



**Jesuit Centre for Theological Reflection
(JCTR)**

Memorandum on

**Implications of the 2024 Budget on Community
Development, Social Services and Health**

Submitted to

**THE NATIONAL ASSEMBLY COMMITTEE ON HEALTH,
COMMUNITY DEVELOPMENT AND SOCIAL SERVICES**

October 2024

“A Just Zambian Society Guided By Faith, Where Everyone Enjoys the Fullness of Life”

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1. Organizational background

The Jesuit Centre for Theological Reflection (JCTR) a faith-based research, education and advocacy Centre established in 1988 has continued to work with Government by conducting analysis and research on key social and economic issues affecting our nation. Specifically in the context of National Budgets, we have on various occasions been awarded the opportunity to analyze and input into the budget process. This we have done over the years. This is because we regard the National Budget as an important economic policy instrument, which has the potential to reduce the incidence of poverty.

JCTR is concerned with equity, social and economic justice to enable Zambia make significant strides where human and pro-poor national development remain key. Specifically, in the context of national development, JCTR has on various occasions been awarded the opportunity to analyse and input towards a number of national matters of interest. This we have done consistently over the years through various interventions. Interventions aimed to contribute to seeing Zambia attain long-term objective of being a prosperous middle-income nation by the year 2030. To enable Zambia, make significant strides where human and pro-poor national development remain key, JCTR recognises that an understanding of emerging issues and translating identified issues into action remains paramount in ensuring development trickles down to the most vulnerable in society.

2. Introduction

In January 2023, Pope Francis addressed a delegation of Italian radiographers and gave them an important message. He said to them that “a world that discards the sick, which does not assist those who cannot afford treatment, is cynical and has no future.”¹ These powerful words were mentioned in the context of his whole message to the group, which emphasised the need to keep the human person at the centre of any debate about health care. From this perspective, the provision of health care is ultimately about ensuring that the dignity of each person is respected.

¹ <https://www.vaticannews.va/en/pope/news/2023-01/pope-francis-health-is-not-a-luxury.html>

Pope Francis has also been outspoken about the need of society to take care of the poor and the marginalised, which includes persons with disabilities and the elderly. In his encyclical letter *Fratelli Tutti*, a letter on fraternity and social friendship, he emphasised that “in today’s world, the sense of belonging to a single human family is fading, and the dream of working together for justice and peace seems an outdated utopia. What reigns instead is a cool, comfortable and globalized indifference...” (§30). With these statements on healthcare and the need for social support, Pope Francis is calling for us to treat everyone with dignity, to reach out to those who are in need, and to make sure that we are not indifferent to the struggles of the people of Zambia.

According to the 8th National Development Plan, Zambia’s “epidemiological profile has been characterised by the high prevalence and impact of preventable and treatable communicable diseases.” (§2.1.2). These include malaria, HIV / Aids, pneumonia and tuberculosis. Other challenges to the health sector involve: the consistent supply of essential medical resources, which include drugs, medication and health personnel; long distances to health facilities; inadequate numbers of specialists to deal with medical problems; and access to health facilities in rural areas. The Plan envisages tackling these by increasing access to quality health care, strengthening the provision of district health services, as well as strengthening integrated health information systems.

When consulting the 2022 Poverty Assessment in Zambia, one can see that there is an increasing need for effective social support systems. The poverty level for the country was at 60% in 2022. The incidence of extreme poverty levels was recorded at 48% for the same period. The Social Cash Transfer System is a core part of Zambia’s social support infrastructure, as well as the Food Security Pack Programme and the School Feeding Programme. These support frameworks are aimed at responding to the needs of the poor and the marginalised, making sure that their dignity is respected.

This parliamentary committee submission paper will analyse the 2024 budget from the perspective of expenditure on health, community development and social services. It will analyse the expenditure of the 2024 budget against the challenges experienced by Zambia in these sectors, paying particular attention to the call of Pope Francis to all societies to take care of the poor, the

marginalised and to treat all with respect. It will propose recommendations for possible consideration by the Committee on Health, Community Development and Social Services.

3. The 2024 National Budget Overview

The 2023 budget was anchored on the theme, “*Unlocking Economic Potential*”. As noted in the budget speech, the global economic growth rate has slowed, from 3.5% in 2022 to 3% for 2023. This is projected to remain the same for the 2024 period. The reasons stipulated were climate change and the Russia Ukraine war. Therefore, the theme for 2024 highlights the important need for Zambia to stimulate economic growth, as per the 8th National Development Plan. The budget is expansionary, with the Minister of Finance proposing to spend ZMW 177, 891, 868, 893 compared to ZMW 167, 321, 733, 563 in 2023. This represents a 6% increase of the 2023 budget.

To support the 2024 expenditure, government plans to utilise domestic resources amounting to ZMW 141 billion, of which ZMW 114 billion will be tax revenues while ZMW 26.5 billion will be non-tax revenues. ZMW 3.4 billion will be financed by grants from cooperating partners while the fiscal deficit of ZMW 33.3 billion will be supported by both domestic (ZMW 16.3 billion) and external financing (ZMW 17 billion).

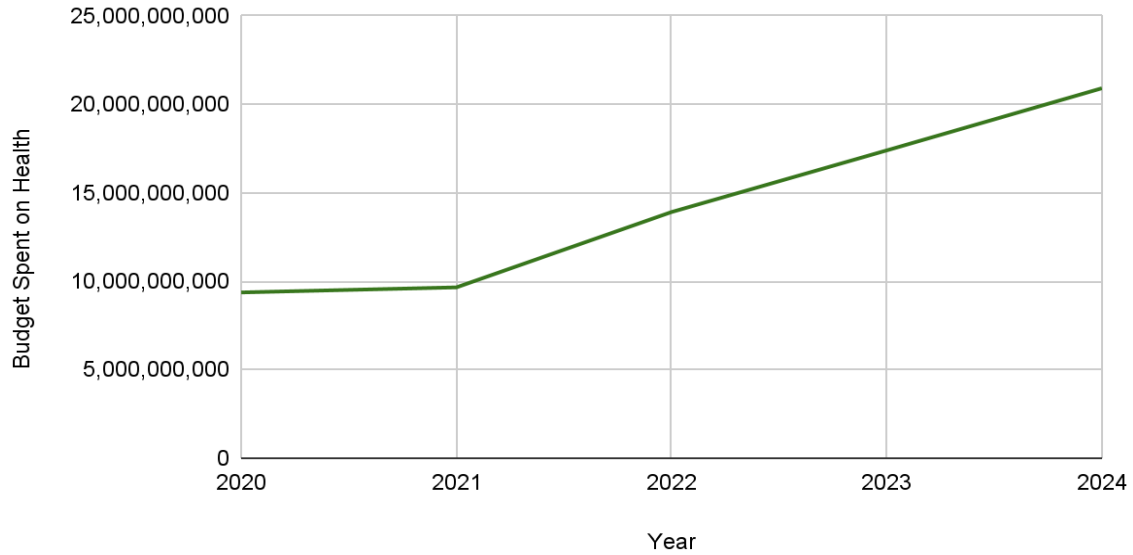
3.1 National Budget Health Sector Allocations

In the 2024 national budget, the government proposes to spend ZMW 20.9 billion on health, which comprises drugs and medical supplies (ZMW 4.9 billion), health infrastructure (ZMW 1.3 billion), and the Electronic Health Records System (ZMW 1.2 million). This represents 11.8% of the total budget allocation and a significant 20% increment relative to the 2023 national budget.

The figure below showing the health sector allocation as a percentage of the total budget from 2020 to 2024 reaffirms the commitment of the just released budget where health allocation as a share of the budget has been the highest in the last four years.

Figure 2: Health as a Percentage of Total Budget (2020-2024)

Budget Allocations for Health



Source: JCTR calculations based on National Budget Speeches (2020-2024)

As can be seen from this figure, between 2020 and 2021, there was a small increase of about 3% in the budget for health. However, the expenditure on health has increased dramatically from 2021 onwards. There was a 44% increase between 2021 and 2022. This can be explained by a significant increase in expenditure on Covid-19 medication, as well as an increase in healthcare personnel. This makes sense in the light of the Covid-19 pandemic. Health infrastructure expenditure continued to be a highlight of the 2022 budget. There was a 25% increase from 2022 to 2023. This can be explained by more money being spent on drugs and medical supplies, together with a significant investment in medical equipment and ambulances. This was to provide better access to basic services like x-rays.

Finally, there was a further 20% increase for the 2024 budget for health. The drugs and medical supplies expenditure has remained relatively unchanged from the 2023 budget. The significant expenditure planned for the 2024 period for health concerns the construction of mini hospitals and a major investment into an electronic health records system. The latter expenditure will amount to K120 million.

3.2 Outline of the 2023 health budget

In the summary of the budget performance for the 2022-2023 period, the Government emphasised that it has continued to prioritise the development of infrastructure, the recruitment of health personnel and the provision of medicines and medical supplies. In terms of the development of infrastructure, it indicated that it had completed the construction of 12 mini hospitals, out of a planned 16 for the year. The total targeted number of mini hospitals is 115, of which 111 have been completed so far. Furthermore, 62 maternity annexes have been constructed, partially financed by the CDF. The budget line for infrastructure amounted to K1,123,002,011.

Regarding the supply of essential medicines and medical supplies, the government has procured 42, 000 health centre kits which are envisaged to last until the middle of 2024. The next batch to follow this supply has already been ordered. The government emphasised a collaboration with various stakeholders to establish a Local Pharmaceuticals Manufacturing Strategy. This is with the view to stimulate the local production of pharmaceuticals and to support the supply chain. The budget line for drugs and medical supplies was K4,584,345,181.

In terms of personnel, the government has begun a recruitment of 3000 health personnel, the completion of which is planned for the end of next year.

The total health budget for the 2022-2023 period amounted to 17,394,799,887.

3.3 Outline of the 2024 health budget

The government has indicated that it will continue to invest in health infrastructure. The targeted number of hospitals is 115, of which 111 have been built. The remaining 4 mini-hospitals in Lufwanyama, Lusaka, Mpongwe and Mufumbwe Districts will be completed in 2024. A total of 30 more maternity annexes will be built in the next year, and phase II construction will commence of 135 mini hospitals. Specifically, the government has allocated K239,836,842 for this construction.

Finally, the government has announced that it will extend the treatment for cancer to the general public, by the provision of cancer treatment centres in Livingstone and Ndola. This is to decongest the Cancer Diseases Hospital in Lusaka. Also, the government will upgrade the radiotherapy equipment infrastructure at the Cancer Diseases Hospital for improved health care service. The budget line for 2024 for health infrastructure is K1,394,734,394. This represents a 24% increase on the 2023 budget line.

Regarding the supply of essential medicines and medical supplies, as indicated, the government plans to procure the next batch of health centre kits to cater for citizens beyond the middle of 2024. Furthermore, there are plans to establish the local production of pharmaceuticals. The budget line for drugs and medical supplies is K4,951,092,795. This is an 8% increase on the 2023 budget line for this.

In terms of personnel, the government has begun a recruitment of 3000 health personnel, the completion of which is planned for the end of this year. For the 2024 period, the government has planned an increase of 4000 health care personnel.

Finally, the current implementation of the Electronic Health Record System serves 600 health facilities. In the next three years, the government will increase the implementation of this system to 3000 health facilities. This is set to reduce the costs of manual processing, and provide information for planning and allocation. Importantly, more health personnel will have access to critical health records whenever needed. The budget line for this expenditure is K120,000,000.

3.4 Analysis of the 2024 Health Budget

a) Positive Elements of the 2024 Health Budget

Since the 2022 national budget, health care expenditure has been rising significantly, sometimes exponentially. The jump between the 2021 budget and the 2022 budget amounted to a 44% increase, which recognised the impact that the Covid-19 pandemic was having all around the world, and in particular in Zambia. In subsequent years, the increases were all over 20%. The health budget therefore seemed responsive to the needs of the period, and is an indication of the government's concern to provide access which is as universal as possible to the people of Zambia.

One way the government has sought to provide universal access to medical care is the construction of mini hospitals. Providing adequate access to medical care for people must include the provision of more good facilities to more people. This would also mean that more people would have to travel smaller distances to access medical care. Moreover, the focus on providing more maternity annexes to more expectant mothers is an important way to intervene to reduce maternal mortality rates.

If one were to look at the location of where the construction of medical facilities is occurring, the government can be commended for improving access to medical facilities to rural areas. For example, the 4 mini hospitals that remain to be constructed from the 2023 budget include hospitals to be built in Lufwanyama, Mpongwe and Mufumbwe districts. Moreover, the construction of cancer treatment centres in Livingstone and Ndola will mean that patients in the Southern and Copperbelt Provinces would not have to travel to Lusaka to get treatment. This further increases access to medical care for cancer patients and is a positive step towards universal access to cancer treatment in Zambia.

Finally, the Electronic Health Record System is a major contribution towards medical research. Zambian teaching university hospitals can benefit from the real time research available with the information from the increased capacity of the database. Health care personnel will also have access to medical information in their service of the people.

b) Challenges for the 2024 Health Budget

While the government's commitment to better medical supplies and facilities is evident, one challenge for the government would be to make sure that all new medical facilities have access to the essential medication and drug supply. This applies to all existing medical facilities as well. This concern is raised because of JCTR's experience when visiting medical facilities in the field during project implementation. For instance, in 2022, JCTR visited a clinic in Choma District in Livingstone. The clinic had been upgraded using CDF funding. But JCTR found a shortage of staff and equipment, as well as medical supplies at the clinic. Based on this experience, JCTR would recommend that even though health care personnel are increasing and more funding is available for

medical supplies, careful attention is given by the government to ensure that new and existing medical facilities are fully supplied.

Associated with the challenge of ensuring that all medical facilities have whatever they need to function at their best, one can think of the challenge to health care kits. The first issue has to do with the sufficiency of these kits for the magnitude of health care needs for each district. While the health care kits do give a standard collection of pharmaceutical products which cover basic healthcare needs, the big question is whether each district has sufficient supply of health care kits to cover the medical needs of the district. In order to ensure that sufficient supply is given to each district, there is a clear need to have up to date information about the usage of medical supplies from each district. This challenge points to the necessity of maintaining databases for medical supplies and that the government's response to the needs of each district is timeous.

4. The Community Development and Social Service 2024 Proposed Budgetary Allocation

The mission of the Ministry of Community Development and Social Services (MCDSS) is to facilitate the provision of equitable Basic Social Protection services for inclusive sustainable human and community development.² The ministry draws its mandate from Government Gazette Notice No. 1123 of 2021. Under the Government Gazette Notice No. 1123 of 2021 which was published on 24th September 2021, the Ministry is subject to Adoption Services, Child Development, Child Policy, Child Welfare Services, Community Development Policy, Community Development Training, Disability Affairs Policy, Food Programme Management, Group Housing, Juvenile Correctional Services, Non-Formal Education Skills and Skills Training, Non-Governmental Organizations Policy, Persons With Disabilities, Probation Services, Rehabilitation of Persons with Disabilities, Social Welfare Policy, Street Children, Supporting Self Help Initiative, Welfare Service and Counselling Organizations.³ Succinctly, the Ministry of Community Development and Social Services implements basic social protection services aimed at protecting livelihood and empowerment to the poor, the vulnerable and the marginalized members in our societies.

² [Vision, Mission and Values – Ministry of Community Development and Social Services \(mcdss.gov.zm\)](https://www.mcdss.gov.zm)

³ Government Gazette Notice No. 1123 of 2021. Page 587. 24.09.2021

In this analysis of the proposed 2024 national budget, JCTR reflects on two aspects of social protection falling under the mandate of the Ministry of Community Development and Social Services. The two mandates will include the management of social cash transfer and the implementation of the food security pack programme.

To begin with, JCTR acknowledges the growing levels of poverty in Zambia. From the Living Conditions Monitoring Survey (LCMS, 2022), by Zambia Statistical Agency reveals that poverty in Zambia is on the upward trend (both urban and rural poverty).⁴ The table below illustrates the poverty trend from 2015 to 2022.

Poverty Trends (percent) by Residence, Zambia, 2010-2022

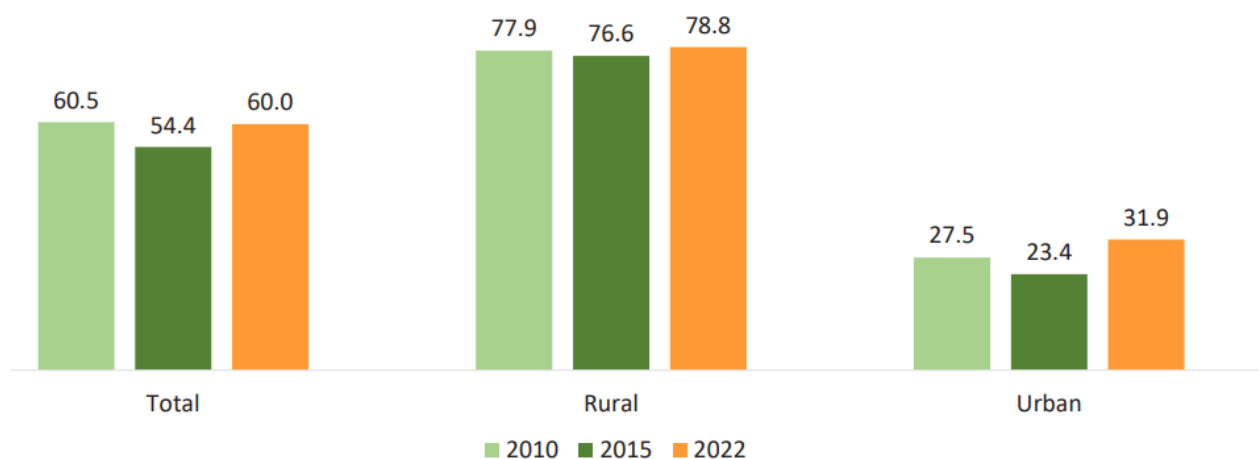


Figure 1: Source from the 2022 Living Conditions Monitoring Survey

The above figure shows that in the last seven (7) years, poverty has increased both in rural and urban. The causes of the rise of the poverty levels may be attributed to various factors like:

- Climate change:** in recent past, we have experienced weather shifting, leading to late onset of rainfalls, shortening the rainy season or flash floods. Climate change impact has destabilized Zambia’s food security system, especially with the component of food production. Many households, especially in rural communities are agrarian (Subsistent farmers). With the advent of adverse effects of climate change, many rural households are struggling with producing food for home consumption, and later, surplus to be sold. This is because, due to climate change effects, sometimes crops in the fields do not reach the maturity stage before the rains set off or the rains become intense when the crops are ready for harvest, leading to destruction and exposing households to climate vulnerability.

⁴ Living Conditions Monitoring Survey, 2022. ZamStats

- **Outbreak of Pests:** in many regions in Zambia, especially Luapula and Southern provinces, the outbreak of pests have devastated the source of livelihoods for many community members. For example, community members in Mansa and Samfya districts continue to battle with pests devouring their cassava. In these communities, cassava is the main crop for both nutrition and earning household income. Therefore, the fall of pests put economic stress on households. In Southern province, pests continue to cause problems for farmers and households into livestock keeping. Hence, it makes sense to argue that the outbreak of pests continue to contribute to increase in poverty levels in Zambia, thereby, forcing more households into poverty vulnerability.
- **High cost of producing food:** In the last few years, the cost of farming input have incessantly increased. Economically, most farming inputs like hybrid seeds, fertilizers and other necessary chemicals have become economically inaccessible. The high cost of farming inputs can be attributed to the Russia-Ukraine war that ensued in 2021, COVID-19 disruptions as well as the mismanagement of the 2022-23 Farmer Input Support Programme (FISP). The economic inaccessibility of farming inputs by many rural communities has forced many households to abandon agricultural activities, thereby, stressing members of our societies to depend on buying already produced and processed foods. This is also seriously contributing to poverty levels in our communities.
- **High levels of unemployment:** Unemployment in Zambia continues to be a serious challenge contributing to rising poverty levels in Zambia. Currently, the youth unemployment is predominantly leading the curve on the distribution on unemployment rates among those who can work, willing to work and have the capacity to work. One of the causes of unemployment may include shutting down of companies (especially during COVID-19 outbreak), cost of doing business, forcing employers to down size of number of employees, flooded labour markers, limited job opportunities etc. In this regard, high levels of unemployment have continued to contribute to the rising poverty levels in Zambia.
- **High Cost of Living:** Over 27 years, JCTR has been conducting a survey on the cost of living (since 1996). The last few years, the cost of living has exponentially risen, both in rural and urban communities. The major contributors to the rising cost of living have been housing, energy (charcoal/electricity), edible oils, cost of mealie meal, cost of transport and other items. These increases have arisen due to rising demand, cost of production, cost of

doing business, income taxes, scarcity of commodities, and regional demands of commodities like mealie meal, seasonality (where some commodities like charcoal and other food items become very expensive for ordinary households). This has continued to contribute to the rise poverty levels

- **COVID-19 Pandemic:** the advent of the COVID-19 pandemic in the early 2020s ravaged Zambia's economy, especially with the shutdown of many economic activities like the hospitality industry (hostels, lodges, restaurants, resorts, parks etc) and other trading centers. The pandemic impacted on the availability and accessibility of commodities, movement of needed merchants as well as shrinking the global nature of humanity. This contributed to poverty, especially in developing countries who are now beginning to recover from the COVID-19 shocks.
- **Unstable macroeconomic fundamentals:** In the recent years, the macroeconomic fundamentals like exchange rate, inflation rate and debt-stock have been very unstable. This has impacted on the prices of commodities, thereby, making it difficult for many households to afford some essential items. The debt stock has limited Government's spending on key social sectors like education, health, water and sanitation as well as social protection. Largely because debt services claims a huge percentage from Zambia's national budget. Equally, this has impeded many community members, especially the vulnerable from accessing quality health care, clean water and improved sanitation, substantive social protection to escape the poverty loop.
- **Low financial literacy among rural communities:** Even though the Government has numerous public financing tools like the Constituency Development Fund (CDF), Citizens Economic Empowerment Commission (CEEC) loans and other market boosters, the financial literacy among many community members community to limit their accessibility to these public financing tools. On the other end, those managing the implementation of these public financing tools have not popularized the tools by raising awareness among community members on these tools, building capacities of viable applicants on accessing the funds, sharing information on the implementation of the programmes as well as quality monitoring and evaluation of the implementation of the same public financing tools.

In bid to address some of these challenges, the Government has been running programmes aimed at safeguarding livelihoods and uplifting the living standards and conditions of ordinary people in

Zambia, especially the vulnerable and the poor (e.g the aged, those living with disabilities, child headed homes, female headed homes etc). In this memorandum, JCTR will focus on the Social Cash Transfer (SCT) and the Food Security Pack (FSP).

4.1 Social Cash Transfer and the Proposed 2024 National Budget

Social cash transfers are cash payments given to vulnerable individuals and households to reduce extreme poverty and promote children’s rights, particularly the right to education, health, and nutrition.⁵ The overall objective of the Social Cash Transfer programme in Zambia is to reduce extreme poverty and the intergenerational transfer of poverty among beneficiary households and to ensure that household members live a dignified life through meeting their basic needs and nutrition.⁶ The Government, through the Social Cash Transfer Programme (SCT), envisions notable improvements in the lives of households, reducing hunger and better school attendance for children.

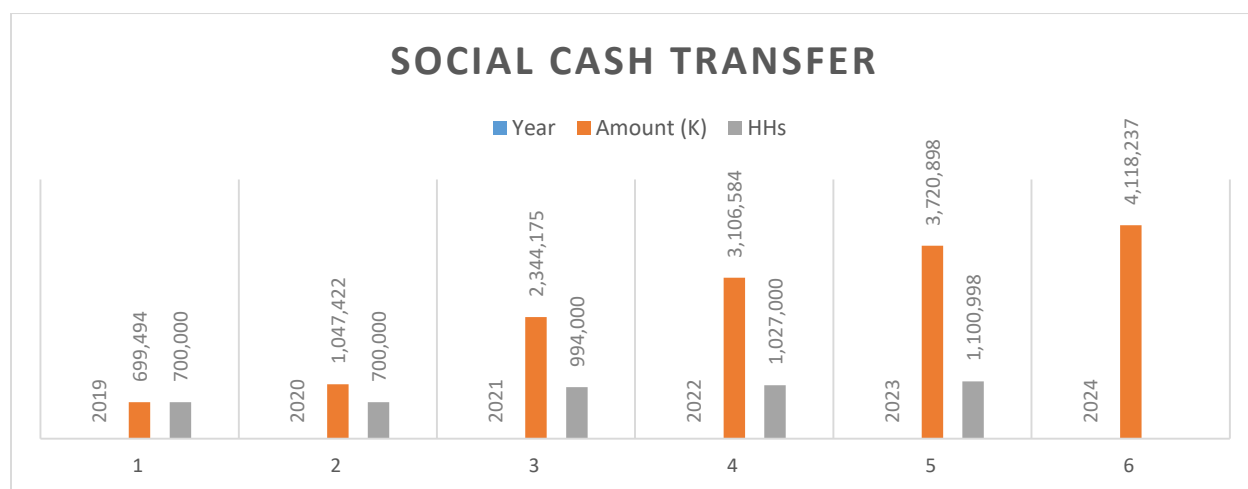


Figure 2: A chart showing budgetary allocations and the number of households

The above chart shows the national budgetary allocation to Social Cash Transfer from 2019 to 2024. In 2020 and 2021, Social Cash Transfer witnessed an exponential increase. One may attribute the increase to the advent of COVID-19 during the cited years. The above chart shows that allocation to Social Cash Transfer since 2019 has been on the increase. This may entail that the rise of number

⁵ David Chibanda. Social Cash Transfers and Children’s Rights in Zambia. *Sociology and Anthropology*, 7(1), pp. 20-37.

⁶ Ministry of Community Development and Social Services. Social Cash Transfer – Ministry of Community Development and Social Services (mcdss.gov.zm)

of beneficiaries and budgetary allocation are only a symptom of the depth of the poverty challenge in Zambia. In principle, social protection programmes must be aimed at economically empowering beneficiaries from escaping the poverty loop. In as much as it is commendable the Government has proposed to increase Social Cash Transfer budgetary allocation from ZMW3,720, 898, 131 to ZMW 4,118,237,220 (increased by ZMW397,339,089), a lasting solution to prevent other community members from falling into the poverty trap has not been developed. Therefore, the budgetary allocation to carter for the number of households to escape the poverty loop is not adequate.

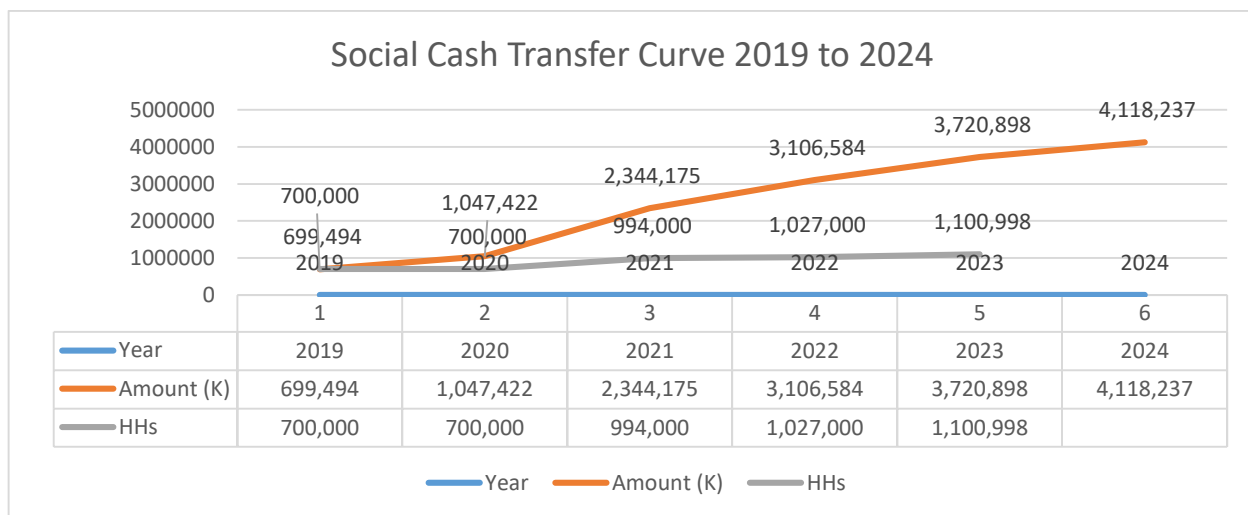


Figure 3: The chart shows the curves of increase in number of beneficiaries against the budgetary allocation

Figure three shows that the number of beneficiaries has been increasing since 2019. In the proposed 2024 national budget, Government has proposed to increase the Social Cash Transfer budgetary allocation. However, the proposed budget has not indicated the number of beneficiaries to reach in the year 2024. From 2019 to 2023, the social cash transfer per household has increased from ZMW90, to ZMW110, ZMW115, ZMW200 and ZMW400 (for those who are severely disabled). Arguably, it can be concluded that the Social Cash Transfer programme in Zambia has focused so much on casting the net wide, than deepening its lasting impact of uplifting the living standards and conditions of beneficiaries. From the itemised factors contributing to the growing levels of poverty in Zambia, it can be argued that the current social cash transfer allocation per household is not sufficient to meeting demands like housing, energy, transport, nutrition in the light of the continued rising cost of living.

4.2 Food Security Pack and the Proposed 2024 National Budget

The Food Security Pack (FSP) programme as a safety net project was introduced in the late 2000s by Government to empower poor and vulnerable but viable farmer households who had lost their productive assets due to recurrent unfavorable climatic conditions and adverse effects of structural adjustment reforms that reduced their productivity at household level.⁷ The beneficiaries of the programme are supported with inputs like hammer mills, maize shellers, chickens and small ruminant animals such as sheep and goats etc. The main purpose of this purpose is build capacities of beneficiaries to escape poverty, build sustainable livelihoods, increase their productivity, enhance food security and cushion their adaptive capacities to climatic shocks. The programme comprises three categories and these include:

The programme has three major components namely;

- ❖ Alternative livelihood initiatives
- ❖ Rain-fed Cropping
- ❖ Wetland Cropping

The Ministry of Community Development and Social Service emphasize that the food security pack is not merely a free handout. And as such, the beneficiaries are expected to pay back 10% after the beneficiary has been supported. According to the Ministry of Community Development and Social Service, the pay back are either kept at community level or sold off and funds that are realized are used by the community members for other food enhancing.⁸

⁷ Ministry of Community Development and Social Service. [Food Security Pack Programme \(FSP\) – Ministry of Community Development and Social Services \(mcdss.gov.zm\)](http://mcdss.gov.zm)

⁸ Ministry of Community Development and Social Service. [Food Security Pack Programme \(FSP\) – Ministry of Community Development and Social Services \(mcdss.gov.zm\)](http://mcdss.gov.zm)



Figure 4: Chart showing the budgetary allocations from 2019

The above chart shows the budgetary allocation to the Food Security Pack programme. Relatively, the programme has maintained the low to stable increase in the budgetary allocations from 2019. For example, in 2020 and 2021, the allocation was the same. Equally, in 2023 and the proposed 2024 national budget, the allocation is the same. This may imply that the food security pack programme has maintained the steadiness because of:

- ❖ Emphasising that it is not a free handout
- ❖ Community approach to implementation of the food security pack
- ❖ Intentional about the beneficiaries (vulnerable, but viable household farmers)
- ❖ Not giving cash, but supporting with procurement of input
- ❖ Ensuring the 10% pay back, which is then ploughed back into the community, with specific intention on enhancing food security.

Besides the budgetary allocation being similar, equally the trends have shown that the food security programme beneficiaries have remained within margins. For example, there were about 80,000 beneficiaries in 2019. Equally, there were 80,000 beneficiaries in 2020. Furthermore, the difference between the beneficiaries in 2022 and 2023 national budget were 1000 beneficiaries.

The consistence in the number of beneficiaries may imply:

- ❖ Robust selection criteria of beneficiaries
- ❖ Good monitoring and evaluation mechanisms to ensure accountability and transparency of the implementation of the programme.

- ❖ Measurable outcomes, where beneficiaries who attain sustainable livelihood wean off the programme and plough the 10% pay back into the community
- ❖ The project meeting the intended goals and objectives

Similarly like the Social Cash Transfer, the Government has proposed to spend ZMW1, 260, 856, 784 as compared to ZMW1, 206, 855, 784, a difference of ZMW54, 000,000. However, the Government has not indicated the targeted number of beneficiaries in the 2024 fiscal years.

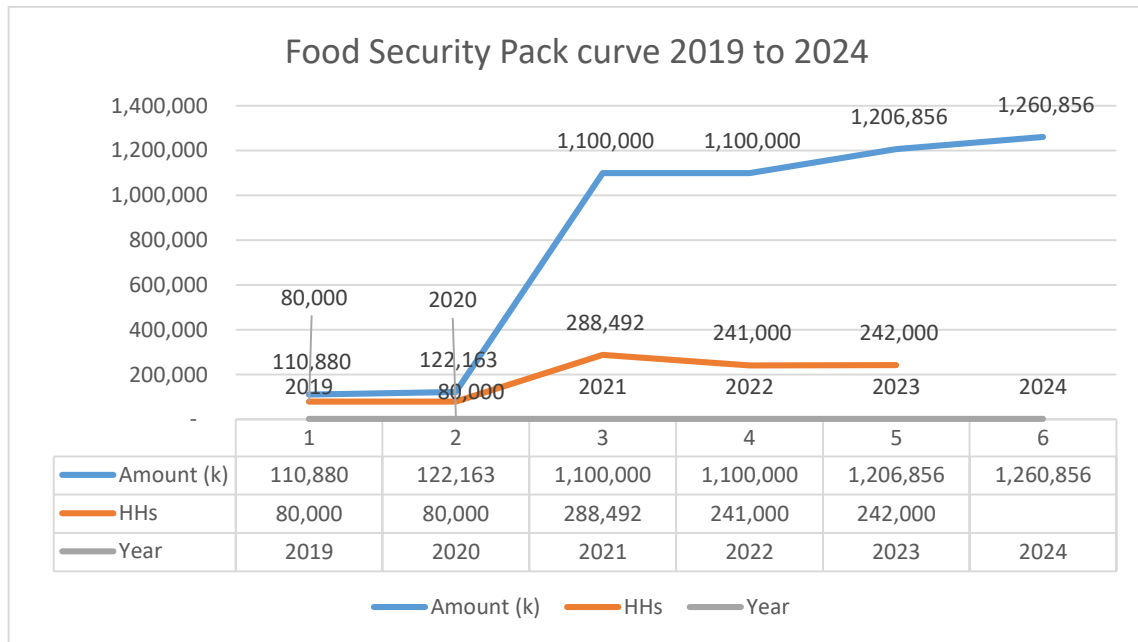


Figure 5: Chart showing the number of beneficiaries

The above chart shows that the budgetary allocation to the food security programme exponentially increased in 2020. This may be attributed to the climatic shocks like droughts and flash floods in some areas. Basing on the analysis, it can be concluded that the proposed 2024 budgetary allocation to the food security pack is adequate.

5. Conclusion: General Impact of the 2024 Budget on the Health Sector and the Community Development and Social Service Sector

The call of Pope Francis is to keep the human person at the centre of any debate on health care and social support. The 8th National Development Plan strives to extend health care services to more Zambians, to strengthen the provision of district health services, as well as to enhance integrated health information systems. Moreover, the latest poverty statistics puts Zambia in a crisis of need, with 60% of the population being identified as poor.

What the JCTR analysis indicates is that the budget for health care has been increasing dramatically over the past few years, and the Centre acknowledges the positive elements of this increased expenditure, namely: investment in new health facilities, more medical supplies and health personnel. However, the Centre remains concerned that databases are adequately maintained regarding medical supply usage. This is linked with the need for the government to ensure that new and existing healthcare facilities are sufficiently provisioned with the necessary resources.

The Social Cash Transfer system is designed to respond to crises of poverty in the country and the budget has increased for the 2024 period for the system. Furthermore, the Food Security Pack Programme is aimed at providing the necessary support for vulnerable but viable farmers. While the budget for the Food Security Pack Programme is adequate, a source of concern remains the Social Cash Transfer system. The allocation to this programme has increased, but the increase is not enough to ensure a household can escape the poverty loop against the background of a rising cost of living and the shocks brought about by climate change.

JCTR would like to commend the government for the dedication it has shown to the improvement of the health care sector, as well as the improvement of the social support systems and community development. The 2024 budget presents a committed plan for this next period. JCTR hopes that with the implementation of the budget and subsequent improved responses to the challenges that have been identified in this report, the government can lead the way to a more prosperous 2024 for Zambia.

6. Recommendations

- ❖ The government is urged to keep up to date databases of medical supply usage in districts, ensuring that the number of health care kits suffices for the medical needs of each district.
- ❖ Against the backdrop of new medical facilities and expanded medical and drug supplies, the government should ensure that all new and existing facilities are adequately provisioned with the necessary health resources.
- ❖ Provide a link between the Disaster Management and Mitigation Unit on climate warnings to the viable farmers who benefit from the Food Security Pack Programme.
- ❖ Develop a multi-sectoral approach to the implementation of social cash transfer, where beneficiaries (viable) are encouraged to form cooperatives and apply for CDF empowerment and CEEC loans. This will help the SCT beneficiaries to escape the poverty loop through access to public financing tools
- ❖ The Ministry of Community Development and Social Services must open room to support SCT beneficiaries with viable business proposals
- ❖ The Government must integrate climate resilience and adaptive strategies in the implementation of SCT and FSP (Republic of Zambia, 2023). This will help SCT beneficiaries to be able to adapt during climate shocks
- ❖ Ministry of Community Development and Social Service, Civil Societies and the Church must develop capacity building activities on financial literacy among community members, especially on accessing public financing tools.

- ❖ The food security pack must be expanded to consider the issue of addressing pests

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Presentation

Advocacy on Socio-Economic Development

2023-10-05

Memorandum on Implications of the 2024 Budget on Community Development, Social Services and Health - Submitted to the National Assembly Committee on Health, Community Development and Social Services

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<https://hdl.handle.net/20.500.14274/1809>

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