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CF-RAI-USAA-DB01-EV-2003-01136

Full Item Register Number [Auto] **CF-RAI-USAA-DB01-EV-2003-01136**

Ext Ref: Doc Series / Year / Number **EVL/03.11.13/ GHA 98/03**

Record Title

Participatory Evaluation - Ghana Rural Community-based Development Programme - 2 of 2

Date Created - on item
11/18/2003

Date Registered in RAMP-TRIM
11/18/2003

Date Closed

Primary Contact
Owner Location Evaluation Office, UNICEF NY-HQ = 5128
Home Location Evaluation Office, UNICEF NY-HQ = 5128
Current Location CF-RAF-USAA-DB01-2003-63587 > Evaluation Office, U

1: In, Out, Internal, Rec or Conv Copy
Fd2: Sender or Cross Reference
Fd3: Doc Type of Format

Container Record [Folder] **CF-RAF-USAA-DB01-2003-63587**
Container Box Record (Title) **Participatory Evaluation - Ghana Rural Community-based Development**

Nu1: Number of pages
0

Nu2: Doc Year
0

Nu3: Doc Number
0

Full GCG File Plan Code

Da1: Date Published

Da2: Date Received

Da3: Date Distributed

Priority

If Doc Series?:

Record Type **A01ev Item Eval Office - CF-RAI-USAA-DB01-EV**

Electronic Details

No Document

Electric [wasDOS] File Name

Alt Bar code = RAMP-TRIM Record Numb : **CF-RAI-USAA-DB01-EV-2003-01136**

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The NSC need to use their contacts to ensure a suitable replacement is found for the YD VAP coordinator before valuable momentum is lost as it was after the loss of the coordinator in BD.

One of the key outcomes of the VAP process is the creation of Community Action Plans (CAPs). The following table summarises the plans that were produced in the two districts.

Table #12 Summary of Community Action Plans

a) Yendi District

Village	Plan	
1. Gukpegu	Environmental clean up	
	Re-floor base of well	
	Preparation of Weanimix centre	
	Food Security proposal: 20 acres maize: Tractor service, fertilizer, seeds, 2 bullocks	
	Sanitation : tools for clean up	
	Soap making training	

	Income Generation: women soya bean farming	
2. Kpanjamba	Environmental clean up	
	3 pit latrines	
	3 dumping latrines	
	Food security: 10 acres maize, 10 acres soya; tractor farming & 2 bullocks	
	Improve school building	
3. Kpaligigbini	Environmental clean up	
	3 pit latrines	
	3 dumping latrines	
	Food security: 10 acres maize, 10 acres soya: tractor farming & 2 bullocks	
	Improve school building	
	Well for drinking water	
4. Kpabia	Environmental clean up	
	3 pits for refuse	
	Rehab of 2 boreholes	
	Food security: 20 acres maize; tractor farming & 2 bullocks	
	Tools for constructing pit latrines	
	2 boreholes repaired	
5. Kulkenpenduli	Environmental clean up	
	Construction of Weanimix centre	
	Rehab of Primary School	
	Food security: 15 acres maize, tractor farming	
	Tools for construction of pit latrines	
	Income Generation for women: pito brewing	
	Soap making	
6. Sunson	Work on outreach clinic	
	Food security: 15 acres maize, 10 acres soya: tractor farming	
	Income generation for women	
	Pits for refuse burning	

	Malaria prevention	
	Training of TBA	
	Furniture for clinic	
7. Tidjo	Environmental clean up	
	Food Security: 10 acres soya, 10 acres maize: tractor farming & 2 bullocks	
	1 handdug well	
	Cladding of Primary School	
8. Pion	Communal groundnut farm by women, 10 acres maize, 10 acres groundnut: DA helped with ploughing, seeds and fertilizer	
9. Nakpashie	Environmental clean up	
	Weanimx production centre	
	Cladding ½ pavilion	
	Allocated site for refuse dump	
	Encouraged girls to attend school	
	Food security: 10 acres maize: tractor services & 2 bullocks	
	20 KVIPs	
	Food banking	
10. Nalogu	Build VIP toilets	
	Communal farm: 10 acres maize, 5 acres cowpeas: 2 bullocks	
	Community Weighing Team(CWT)	

In YD in addition to the CAP proposals generated by the VAP process every community also receives the following assistance:

- support to grow 3 acres (1 acre each of groundnuts, soya and maize) for weanimix production
- every women's group gets support to grow 10 acres of soybean for income generation
- training in compost making and application
- training in local storage structures
- received cashew and other trees from the district nursery

- animals vaccinated and bulls castrated on request

b) Builsa District Community Plans of Action

Community	Action	Response
1. Sinyansa	Dry season gardening	Proposal submitted and approved
	Groundnut production	
	Credit facilities	
	Nutrition Centre	Proposal not approved by UNICEF – much of proposal focussed on DSA etc for community members
2. Abil Yeri	Processing of groundnut and sheanut oil	Large scale proposal – UNICEF propose more moderate approach
	Grain Bank	
	Education on: book keeping, environmental awareness & personal hygiene	
	Enrollment drive	
	Rehab of Primary School	
	5 groups dry season gardening	
3. Banyansa	Grinding Mill	Installed – working well.
	Village Health Committee	Formed
	Pump management committee	Formed
	Registration births/deaths	In progress
	Improved farming techniques	MOFA assistance
	Rearing of nannies	Delay of funds from DA pending making structure, \$ now released & animals purchased along with assistance from Vet.
4. Kalijisa	Nutrition Education	'proposal with Sak'
	Income Generation	
	Dam	

5. Guuta	Grinding mill	C'ty should put up the structure & get roofing materials from DA
	Planting of tree seedlings	
	Soil conservation	
6. Namonsa	Rehabilitation school	C'ty raised 2.5 m cedis, need 3.5 more, finished 3 classes, store, office. Remaining money now supplied by UNICEF.
	Fish farm	4 ponds made : 12.7m
	Sheabutter	Machine wanted : `UNICEF promised another machine – not done yet`
	Agroforestry	Seedlings earmarked for dam catchment area
	Income Gen.	Credit for 8 groups
	Community Weighing team	Awaiting training
	Well	Hit rock – need drilling ; `not sure what action is taking place`
	Grinding mill	UNICEF supplied, previous mill only worked for 3 days. Before walked 3-4 miles to grind, now well managed, \$ in bank for spares, accounts kept.
		`proposal submitted 6 months ago – no response – waiting to hear`
7. Goluk	Sheabutter extractor	
	Crop cultivation	
8. Azug Yeri	Butcher's shop	C'ty raised .3m cedis, cement bought, blocks made – told `UNICEF do not fund infrastructure projects`
	Market stall	2 done, 1 to do
	Sheabutter extractor	Structure built to window level – now awaiting response from UNICEF
	KVIP	
	Credit facilities	
	Provide lunch to school ch.	

	Water Pump	'pump not working – not sure who's responsibility it is to fix it'
9. Zaring Bulba	School rehabilitation	Not completed, teacher's houses awaiting roofing
	Income gen.	'Sak has the proposal – we don't know what is happening – DA say they don't have a copy'
	Seed Bank	'proposal with UNICEF – no reply- villagers losing interest in attending VAP meetings & other community activities e.g. clean up campaigns'
	Weanimix	Good operation- transparent accounts, only mill in village, previously women walked 2 miles
10. Gobsa	Water	Began 4 wells – abandoned because of rock – needs drilling
	Nursery	No progress
	Health clinic	Built simple structure on their own
	Rehab dam	
	Grinding mill	Village need to build the house
	CWT	Awaiting training
	Aforestation	Waiting on seeds
11. Dorinsa	Bee keeping	'proposal with Sak- we don't know what is happening'
	CWT	Team identified & awaiting training – Presbyterian Rural Health Care already operates a CWT in the village
	Clinic	Community made blocks – building not yet started
	Day Care Centre	Assistance from 31 st Dec Group – up to window level- project unfinished

	JSS classroom	'DA promised assistance – no work yet'
	Sheabutter processing	'mill incomplete – never worked...initially presented grand projects..no proposals approved yet ...process very slow..process mainly talking...don't call VAP meetings now ..seen as wasting peoples time...need more evidence of activities and action...new VAP team formed in 1997'
12. Musidem	Weanimx	UNICEF provided machine – c'ty made structure, wrong mill, removed , now awaiting replacement...`when machine arrives will need to train operators'
	School building & kitchen at school	'no response'
	Tree planting	
13. Kassiesa	Agriculture	Help from NGO Freedom from Hunger
	School rehab.	
	Rehab dam – to ensure they can do dry season gardening	
14. Chansa	Rehab dam	No work yet
	Grinding mill	No structure built
	Agroforestry	'students planted some trees'
	Health post	No UNICEF support yet
	Pit latrines	'about 10 built'
	Roadway	Small rehab done of road
	Day care	'proposal given one year ago – no response – still have hope they will do something for us'
	Mill	Disunity in village- `some say DA should supply zinc roof , others argue for self help grass roof- impasse for 3 months'

	Bridge	Proposal passed on to World Bank – heard nothing
15. Kandema	Grain Bank	Proposals approved swiftly – saw impending hunger – 4 m cedis to buy and store grains, during shortage share with needy families and sell remainder to villagers at fair prices, well managed, each household with 'grain bank book'. 'DA stated it would help any community which helps itself' therefore expected support from DA for rafters for grain house – not forthcoming – disappointed in DA – grain stored in mill house.
	Income Gen	Plan to buy 30 goats for widows and blind persons – NGO/DA to assist with vet services and drugs. Now being processed
	Groundnuts	'DA agreed to prefinance Income Gen project with women, however DA not kept promise... Grain Bank supplied nuts instead'
	Income gen	30 women trained for 2 days in Dawadawa and Soya bean processing
	Nutrition Centre: make Weanimix and eat it there	Structure collapsed
	Mill	Mill working but operator left village – now need to train two others

Certain frustrations were experienced in the communities with the development of their CAP proposals. These frustrations are especially apparent in Builsa District where the approach appeared to have been badly introduced by UNICEF with very little guidance concerning what *could* be presented in a proposal. The community of Azug Yeri was disappointed for example, after mobilising resources within the community for their project, the butcher's shop, they then learnt that UNICEF does not fund infrastructure projects. This should have been made clear at the outset.

Many villages are experiencing long delays in getting any kind of response to their proposals. An ironic outcome of this for a 'capacity building' project is growing disillusionment with the DA for the perceived delay in response.

A more effective system needs to be developed for dealing with approval of proposals. A small team of persons representing MLGRD, UNICEF and the DA should be appointed to process the proposals in the District and ensure a speedy reply to submissions.

Once proposals are approved a more effective system needs to be put in place in terms of receiving the funds and reporting. Some improvements are already in place with local banks now processing UNICEF cheques far quicker than the painful route that they took earlier. A major constraint with a village based project is UNICEF's policy of liquidation by which no more money can be allocated if money remains unspent over a 6 month period. Presently the projects are approved by UNICEF Accra. This is a cause of some concern in that it gives the impression of 'control' of funds by UNICEF. Because of the liquidation policy it may be unrealistic to hand the money over to MLGRD to disburse. The existing system therefore needs to be made more efficient and efforts made to work with the DA so that the programme can work towards giving the money to the DA to disburse.

The communities need more work on the process and not just the product. Already there are warning signs that some communities are losing interest in the process. More training is needed on proposal writing and introducing the communities and DAs to other possible sources of funding.

UNICEF could organise a conference in each of the districts at which the communities present their proposals to an audience made up of potential funders e.g. CIDA, JICA, embassies etc.

More training needs to be invested at the community level in; how to handle funds, budgeting and accounting. These aspects need to be built into the project, to ensure that the process is well managed and does not become a source of disunity within the small communities.

There is also a need for refresher training for VAP teams to understand the process. As recently as the First Trimester Report (1998) it was stated that, 'proposal writing is still

an illusion' to most VAP teams'. Many proposals either fall 'below standard or fell outside the scope of UNICEF sponsorship'

More training needs to be invested in understanding the process behind the intervention to help the communities appreciate that the fruits of this process are not simply the physical outcomes and that they may increasingly appreciate some of the more subtle effects of the intervention. The VAP process needs to be more than a 'shopping list' presented to the funders.

It is clear that such an understanding of the process is necessary at *all* levels. The magnitude of this challenge is clear when those in key positions in the districts are still looking for 'real' progress and 'tangible results'. To many the process is too slow and academic, resulting in only talking, when the community wants *action*. In Chansa for example the villagers complained, 'we go to people in the community and have meetings and then we get a message that the objectives have changed and we need a new meeting...the community is growing tired of the process..they no longer pay attention to the VAP members because they see no activities coming out of all these meetings.'

In YD all the projects focussed on food security and asked for tractor services, seeds and fertilizer to grow food on 20-64 acres. As one person observed, 'if you are satisfied with food you can think of education.' All communities requested tractor farming as the top priority. Tractor farming is however expensive and will only solve the problem for the first year. They therefore decided to pursue tractor farming for the first year, to solve an immediate problem, and then request money to buy bullocks to ensure greater sustainability for the future.

Despite all the challenges outlined above, in its best examples, the VAP process is facilitating community based action. In a pilot project of this nature it is therefore necessary to study why the intervention has been more effective in certain villages, e.g., Pion, Sunson and Kandema, than in others.

In the case of Pion village the following was achieved;

- community farm together for the first time
- surplus food is now sold
- women pursue income generation projects for the first time
- villagers are empowered to play new roles e.g. members of the Community Weighing Team
- enrollment of girls at school increased from only 2 in 1997 to 14 the next year thereby challenging long held traditions
- women began work on building a new school using part of the profits from the communal farm
- the VAP process helped to unite a village which was at the centre of earlier

ethnic conflict

- 'PTA became more effective' – there is greater 'ownership of the school'
- 'villagers are more able to identify and prioritize their problems and seek out local solutions
- in the words of one community leader, 'we are now closer to the DA'

These are very real achievements in a rural community of only 1,000 persons.

Some of the characteristics of the Pion , Sunson and Kandema village programmes include:

- motivated and united Extension Workers who listened to the voices from the community and followed their lead rather than imposing their own views
- leadership role played by DA member of VAP team who is *resident* in that community
- good collaboration between DA member and Extension Workers
- good support from UNICEF staff in Tamale and Accra
- regular community meetings to ensure transparency with income generation projects
- carefully followed the steps laid out in the VAP process
- clear banking procedures with receipts
- (in the case of Pion and Sunson) – the support of a DCD who is 'pragmatic, dedicated, flexible and who wants success for his district'
- unified VAP team comprised of respected members of the community
- (in the case of Kandema) – they chose to be part of the project rather than being selected at random. In extending the project in BD the DA challenged new communities to demonstrate their commitment to the project before being selected as a new project site

One of the initial goals of the programme was to raise awareness within the community of development issues and help nurture the understanding that persons from the villages can take action to impact on their situation. The evaluation attempted to examine how far this was achieved by interviewing a total of 97 persons from the community.

The following table outlines their responses concerning what the RCBD has done in their community.

Table #13 Community members responses re 'What has the RCBD done in your community

Response	Yendi		Builsa		Total	
	n	%	n	%	n	%
Growth monitoring reduce malnutrition	26	52%	4	9%	30	31%

Help schools	2	4%	8	18%	10	10%
Income Generation	7	14%	1	2%	8	8%
Help farmers	7	14 %	-	-	7	7%
Help c'ty identify & solve problems	9	18%	4	9%	13	13%
Grain Bank/mill	-	-	18	38%	18	18%
Immunization	-	-	5	11%	5	5%
None	-	-	1	2%	1	1%

(* totals need not add up to 100% as persons could give more than one response.)

When asked to rate the RCBD programme they replied.

Table #14 Rating of community leaders of the value of the RCBD

Rating	Yendi		Builsa		Total	
	n	%	n	%	n	%
Very helpful	29	58%	23	5%	52	54%
Helpful	22	44%	25	53%	47	48%
Not helpful at all	0	-	3	6%	3	3%
Uncertain	1	2%	1	2%	2	2%

As can be seen from the above table therefore the community leaders interviewed rated the RCBD programme very highly. When they were asked to share what they had learnt from the intervention there was a very wide range of answers including;

- exchanged ideas (n=6, 6%)
- unity and self help (n=7, 7%)
- learnt to solve problems (n=4, 4%)
- learnt to weigh children and see their nutrition improve (n=9, 9%)
- helped the community to develop (n=5, 5%)
- learnt about the importance of immunization (n=7, 7%)

Only 6 persons (6%) could not think of any way in which they had benefited from the intervention.

A similar range of responses was evident to the question, 'in what ways, if at all, have you been able to assist the RCBD programme in your community':

- communal labour (n=22, 22%)
- organise literacy classes (n=10, 10%)
- organise/attend community meetings (n=16, 16%)
- assist with training courses (n=5, 5%)
- help community identify/solve problems (n=14, 14%)

The community leaders interviewed therefore saw a range of important ways in which they had assisted the programme. They were therefore active participants in the process as opposed to spectators.

The VAP team members felt they have contributed to the programme in a wide variety of areas including;

- helping community to identify/solve problems (n=16, 27%)
- organising/attending community meetings (n=26, 45%)
- organizing self help projects (n=9, 16%)

The VAP team members rate the programme highly, all members interviewed in YD and BD rated the programme either 'very helpful' or 'helpful'.

When asked concerning the benefits of participating in the RCBD they responded;

Table#15 VAP Team members response to, 'What, if any, are the benefits of being involved in the RCBD programme?'

Response	Yendi		Builsa		Total	
	n	%	n	%	n	%
Increased self respect	26	54%	4	40	30	52%
More knowledge	37	77%	10	100%	47	81%
More respect within c'ty	38	79%	7	70%	45	78%
More money	4	8%	1	10%	5	9%
Other	3	6%	-	-	3	5%

Moreover when asked how satisfied they were in participating in the programme all stated they were either 'very satisfied' or 'satisfied' about participating.

In considering the potential role of the VAP teams in any expansion of the programme one needs to examine their need for further training. The great majority of VAP members interviewed stated they needed more training. The VAP team members are at the heart of the intervention. They therefore need to be as well equipped as possible to meet the challenges they face. The managers of the RCBD programme need to examine the training

needs of the VAP team members and need to develop a coherent, long term, syllabus of training.

A coherent programme of training needs to be developed for the VAP members including the following areas; consultation skills, problem solving, leadership styles, ways to nurture community involvement, the management of change, promotion of team work, facilitation and networking skills, data collection, monitoring, the use of data, proposal writing, book keeping and reporting procedure.

The training should be made as practical as possible with field trips to put the ideas into practice. Where possible the training should be conducted in the villages with the community selecting the most appropriate persons to be trained.

Elements of the training package could be put into a video training format. Thereby persons could be trained to undertake the training of VAP teams and the newly created Unit Committees. This would ensure a pyramid training model.

The value of video based training packages is that the Extension Workers could be trained to use the packages in their work in the villages. It can greatly enhance their own training sessions in the villages. It is an effective way of facilitating a 'training of trainers' process.

Another key element of the intervention has been the creation of Community Weighing Teams (CWT) . These teams are operating in YD and have been identified and are awaiting training in BD.

The CWTs have tried to help empower communities to assess and analyse the causes of malnutrition in their communities and plan and implement local actions to overcome malnutrition through village action plans. The CWT is comprised of four persons from the community who help mobilise the community for the monthly weighing sessions of children under 5 years of age and then help the mothers to understand the weighing activity.

In addition to decreasing malnutrition levels the goal of the Growth Monitoring aspect of the project was to create awareness and supply information to guide decision making. Brouwer et al (1998) concluded that awareness within the community concerning malnutrition and its range of causes was increased as a result of the project. It was felt to be especially important that the mothers do the weighing themselves. Knowledge on growth and ability to detect problems in growth increased in all four pilot communities in Tolon Kumbungu. The mothers discussed the results of the weighing sessions. Previously the weighing activity would be conducted by professional staff from the Ministry with little or no participation by the mothers. The mothers can now explain why malnutrition exists – it is seen in a more holistic manner and not simply as the lack of food. The mothers are now more knowledgeable concerning good feeding practices. The Growth Monitoring aspect of the programme also afforded a forum for mothers to discuss child

care issues and feeding practices. It strengthened solidarity between the mothers. Moreover it may lead to an improvement in care taking of children through better knowledge of when the child is ill and how to feed young children.

The Growth Monitoring intervention should not therefore be seen as an isolated activity but as an integral part of the VAP process in which information on child growth is fed into the Triple A process.

Growth Monitoring was therefore effective as an educational and awareness creating tool and effective in terms of developing a holistic approach to problem solving and making the process 'community owned' and implemented. It is interesting to note that malnutrition rate decreased more in YD, where the CWT operated, than in BD where they are yet to begin operation.

A constant challenge for community based programmes is how much training it is fair and realistic to offer village based workers who, in the case of the community members and DA members on the VAP team, are operating as volunteers. This is however a crucial question which needs to be addressed. If not the intervention will remain high on; awareness and participation, but precious little may happen in terms of resolving specific problems in the village.

Unit Committees have recently been formed in each village. In expanding and consolidating the program these grassroots groups should be the key agents through which the programme operates. As they are newly formed and want to demonstrate their ability to perform this could be an opportune time for offering them a package of training along the lines of the VAP process. In the absence of any other body, the VAP teams were of course a product of the RCBD intervention. The challenge now is to see how a similar nurturing process can be offered to the Unit Committees and through this entrée to the community to examine ways to work with the Community Leaders, Chiefs, elders, and religious leaders.

In conclusion therefore the VAP process has been effective in a number of ways in the community, by; creating awareness of development issues, identifying problems, mobilising the community in self help activities, looking inwards in the community in terms of resources to effect change, more keenly identifying external resources to draw upon, and by making the DA increasingly more accountable to the grassroots.

In the above process the Extension Workers play a key role. The following table provides background information on 53 Extension Workers interviewed as part of this evaluation.

Table #16 Background information on Extension Workers

1. Background	Yendi	Builsa	Total
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	n	%	n	%	n	%
Health	6	20%	3	10%	9	15%
Education	6	20%	7	24%	13	17%
Community Dev.	3	10%	3	10%	6	10%
Water/Sanit.	2	7%	1	3%	3	5%
Agriculture	10	33%	9	31%	19	32%
Other	1	3%	2	7%	3	5%
2. Age						
21-30	2	7%	3	10%	5	8%
31-40	13	43%	11	38%	24	41%
41-55	13	43%	11	38%	24	41%
3. Sex						
male	26	86%	16	55%	42	71%
female	2	7%	9	31%	11	19%
4. Educ. Bdg.						
Primary	1	3%			1	2%
Secondary	2	7%	6	20%	8	14%
Tertiary	25	83%	19	65%	44	75%

The Extension Workers therefore represent a variety of backgrounds and are comprised of persons with broad experience. They are also predominately male. When asked concerning their role they mentioned; working with the community (n=14, 24%), awareness creation (n=11, 19%), help community identify problems (n=5, 8%), and work in food security and income generation activities (n=13, 22%).

Their training comprised seven days on the VAP process and the Triple A approach which included; programme planning, growth monitoring, facilitation skills and data collection. Forty (68%) of the Extension Workers rated the training as very helpful and the remainder said it was 'helpful'.

In collaboration with UNICEF, the Extension Workers conducted a good deal of informal training in the communities on; growth monitoring, sanitation, farming techniques, education, literacy, health, environmental awareness, and nutrition. In addition they provided on-going support to the VAP teams by offering support and training in; leadership skills, book keeping and financial management, proposal writing and problem solving.

When asked what they felt they had contributed to the process, they replied, 'help community identify & solve problems' (n=20, 34%), 'assist in project work' (n=10, 17%), 'create awareness in the community' (n=12, 20%) and 'proposal writing' (n=9, 15%).

In response to the question of how they felt they had benefited from being involved in RCBD they responded,

Table#17 Responses of Extension Workers re `What, if any, are the benefits of being involved in the RCBD programme?

Response	Yendi		Builsa		Total	
	n	%	n	%	n	%
More self respect	18	60%	10	34%	28	47%
More knowledge	26	80%	23	79%	49	83%
More money	6	20%	2	7%	8	14%
Respect in c'ty	21	70%	19	66%	40	68%

When asked concerning the degree of collaboration which they felt existed with their fellow sectors, only a minority (n=13, 22%) felt this happened on a `very regular' or `regular' basis. There is clearly more that needs to be done to translate `inter sectoral collaboration' into practice.

In considering the training needs for the programme attention needs to be paid to developing a new and wider role for the Extension Workers. They need to be trained in `how to give their skills away'. There is still a danger that Extension Workers enter the rural communities with limited respect for the views of the persons they are serving. They need to be sensitised to genuinely appreciate the richness of the communities. There is still a great need to counter the kind of attitude expressed by one district official when , in referring to the villages, he stated, `we have to do the thinking for them.'

In trying to expand the RCBD service there is a limitation in that each sector has divided up the district into different sub zones. It would be preferable if all sectors could agree to a common sub division. A team of Extension Workers could therefore serve the RCBD in each zone by being `consultants' for that area. The Unit Committees/VAP teams could be responsible for the community animation part of the process and only call on the services of the External Team once the sensitisation has taken place. More attention also needs to be invested in seeing how the RCBD intervention can complement the work of other NGO initiatives in the area especially as in the case of NGOs like the Presbyterian Health Mission who have highly experienced field workers in the areas of community mobilizaion, agriculture and health.

5.4 SUSTAINABILITY

Goal: to develop models of community based initiatives that address National Plan of Action goals which can be replicated by government and by other donor agencies

A major challenge of this intervention is whether it will endure after UNICEF support ends and whether the process can be effectively incorporated into the government

decentralisation system.

The District Assembly play a key role in this search for sustainability. The majority of members of the DA interviewed in this evaluation appreciated the major goals of the intervention. In response to the question, what do you think is the major goal of the RCBD programme, they replied, 'reduction of malnutrition' (n=39, 55%) and 'capacity building' (n=18, 25%). More importantly they gave clear ideas of the ways in which they felt the DA had contributed to the programme, e.g. 'financial support' (n=21, 30%), 'supply of manpower' (n=21, 30%), 'logistical support,' (n=17, 29%), and 'planning process' (n=17, 24%). Only one respondent expressed that they were not well informed about the project. It could be said therefore that there was a high level of ownership of the intervention and this augurs well for project sustainability.

When asked concerning the decision making process in the project, the responses were as follows,

Table #18 DA members opinions on who makes the major decisions in the programme

Decision maker	Yendi		Builsa		Total	
	n	%	n	%	n	%
UNICEF	3	8%	15	44%	18	25%
VAP Teams	3	8%	2	6%	5	7%
DAs	19	51%	15	44%	34	48%
Community	13	35%	16	47%	29	41%
other	4	11%	3	9%	7	10%

Whilst there has been considerable progress from the early days of the project when it was referred to as the 'UNICEF project' there is still need for more work in this area to help people understand that the programme, if they want it, is theirs. However, when asked the more direct question, 'who does the programme belong to,' only 8 persons (11%), 2 in YD and 6 in BD, stated UNICEF. Fully 61 persons (86%) stated the programme was owned by the DA or the community.

What capacity does the DA have to take on the programme? In terms of human capacity: members of the District Assembly spoke of feeling, 'pressurized by UNICEF.' This feeling was expressed in the BD Third Trimester Review (1997) when they spoke of 'the Secretariat of DA is overstretched...there were times when we had an unhealthy

correspondence with UNICEF over certain issues...e.g. not utilising all the funds available'. It soon became apparent that to sustain the VAP process necessitates high commitment from Departments to meet awakened demands of communities.

A second challenge is the financial capacity of the DA to meet the expenses that such an empowering process creates. This is a major challenge, especially when one considers any attempt at 'going to scale' with this intervention. UNICEF have helped to facilitate the transition by phasing out their financial support for the recurrent expenses on the programme. The agreement for 1998 is that UNICEF will meet 70% of the recurrent expenses and DA would cover the remaining 30%. In 1999 the ratio will be 50:50, gradually leading to full financial responsibility assumed by the DA. In a similar way, UNICEF pays 2 visits to the community per month by the VAP team coordinator, at 5,000 cedis per visit. If more is needed the DA should meet the costs. For the Trimester Reviews for 1998 UNICEF pays for two and the DA for the other.

This is however no easy challenge, a typical department in the district will receive between 100,000 and 200,000 cedis for the total recurrent costs per quarter. Replacement cost of one motorbike tyre is 90,000 cedis. The running costs of sustaining the VAP teams is 40,000 cedis per community, per month for fuel and subsistence alone. Therefore present costs cannot be met by departments.

However the DAs themselves are a recent creation. Their revenue base is increasing. The utilisation of the Common Fund is now expanding beyond infrastructure to the alleviation of poverty. The RCBD programme should add its voice to those calling for greater flexibility in the use of the Common Fund. This programme can help challenge the DAs on how they use the existing revenue base. The empowerment focus of the intervention will also inevitably make them increasingly accountable to their 'parishioners'.

The DAs are also increasingly realising that UNICEF is only *one* possible source of funding. In the eloquent words of the DCD YD, 'UNICEF have not given us a fish to eat, but a lake to fish in. Once we have that lake to fish in we can get our own fish to eat.' The challenge for the DAs is now to find other sources of funding to respond to the increasing demands coming out from the communities.

At the same time however the communities need to be sensitised to the constraints under which the DA operates. Amidst the barrage of criticism heard about 'delays' and 'lack of response' the communities need to understand that the DA only has a certain number of tractors available to respond to their requests. Just as a child matures and needs to appreciate the perspective of the parents, so too the communities need to couch their requests with a more mature realisation of the demands being made on their parent body.

UNICEF's challenge is to refine the RCBD package so that other donors can take on the approach in other districts. In this sense UNICEF will become a catalyst to other donors.

However a number of key factors exist which promote the sustainability of the intervention; the match between programme objectives and perceived needs, the utilisation of the existing social sectors rather than creating new ones, and the program's focus on empowering communities. With this base on which to build the RCBD programme has a strong foundation to develop longer term sustainability.

5.5. Empowerment

Goal: ensure development through the process of empowerment

It is now widely accepted that real development must engender change on an individual basis if it is to be sustainable. Projects which fail to involve communities and individuals as full and active "partners" (rather than as passive "targets" or "beneficiaries") frequently cease to function as soon as external assistance, whether from Government or donors, is no longer provided.

An empowering strategy is one which not only allows the resolution of an immediate problem but also gives the "partner" the confidence, skills and access to information to transform them from passive recipients into "agents of change" in their own local environment.

5.5.1. National Level:

a) MLGRD :

How effective is the programme structure and how has it evolved over time? The original project design envisaged the Department of Planning of the MLGRD as playing a key role in planning, coordinating and implementing the RCBD. This would be facilitated by a Project Co-ordinator who would be a member of staff of MLGRD. He/She was to prepare quarterly and annual plans and budgets for the project and reports on implementation and expenditures, and would be assisted by an Assistant Project Co-ordinator, and a financial accounts officer. In practice however the majority of these functions are preformed by UNICEF personnel in Accra. The money for the project is clearly handled by the UNICEF officers and not MLGRD.

In addition, at the outset it was envisaged that a Programme Advisory Committee would be formed to manage the project. In practice a good deal of the 'management' of the project is handled by UNICEF. This has proved to be a cause of frustration to members of the NSC and MLGRD.

There is a need to delegate more responsibility to the local counterpart. At times there has been a perception in the project, in the haste to get the programme done that UNICEF

personnel give the appearance of not consulting their colleagues in the Ministry. In this sense the RCBD programme has not been effective in supporting MLGRD to operationalise decentralisation. In reality however this goal has been very challenging, promoting a participatory process is not easy within a government Ministry because of weak planning skills, poor co-ordination, and weak human resource development. This however is a challenge that the intervention needs to address.

However as MLGRD persons voice their frustrations concerning the management of the project one also hears some fears concerning the evolving effects of the 'empowerment' process. With effective decentralisation much of the power and influence that we have become accustomed to at the central level will decrease rapidly. For many at the central level this will be a time of readjustment. Truly effective decentralisation will see a far more limited role for people at central government. It should be no surprise therefore that such a process creates uncertainties and stress in key figures at the central level.

With a greater sense of ownership of the process it would be hoped that the MLGRD would then examine ways in which the philosophy of the intervention could be internalised by the Ministry and a coherent plan of training adopted for the Unit Committees and DA members and thereby influence policy based on experience gained from the field.

5.5.2. National Steering Committee (NSC)

A number of members of the NSC expressed their frustrations regarding their role on the NSC. Again the feeling was that UNICEF were making the key decisions and their own inputs were often not respected. The NSC is remarkable in the caliber of persons it has attracted. These members could however make a more valuable impact by also supporting the work in the field. A beginning has been made in this area, e.g. NSC members from Women in Agricultural Development and Nutrition Section of MOH gave orientation to district members on how to implement the National Plan of Action on Food Security and Nutrition into district activities. However further efforts need to be made to strengthen linkages between national and district levels re information on policies and technical advice. This aspect of the intervention is constrained as the NSC members receive inadequate DSA for such field trips. Moreover when they travel in their own vehicles no allowance is made for the drivers. *Attention needs to be paid to ensure the NSC members are fairly recompensed for such monitoring visits.*

A meeting needs to be organised to clarify the role the NSC can make in this project. The programme needs to listen to what the NSC members feel they can contribute. If they feel a greater sense of ownership of the project they could undoubtedly play a key role. For example they could use their contacts to ensure an appropriate replacement is quickly forthcoming to replace the VAP coordinator in YD before valuable momentum is lost as it was in BD under similar circumstances.

The funds invested in the development of the NSC members, e.g. in field visits to Uganda

to study district development structures etc can be richly repaid in this manner.

5.5.3. District Level

The DA and the District Administration has clearly been empowered by the RCBD programme. One example of this is the way in which the 1996 District Plan (YD) was developed with assistance from the University for Development Studies at Tamale , however by 1997 the plan was their own. The change is also evident in the improvements in the Trimester Reviews over time at which they report on last 4 months and plans for next 4 months. Now about 60 persons attend on average for the two days. District Plan of Action are more the product of the district now than it was before

UNICEF have been more effective at promoting empowerment at a district level than they have been at a national level. The UNICEF staff played a key role in the early District Review meetings, however they gradually phased themselves out effectively over the years. UNICEF are fortunate in the Project Officer they have to manage the project, who has a profound understanding of the goals of the project and a humble and self effacing nature to facilitate such a process.

The appreciation of the impact of the RCBD at the district level would be keener if there was more baseline data to illustrate the level at which the DAs were operating before RCBD.

The DAs can be further strengthened by creating a District Project Implementation Committee, composed of representatives from NSC, District Administration and UNICEF who can handle the processing and funding of proposals within the district rather than the present process which relies on UNICEF in Accra. This will also gradually increase the responsibility of the DA concerning the money available for community projects. The budget and planning officers from the district should be part of this process to ensure the village proposals are well thought through. This will help consolidate the understanding within the district and the community that the intervention belongs to them and not UNICEF. It would also be hoped that this will overcome some of the present problems of not liquidating the money available. In 1997 for example the DA of BD did not fully utilise the budget of US\$70,000 allotted by UNICEF. The reasons given for this in the Trimester Review (May 1998) were; 'delays in dealing with proposals, banking bureaucracy and delays on cash releases and sector unpreparedness to handle the projects.'

At present the programme budget is largely administered by UNICEF . This creates an irony in a decentralisation/empowerment programme where UNICEF is trying to strengthen the system.

The intervention has developed a clearer focus in YD after a number of false starts in BD

and is now a clearer 'package' to introduce in new areas. The key stakeholders are clarifying their roles/responsibilities, increasing their sense of ownership of the programme and are becoming more satisfied concerning the role they play in the intervention. The programme strategies and responsibilities are becoming clearer to the major players and the process is becoming increasingly more transparent for the various stakeholders..

5.5.4. Community Level

A similar pattern of growth is evident at the community level where the VAP teams have been able to mobilise the resources of the community to examine their challenges. The Community Action Plans reveal an increasing ability to plan and create a new approach to development with the community playing a key role rather than being passive spectators to the process. The wider community is clearly aware of the RCBD intervention and meetings have been attended by larger numbers. However problems in the way in which the proposals were formulated has led to considerable disillusionment and has greatly impeded the ability of the VAP teams to continue this process, especially in BD where the delays have been most acute. However if a mechanism can be developed to efficiently and expeditiously deal with proposals and if more can be done in widening the network for districts and villages to see a wider world of possible funding sources than UNICEF alone then the VAP process can prove to be a key force for development in these communities.

The programme activities create an environment where problems in the community can be discussed. The BD Second Trimester Review 1997 notes, 'most communities now have a strong perception of the project as their own based on the level of community participation at the meetings'. Communities can now identify their own problems and take action. A number of persons expressed the view that the RCBD intervention had played a key role in bringing the conflicting groups of together in YD.

The VAP teams need more support however in bringing the sectors together within the community and district.

5.5.6. Individuals in the community:

In a similar way a number of persons in the community have moved from the role of 'spectator' to 'actor' in development. Mothers are beginning to discuss the problems of malnourished children and see how they can be helped. Now with knowledge of what constitutes a healthy child, they can see when growth is faltering. Before they did not fully understand the purpose of weighing when done by the nurse. They now know more about what to do if growth is faltering, and now know the importance of proper weaning foods and how to prepare them. Through their new found confidence, the mothers are becoming less intimidated by professionals.

5.6 MONITORING AND EVALUATION

A major goal in the project was to develop a monitoring and evaluation system at district and community level. Relatively little has been done in this respect. The following suggestions are therefore offered.

1. Need baseline data:

We need more qualitative data at both district and community level to monitor progress. Before entering new areas there is a need to develop village profiles including information on; school enrollment figures, food security levels, health indicators, water supply, malnutrition rate and agriculture production, which are updated annually. Such profiles would also be valuable for other organizations working in the district. Data should also be collected on; persons conceptions of malnutrition, child rearing practices, attitudes to education of girls, breastfeeding, weaning and feeding practices.

2. Nutrition and Growth Monitoring:

The RCBBD programme focuses on the reduction of malnutrition. The community weighing teams therefore have the potential for playing a key monitoring role. One of the hopes of this aspect of the intervention was that the exercise could provide data on which to base health care decisions. However Brouwer et al (1998) note that the reliability of the data from the community weighing sessions is questionable for the following reasons; errors in measurement and in reading the master sheet, scale inappropriately placed for accurate reading, scale not zeroed between weighing sessions, children are weighed with more than the minimum clothing, scale not properly held, charts filled incorrectly, mistakes in transferring information from one file to another, master chart faded and difficult to read. In all Brouwer et al (1998) recorded over 20% misclassifications in the 145 cases in the 4 communities in Tolon Kumbungu. As a source of data therefore the process is highly unreliable.

In the retraining process therefore there is a clear need to now working on improving collection of data with more sensitisation on the use of the data, helping weighing teams and DAs to see how to use the information gathered.

Increase the understanding of the VAP teams concerning the relationship between malnutrition and healthy child development, especially mild and moderate levels of malnutrition and assist the teams ability to communicate this information in a meaningful way in community meetings

Investigate ways to integrate GMNS data into the routine data collection of the Ministry of Health where it could influence planning and decision making.

Improve information flow between the community and District Assembly and develop

a monitoring system where data is routinely compiled and used for District Assembly planning.

More training needs to be invested to help mothers and the wider community understand the monitoring process and to appreciate how such data can be used. More culturally appropriate ways to record and communicate data need to be examined. The data needs to be analyzed in the community before the nurse leaves the village.

There is a danger however that the intervention is simply expecting too much from these village based groups. If the weighing data is to be truly scientific it will need to be done by persons with a higher level of education than that offered by the members of most community weighing teams.

We need to examine whether the information is shared effectively with community/key actors. Although a DA member is a part of the VAP team it does not automatically mean the DA is informed of the findings because no specific body within the DA responsible for compiling such data.

People will only gather data if they can understand how it will be used and if they see people acting on the data gathered. The monitoring and evaluation system should therefore form a key part of the on going training of the key workers at different levels. We need to improve storage and retrieval of data and the process of assembling, analysis and using reports. More attention needs to be invested in how to present data for use in advocacy, monitoring and evaluation.

3. Need short term goals

District Monitoring teams should be established, comprised of members from CD, MOFA, MOH, GES and DPU to develop the monitoring system and organise and use the data which *does* exist and examine ways in which to use the data for planning. One key goal they could address would be the development of short term goals . The key players need to feel that progress *is*, in fact, being made. In the present approach the goals are too long term and demanding. We need to examine ways to measure if we are moving towards the larger goal.

Decreasing levels of malnutrition is a long term goal. When there are no great changes persons are understandably disappointed. We need short term goals otherwise we will be discouraged. The research in Tolon Kumbungo, for example, revealed that most of the malnutrition was the result of stunting, not wasting. The major problem therefore is one of basic food security. As such we could not expect such a problem to be resolved within the space of a few years, the problem is far more fundamental and is rooted in raw poverty. A long term strategy for food security would therefore need to be developed to address this fundamental problem.

Moreover we need to become more adept at communicating the subtlety of the findings.

Brouwer (1998) concluded that the communities mainly focussed on severe malnutrition, by contrast mild and moderate forms of malnutrition were not regarded as serious. However she noted that only 1:6 nutritional related deaths are because of severe malnutrition. A significant reduction in mortality and morbidity can therefore only be achieved by paying far more attention to mild and moderate malnutrition. It was clear that the communities did not use the data concerning the prevalence of diarrhea, fever, feeding patterns of young children and immunization coverage. More attention needs to be invested in understanding what indicators feed into lower malnutrition, e.g. sanitation, literacy, education. We need more subtle use of data e.g., use the differences and changes of level of malnutrition and immediate causes rather than the absolute level of malnutrition in community discussions.

4. More creative forms of `monitoring` and `documentation`

A greater identity needs to be established for the programme. An Annual National Conference could achieve a number of objectives and is, in itself, a powerful force for advocacy.

A National Conference should be held each year for 2 to 3 days for 200+ persons. The hosting of the Conference should be alternated each year between the various districts. The conference programme should be based on presentations by those involved in the programme in various capacities; Community Weighing Teams, VAP members, Extension Workers, community leaders, DA members, Members of District Administration, National level persons. Each district should present a display of its activities over the previous year. This Conference could provide a forum at which to recognize the inputs of various persons who may have given outstanding service to the area over the preceding year. The Conference could be in a local school to minimize expenses. However it should be opened by as prominent a person as possible.

In addition more creative ways need to be explored of `communicating the data` to sell the approach to government, donors and NGOs. A documentary video on the RCBD needs to be produced accompanied by training manuals and brochures on the key lessons learnt from the intervention.

Regular Newsletter need to be produced written by the villagers for the villagers. The project could assign staff to help develop and nurture contributions.

5.7 LESSONS LEARNT

- **`Development machine` – dis-empowerment**

There may be a danger of the international donor community in Ghana seriously compromising the natural rhythm of life in the villages. Before the advent of `development agencies`, in conditions no different than today, in rural areas of Ghana

there was surely a rich experience of community assistance given without a thought of material reward. Now, in the quest for quick results on the log frame and to provide reports to funders, donors are willing to pay premium prices for services that have been given freely for hundreds of years. In the marketplace of development some donors are prepared to outbid their sister agencies in 'order to get the job done.' In the competitive process the rural villagers will naturally seek out the highest bidders. The tragic irony then becomes that the villager is the one who is then criticized for being so 'materialistic' with no thought as to how such desires were nurtured in the first place.

The Non Formal Education project, funded by the World Bank, is a tragic example of this process. 'Shopping lists', featuring sewing machines, bicycles and televisions, are offered to the village 'volunteers', who simply pen their choice. When such benefactors exist inevitably the UNICEF RCBD programme will pale by comparison. There is need for unity of vision and action by the donors to cease the 'major players', i.e. those with the largest budgets, 'purchasing victories'. In the interest of sustainability, the UNICEF position is that government workers should not receive any further incentive for performing their everyday work. The World Bank and UNDP interpret their 'development' mandate more freely and offer very attractive packages to government staff to ensure programme items stay on the agenda. In such an unequal playing field UNICEF will inevitably be regarded as the poor relation and not the first team of choice. This is an issue that the UN family need to address otherwise it will constantly undermine UNICEF field work.

In the 'market place of development' key players will hawk their skills in the market and sell to the highest bidder. As a result RCBD loses one of its key players, the VAP coordinator in YD who has joined the Catholic Relief Service and therefore a salary increase of several hundred percent.

- **basic inequalities between UN staff and their local 'partners'**

The RCBD programme is full of the new jargon in development, 'empowerment', 'capacity building' etc. However such lofty concepts are sometimes greatly diluted by the tensions which are created by the significant disparities in conditions which exist between UN staff and their government 'co workers'. This is made most acute in the present project where there is a major disparity between UN rates and local rates for field trips using the same hotels and restaurants. Work needs to be done to close this disparity otherwise senior government workers will simply not support the work in the field.

- **'Short term' consultants – in long term intervention**

The RCBD programme is attempting to impact on very fundamental issues in development. The key players in the process change too frequently. The present JPO has inherited a project with a number of limitations, e.g. in the way in which the proposals were introduced and the way in which UNICEF was presented as the 'saviour' for the

development needs of the districts. It may be necessary to have key staff assigned to such a programme for longer periods than the UNICEF career path presents.

- **Decision making**

A major source of frustration in the project is where decisions are made. As outlined earlier too many of the decisions are made by UNICEF. This is seen most clearly in the long delays in dealing with the CAPs from the villages. Many communities claim not to know 'where' the proposals are, there was an oft repeated sense of 'helplessness' in the communities as they spoke about their proposals. The locus for decision making for the project needs to be within the districts.

- **National commitment?**

Commitment to the concept of decentralisation comes in many forms. At a national level the MOH and MOFA have been slow to respond to the decentralisation thrust. It should be no surprise therefore that key figures at national level are themselves ambiguous about the reality of decentralisation and inevitably personalize the process and examine what their own role will be in the new hierarchy.

- **Genuinely want empowerment?**

Only the most enlightened of 'rulers' wants empowerment. It is no coincidence one great sage of 'empowerment', Pablo Friere' had to leave his native land and travel the globe to find an environment conducive to such revolutionary concepts. Closer to home some of the districts may not be a conducive environment to such ideas. Whilst leading figures in YD genuinely greet such a philosophy some of their colleagues in other districts are less than positive. In deciding on expanding and consolidating the project these issues needs to be considered.

- **danger of expecting too much from the community**

As Brouwer (1998) notes there are limits to the range of actions a community can take to address its nutritional problems and limits in its ability to develop innovative solutions.' We need to reconsider what is realistic to expect the community to do on their own?

- **Effective partnerships – with NGOs**

There have been a number of very effective examples of collaboration between the RCBD and NGO/CBOs in the district. Examples of this collaboration include; Food security with VVUM and CCFI, Church of Africa and Presbyterian Mission in building wells, School for Life, Community Life Improvement Programme, Management Aid, and Church of Christ. However many of the NGOs at District level share many of the same 'sins' as the major donors and many NGOs have hidden agendas, e.g. evangelism.

Moreover in forming linkages with other developmental initiatives in the district the RCBD programme needs to seek out NGOs with a common philosophy. The Catholic Relief Service for example provides free lunches to children at school to increase enrollment levels with 'spectacular success'. Presently they do not consider investing

part of their resources in the more long term vision of developing school farms. Moreover in collaborating with an NGO like WUSC and the 'girl child' project RCBD could attract more opposition than any possible gains. By directly challenging conservative Northern Ghanaian villagers with their 'attitudes to women' they could indeed retard the progress made for women in the RCBD programme that adopts a more subtle approach. Victories for women have been won by the RCBD programme that would not have been possible if it was a 'gender project' pioneered by young females from Canadian Universities. Another NGO, with the title, 'Doctors Throughout the World', swept through the district providing vaccinations for two years but consolidating dependency in the process. The NGO passport is not therefore an easy one to hold and partnerships with such interventions can well breed far more problems than victories.

However there are of course many visionary and pure hearted NGOs and the challenge in these cases is to form effective partnerships with them to develop a more holistic approach to intervention. The RCBD programme needs to see how to make the most effective linkages with other development agencies who may be working in the same communities and examine together how they can combine resources. A major challenge for the RCBD programme is to see how to inject a deep understanding of the RCBD philosophy onto the agenda of other NGOs in the district.

- **Effective partnerships with other UNICEF initiatives**

A number of the reports highlight the 'achievement' of RCBD collaborating with two other UNICEF initiatives, i.e. Childscope, in education and the Bednet project in health. The Childscope project is a visionary project however as yet only limited investments have been made to introduce the key Childscope methodology to the RCBD areas. The Bednet project, by comparison, has done extensive baseline data and has promised mosquito nets to the villagers. The deadline for this promise is now past and in all the villages visited by the writer complaints were voiced concerning the failure to keep promises. In making partnerships therefore RCBD needs to fully appreciate what inputs are necessary to make.

UNICEF needs to adopt an integrated approach. The UNICEF Accra office is rich in experience, but it would appear that each section works in 'isolation'. The goals of the present project are far reaching and yet the investments in each sector are no more than a few thousand dollars. To translate such lofty goals into practice a far more unified use of the UNICEF resources is required.

The RCBD project needs to overcome the *political correctness* of trying to spread the various interventions throughout the region with the need to ensure the inputs are sufficient to make an examination of an impact realistic. In the expansion of the Childscope project into the RCBD programme only a *minority* of VAP communities chosen to coincide with villages chosen for Childscope project.

- **Need for effective management of the intervention**

How effective is the programme structure/management for achieving the goals? Various misgivings have been recorded earlier for UNICEF exceeding its technical mandate and taking on major aspects of the project management. A UNICEF project officer should be based full time in Tamale to ensure effective partnerships with the districts and help them see the locus of control for the project has moved from Accra to the North. Liv Elden, who is presently officer in charge, should ensure that copies of her very detailed and informative trip reports are sent to the NSC to keep them informed of developments on the project. This would overcome the feeling expressed in the RCBD retreat, 'most of the time we don't know what UNICEF is doing in the field'.

- **RCBD goals too diffuse**

The programme needs greater focus. The project goal is the reduction of malnutrition- however how many of the causes of malnutrition can one project address? It may be better to make a more limited project focus, and support some clearly defined area in each sector and then establish some clear indicators which will monitor if an impact is being made and then simply liaise with certain organisation e.g. in the area of agriculture.

- **expansion vs consolidation**

The initial goal for BD was to work in the entire district, eighteen months later they realised this was unrealistic and the programme was confined to 12 communities. In YD the project presently operates in 10 villages and is expanding to 12 more, the district however has 314 communities. A major challenge for the intervention therefore is to see how to 'go to scale'. The programme should continue to expand and consolidate in YD and maintain its presence in the existing communities in BD. In expanding to new areas very clear commitments need to be made in writing by the DA concerning their inputs into the programme. A number of 'zone wide' Extension teams could then be nurtured, with a new role of 'giving away their skills', who would then respond to specialised requests from communities which have been animated by the community members of the existing VAP teams. Effective community members of the VAP teams could be challenged, and 'motivated' to introduce the animation approach in 4 or 5 neighbouring villages. Their 'motivation' for this 'consultancy' service could be some modest stipend. However it is understood that to be sustainable the available incentives can only be those which are feasible for government to maintain. For many such workers a certificate of recognition can be a motivating force. This could be combined with tangible – but modest – symbols, such as project T shirts, calendars, pens, manuals, which help to foster a project identity.

The DCCD summarised the challenge for the RCBD programme; 'the RCBD is playing a pilot role, to develop a model for other to follow, however as leaders we need to establish clear footprints for others to see.' A major challenge now is to document the lessons learnt from the experience to date in a way that is 'user friendly'.

6.0 CONCLUSION

In evaluating the RCBD project one needs to distinguish between the challenges of the 'RCBD' approach as opposed to the fundamental development challenges which confront much of the country and a good part of humankind.

There is an impatience in development work that may have its roots in Western cultures. We enter communities which have remained largely unchanged for hundreds of years and proceed to formulate goals to be achieved within the space of a matter of months. The kind of change the RCBD intervention would like to herald does not come about in such a time frame.

Rather the RCBD programme needs to develop a 10 year vision and try and attract a champion who will walk towards the vision not in terms of a two year consultancy contract but with a 5-10 year commitment. A key goal then will be the development of a unified vision of growth which will be the outcome of a large number of consultations at all levels of the intervention, which are facilitated by resource persons blessed with the gift of listening. They will show others the power of listening to persons who, at first do not seem articulate in the 'educated' sense and yet who have so much to say if others would listen more attentively and more respectfully.

This process will reap rich rewards if the facilitators have a genuine faith in the capacity of the people they are serving to bring about change in their own condition. Such a belief is infectious and inspires people to achieve more than they thought they were capable of doing. Such a condition cannot be defined into existence, rather it will be the natural outcome of a grassroots consultative process that will emerge over time within the programme.

Development is now coloured by a flourishing new vocabulary. We read about 'ownership', 'empowerment', and 'community participation'. More often they are spoken about than demonstrated. The challenge of this programme is to translate those phrases into practical action.

In reflecting on the goals one comes away from this intervention with a renewed respect for the length of time it takes to effect a process of meaningful change in the lives of largely impoverished people. However the RCBD programme has established a valuable foundation on which to build .

Appendix #1: Questionnaires used

Questionnaire #1: MEMBERS OF THE PROJECT MANAGEMENT TEAM

1. Please give a brief description of your role in the RCBD project.

2. What would you say are the major achievements of the RCBD project?
3. How could the RCBD project be improved?
4. What training, provided in the project, has been most effective and why?
5. What training, if any, was provided to make you more effective in your role on the project?
6. What examples have there been of effective multisectoral collaboration on the project?
7. How effectively has the project involved the project beneficiaries in the process of development?
- 8a. What steps have been put in place to monitor and evaluate the project?
- 8b. How effective has this monitoring and evaluation been on the project?
9. How effective has the networking been with (give examples)
 - a) NGOs
 - b) Other organisations
3. What economic, social or human factors have impeded the realisation of the project objectives?
4. What economic, social or human factors have enhanced the realisation of the project objectives?
5. How effectively has the project raised up new human resources?
6. (With examples) How effective has the project been in terms of....
 - a) promotion of community responsibility
 - b) promotion of a spirit of self reliance within the communities
3. Specifically, what has the project done to improve the condition of women in the project?
4. What steps have been put in place to maximise the sustainability of the project?
5. What are some of the major lessons of development you have learnt from the project?
6. How replicable is the project to other districts in Ghana?
7. Have there been any unintended effects of the project?
 - a) in a positive sense
 - b) in a negative sense
3. In retrospect, how realistic were the original goals and objectives of the project as presented in the Original Project Document.
4. What support, if any, have government ministries given to the project
 - a) in terms of support for training programmes, e.g. release to attend workshops etc
 - b) budget allocation
 - c) high level inter ministerial meetings to discuss the project
4. In what ways has the project strengthened the existing infrastructure, e.g. government workers becoming more committed to their work etc.
5. Have any NGOs requested training from the project?
6. Has the project obtained funds for RCBD from any other source than MLGRD or UNICEF?
7. What form of support has the project mobilised, e.g. use of community buildings, contribution of time by volunteers, donations of materials etc?
8. What has been the most rewarding aspect of the programme for you?
9. What has been the most frustrating aspect of the project for you?
10. Anything you would like to add.

Questionnaire #2: Members of the District Assembly

Interviewer:

District: Builsa/Yendi (circle one)

1. What do you think is the major goal of the Rural Community Based Development (RCBD) Programme in your District?
2. What are the most important needs in terms of development in your District? (choose five and rank them in order of importance)
 - a) education
 - b) health
 - c) nutrition
 - d) water and sanitation
 - e) improvement in the status of women
 - f) literacy training
 - g) Income Generation Projects
 - h) environmental awareness
 - i) decentralisation of decision making
 - j) family planning
 - k) other, please specify
12. How effectively has the RCBD programme responded to these needs?
13. What contact has the District Assembly with the RCBD programme?
14. In what ways has the District Assembly been able to assist the RCBD programme?
15. In what other ways could the District Assembly help the programme?
16. What changes could be introduced to make the RCBD programme more effective in your District?
17. In what ways, if at all, has the RCBD programme strengthened the District Assembly?
18. How practical would it be to introduce the RCBD programme into other communities in your District?
19. What, if anything, have you gained personally from the RCBD programme?
20. Does the District Assembly have the necessary resources (human, financial, etc) to participate effectively in the programme?
21. What could be done to strengthen the capacity of the District Assembly to participate effectively in the programme?
22. Who makes the major decisions concerning the RCBD programme?
23. Who does the RCBD programme belong to?
24. Is there anything else you would like to add?

Questionnaire #3: Extension Workers

Interviewer:

District: Builsa/Yendi (circle one)

1. Your background:

- a) Health
 - b) Education
 - c) Community Development
 - d) Water/Sanitation
 - e) Agriculture
 - f) Other, please specify:
7. Age:
- a) under 20 years
 - b) 21-30
 - c) 31-40
 - d) 41-55
 - e) 56 years +
6. Sex:
- a) male
 - b) female
3. Educational background:
- a) primary
 - b) secondary
 - c) tertiary – college/university
 - d) no formal education
5. Give a brief description of your role on the Rural Community Based Development (RCBD) Programme?
6. About what percentage of your working time is given to the RCBD programme?
- a) 90-100%
 - b) 70-89%
 - c) 50-69%
 - d) 30-49%
 - e) less than 30%
 - f) none at all
7. What training, if any, did you receive from RCBD programme. (give type and length of training)
7. How would you rate this training?
- a) very helpful
 - b) helpful
 - c) not helpful
 - d) uncertain
9. What training, if any, have you organised as part of the RCBD programme?
10. What are the most important needs in terms of development in your District? (choose five and rank them in order of importance)
- a) education
 - b) health
 - c) nutrition
 - d) water and sanitation
 - e) improvement in the status of women
 - f) literacy training

- g) Income Generation Projects
- h) environmental awareness
- i) decentralisation of decision making
- j) family planning
- k) other, please specify

12. How, if at all, has the RCBD programme responded to these needs?
13. Please give a brief description of what the programme has done in your district.
14. What is the single most important contribution of the RCBD programme in your district?
15. What have you been able to contribute to the work of the programme in your district?
16. How well known is the RCBD programme in the project communities in your district?
- a) known by the majority of persons
 - b) known by some of the persons
 - c) known by only a few persons
 - d) not known
5. What support, if any, have you received from the RCBD programme for your work on the programme?
(circle more than one if necessary)
- a) attended training courses
 - b) manuals, booklets
 - c) visits to other projects
 - d) supervision/encouragement
 - e) other, please specify:
6. In what ways could the RCBD programme be improved?
7. What, if any, are the benefits of being involved in the RCBD programme?
(circle more than one if necessary)
- a) increased self respect
 - b) more knowledge
 - c) more money
 - d) more respect within the community
 - e) none
 - f) other, please specify:
7. How would you rate the RCBD programme:
- a) very helpful
 - b) helpful
 - c) no help at all
 - d) uncertain
5. To what extent have you collaborated with Extension workers from other sectors as part of the RCBD programme?
6. When you have collaborated with Extension workers from others sectors how valuable has this been?
- a) very valuable
 - b) valuable
 - c) not valuable

4. Is there anything else you would like to add?

Questionnaire #4: VAP Team Members

Interviewer:

District: Builsa/Yendi (circle one)

1. Your background:

- a) Community member: man, woman, youth
- b) District Assembly member
- c) Extension Worker: (state which sector):
- d) Other, please specify:

5. Age:

- a) under 20 years
- b) 21-30
- c) 31-40
- d) 41-55
- e) 56 years +

6. Sex:

- a) male
- b) female

3. Educational background:

- a) primary
- b) secondary
- c) tertiary – college/university
- d) no formal education
- e) none

6. Give a brief description of your role on the Rural Community Based Development (RCBD) Programme?

6. About what percentage of your time is given to the RCBD programme?

- a) 90-100%
- b) 70-89%
- c) 50-69%
- d) 30-49%
- e) less than 30%
- f) none at all

7a What training, if any, did you receive from RCBD programme. (give type and length of training)

7b How would you rate this training?

- a) very helpful
- b) helpful
- c) not helpful
- d) uncertain

7c. Please describe any areas that you feel should have been covered in your training but were not?

8. What are the most important needs in terms of development in your District? (choose five and rank them in order of importance)

- a) education
- b) health
- c) nutrition
- d) water and sanitation
- e) improvement in the status of women
- f) literacy training
- g) Income Generation Projects
- h) environmental awareness
- i) decentralisation of decision making
- j) family planning
- k) other, please specify

9. How, if at all, has the RCBD programme responded to these needs?

10. Please give a brief description of what the programme has done in your district.

11. What is the single most important contribution of the RCBD programme in your district/community?

12. What have you been able to contribute to the work of the programme in your district/community?

13. How well known is the RCBD programme in the project communities in your district/community?

- a) known by the majority of persons
- b) known by some of the persons
- c) known by only a few persons
- d) not known

5. What support, if any, have you received from the RCBD programme for your work on the programme?

(circle more than one if necessary)

- a) attended training courses
- b) manuals, booklets
- c) visits to other projects
- d) supervision/encouragement
- e) other, please specify:

6. In what ways could the RCBD programme be improved?

7. What, if any, are the benefits of being involved in the RCBD programme?

(circle more than one if necessary)

- a) increased self respect
- b) more knowledge
- c) more money
- d) more respect within the community
- e) none
- f) other, please specify:

7. How would you rate the RCBD programme:
- a) very helpful
 - b) helpful
 - c) no help at all
 - d) uncertain
18. What was your motivation for participating in this programme?
19. How satisfied are you in terms of participating in this programme?
- a) very satisfied
 - b) satisfied
 - c) not satisfied
20. What impact do you think you have made on:
- 20a. The level of malnutrition in the village
- a) excellent
 - b) good
 - c) satisfactory
 - d) poor
- 20b. The general development of the community
- a) excellent
 - b) good
 - c) satisfactory
 - d) poor
5. How would you rate the supervision/support you received from the VAP coordinator?
- a) excellent
 - b) good
 - c) satisfactory
 - d) poor
22. What is the benefit of the VAP team being composed of persons from different sectors and backgrounds?
23. Is there anything else you would like to add?

Questionnaire #5: Community Members

Interviewer:

District: Builsa/Yendi (circle one)

1. Position:

- a) Chief/Elder
- b) Council member
- c) Teacher

- d) Health Worker
 - e) Mother
 - f) Farmer
 - g) Other, please specify
8. Age:
- a) under 20 years
 - b) 21-30
 - c) 31-40
 - d) 41-55
 - e) 56 years +
6. Sex:
- a) male
 - b) female
3. Educational background:
- a) primary
 - b) secondary
 - c) tertiary – college/university
 - d) no formal education
 - e) none
6. Please give a brief description of what the Rural Community Based Development Programme (RCBD) has done in your community.
6. What is the single most important contribution of the RCBD programme in your community?
7. What are the most important needs in terms of development in your community? (choose five and rank them in order of importance)
- a) education
 - b) health
 - c) nutrition
 - d) water and sanitation
 - e) improvement in the status of women
 - f) literacy training
 - g) Income Generation Projects
 - h) environmental awareness
 - i) decentralisation of decision making
 - j) family planning
 - k) other, please specify
12. How, if at all, has the RCBD programme responded to these needs?
13. How would you rate the RCBD programme:
- a) very helpful
 - b) helpful
 - c) no help at all
 - d) uncertain
5. How could the RCBD programme be improved?
6. In what way, if at all, have you been able to support and assist the RCBD programme in your

community?

6. How well known is the RCBD programme in your community?
 - a) known by the majority of persons
 - b) known by some of the persons
 - c) known by only a few persons
 - d) not known
13. What, if anything, have you learnt from the RCBD programme?
14. Is there anything else you would like to add?

Questionnaire #7: Evaluation of the evaluation exercise

1. What, if anything, have you gained from being involved in this evaluation?
2. What role do you feel you played in the evaluation exercise?
3. How would you rate the evaluation exercise?
 - a) very helpful
 - b) helpful
 - c) not helpful
 - d) uncertain
5. Have you ever been involved in an evaluation exercise of this nature?
 - a) yes
 - b) no
3. How adequate was the one day training course for preparing you for the evaluation?
 - a) very adequate
 - b) adequate
 - c) not adequate
4. How well were the questionnaires understood in the villages?
 - a) very well
 - b) quite well
 - c) not well
4. How useful was the feedback meeting to discuss the results of the evaluation?
 - a) very helpful
 - b) helpful
 - c) not helpful
 - d) uncertain
8. Is there anything else you would like to add about the evaluation exercise?

Appendix #2: REFERENCES

a) Progress Reports

RCBD Village Action Process in Yendi District, 1996

RCBD A cost effective and participatory process for mobilising community action against malnutrition and for building the capacity of the DA to better deliver essential services. Progress Report UNICEF, Tamale, 1996

b) Research Reports

Builsa District RCBD Builsa District Household Food Security and Nutrition Baseline Study, Builsa DA, Sandema, 1996

Brouwer, I. (1997) 'Impact of RCBD on nutritional status of children under 5.' UNICEF, Tamale.

Brouwer, I. (1998) 'Growth Monitoring and Nutrition Surveillance Project,' UNICEF Tamale.

Brouwer, I. (1998) 'RCBD Tolon-Kumbungu Impact evaluation on nutrition status of children under 5.' 1996-98. UNICEF, Tamale.

Brouwer, I. Rijlaarsdam, J. and Terink, C. (1998) 'Impact evaluation on nutrition status of children under 5.' 1997-98. UNICEF, Tamale

Brouwer, I. Rijlaarsdam, J. and Terink, C. (1998) 'Impact evaluation on nutrition status of children under 5. Builsa District ' 1996-98. UNICEF, Tamale

c) Donor Reports

Progress/Utilization Report #4 (final) SC/92/0159-3, Netherlands Government, UNICEF, Accra, 1996.

Progress/Utilization Report #1 SC/95/0604-2, Netherlands Government, UNICEF, Accra, 1996.

Progress/Utilisation Report #2 SC/95/0604-2, Netherlands Government, UNICEF, Accra, 1997.

d) District Plans of Action

District Plan of Action, Builsa District, 1997, 1998

District Plan of Action, Yendi District, 1996, 1997

e) Report of Trimester Reviews

Second Trimester Review Meeting on RCBD , Builsa District Assembly, 1997

Third Trimester Review Meeting on RCBD , Builsa District Assembly, 1997

First Trimester Review Meeting on RCBD , Builsa District Assembly, 1998

First Trimester Review Meeting on RCBD , Yendi District Assembly, 1998

f) Project Workplans

Annual Project Workplan (APW) 1995, 1996, 1997, 1998.

Annual Project Assessment Table (APAT) 1995, 1996, 1997, 1998.

Cash assistance to Government Counterparts 1995, 1996, 1997, 1998.

Supply Assistance to Government Counterparts 1995, 1996, 1997, 1998.

Appendix #3: ITINEARY

- July 21st Depart Guyana
- 22nd Arrive Ghana – meeting with Liv Elden and Reyoko
- 23rd Meeting with PAB Consultant, Andrew Aforo
 - Review work schedule
 - Meeting with UNICEF Resident Rep
 - Meeting with NSC Representatives
- 24th Meeting with RCBD Mid term Review Task Force
- 25th Review of documents
- 26th Review documents
- 27th Travel by air to Tamale
 - Training workshop for LET in Builsa
- 28th Training workshop for LET in Yendi
- 29th to August 4th: Collection of data
- 31st Feedback meeting in Builsa
- Aug 3rd Feedback meeting in Yendi
- 4th to 6th Compilation of data
- 7th Feedback meeting Accra
- Dept Ghana 23.00

(rcbd)