in wards except in Bundabunda, Mapalo, Mwembeshi and Lubuto wards.

Therefore, there is need to sensitize households on the importance of excessive utilization of voluntary counseling and testing as well as correct and consistency use of condoms so as fight the further spread of HIV/AIDS.

**Figure 6.7 – Percent (%) Distribution of the HIV preventive measures utilized by households**

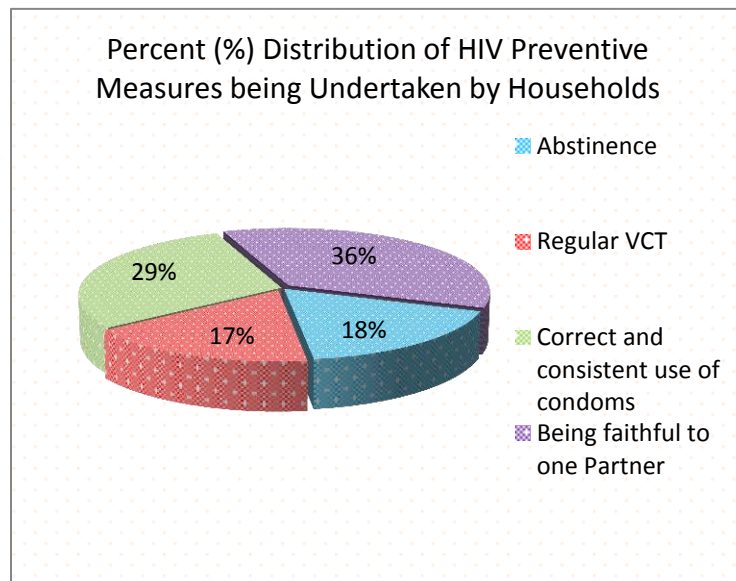


Figure 6.7 gives information on the percent distribution of the HIV preventive measures being utilized by households and it can be seen that the majority reported being faithful to one partner making 36% of the households in the sample, 29% reported correct and consistency use of condoms as a preventive measure which they were using, 18% of the households in the sample reported

that they were abstaining and 17% reported using regular voluntary counseling and testing as a preventive measure.

## I. ENVIRONMENTAL SUSTAINABILITY

This section presents findings on the environmental sustainability with specific focus on the main sources of water for the households, whether or not households treat their water before utilization as well as the systems of water treatment they use. It also provides information on the sources of energy for the households and method of garbage collection.



Environmental sustainability is the rates of renewable resource harvested, pollution creation, and non-renewable resource depletion that can be continued indefinitely. If this process cannot be continued indefinitely then there is no sustainability (Herman Daly; 1990).

Poor land management systems: soil erosion and poor garbage disposal methods in almost all the wards. The pictures above depict soil erosion and garbage disposal methods in most wards. These conditions were found in many wards and generally speaking there is need to put measures in place in order to correct the prevailing environmental conditions.

Development cannot be sustained in a deteriorating environment, and the environment cannot be protected when economic growth does not take into account the cost of environmental destruction.

The high poverty levels, limited access to basic rights such as education and health, and continued degradation of the forests mean that sustainable development is under threat in Zambia despite high economic growth.

**Figure 6.8 - Percent (%) Distribution of the Sources of water for the Households**

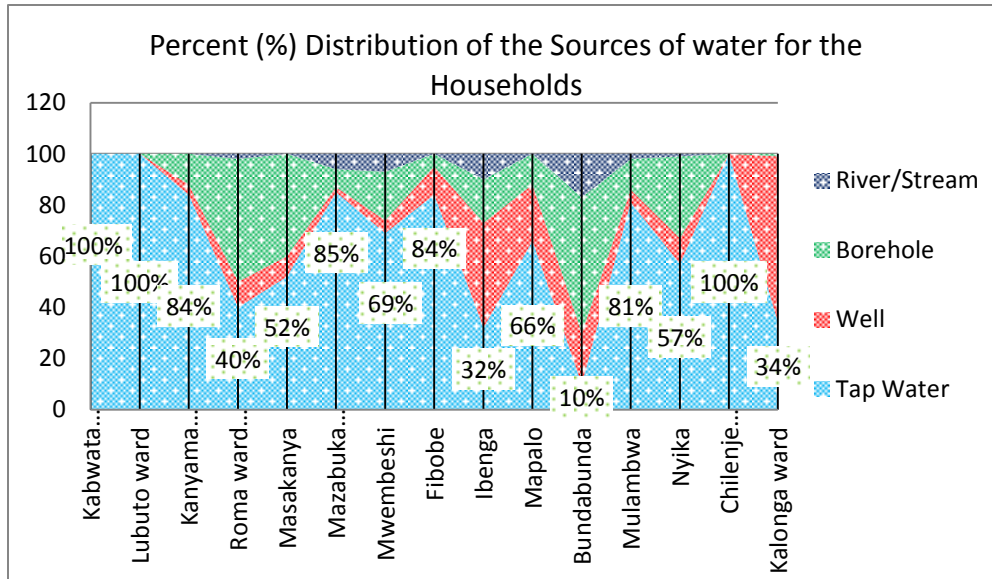


Figure 6.8 above shows the percent distribution of the sources of water for the households and it can be seen that the majority reported having tap water. It was only in Kabwata estate, Lubuto and Chilenje wards that all the households reported having taps as their main source of water. Bundabunda ward reported having the majority of the households with boreholes followed by Roma ward 17, Masakanya and Nyika wards. Kalonga ward reported having the majority of the households having a well as main source of water and was followed by Ibenga ward. It is also clear that few households reported having a river or stream as main source of water and of these the biggest proportion was reported in Bundabunda ward.

From figure 6.8 it can be observed that the wards which were predominantly rural had lower proportions of households which reported having tap as main source of water. Households that made up 3.1% of the households in the sample which reported having river/stream as source of water were from Bundabunda, Ibenga, Mwembeshi and Mazabuka central wards.

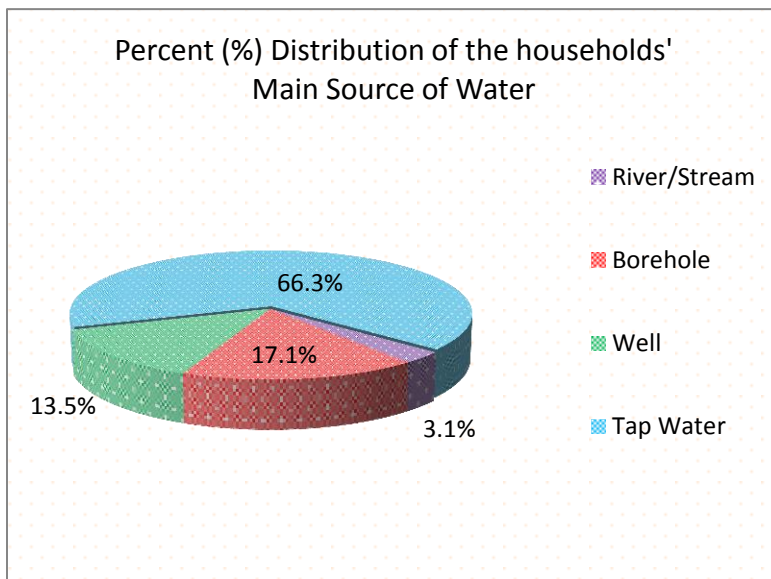
Water purification is the "act of cleaning by getting rid of impurities." For water treatment, this term refers to the process of removing specified contaminants from a water source. All effective water treatment methods will provide some amount of purification, however, only some methods will disinfect the water.

Water Disinfection is basically the "Killing or removal of microorganisms outside the body by direct exposure to chemical or physical agents or processes." For water treatment, this term

refers specifically to a purification process that kills or removes biological contaminants (cysts, bacteria, viruses, protozoans, etc.) from a water source.

Water that has been disinfected (by UV treatment, boiling, chlorination, micro-filtration, ozone, etc.) may still be polluted with other contaminants that are not affected by the disinfection treatment. In some cases, additional contaminants may actually be added to the water by the disinfection process. Boiling water too long will concentrate inorganic contaminants.

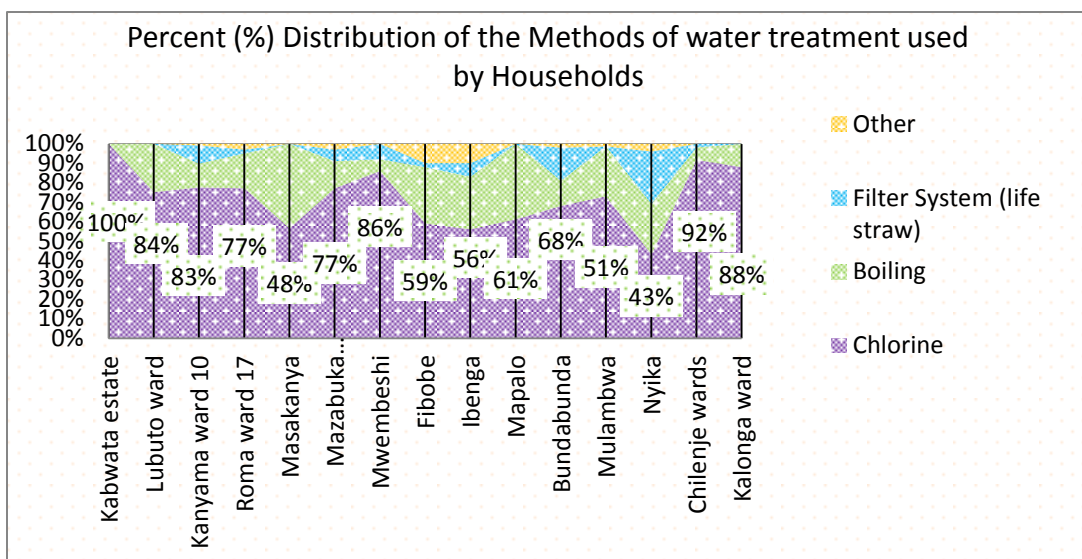
**Figure 6.9 – Percent (%) Distribution of the Households' Main Source of water**



From figure 6.9 it can be seen that the majority of the households in the sample reported that their main source of water were taps making 66.3% of the households in the sample, 17.1% reported having boreholes, 13.5% reported that they had some wells and 3.1% indicated that their main source of water was river/stream.

The figure on the next page shows the water treatment methods used by the households in this study and it can be seen that the majority of the households reported using chlorine in all the wards that were captured in the sample.

**Figure 7.0 - Water treatment systems by households**



All the households in Kabwata estate ward reported that they used chlorine and was followed by households in Chilenje which made up 92% of the households in that ward. It can also be observed that boiling was the second most frequently used method of water treatment. The use of filter systems was fairly distributed in wards although the highest proportion was reported in Nyika ward.

**Figure 7.1 – Percent (%) Distribution of Water treatment systems by households**

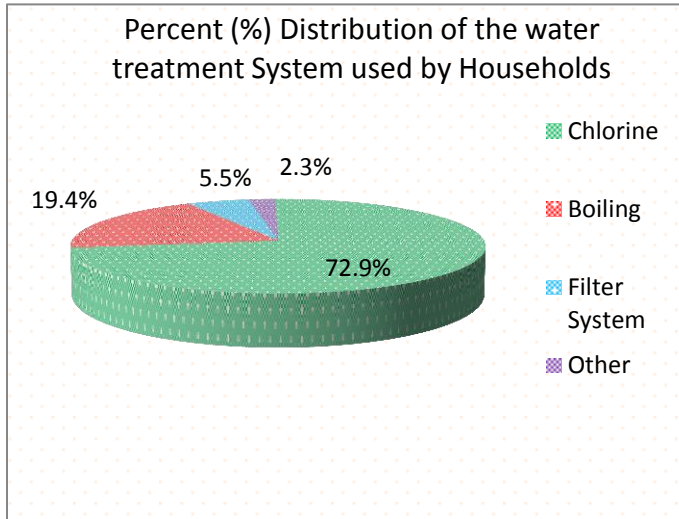


Figure 7.1 shows the percent distribution of the water treatment that were used by households and it can be seen that the majority reported using chlorine making 72.7%, 19.4% reported that they boiled their water, 5.5% reported using filter systems and 2.3% reported that they were using other methods to treat their water.

Based on these findings there is need to make chlorine more readily available to households so that they purify their water in order to avoid re-occurrence of diseases in their wards. This strategy is in existence and has been implemented by many health facilities in the country but there is need to revamp it and make it more effective in addressing its' goals.

**Figure 7.2 – Percent (%) Distribution of the Source of Energy used by Households**

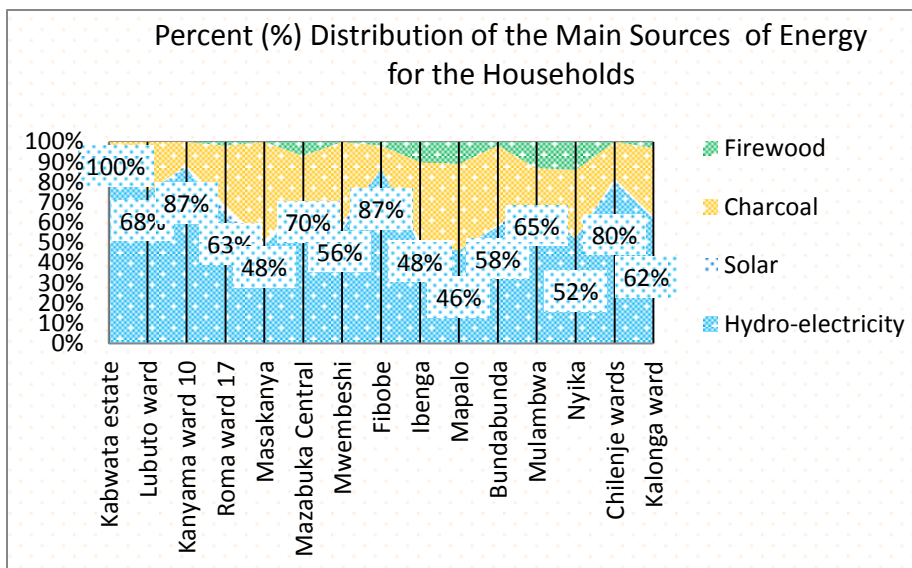


Figure 7.2 on the left side shows the percent distribution of the main sources of energy used by the households and it can be seen that the majority reported using hydro-electricity.

It is clear that among those who reported that they were using hydro-electricity as their main source of energy the majority were in Kabwata estate where all the households indicated that they were using hydro-electricity.

Lubuto ward reported that 68% of the households used hydro-electricity, 87% was recorded in Kanyama ward and wards with less than 50% of the households who reported using hydro-electricity were in Masakanya, Ibenga and Mapalo wards.

The second widely used source of energy was charcoal and was reported in all the wards except Kabwata estate ward. The majority of households that reported using charcoal were in Masakanya, Ibenga and Mapalo wards. In this study fire wood and solar were the least used sources of energy. Firewood was reported in Nyika, Mulambwa, Mapalo, Ibenga and Mazabuka central wards.

**Figure 7.3 – Percent (%) Distribution of the Households’ Main Source of Energy**

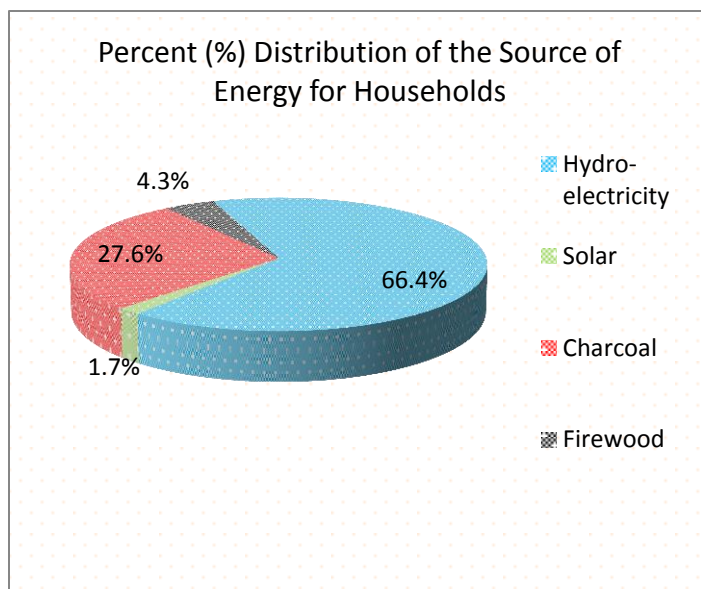


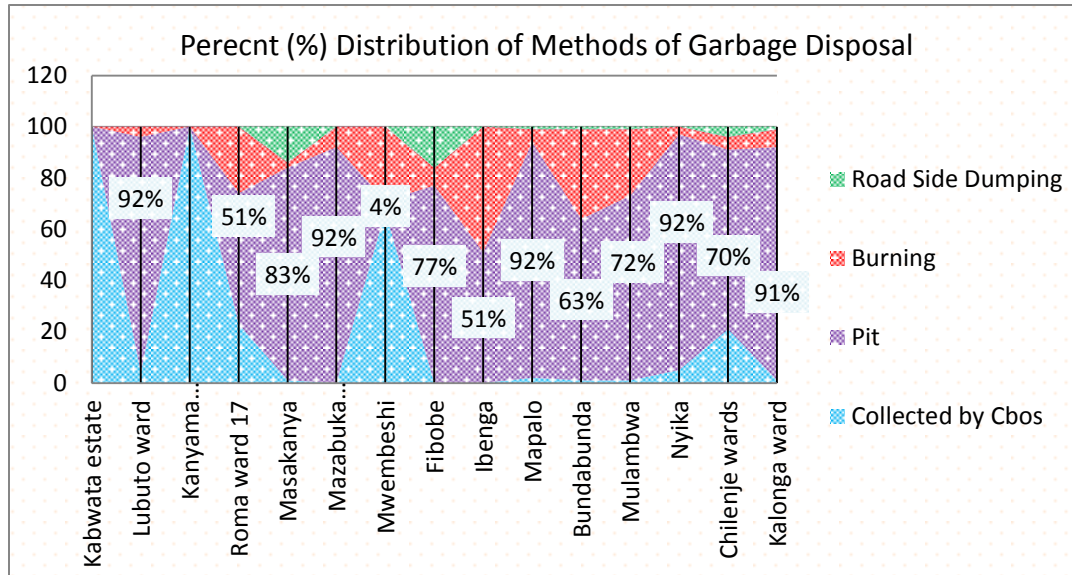
Figure 7.3 percent distribution of the main sources of energy of the head of households and it can be observed from figure 7.3 above that the majority of the households reported having hydro-electricity as the main source of energy making 66.4%, 27.6% of the households reported that they were using charcoal, 4.3% reported the use of fire wood and 1.7% reported the use of solar energy.

The only logical justification for this distribution is that most of these wards were located in urban areas where the accessibility of power is better than in rural areas as well as the economic opportunities. In this study, it was found that 66.4% of the households reported that they were using hydro-electricity because the sample was highly skewed towards wards in the urban areas.

However, some households in this study were also using charcoal for cooking despite reporting that their main source of energy was hydro-electricity.



**Figure 7.4 – Percent (%) Distribution of Households’ Methods of Garbage disposal**



The figure on the previous page shows the methods of garbage disposal used by households and it can be seen that the majority of the wards reported that they were using a pit to dispose garbage off. Among those households which reported that they were using pit method the majority were in Lubuto, Mapalo and Nyika wards covering over 92% of the households.

Only few households reported that they were burning their garbage and the majority of them were in Ibenga and Bundabunda wards. Kabwata estate and Kanyama ward 10 reported that they had their garbage collected by cbo’s making almost all the households, these were followed by those in Mwembeshi and Chilenje wards as shown in the figure above. With regard to dumping garbage by the road side, the majority of the households that engaged in this kind of garbage disposal were in Fibobe and Masakanya wards.

From the same figure 7.4 it can be seen that only wards that are located in Lusaka district reported that their garbage was collected by cbo’s and since the majority of the households in this sample reported that they had their garbage disposed by pit method it is important to sensitize households on how best they can dispose their waste products because under main source of water for the households the 13.5% reported that their main source of water was well and 17.1% indicated boreholes. Therefore, good garbage disposal methods need to be practiced by sensitizing households where and how to dispose garbage so that they don’t pollute

underground water. In this regard it must be stated that households need to put up good sanitary conditions such as where to build their pit latrines.

**Figure 7.5 – Percent (%) Distribution of the Methods of Garbage Disposal by Households**

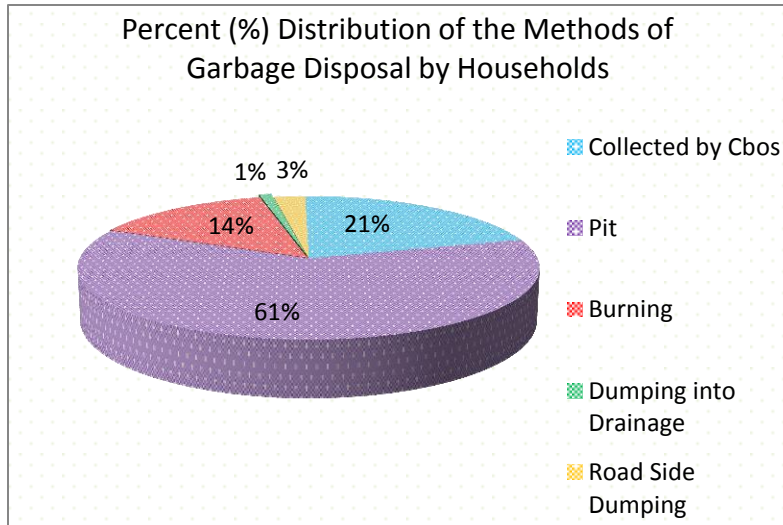


Figure 7.5 shows a summary of the percent distribution of the methods of garbage disposal used by households and it can be seen that the majority reported using a pit as was established under figure 7.4 on the previous page.

In this study, 61.22% of the households reported that they were using a pit to dispose their garbage off, 20.9% indicated that they had their garbage collected by cbo's, 14.4% reported that they were burning their garbage, 2.5% reported that they were dumping by the road side and 1% reported that they were dumping into drainages.

## **J. ACCESS TO ICTs**

This section presents findings on accessibility to ICTs by households in terms of having mobile phone, Landline phone, Laptop, Desktop, Printer, Scanner, IPod, Satellite Dish and Television. It also provides an assessment of households' means of connectivity to internet and mobile phone provider households subscribe to.

Assessment of availability of ICT equipment in households can be used to determine or measure the living conditions in households. Therefore, this section presents findings on the availability of ICT equipment in households among the selected wards under investigation although residence in terms of rural and urban is a major factor that influences this assessment.

**Figure 7.6 - Percent (%) Distribution of HHs that Reported having a mobile Phone & Land Phone**

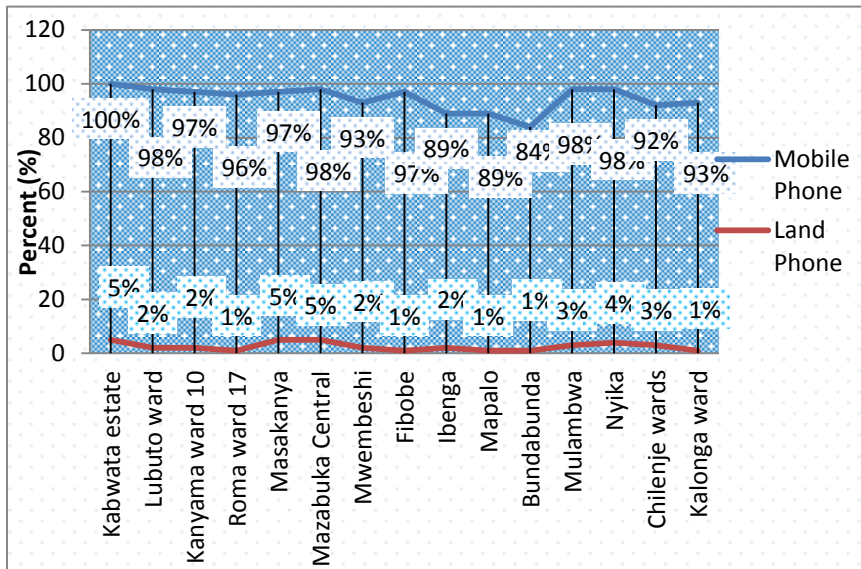


Figure 7.6 shows the percent distribution of the households' acquisition of mobile phone as well as land phone. It can be seen that the majority of the households reported having a mobile phone with over 80% in all the wards as shown.

Kabwata estate, Lubuto, Kanyama ward 10, Masakanya, Mazabuka central, Fibobe, Mulambwa and Nyika wards had the majority of households with mobile phones.

From the figure above it can be seen that only few households reported having land phones and the majority of them were in Kabwata estate, Masakanya and Mazabuka central wards with 5% each and were followed by Nyika ward with 4%. Therefore, it is clear that the acquisition of land phones by households in the sampled wards is very low according to this study.

**Figure 7.7 – Percent (%) Distribution of the Availability of Desktops and Laptop in Households**

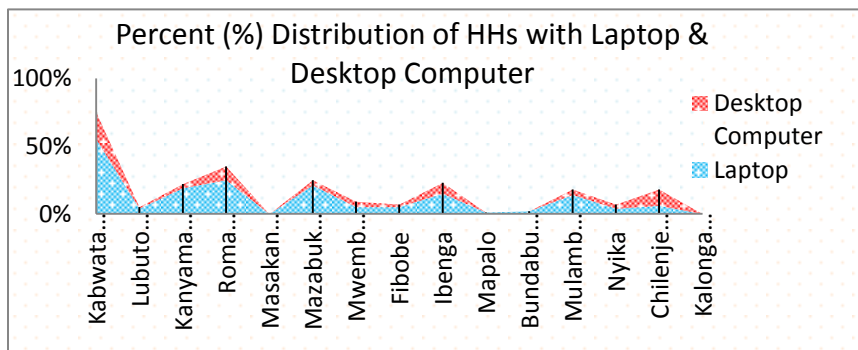


Figure 7.7 presents findings on the possession laptop and desktop computer and laptops by households

It can be seen that the majority of the households that reported having either of them were in Kabwata estate ward with about 51% of the households having a laptop and about 20% desktop computers. These households were followed by those in Roma ward 17 where about 36% of the households reported having either a desktop computer or laptop. It is therefore clear that

generally wards which are located in urban areas reported having more of the said electronic items than those in the rural areas.

**Figure 7.8 – Percent (%) Distribution of Acquisition of Satellite Dish and TV sets by Households**

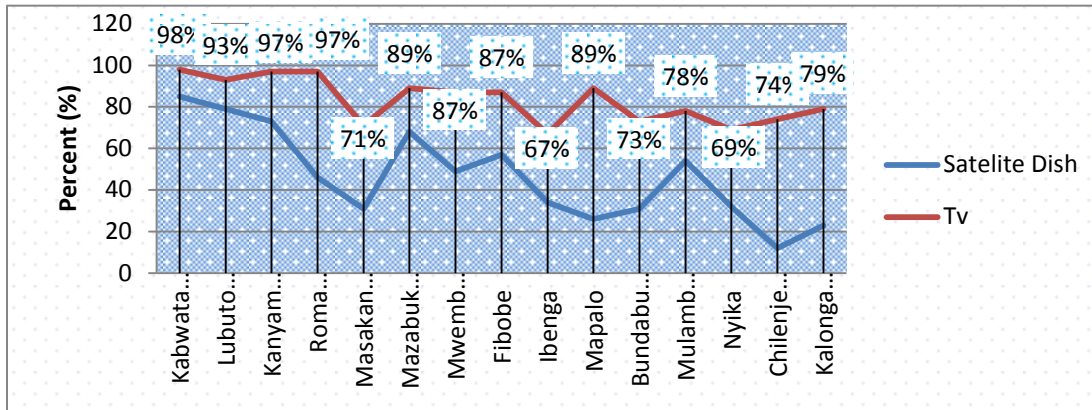


Figure 7.8 above presents findings on the percent distribution of the acquisition of satellite dish and television sets by households and it can be seen that Kabwata estate, Lubuto, Kanyama ward 10 and Roma ward 17 had over 90% of the households with a television set.

Households with fewer television sets were reported in Ibenga and Nyika wards with less than 70% of the households having a television set.

Concerning acquisition of satellite dish by households the majority were reported in Kabwata estate, Lubuto, Kanyama ward 10 and Mazabuka central with more than 60% of the households having a satellite dish while the lowest were reported in Chilenje ward, Mapalo, Bundabunda and Masakanya wards.

**Figure 7.9 – Percent (%) Distribution of Households' Acquisition of Printer, Scanner and/or IPod**

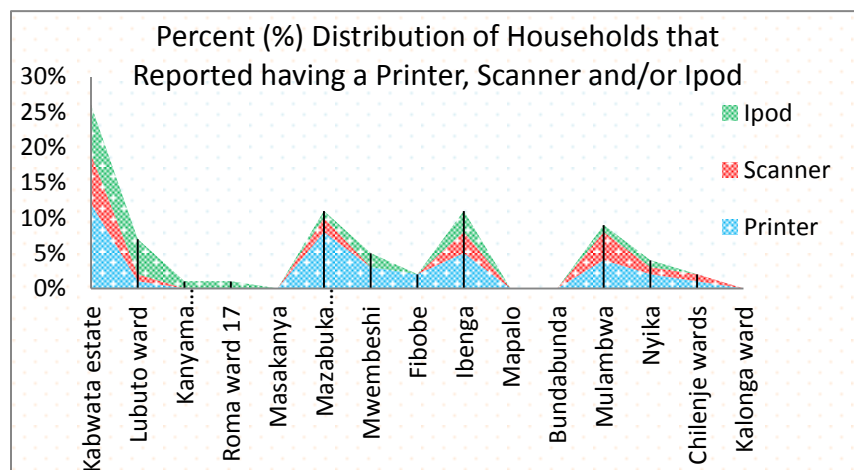


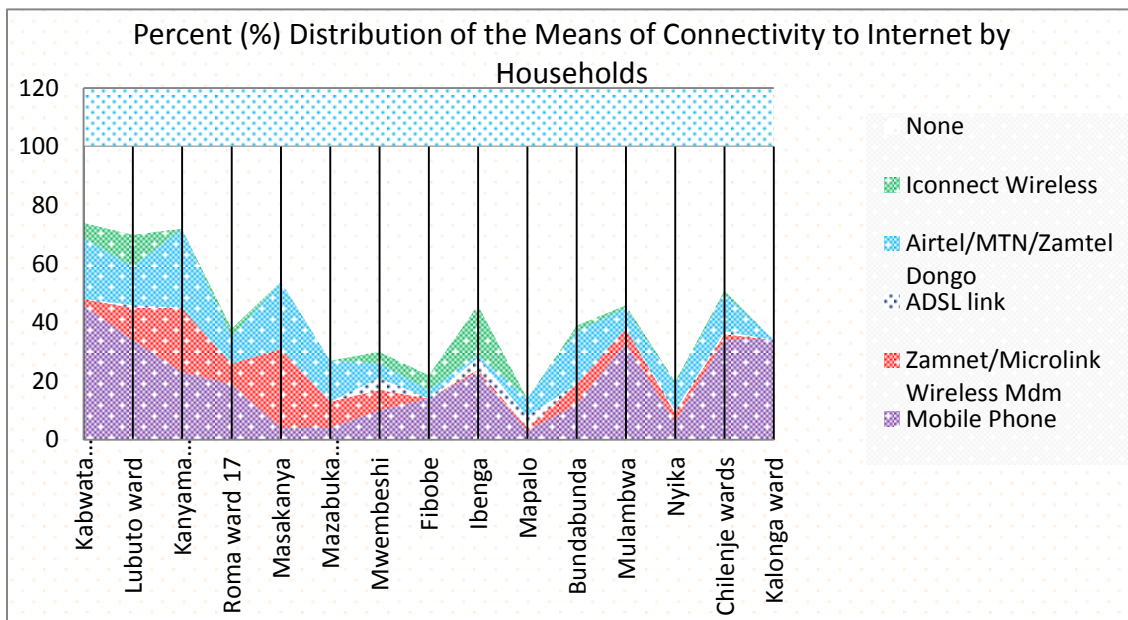
Figure 7.9 presents findings on the percent distribution of households that reported having a printer, scanner and/or IPod.

From the same figure it can be seen that the majority were in Kabwata estate, Mazabuka central, Ibenga and Mulambwa wards making 25%, 12%, 11% and 9% of the households having either an iPod, scanner and printer. It can be observed that in these wards households had more of printers than iPods or scanners.

It is also clear that households in Mapalo, Bundabunda and Masakanya wards had none of the listed items while Kanyama ward 10 and Roma ward 17 reported having iPods only although the percent distribution of these households was very low.

The figure on the next page (fig. 8.0) shows the percent distribution of the households' means of connectivity to internet and it can be seen that the majority of the households reported having no connectivity, these households were followed by those who reported having connectivity via mobile phone of which the majority were in Kabwata estate, Lubuto, Mulambwa, Chilenje, kalonga and Ibenga wards.

**Figure 8.0 - Percent (%) Distribution of Households' Means of Connectivity to Internet**



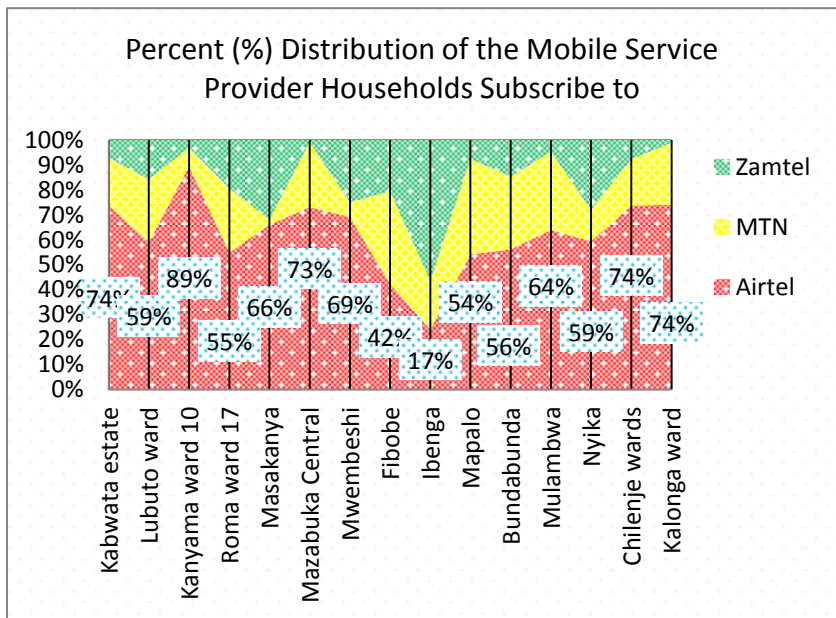
From the figure above it can also be seen that only Kabwata estate, Lubuto, Mwembeshi and Ibenga and Fibobe wards reported having connectivity through Iconnect wireless. Households having connectivity via Airtel/MTN/Zamtel Dongo were reported in almost all the wards as shown in the figure.

It can be observed that Mwembeshi, Ibenga and Mapalo were the only wards with connectivity through ADSL link while households with connectivity to Zamtel/Microlink wireless Mdm were reported in almost all the wards but the majority of them were in Kanyama ward 10 and Masakanya wards.

Figure 8.1 on the next page shows the percent distribution of the mobile service provider households subscribe to in terms of them being on Zamtel, MTN or Airtel. In this regard, all the mobile service providers household members subscribe to were aggregated and the percent distribution was calculated thereafter.

Therefore, there is need for the above named internet service providers to advertise more and provide good incentives so that household members can get to know about their services thereby increasing their customer base which translates into profit maximization.

**Figure 8.1 - Percent (%) Distribution of the Mobile Service Provider Households Subscribe to**



From the same figure 8.1 it can be seen that the majority of the households reported that they subscribed to Airtel in almost all the wards except Ibenga ward which had more Zamtel subscribers than Airtel and MTN. It is clear that all the networks were spread in all the wards as shown above.

This therefore means that MTN and Zamtel should increase registration of subscribers as well as putting up good incentives in order to capture more subscribers because market is highly skewed towards Airtel in the wards except Ibenga ward. It can be observed that in all the wards Airtel subscribers above 50% except in Ibenga and Fibobe wards.

**Figure 8.2 Percent (%) Distribution of the Mobile Service Providers Households subscribe to**

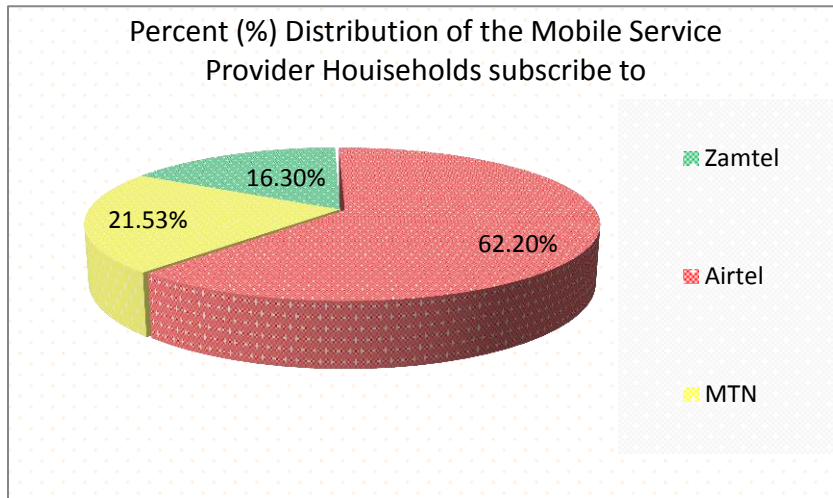


Figure 8.2 above presents a summary of the mobile phone provider households subscribe to and it can be observed that the majority of the members of households in this sample were Airtel subscribers and they made up 62.2%, these were followed by MTN subscribers who made up 21.53% and Zamtel subscribers made up 16.3%. Therefore, MTN and Zamtel need to put more attractive incentives in order for them to widen their customer base who are the subscribers.

**Figure 8.3 - Percent (%) Distribution of Children below 18 years reported using the Internet**

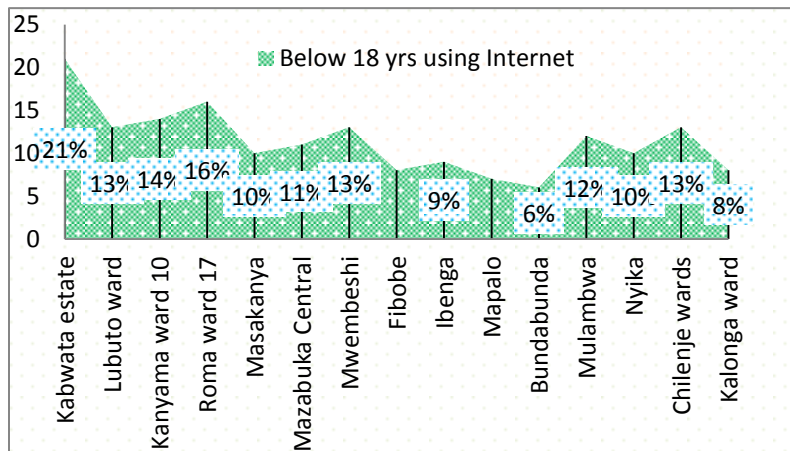


Figure 8.3 on the left shows the percent distribution of members of households below the age of 18 who were reported using the internet. The majority of these children were reported in Kabwata estate ward making 21% of the households and was followed those in Roma ward 17 with 17% of the households. This study found that the majority of these children were using the internet in order to have access to facebook among other things.

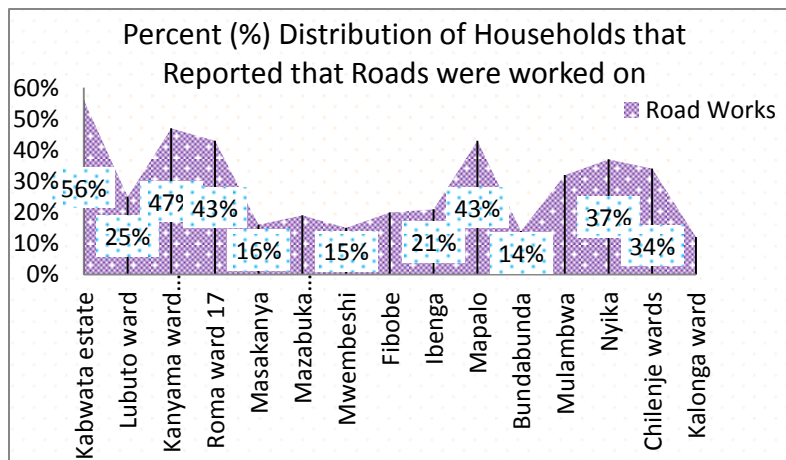
## K. COMMUNITY DEVELOPMENT

This section presents findings on the views of household members with regard to the projects that were implemented by the government or NGOs in their respective wards in terms of roads works, drainage works, construction of bridges, construction of toilets, construction of new schools, construction of toilets which were implemented as well as assistance to senior citizens or vulnerable people in their communities.



The final aspect on this section focuses on the suggestions that were made by members of households in order to improve the prevailing community situations in respective wards.

### 8.4 – Percent (%) Distribution of the HHs that stated that Road works were done



From figure 8.4 it can be seen that the majority of the households which reported that road works were done in their respective wards were from Kabwata estate followed by those in Kanyama ward 10 with 56% and 47% respectively.

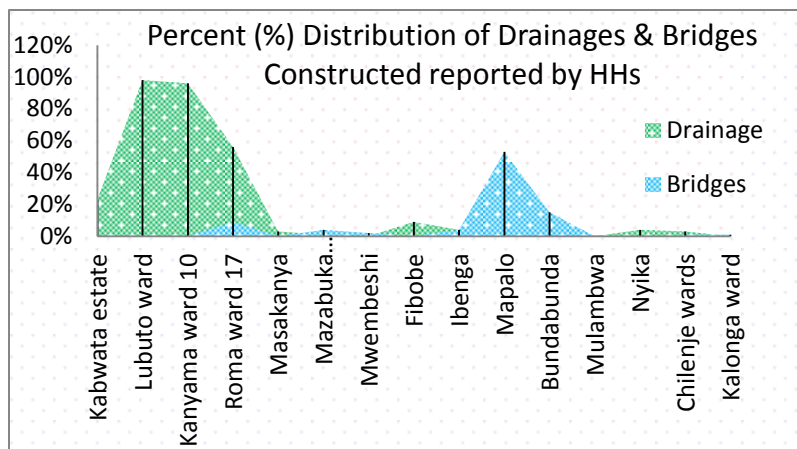
Roma ward 17 and Mapalo wards had 43% each, 25% of the households reported that roads were worked on in Lubuto ward, 37% in Nyika, 34% in Chilenje, 32% in Mulambwa, 16% in



Masakanya, 19% in Mazabuka central, 20% in Fibobe, 21% in Ibenga ward and 12% in kalonga ward.

Therefore there is need to intensify the implementation of road works by allocating more resources in most wards such as Lubuto, Masakanya, Mazabuka central, Mwembeshi, Fibobe, Ibenga, kalonga, and Bundabunda so as to improve and widen the road network system.

**Figure 8.5 – Percent (%) Distribution of the Households that stated that Drainages & Bridges were constructed in their respective wards**



The figure to the left gives a summary of the percent distribution of households that reported that drainages and bridges were constructed in their respective wards at the time of this study.

With regard to the construction drainages the majority of the households were from Lubuto, Kanyama ward 10 and Roma ward 17. In this study only Mapalo ward had about 45% of the households which stated that bridges were constructed. Based on these findings it is clear that there is need to intensify projects with regard to construction of bridges as well as drainages in almost all the wards so as to improve the prevailing situations such as flooding whenever there are heavy down pours for example in Lusaka district.

**Figure 8.6 – Percent Distribution of the Households that stated that Hospitals/Clinics, New Schools and Toilets were constructed in their respective wards**

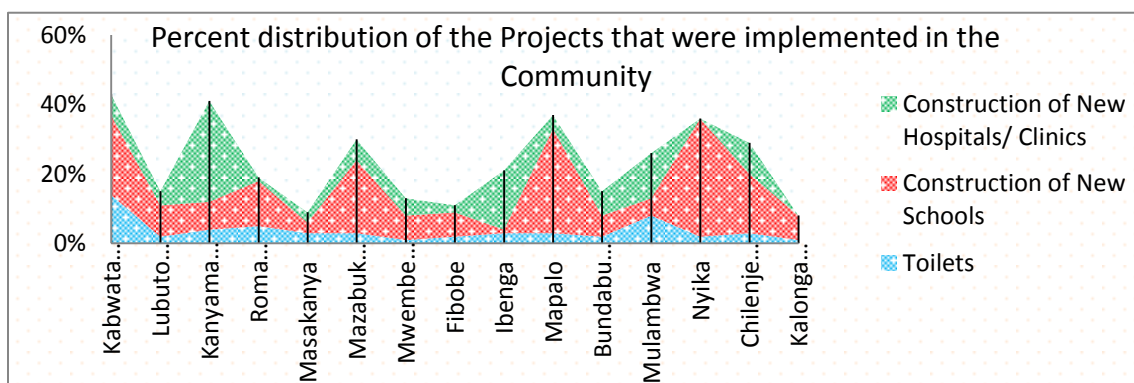


Figure 8.6 above shows the percent distribution of households which reported that there hospitals/clinics, new schools and toilets were constructed in their respective wards. The majority of households in Kabwata estate reported that toilets were constructed followed by those in Mulambwa. Construction of new schools was predominant in Nyika, Mapalo and Mazabuka central wards while the construction of new hospitals or clinics was predominantly reported in Kanyama ward 10 and Ibenga ward.

**Figure 8.7 - Percent (%) Distribution of HHs that reported that Assistance was rendered to Senior Citizens**

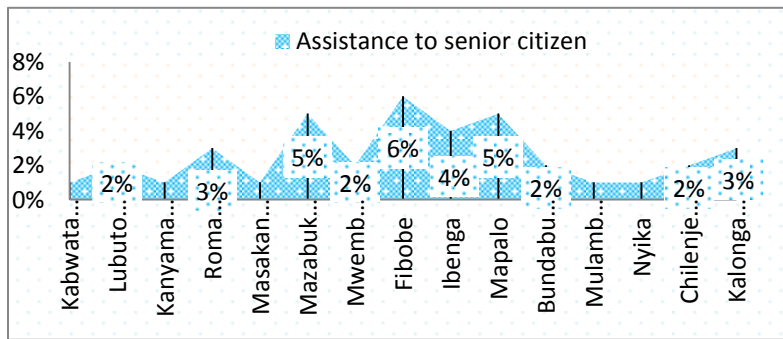


Figure 8.7 shows the percent distribution of households that reported that assistance was given to senior citizens in their respective wards and the majority of them were in Fibobe ward.

**L. SUGGESTIONS MADE BY THE HOUSEHOLDS SO AS TO IMPROVE COMMUNITY SITUATION IN THEIR RESPECTIVE WARDS**

**Figure 8.8 – Percent (%) Distribution of Households that suggested the need to Improve Water delivery (quantity & quality) as well as Sanitation Standards**

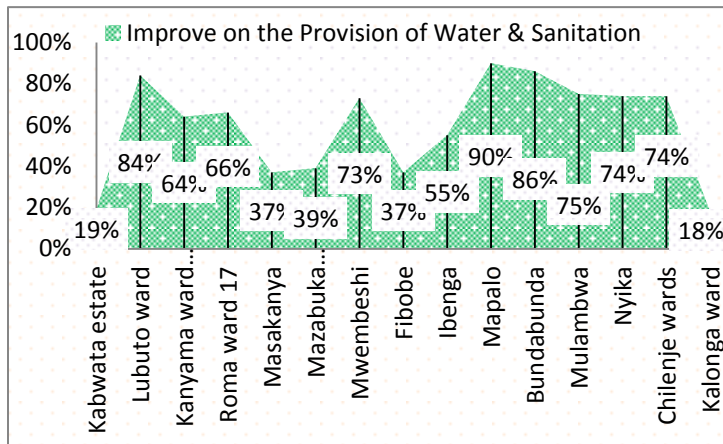


Figure 8.8 above shows the percent distribution of households that suggested the need to improve community situation by improving water delivery as well as enhancement of sanitation standards in their respective wards.

From the same figure it can be seen that the majority of the wards in the sample indicated that there is need to improve water delivery as well as sanitation standards. Kabwata estate and kalonga wards were the only ones with less than 20% of the households which stated the need to make an improvement on the above stated suggestion.

**Figure 8.9 – Percent (%) Distribution of Households that suggested the need to build new schools**

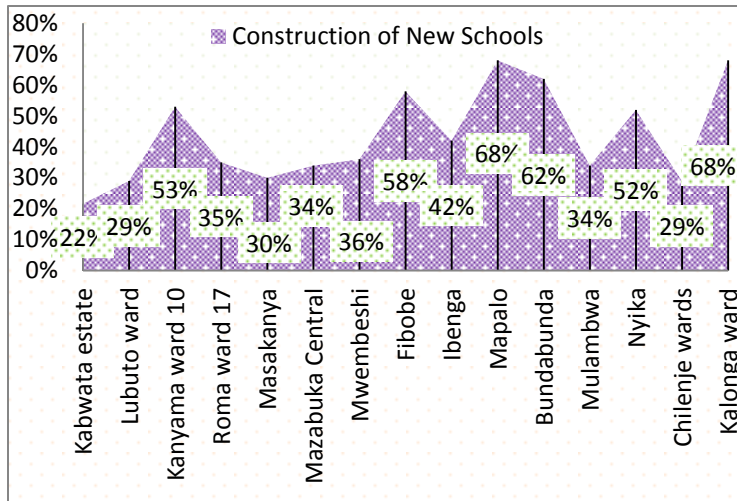


Figure 8.9 gives percent distribution of the households that suggested the need to construct new schools and the majority making 68% were recorded in Kalonga as well as Mapalo wards. Kabwata estate ward was the lowest with only 22% of the households making this suggestion.

From the same figure it can be seen that Kalonga, Nyika, Bundabunda, Mapalo, Fibobe and Kanyama wards were the only wards with over 50% of the households suggesting the need to construct more new schools.

**Figure 9.0 – Percent (%) Distribution of Households that suggested the need to Construct new and improve existing Hospitals/Clinics**

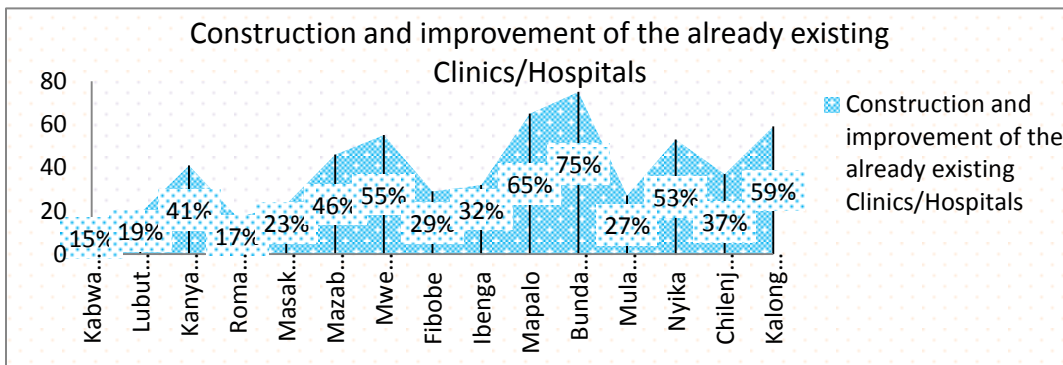


Figure above shows the percent distribution of the households which suggested that there is need to construct new and improve or rehabilitate the existing hospitals or clinics and it can be seen that the majority were in Bundabunda and Mapalo wards making 75% and 65% respectively. It can be seen that only Kabwata estate, Lubuto and Roma ward 17 had households which gave out the above stated suggestion with less than 20% of the households.

Therefore, the priority to construct new and rehabilitate existing hospitals and clinics differs by ward because the level of development in these wards is not uniform.

Thus policy makers can use this information to prioritize which wards need more attention. For example since Bundabunda ward had 75% of the households suggesting the need to construct new and rehabilitate existing clinics or hospitals; hence in case there are resources for projects to be done of this nature it is logical that the such wards be prioritized.

**Figure 9.1 – Percent (%) Distribution of Households that suggested Early Distribution of Agricultural Inputs**

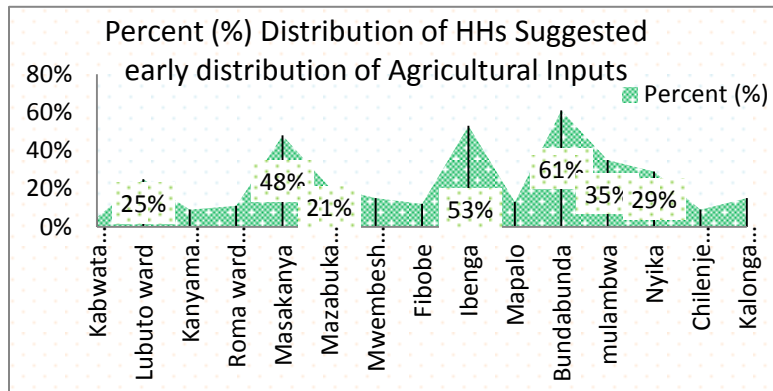
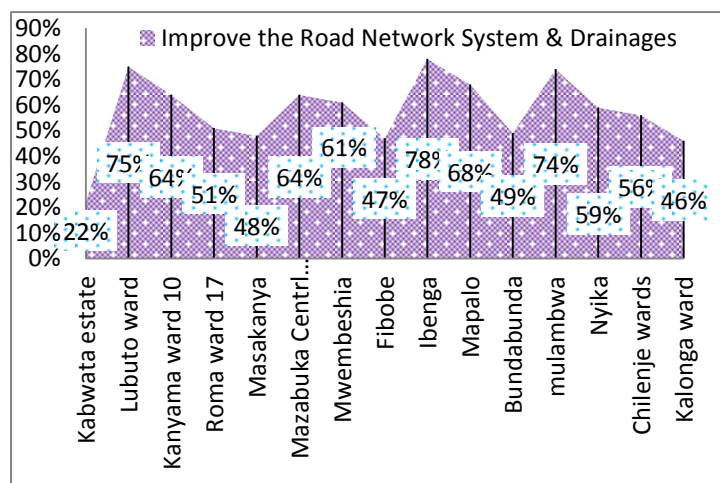


Figure 9.1 to the left shows the percent distribution of households which suggested the need to make the distribution of agricultural inputs done early every farming season.

The majority of these households were in wards which are predominantly agro-based in terms of economic activity such and these were Bundabunda and Masakanya wards. Therefore, there is need for the government to put this into consideration because most of the households in these wards depend on agriculture to sustain themselves.

**Figure 9.2 – Percent (%) Distribution of Households that suggested the need to Improvement of the Road Network and Drainage Systems**



With regard to improvement of the road network & drainages it can be observed from figure 9.2 on the left side shows that Kabwata estate was the only ward with the lowest percent of households with this suggestion as shown above.

Therefore, generally speaking there is the need to improve the road network system as well as drainage systems in all the wards.

## Conclusion

This Community Based Monitoring System report has availed to planners and decision-makers relevant information in areas of poverty reduction, sustainable development as well as bringing to light the prevailing socio-economic conditions in the selected wards. These study findings can equally be generalized to other wards on grounds that the findings are very close to what other research project reported whether census or surveys.

Therefore, this research project has brought to light many challenges that the community members or households in selected wards face with regard to employment conditions, crimes experienced by households, accessibility to internet, average monthly budgetary allocation for food, diseases experienced in households, gender equality, maternal health, combating HIV/AIDS, malaria and other diseases, environmental sustainability, sources of water and energy, garbage disposal, accessibility to ICTs as well as community development issues.

### **The following findings were highlighted in this:**

Demographic information in this showed that average household size was 5.06 which indicate households in this study were expected to have five members including the head of households. There were slightly more females than males making 52.03% and males made up 47.97%. Education status of the head of households showed that about 1% had pre-school education, 22% had primary, 37% had secondary education, 34 had tertiary education and 6% have never being to school.

The main profession of the head of households showed that 12% were farmers, 22% were traders, 14% were civil servants, 32% were private sector employees and 20% were involved in other forms not stated here or had none.

Political status of the members of households indicated that much work needs to be done in sensitizing the 29% who were the eligible voters without voter's card to get their voters card and participate in elections. 39% were below the voting age which is 18years. And 32% had their voter's card indicating that these were participating in national matters. Therefore, there is the need to get those eligible voters without voters' cards issued with national registration cards and registered.

There is a need for the government to create employment and empower the youth because about 43.3% of the head of households reported that they were looking for employment and about 48.9% are the only employed. And those retrenched and retired had 3.1% and 4.7% respectively. In these wards it was found that many head of households relied on employment for incomes and source of food making 46%, it was also found that 19.3% to depend on agriculture and 34.7% to depend on business as their source of income and it was presented that these were most sources of food.

In these wards among women who were reported working this was shown from their level of education tertiary having about 50% and secondary having about 47% and those women with primary level education having about 3%.

With regard to combating HIV, malaria and other diseases, the majority of household members reported that they were attacked by malaria making about 72.85%, dysentery 5.77%, cholera about 2.73%, diarrhea 15.09% and tuberculosis 3.56%.

Due to healthy message campaigns in these wards the majority reported that they combated these diseases by preventing the re-occurrences for example those that who reported practicing better hygiene were making about 51.5%,boiling water about 13.7%, those sleeping under a mosquito net 19.3%, and those that were spraying of mosquitoes were about 15.5%.

Data on combating HIV/AIDS, malaria and other diseases showed that the majority of head of households were using abstinence making 18%, those that went for regular VCT made up 17%, those that stated correct and consistent use of condoms made up 29%, those that said being faithful to one partner made up 36%. This indicated that healthy campaigns yielded good results as many administered these measures.

To ensure environmental sustainability, The majority of the households indicated that their source of water was tap making 66.30%, those that said river/stream made up 3.10%, borehole were 17.10% and made up 13.50% of the whole sample on households. The methods of treating water which were implemented in these wards showed that the majority were using chlorine making 72.90%, 19.40% reported that they boiled their water, those that practiced the filter system were about 5.50% and those that used other methods not mentioned in this report made up 2.30%.

Households' main source of energy was hydro-electricity and 66.40% of the households reported that they were using it as their main source of energy, solar made up 1.70%, charcoal made up 27.60% and firewood made up 4.30% of the sample.

With regard to method of garbage disposal, the majority of households reported that they were using the pit making 61.22%, followed by those that indicated that their garbage was collected by cbos with about 20.8%, 14.40% reported that they were burning, road side dumping made up 2.50% and those that stated dumping in drainages made up 1% of the households.

To this end, effective planning should be based on relevant and up to-date information such as the findings of this study. This entails the significance of this report because it has provided useful baseline data for poverty monitoring and evaluation as well as assessing the extent to which millennium development goals have been attained. This study has therefore generated good information in order for policy makers to base their decisions in terms of planning and setting up developmental projects in their respective administrative units.

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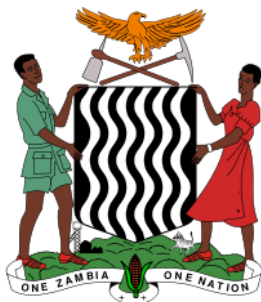


# Course Project

## Household Questionnaire

ICU

(CBMS 2013)



**A. GEOGRAPHIC CHARACTERISTICS**

- 1. HH\_ID (House Number)
- 2. District: .....
- 3. Constituency: .....
- 3. Ward: .....
- 5. Enumeration Area (Section): .....
- 6. Telephone No. (Mobile) of the Household Head or Spouse: .....
- 7. Email Address of the Household Head or Spouse: .....

**B. BACKGROUND AND DEMOGRAPHIC INFORMATION**

1. Household members

ID	Name	Relationship to Head of HH -Head=1 -Spouse=2 -Own Child=3 -Other-Relative=4 -None-Relative =5	Age (In years)	Sex of HH members -F=1 -M=2	Marital Status -Single=1 -Married=2 -Widow=3 -Separation=4 -Divorced=5	Ethnicity -Bemba=1 -Tonga=2 -Chewa=3 -Soli=4 -Lozi =5 -Lenje=6 -Mambwe=7 -other, specify	Highest level of Education attained -Pre-school=1 -Primary=2 -Secondary=3 -Tertiary=4 -Never been to school=5
01							
02							
03							
04							
05							
06							
07							
08							
09							

### C. SOCIAL-ECONOMIC AND POLITICAL INFORMATION

	Mobile Phone: Airtel=1 MTN=2 Zamtel=3 Airtel & MTN=4 Airtel & Zamtel=5 MTN & Zamtel=6 Airtel, MTN & Zamtel=7 No Mobile Phone=8	Voting and Elections: -Holding voters card=1 -Eligible voter without voters card=2 -Not eligible to vote=3	Education attendance -In school=1 (Up to Grade 12) -Completed=2 -In Tertiary Education=3 -Dropped-out from school=4	Victim of crime (HHs) -Loss of property=1 -Physical injury=2 -Loss of life=3 -Never been Victim=4	Employment Status of head of households -Employed=1 -Retrenched=2 -Retired=3 -Looking for a job=4	Main Profession -Famer=1 -Business/Trader=2 -Civil Servant=3 -Private-sector Employee=4 -None=5
01						
02						
03						
04						
05						
06						
07						
08						
09						

### D. ERADICATE EXTREME POVERTY AND HUNGER

1. How many meals do household members have per day?	1 meal 2 meals 3 meals	
2. What is households' main source of income?	1. employment 2. agriculture 3. business	
3. What was household members' source of food?	1. Neighbours 2. well wishers 3. Relief food 4. Non	
4. What are these meals comprised of? State		
5. How much is your budget for food?	Monthly 1. Zk100-Zk300 2. Zk300-Zk500 3. Zk500-1000 4. above Zk1, 000	
6. How many member of the household have suffered during the past one month from	1. malnutrition 2. kwashiokor 3. marasmus 4. dehydration	
7. Are there any members under the age of 5 who are under weight	0 1 2 3 and above	

### E. ACHIEVE UNIVERSAL PRIMARY EDUCATION

1. How many members of the household are in formal education?	1.Primary 2.Secondary	
2. In which grade is/are members of the household receiving formal education	1.Primary 2.Secondary	
3. Names of schools. State		
4.Number of members of household by sex in	1. Females in primary	
	2. Males in primary	
	3.Females in secondary	
	4. Males in secondary	
5. Reasons for not completing primary/secondary school	1.Lack of school fees	
	2. Pregnancy/marriage	
	3.Lack of interest	
	4.Any other	
6. How many members of the house hold are currently attending adult literacy classes		
7. How many members of the household have completed adult literacy classes		
8. How many members of the household have attended adult literacy classes but have not completed		
9. Reasons for not completing the adult literacy class. State.		

### F. PROMOTE GENDER EQUALITY

1. Does the household have any women who are working?	1.Yes 2.No	
2. Number of female members of the household who are working		
3. What is their occupation? State		
4. What is the average income of the females who are working?	1.Zk100-299	
	2.Zk300-Zk499	
	3.Zk500-Zk999	
	4. Zk1,000-Zk2,500	
	5.Zk2,500 and above	
5. level of education	1.Primary	
	2. Secondary	
	3.Tertiary	
6. Are there any female members of your household actively involved in politics?	1.Yes 2. No	
7. What position do they hold? State		

## G. REDUCE CHILD MORTALITY

1. Has any member of the household passed away during the past one month below the age of:	1. 5	
	2. 5-10	
	3. 10-18	
2. What was the cause of death? State.		
3. During the past one month, has any member of households lost a child during birth?	1. Yes 2. No	
4. Has any member of the household been immunized in the past one month?	1. Yes 2. No	
5. At what age was last immunization?	1. 0- 3months 2. 3-6months 3. 6-12month 4. 1-3 years 5. 3-5years 6. 5and above	
6. What immunization was received? State		
7. If no, give reasons or not immunizing		

## H. IMPROVING MATERNAL HEALTH

1. Are there any members of the household with children?	1=Yes 2=No	
2. What was their age at first pregnancy?		
3. What was their age at first sexual encounter?		
4. Did member receive antenatal care?	1= Yes 2=No	
5. In what month of pregnancy did they attend their first antenatal check up		
6. During birth, did the member receive assistance from a trained health practitioner?	1. Yes 2. No	
7. If not, who assisted in the birth?		
8. Has any member of your household passed away during child birth in the past one month?	1. Yes 2. No	
9. Have members of the house hold received information about birth control/contraceptives?	1. Yes 2. no	

10. From who/where did they receive this information?		
11. How regularly do you receive birth control?		
12. Age at which one first received birth control		
13. Method of natural birth control used		
14. Age at which one learned of natural birth control.		
15. Age at which one first employed natural birth control		

### I. COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES

1. Has any member of the household suffered from the following diseases in the last 6 months?	1.Malaria	
	2.Dysentery	
	3.Cholera	
	4.Diarrhea	
	5.Tuberculosis	
2. Age of the patient(s)		
3. Was the case reported to the local health centre/post?	1. Yes	
	2. No	
4. What medication was received or used to treat this disease(s)?		
5. Are you aware of any cholera centers within the area?	3. Yes	
	4. No	
6. What methods have been used to prevent the reoccurrence of this disease?	1. Better hygiene?	
	2. Boiling water?	
	3.Sleeping under a mosquito net	
	4. Spraying of mosquitoes?	
8. Has any member of the household had an HIV test in the last 6 months?	1. Yes	
	2. No	
9. Age of the person who recently tested.		
10. Sex of the person who recently tested?	1. Female	
	2. Male	
11. What were the results?	1. Negative	
	2. Positive	

12. Was counseling and treatment provided	1. Yes 2. No	
13. What preventive measures are being undertaken	1. Abstinence	
	2. Regular VCT	
	3. Correct and consistent use of condoms	
	4. Being faithful to one partner	
14. Have you received any literature on HIV, cholera, dysentery, diarrhea prevention?	1. Yes 2. No	
15. Has any member, in the last 6months, passed away from	1. Malaria	
	2. Dysentery	
	3. Cholera	
	4. Diarrhea	
16. Have there been any health campaigns in the last	1. 6 Months	
	2. 3 months	
	3. 1 month	
17. Have any shallow wells/boreholes been buried in your area?	1. Yes 2. No	
18. Have you received any soap, chlorine from government institutions/ NGOs in the last?	1.Last 6 months	
	2.Last 3months	
	3.Last month	
19. Have government institutions chlorinated wells or boreholes in the area?	1. Yes 2. No	
20. Does each member of your household have a mosquito net?	1. Yes 2. No	

**J. ENSURE ENVIRONMENTAL SUSTAINABILITY**

1. What is your source of water?	1. Borehole	
	2. Stream/river	
	3. Tap water	
	4. Well	
2. Do you treat your water?	1. Yes 2. No	

3. How is your water treated?	1. Boiling	
	2. Filter systems e.g life straw	
	3. Chlorine	
	4. Other	
4. What is your source of Energy?	1. Hydro-Electricity	
	2. Solar	
	3. Charcoal	
	4. Fire wood	
5. Are you aware of any pollution that has occurred to your source of water?	1.Yes 2.No	
6.Method of garbage disposal	1. Pit	
	2. Burning	
	3. Collected by cbo's	
	4. Dumping into drainage	
	5. Road side dumping	
7. Is the house you are occupying	1. Rented or 2. Owned	
1. Do you engage in any agricultural activities?	1. Poultry 2. Planting	
2. What form of fertilizer do you use?	1. Compost manure 2. Fertilizers(chemical)	
3. How many bags of chemical fertilizers do you use?		
4. Do you rotate your crops	1. Yes 2. No	
5. What is the size of the land on which you farm?		

### K. ACCESS TO ICTs

1. Does HH have any of the following ICT equipment?	1. Mobile Phone	
	2. Landline Phone	
	3. Laptop	
	4. Desktop Computer	
	5. Printer	
	6. Scanner	
	7. IPod	
	8. Satellite Dish	
	9. TV	



2. Does HH have access to internet?	1. Yes 2. No	
3. If yes to Q.2, What is the household's main access to internet?	1. At home 2. At office 3. At internet cafe 4. Via mobile phone	
3. HH means of connectivity to internet	1. mobile phone 2. Zamnet/Microlink Wireless Mdm 3. ADSL link 4. Airtel/MTN/Zamtel Dongo 5. Iconnect wireless Ispot 6. other	
4. Which internet service provider does HH subscribe to?	1. Zamtel 2. Zamnet 3. Microlink 4. Airtel 5. Iconnect 6. MTN 7. other	
5. Which mobile phone service provider does HH subscribe to?	4. Zamtel 5. Airtel 6. MTN	
6. How Many Females (girl or woman) have a mobile phone?	0. 1. 2. 3. 3 and above	
6. How Many Females (girl or woman) use internet?	0. 1. 2. 3. 3 and above	
6. How Many Females (girl or woman) are on facebook?	0. 1. 2. 3. 3 and above	
6. How Many Females (girl or woman) have email addresses?	0. 1. 2. 3. 3 and above	

6. How Many Children (below 18 years) use internet?	0. 1. 2. 3. 3 and above	
2. Does HH head or spouse have access to internet at work?	1. Yes 2. No	
2. Does HH head or spouse have email address?	1. Yes 2. No	

### L. COMMUNITY DEVELOPMENT

1. Have any of the following projects been implemented in your community by the government or NGO?	1. Road works	
	2. Drainage works	
	3. Construction of toilets	
	4. Construction of schools	
	5. Construction of Hospitals/Clinic	
	6. Construction of bridges	
	7. Donations to vulnerable/orphaned	
	8. Assistance to senior citizens	
	9. Water reticulation	
2. What is the name of the implementing organization /institution		
3. Was there any agreement signed between the gov't/NGO and the community for the community to maintain projects?	1. Yes 2.No	
4. Has any agency/ institution conducted skills training within the community?	1. Yes 2.No	
5. Are you aware of any research carried out?	1. Yes 2.No	
6. Are you aware of the results of this research i.e were they published?	1.yes 2.No	
7. Were there any projects implemented to implement the results/ or mitigate the results?	1. Yes 2.No	
8. What is the most prominent business in the area?		
9. What is the most prominent industry in the area?		
10. What mineral resources are found in the area?		
11. What mining activities take place in the area?		

**M. SUGGESTIONS ON HOW TO IMPROVE THE COMMUNITY SITUATION**

- 1).....
- 2).....
- 3).....
- 4).....
- 5).....

Name of respondent: .....  
Signature: .....  
Date: .....

Name of Interviewer: .....  
Signature: .....  
Date: .....

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