

the SEEP NETWORK

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Economic Support and Income-Generating Programming for HIV and AIDS-Impacted Communities

Introduction

In April 2006, the SEEP Network Market Development Working Group (MDWG) held the second of two online discussions to explore the challenges, innovations, and possible next steps for economic security and renewal in communities and households impacted by HIV and AIDS. This exchange broadened participation beyond the microenterprise development community to gather input from international development practitioners involved in various aspects of HIV and AIDS work—livelihood security, economic support, enterprise development, and related areas.¹

The format for the discussion was an email listserv that lasted two weeks, guided by specific questions, and facilitated by Linda Jones of MEDA (Mennonite Economic Development Associates). The discussion was launched with suggested readings, most importantly USAID's *Strengthen-*

ing the Role of AIDS-Affected MSEs in Productive Markets and SEEP's *HIV/AIDS and Microenterprise Development Annotated Bibliography*. (See References section.) Although the 64 registrants for the discussion indicated strong interest in the topic, the participation of relatively few (less than 15) was interpreted to reflect the limited experience in economic and income-generating programming for HIV/AIDS-impacted communities.

Participants shared two types of program experience. In one, many integrated, holistic, grassroots initiatives, established by community-based organizations (CBOs) and self-help groups (SHGs), offer a number of low-level support options, from counseling to health services to community awareness, economic support, and legal services. In the second type, a few donor-funded, larger-scale economic development initiatives include HIV/AIDS-impacted

Abstract

This progress note is a synthesis of an on-line discussion held in April 2006, hosted by the SEEP Network's Market Development Working Group. The on-line discussion, "Economic Support and Income-Generating Programming for HIV and AIDS-Impacted Communities," which followed a 2004 exploratory discussion, invited broader participation from the economic development and HIV and AIDS communities of practice. Although the 64 registrants for the discussion indicated strong interest in the topic, the participation of relatively few is interpreted to reflect the limited experience in economic and income-generating programming for HIV and AIDS-impacted communities. The significant challenges discussed ranged from how to address skills loss to how community-based organizations and self-help groups can link with broader economic development initiatives, and from how to deal with the threat of violence against HIV and AIDS-support programs to how to raise funding for economic support programs in HIV/AIDS-affected communities.

¹ As a side note, one of the authors attended the 20,000-participant 26th International AIDS Conference in Toronto, in August 2006, where the conclusions of the on-line discussion were largely reinforced. The agenda and presenters at the conference showed a greater awareness of the vicious cycle of poverty and AIDS and the need for community-level economic empowerment, particularly for women. Numerous community-based initiatives in income generation and market integration were featured, and macro-level players echoed the economic concerns of the grassroots organizations.

households. Some programs form member-driven groups for economic purposes, and members find creative ways of addressing HIV and AIDS-related needs.

Other programs are more expressly designed to help integrate HIV/AIDS-affected communities into markets to help them secure and advance their livelihoods.

There were several objectives for the discussion:

- To gain insight into economic programming (non-financial services) for HIV/AIDS-impacted communities and households, including youth- and elder-headed families
- To share innovations, practical experiences, cases, and strategies that have helped HIV/AIDS-affected households and communities deal with economic challenges
- To further brainstorm innovative solutions to counteract the constraints faced as a result of new family, community, and market structures
- To facilitate improved understanding, relationships, and dialogue among practitioners in different fields who are concerned with income generation and economic support for HIV/AIDS-impacted communities and households
- To discuss next steps, including what resources are needed to advance economic support for HIV/AIDS-impacted communities and households

Economic Support and Income-Generating Programs

In the on-line discussion, participants shared their experiences in offering economic support to HIV/AIDS-impacted communities.

These programs fell into several categories, and are described below. Although the examples focus predominantly on Africa, participants recognized the rising prevalence of HIV and AIDS throughout the rest of the world, with alarming growth rates in Asia, Eastern Europe, and the Caribbean. Programs are always context specific, but it is anticipated that the lessons learned in Africa will benefit the larger world community confronting the pandemic.

Grassroots Initiatives Deliver Integrated Support

The on-line discussion revealed that economic interventions in HIV/AIDS-impacted communities are often started and implemented by grassroots associations—typically referred to as self-help groups or community-based organizations. The activities of community groups tend to be wide-ranging, representing a bottom-up form of what is termed “integrated programming” in the development industry. That is, economic support is one of a spectrum of initiatives from household nutrition to counseling and awareness-raising. Information collected at the recent 26th International AIDS Conference in Toronto, in August 2006,² rein-

forces the conclusion that community initiatives are widespread and comprise the majority of economic programs for disadvantaged HIV/AIDS-impacted households.

The economic interventions of such groups are usually classified as income-generating activities, and the goals are immediate and basic: to alleviate extreme hardship through incremental increases in household finances, and often, to help sick parents develop a business that will provide for their children once the parents are no longer able to provide for them. The case in box 1 illustrates these types of economic interventions that SHGs and CBOs carry out.

Donor-Funded Initiatives Offer Economic Programming *Plus*

Economic programming for HIV and AIDS-affected communities is sometimes funded by large donors, with national and international development agencies as the implementing partners. Although the primary focus of these programs is economic, some implementing agencies realize that economic development and market integration require additional interventions such as HIV and AIDS awareness or access to health care. This has resulted in programs that work closely with community groups or with other partners who can provide essential non-economic support. The following describes two programs with quite different approaches.

² See 26th International AIDS Conference web site, <http://www.aids2006.org/>.

Box 1. Vumilia: A Community-Based Initiative in Western Kenya

Vumilia—meaning “positive perseverance”—is an SHG in western Kenya. A local social worker was inspired to donate her farm to HIV-positive women from a local church so that they could grow food to provide for their families. The social worker also offered counseling to the women, raising their awareness of the disease and their situation. The women were empowered to join forces to address the many challenges they faced with their families and communities, resulting in the formation of Vumilia. By the time of the on-line discussion, the group comprised 30 women who served approximately 700 community members, delivering demand-driven support, such as:

- growing vegetables to eat and to sell for income generation;
- raising awareness of HIV and AIDS;
- reducing the stigma and promoting acceptance of HIV-positive individuals;
- offering informal counseling services;
- helping community members access medicine and medical care;
- housing and feeding orphans;
- providing scholarships to orphans;
- reaching out to remote villages (selling vegetables in these areas enables Vumilia women to hide their HIV/AIDS work while earning much-needed cash); and
- building businesses for their children to run so that they will be independent in the future.

Vumilia receives some external support, much of which is provided by the social worker herself from her personal and church network: access to antiretroviral drugs, training for community health workers, improved bicycles that can carry a load of vegetables or a sick passenger, small amounts of funding, and material donations. Further, because of the social worker’s relatively high status as an educated, urban woman married to a prominent non-government organization (NGO) leader, the group is somewhat protected from attacks that can come from hostile community members who are threatened by the project.

Note: For more information, contact Rose Moon at ayuma@nbnet.co.ke.



International NGO creates community-based organizations

The following case is illustrative of donor-funded programs that initiate the formation of member-driven, community-based organizations in HIV/AIDS-affected areas. In forming community or neighborhood groups, it has been found that it may be better to not specifically target HIV-positive

individuals because of the social barriers when they disclose their status or when other people know. However, once formed—frequently as financial services initiatives—these community groups may take on a life of their own, developing HIV/AIDS relevant support in ways not planned by the implementing agency. For example, the predominance of HIV/AIDS-im-

pacted members in an open and member-driven setting can lead to meaningful emotional support and tangible assistance to affected families. In this way, an economic program develops into an integrated program that includes a broader range of both non-economic and economic activities, such as skill building for income generation and marketing integration.

Box 2. NGO-Initiated Community Groups: The Salvation Army's WORTH Program in Kenya

The Salvation Army's WORTH program in Kenya is reaching 7500 women, and although it is fundamentally a financial services program, it offers interesting lessons about NGO-initiated CBOs and integrated programming.

The Salvation Army is implementing the WORTH program with the technical support of Pact, Inc., in three areas of Kenya—Embu, Migori, and Bungoma. This women's empowerment program combines savings, village banking, and literacy (focusing on financial literacy). Training materials also cover non-financial economic development issues, including good business and marketing practices.

The women form groups of 25 participants, which are then organized into clusters of 10–12 groups. Each WORTH cluster receives technical support and training from an "empowerment worker" who has been selected by the women in her cluster. The worker undergoes a rigorous math test, interview and training, and receives a stipend from the cluster for the technical support she provides to each group twice a month. The women pay for their own books and find their own literacy volunteers (who receive training from the program). The program does not provide any external loan capital. All the funds are generated by the women themselves. The program provides training and technical support to the empowerment workers for two years.

Though not a program objective, the Salvation Army has found that nearly every WORTH group has begun to provide care and support to orphans, vulnerable children, the disabled, elderly, sick, and widows in their communities. A quick survey indicated that over 2000 such individuals are receiving care and support from the WORTH groups so far. (The program had been operating for six months at the time of the online discussion.) Some of the WORTH groups are solely comprised of widows and older orphans, and participants state that they benefit from their group's emotional support in addition to the financial benefits of being in the group. These groups in particular are naturally inclined to reach out to other widows in their communities.

Another unintended consequence of the program was of particular interest to the discussion participants—the WORTH clusters get together about once a month for their own market days, bringing their products to sell to each other and to whoever else is in the area. Finally, the Salvation Army expect that there will be community-to-community transfer by experienced WORTH groups with management committees training women in other communities to set up and operate their own groups.*

* This has been Pact's experience in Nepal.

Note: For more information, see www.sawso.org or contact Holly Christofferson at holly_christofferson@usn.salvationarmy.org.



International development agency supports market integration

Another form of donor-funded programming involves interventions that set up program structures to deliver support and services to affected communities. Although not a prerequisite of the program, the agencies often collaborate with existing local NGOs, SHGs, and CBOs. These programs often have significant funding (millions of US dollars, rather than tens, hundreds, or thousands) and can be more ambitious, going beyond subsistence activities with some income generation to full market integration. Box 3 describes a successful market integration program, Linkages for the Economic Advancement of the Disadvantaged (LEAD), funded by the U.S. Agency for International Development (USAID) and implemented by Development Alternatives, Inc. (DAI), in Zimbabwe.

Programming Challenges and Questions

As discussion participants described their programs and project models, a number of challenges and unanswered questions surfaced:

- Need for, and complexity of, integrated programming
- Sustainability of economic ventures at the grassroots level
- Need for viability of large NGO and CBO partnerships for community-level economic development
- Funds for program implementation, at least in part because

HIV/AIDS programming has been largely viewed as a health issue until recently

- Negotiation of public and private partnerships between government and the commercial sector, and public and public partnerships between large NGOs and CBOs
- Loss of productive labor as the disease predominates amongst older youth and adults (ages 15 to 49)
- Generation gap in skill transference due to high mortality among educated and skilled adults, leading to loss of community and even national skill and knowledge bases
- Better way to approach the situation of orphans and vulnerable children
- Relationships and conflict issues inherent in community groups and other structures
- Stigma and threat of violence for program participants
- Ability of donors and implementers to make the long-term commitment that is necessary in working with affected communities.

In the remainder of this section, the synthesis provides details of the more in-depth discussions around some of the challenges listed above. It also highlights recommended solutions that emerged from the dialogue.

Box 3. International NGO Development Agency Facilitates Market Integration: The USAID-Funded LEAD Program in Zimbabwe (2001-2005)

The DAI-implemented LEAD program was one of the first economic development programs that explicitly targeted HIV/AIDS-affected households, mainly in rural areas. The approach was market driven; the implementers found opportunities in the private sector, primarily in agribusiness, and then linked HIV/AIDS-affected households to those opportunities through locally-based NGOs. Enterprise development activities included growing vegetables (both fresh and processed for domestic and export markets), paprika, birds-eye chilies; rearing livestock (goats, ostrich, broiler chicken, dairy); and farming grains (maize; millet, sorghum for human consumption as well as for poultry feed), black-eyed peas, soybeans, protea (flowers), fruit (pineapple, passion/granadilla, banana), and honey.

LEAD brokered agreements and, usually, but not always, worked in tripartite collaboration with a buyer, NGO intermediary, and LEAD project. World Vision International-Zimbabwe was one of the NGO counterparts, for the goat marketing, small grains, and micro-irrigation initiatives. Having a pre-identified buyer was an important factor in the program. LEAD also made grants to participants for, or lent them, seeds, fertilizer, fencing, micro-drip irrigation kits, crop-specific technical assistance, general agronomic/post-harvest assistance, working capital, and organizational assistance. In terms of integrated programming, LEAD also supported a special educational campaign on specialized nutrition with simple remedies that could be used to combat such symptoms of illness as thrush, nausea, and loss of appetite. During the program's four years, it was reported that LEAD created over US \$5 million in additional annual sales for rural communities, which translated into significant and measurable positive impacts on household nutrition, and the ability to afford medicine and education for girls.



It is important to emphasize that the LEAD program, although much larger and more ambitious than the SHG and CBO initiatives described above (Vumilia and WORTH), recognized the merits of working through local organizations. The community groups and local NGOs had developed excellent rapport with the communities in which they worked, and built their own capacity in social and health education and provision of basic livelihood skills. LEAD discovered that what these organizations lacked was market orientation and the skills and experience to broker deals with buyers and financial institutions. This is where the LEAD project could help—taking income generation to the next level of market integration.

Note: For more information, please see http://www.dai.com/work/success_stories_detail.php?stid=8.

Leadership, Group, and Community Conflict

Conflict within and politicization of CBOs can make it difficult for programs to work constructively for desired results. This is particularly true in HIV/AIDS-affected communities, where communities are often divided about the extent to which they are willing and able to recognize HIV and AIDS as a legitimate disease—in some cases, regarding the disease as a curse that instills fear and mistrust; and where leadership turnover is common due to high rates of sickness and death. Individuals involved in initiatives that target HIV/AIDS-affected households can be ostracized or, worst, threatened with violence from other community members. Discussion group members suggested three solutions to these issues:

1. Broad economic programming that supports the entire community and does not force disclosure of HIV status, while at the same time, it raises awareness about HIV and AIDS to increase understanding and reduce stigma.
2. Extending support to functioning grassroots initiatives that target HIV and AIDS affected people in their efforts and strategies. Assistance could include finance, capacity building, and linking leaders with other similar groups for mutual aid, joint funding initiatives, and strategy sharing.
3. A solid understanding of the power structures within the communities, as well as knowledge of how the individuals and groups perceive their community. Base-

line activities, such as participatory rural assessment, can help elicit the information that reveals priorities and provides the basis for group formation.

Knowledge and Skill Loss

Several participants raised the concern of knowledge and skills loss in HIV/AIDS-impacted communities, due to high mortality among the productive age group. The discussion emphasized that the economic consequences related to loss of workers are not just immediate, but have significant long-term effects when knowledge and skills cannot be transferred from generation to generation. Additionally, specialized knowledge and skills are being lost that could contribute to easing the impact of the disease: for example, health support systems are suffering due to illness and death of health workers, while the academic community has been deprived of critical thinkers who could contribute to their nation's economic development. Efforts to counter these losses are limited—a few organizations offer business programs—but in many cases, the generation gap makes it difficult to achieve strong results. Some related recommendations include:

- increased investment in education and training in business and entrepreneurship in general, but also in core industrial sectors of economies affected by HIV and AIDS; and
- at the community level, supporting HIV-positive people to trans-

fer their skills as part of their legacy. This can only happen if communities recognize and respect HIV-positive individuals.

Risk Aversion and Reduced Resources

A related challenge is the risk aversion of vulnerable households who have reduced capital of all kinds: e.g., fewer educated members, diminished assets, and general labor shortage. Decreased resources call for livelihood security strategies that seek to protect labor, diversify investment, reduce labor intensity, and target accessible local markets. This is in stark contrast to many private sector development initiatives that seek to help families specialize, intensify investment, and take risks on higher-value products that can be sold to more profitable but distant markets. Two primary recommendations from the discussion addressed this challenge:

- Private sector, market development, or value chain initiatives need to take into consideration the context of programming in heavily HIV/AIDS-affected areas. In order to ensure that benefits reach impacted households, these programs need to support sectors and/or market roles for HIV/AIDS-impacted people that match their labor and resource availability as well as the appropriate level of risk taking.
- Private sector and enterprise development principles need to be interpreted, adapted, and disseminated to act as a support for programs that target HIV/

AIDS-impacted communities, to enable these programs to better reflect the demand for labor-saving, low-risk business activity of their clients.

Sustainability of CBOs and SHGs

The most active institutions supporting HIV/AIDS-affected communities are small community groups that operate in isolation with little in the way of external funding or capacity-building support. A primary challenge of many community-based groups is sustainability. SHGs and CBOs often struggle to provide the help needed by households, including children and youth. This leads to the question of how such a community model could be scaled up and, if it is replicated, how quality can be assured. At the same time, international development agencies are finding that improved livelihoods and market integration strategies can be scaled up through such groups, creating a sustainable partnership model. A successful partnership model that combines the respective expertise and experience of CBOs and international development agencies calls for:

- replication of strategies in which internationally funded economic support programs invest in social support initiatives led by CBOs;
- broad financial and capacity-building support for CBOs and SHGs in HIV/AIDS-affected areas, and linkages to existing economic development programs; and

- training and awareness-raising programs for practitioners on how to adapt initiatives to effectively incorporate HIV/AIDS-affected communities.

Orphans and Vulnerable Children

The situation of orphans and vulnerable children was raised from two perspectives: the incorporation of children into viable economic programs, and the appropriateness of doing so. Examples were cited of small-scale production activities by orphans and vulnerable children that would enable them to generate funds necessary for survival and to pay for their education (in partnership with a local school). The on-line discussion participants wondered what other projects (if any) used a similar approach, and if it was a viable method of support with potential scale-up. With regard to expansion potential, it was further noted that there are promising approaches emerging that involve self-managed savings and loan groups for youth. One challenge raised was whether explicit strategies that promote child labor were appropriate solutions, and brings up the question of how youth-focused initiatives could respond to the economic needs of orphans and vulnerable children, such as:

- supporting youth initiatives and HIV awareness among youth;
- integrating youth into economic development initiatives; and
- supporting training and education to reduce the demands on youth for direct income generation.

Transferring Lessons from Other Related Relief and Development Fields

Some contributors to the on-line discussion suggested approaches that have worked in other areas, but have not yet been tried in relation to HIV/AIDS-affected communities. For example, commercial distribution networks are used to channel food assistance to those in need, and this method is reported to stimulate local markets while delivering goods to hard-to-reach clients. Participants suggested that such methods could be used to deliver commodities and services to HIV/AIDS-impacted communities. In another example, participants suggested the application of social enterprises, such as a medical center that manages commercial gardens that can subsidize the medical center's budget while offering more nutritional food to patients. A key next step to advancing understanding and action could be based on broad learning activities and networks across a range of development fields, to harness available expertise to brainstorm a wide range of potential support activities and strategies for HIV/AIDS-affected communities.

Conclusions

The enterprise development and HIV/AIDS communities of practice are in their infancy when it comes to economic security and renewal in communities impacted by the pandemic. These are the major findings of the on-line discussion:

1. Most initiatives that provide livelihood security and economic support to HIV/AIDS-impacted households operate at the community level, delivered in the form of integrated activities by SHGs and CBOs. These initiatives work because they are context-sensitive, reflecting community values and struggles, and addressing needs holistically. However, they are small-scale and, *on their own*, do not show potential for widespread scale-up (breadth of impact) or the possibility of moving from poverty alleviation to wealth creation (depth of impact).

2. A few cases of larger-scale economic development initiatives have succeeded in attaining deeper impact (significantly increased income) by facilitating the upgrading of the production capacity of households, along with improved market access including domestic and export opportunities. In order to achieve depth, as with any market development program, these ventures depend on a wide range of partnerships with commercial players, support service providers, and government agencies. The success of such programs, when executed in affected communities, are dependent on partnerships with community organizations such as SHGs and CBOs. Collaboration between large agencies and community groups enables an integrated approach to the pandemic, providing community support and knowledge, and offering basic services and linkages not included in larger market development initiatives.

3. There is a funding deficit for economic programming in HIV/AIDS-impacted communities. Community groups are under-resourced and often struggle to provide basic support to ailing households, orphaned children, untrained youth, and other impacted people. Larger initiatives have not been more widely replicated because donor funding has not been forthcoming. Historically, funders of HIV and AIDS programs have focused on health-related issues, while livelihood security has been the domain of economic development funders. Since donors to the health-related field lack knowledge of best practices in economic development field and vice versa, they are reluctant to finance integrated programs that require knowledge and expertise in both. There is some hope for increased funding now that there is growing awareness that HIV and AIDS are part of a vicious poverty cycle and are not solely a public health issue. With innovative approaches, donors will be able to support integrated or joint programs and share lessons that advance practice.

4. In order for experts in a range of relevant fields—including enterprise development—to contribute more fully to alleviating hardships in impacted communities, there is a need for brainstorming, action research, case studies, capacity building, and knowledge dissemination that crosses professional boundaries. Such activities will lead to the development and sharing of models and best practices for programmatic solutions to

the many challenges of poverty eradication in HIV and AIDS-impacted communities.

In particular, further investigation could focus on the following questions:

- What adaptations of best practices in private sector and enterprise development can be made to help HIV/AIDS-impacted communities and households secure their livelihoods, generate income, and stabilize and grow assets on a sustainable basis? What is the appropriate mix of economic, health, and social services that HIV/AIDS-impacted households and communities require?
- How can the development community support CBOs and SHGs in their holistic approaches to the pandemic? For example, support might include networking between community-based groups to encourage them to share strategies and generate joint projects, building up the capacity of community implementers, finding financial support for grassroots initiatives, and so on.
- What constitutes appropriate capacity building for international development practitioners and agencies involved in larger-scale economic development initiatives? Is there training and support that would enable them to improve their reach to affected individuals and households, to effectively collaborate with SHGs and CBOs, and to expand the integration of youth and the elderly into programs?

- Given their complementary strengths and weaknesses, how can CBOs and international development agencies work collaboratively to expand outreach and increase impact?
- How can appropriate private/public partnerships, e.g., NGOs fostering market integration, and public/public partnerships, e.g., between a range of CBOs, NGOs, and government agencies, be formed to deliver integrated programs that address people's needs through both community-level and large-scale ventures?
- With special concern for the economic viability of the next generation, what mechanisms will promote and advance inter-generational skills and knowledge transfer, as well as the training of youth in basic education, skills development, income generation, and entrepreneurship?
- How can the microenterprise development community lead and/or support a broader community of practice that would bring together experts and donors from a range of fields, working at various levels, to end the cycle of poverty exacerbated by the pandemic?



References

Olvera, R., J. Thriuvikraman, and K. Wesche. 2005. *HIV/AIDS and Microenterprise Development Annotated Bibliography*. Washington, DC: The SEEP Network. <http://www.seepnetwork.org/content/article/detail/3127>. Accessed September 7, 2006.

USAID (United States Agency for International Development). 2005. *Strengthening the Role of AIDS-Affected MSEs in Productive Markets*. A BDS [business development services] on the Margins HIV/AIDS paper, prepared for USAID by DAI, Inc. Washington, DC: USAID. On Developing Markets for Business Services web site: <http://www.bdsknowledge.org/dyn/bds/docs/503/USAID%20AMAP%20AIDS-Affected%20MSEs%202005.pdf>. Accessed September 12, 2006.

Resources

Barnes, C. 2005. See the Children and Youth Economic Strengthening Network (bmoncenis@afr-sd.org) for a paper on orphans and vulnerable children and economic support.

CEDPA (Center for Development and Population Activities) offers a large number of well-developed training programs that deal with gender, HIV/AIDS, and organization development of CBO/NGO. See the CEDPA web site, specifically the “Publications,” “News,” and “Where We Work” sections. <http://www.cedpa.org>. Accessed September 7, 2006.

GTZ (German Technical Cooperation [Gesellschaft für Technische Zusammenarbeit]). 2005. “HIV/AIDS and Private Sector Promotion Fact Sheet.” Report commissioned by BMZ [Ministry for Economic Cooperation and Development [Bundesministerium für wirtschaftliche Zusammenarbeit und Entwicklung]]. On Developing Markets for Business Services web site: http://www.bdsknowledge.org/dyn/bds/bdssearch.details?p_phase_id=510&p_lang=en&p_phase_type_id=6. Accessed September 7, 2006.

SPARK-STREAM Livelihoods and Language. Web site. Provides tools and material in 14 languages (English plus 13 languages of Southeast Asia) which address communication issues in the framework of economic development. <http://www.streaminitiative.org/Library/VirtualLibrary.html>. Accessed September 7, 2006.

Note

This member-driven on-line discussion was made possible by the conceptualization and facilitation of Linda Jones of MEDA (Mennonite Economic Development Associates). The discussion was hosted by the SEEP Network’s Market Development Working Group, facilitated by Mary McVay. The discussion benefited from the participation of both SEEP and non-SEEP members, only some of who are cited in the paper, although many more made significant contributions.

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SEEP is an international network of over 70 organizations committed to reducing poverty through microfinance and enterprise development. SEEP members are active in over 140 countries and reach over 25 million microentrepreneurs and their families. SEEP promotes professional standards of practice in microfinance and enterprise development, conducts capacity building activities for its members and other practitioners, creates and disseminates publications for application in the field, and serves as a center for collaboration on a broad range of sector-related issues.

—Dana de Kanter, Executive Director

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