

**The Saints Peter and Paul Peace and Social Justice Committee invites you to focus on
Catholic Relief Services' MICROFINANCE operations**

We continue our look at Catholic Relief Services' (CRS') Savings and Internal Lending Community (SILC) model of microfinance through the lenses of the various development areas impacted by SILC activities. In our last article, we saw how SILC interacts with HIV/AIDS, and orphans and vulnerable children. These two areas of development have obvious connections to health and education, respectively, so we now take up the SILC model's interaction with health and education.

It is no secret that the world is full of systems (or lack thereof) that fail to protect the dignity of the human beings within them, and some that even violate that dignity. However, the SILC model's interaction with health is a great example of how CRS' microfinance operations can provide people with the tools to live better lives where they are, with what they have, in spite of "broken" systems.

In Africa, health care is often unreliable, inaccessible, unaffordable, or all of the above. "While SILC is unable to address issues of physical access to health facilities, there have been several promising case studies showing SILC members' increased ability to pay for transportation to medical facilities as well as paying for needed treatment through their social fund," according to CRS. In such environments, SILC groups provide members with an alternative to borrowing at exorbitant interest rates from other non-institutional lenders, selling productive assets (like livestock), or ignoring the need for treatment or preventative care. Seeking health care at the appropriate time reduces the likelihood that livelihood-threatening, poverty-exacerbating health conditions will develop.

In Sierra Leone, a country with one of the highest maternal mortality rates in the world, three women, all of whom were members of the same SILC group and had recently delivered babies safely in the nearest health facility with help from SILC funds, shared with CRS that they "had complications during previous pregnancies and deliveries," but that "SILC not only helped them financially, but may also have saved their lives and those of their babies."

Where health insurance is available, SILC funds can help members pay premiums. One study in Rwanda showed that "94% of SILC members have health insurance due to money gained from SILC groups." In Benin, SILC members have been proactive in creating (along with CRS and its partners) a health microinsurance product as an alternative to less-feasible regional health mutuals.

In addition to financial empowerment, SILC groups serve as a platform for informational empowerment. In many places, misconceptions about health and disease abound. For instance, one health worker in Senegal reported working with a population who believed milk caused malaria. A CRS worker in Niger reported beliefs that mosquito nets harbor spirits and cause sterility. As we explored in our last article, stigma regarding HIV/AIDS is one of the factors enabling that disease to remain so destructive many areas of Africa. SILC, by its nature, gathers people together in an atmosphere of trust where bad information can be dispelled and good information propounded.

This atmosphere of trust provides the basis for another of the SILC model's health-related benefits—relationships. It may seem simple, but it makes a huge difference. When someone falls ill, or when someone seeks preventative care in order *not* to fall ill, a host of concerns arises: one may need to make arrangements to care for one's children, other dependents, home, business, crops, or livestock, among other things. If such arrangements can not be made, health care may be put off, and in the case that one is already ill, the well-being of an entire household may suffer dramatically. SILC groups provide members with the opportunity to build relationships with individuals they can rely on when health-related needs arise. In difficult situations, members can find in one another not only practical support, but emotional support as well. CRS tells the story of two women, Françoise Uwimana and Yvonne Umubyeyi from the same Rwandan village. "We were just neighbors," according to Yvonne, "we had no deep harmony between us," until both joined the Nokara SILC group. They became friends after getting to know one another at meetings, and when Yvonne's brother fell ill and died, Françoise was her angel. "I was running around the hospital not knowing what happened," Yvonne said. "It was amazing – Françoise was the first person to come and comfort us."

If the SILC model's health-related benefits promote sound bodies, its education-related benefits promote sound minds to put into those sound bodies. In places where even primary education is a luxury, SILC funds can help students and/or their caregivers afford school fees, other costs like uniforms and supplies, and the opportunity costs associated with losing an extra worker around the house, farm, or business. Many SILC members take out loans to cover such expenses. Some, like Françoise (who has six children less than seven years apart in age) even find help from other individuals in their group—Yvonne has helped her pay school fees when she didn't have the money on time.

The social capital concentrated within a SILC group can impact the quality of education for an entire community. A SILC group is a platform for awareness, giving it the opportunity to spread messages and initiate change. It is also a nucleus of economic activity, giving it the credibility and weight to have its messages heard and taken seriously. According to CRS, "The social dynamics of the SILC group can be used to assert influence with local government authorities for improved education and to advocate for school feeding and health, infrastructure innovation, provision of materials/equipment, teacher training, better educational opportunities for girls, and curriculum reform."

It is this grassroots-level power and simplicity that makes the SILC model special. As we, under the leadership of Pope Francis, continue to work toward more just *systems*, the SILC model fosters positive connections among the most vulnerable *individuals*. We have both a bottom-up and a top-down approach to bolstering the dignity of the human person. The Peace and Social Justice Committee looks forward to providing you with more information on the SILC model in future articles. In the meantime, please visit crs.org for prayers, stories, and guidance on how to get involved.

Please look for this article and previous articles on the Peace & Social Justice page on the SSPP website. Click on Christian Service and then tab down to Peace & Social Justice.