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Submitted in partial fulfilment of the requirements for the degree of Master Of Communication For Development offered by the Department of Mass Communication of the University of Zambia.

UNZA, 2004
DECLARATION

I declare that this practical attachment Report has not been submitted for a degree at the University of Zambia nor at any other University.

Full Name: James Dalinga Fika
Signature: 
Date: 23/11/2014

Supervisor's Name: Lili Strinoco
Signature: 
Date: 23/11/2014
DEDICATION

I dedicate this report to my children Kaluzi, Mukkuli and Cileleko, my wife Yeletsani and my parents Mr. Orange Sikalima Vwavwa (late) and Rebecca Kaluzi Vwavwa.
ABSTRACT

The research focuses on participatory communication in planning (design), monitoring and evaluation of programmes in Christian Children’s Fund (CCF) affiliated projects in Zambia. The thrust is on the actual involvement of the communities in the planning, monitoring and evaluation of programmes. Of great importance is the use of the Project Management Tool (PMT) which was fully implemented in 1997 to enhance community participation. The specific places of research included the Mwembeshi, Namayani, Kabile, Kalundu and Mtengo Projects.

The study was prompted by the fact that despite the over twenty years CCF has been in operation in Zambia, no tangible empowerment of families and communities has been done, let alone the meagre handouts given to the families. The existing scenario is that communities do not have power to make decisions to control the developments and improve their well-being. Sustainability of programmes does not to exist in CCF projects.

The overall outcomes point to the fact that CCF communities are not fully empowered to decide on programmes though efforts towards that are being introduced through the PMT and organisational / structural changes. However, what is outstanding is that communities are merely informed of what should be done. Information flow is also not adequate and slows participation, hence the need for individual and social change innovations.
ACKNOWLEDGEMENTS

I pay tribute to the Christian Children’s Fund Inc, for facilitating my attachment to its affiliated projects of Mwembeshi, Mtengo, Namayani, Kabile and Kalundu. Particular thanks go to the chairpersons for the above mentioned programmes for letting me gather information without attaching conditions.

The Project Development Managers (PDMs); Mr Dearson Muzenge for Mtengo, Mr Wilfred Malambo for Namayani, Mr Chikatula Mondomona for Kabile and Ophen Mwiinga - acting manager for Kalundu, were very helpful. Equally important were the Project Development officers (PDOs); Clement Ng’andu, Jeans Chikopa, Frezer Muyupi and Chishala Kasakula during his acting period as PDO. It would be unthankful of me to forget the numerous social workers who assisted with the collection of data through questionnaires. To them I say, “your services were greatly valued.” I am equally highly indebted to Brenda Nsewa for secretarial services she rendered to me. To her I say “a good job done.”

To my supervisor and lecturer Mr. Billy Nkunika. “Your inspiration for me was simply great. Your fatherly and scholarly advice has seen me produce this splendid work. May the almighty God continue to bless your family and you. May he strengthen you day by day. I am grateful for the work you have done for me”

I was grounded to carry out the research after a successful year of doing class work. I, therefore, take pride in congratulating my lecturers for the skills and knowledge they imparted into me. Particular thanks go to Mr. Fidelis Muzyamba, Mr. Kenny Makungu and Dr. Emmanuel Kasongo. I am equally grateful to all the staff of the Mass Communications department at the University of Zambia.
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<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIMES</td>
<td>Annual Impact Monitoring and Evaluation System</td>
</tr>
<tr>
<td>BSA</td>
<td>British South African Company</td>
</tr>
<tr>
<td>CAR</td>
<td>Convener, Animator and Recorder</td>
</tr>
<tr>
<td>CCF</td>
<td>Christian Children’s Fund</td>
</tr>
<tr>
<td>CCFA</td>
<td>Christian Children’s Fund- Australia</td>
</tr>
<tr>
<td>CCFIO</td>
<td>Christian Children’s Fund- International Office</td>
</tr>
<tr>
<td>CSO</td>
<td>Central Statistical Office</td>
</tr>
<tr>
<td>CBO</td>
<td>Community Based Organizations</td>
</tr>
<tr>
<td>CDR</td>
<td>Collaborative Development Research</td>
</tr>
<tr>
<td>FIT</td>
<td>Finance Indicator Tool</td>
</tr>
<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
</tr>
<tr>
<td>IMR</td>
<td>Infant Mortality Rate</td>
</tr>
<tr>
<td>IMCFSC</td>
<td>Integrated Model of Communication For Social Change</td>
</tr>
<tr>
<td>INGO</td>
<td>International None Governmental Organisation</td>
</tr>
<tr>
<td>LoA</td>
<td>Letter of Agreement</td>
</tr>
<tr>
<td>MCD</td>
<td>Master of Communication for Development</td>
</tr>
<tr>
<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
</tr>
<tr>
<td>NGO</td>
<td>Non Governmental Organisation</td>
</tr>
<tr>
<td>PAB</td>
<td>Parents' Advisory Board</td>
</tr>
<tr>
<td>PDD</td>
<td>Project Design Document</td>
</tr>
<tr>
<td>PDO</td>
<td>Project Development Officer</td>
</tr>
<tr>
<td>PDM</td>
<td>Project Development Manager</td>
</tr>
<tr>
<td>PFE</td>
<td>Parent Family Educator</td>
</tr>
<tr>
<td>PMT</td>
<td>Project Monitoring Tool</td>
</tr>
<tr>
<td>PPP</td>
<td>Peoples' Participatory Process</td>
</tr>
<tr>
<td>UFMR</td>
<td>Under-Five Mortality Rate</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children's Fund</td>
</tr>
<tr>
<td>UNZA</td>
<td>The University of Zambia</td>
</tr>
<tr>
<td>SADCC</td>
<td>Southern Africa Development Co-ordination Conference</td>
</tr>
<tr>
<td>SITE</td>
<td>Standard Indicator Tool for Evaluation</td>
</tr>
<tr>
<td>SSIMS</td>
<td>Sponsor Services Indicator Measurement System</td>
</tr>
</tbody>
</table>
INTRODUCTION

The research focused on how communities have taken part in Christian Children’s Fund (CCF) activities meant to improve the welfare of children and their families. CCF started operations in Zambia in 1983 with the policy of empowering communities to carry out activities to benefit themselves. The main thrust of CCF was to enable parents to identify their own problems, examine the possible solutions, implement the solutions and improve in their way of living especially in areas concerning health, education, environment e.t.c. This prompted CCF to come up with up the “Ten Steps towards the year 2000.”

The achievement of the goals by the year 2000 and beyond required some social change practices of the communities in which CCF conducted its activities. It required the use of strategies, tactics and structures appropriate enough to empower the communities to achieve the development objectives. However, only partial realisation of the goals was done by the year 2000. Because of the non fulfilment of the objectives, it was imperative that the involvement of the communities in planning, monitoring and evaluation of programmes was examined in CCF projects in Zambia.

The first chapter starts with a profile of Zambia as a country. This is important because the area under survey is and has been influenced by what is obtaining in this country. The chapter then focuses on the Christian Children's Fund as an organisation, examining CCF operations in Zambia. The planning, monitoring and evaluation tool in use, that is, the PMT which was fully enforced in 1997 is as well discussed. CCF has twenty three projects and not all projects were covered. The specific areas of research included the Mwembeshi, Namayani, Kabile, Kalundu and Mtengo child and family projects.
The Second chapter was dedicated to the problem statement, the objectives of the study, the rationale and outlines the general research questions.

In the third chapter, the methodology of the study is explained. The chapter begins with detailed research questions, data collection methods and the sampling frame. The sample size, which included 155 respondents, is given in the chapter. Other areas covered include the sampling methods, the administration of questionnaires and the methods of data analysis.

The conceptual framework is dealt on in the fourth chapter. Conceptual terms used include Participatory Communication, which according to Dordenave is defined as communication in which all interlocutors are free to have equal access to the means to express viewpoints, feelings and experiences (White et al 1994:43). Monitoring and evaluation are the other concepts that are covered in the chapter. Monitoring refers to routine or daily assessment of ongoing activities or progress whereas evaluation is the episodic assessment of overall achievements (UNAIDS, 2002:3). The People's Participatory Planning Process, which is an outline of steps in the planning process, is given as well as social change.

Chapter five discusses the theories used in the research. Although no single theory can be used to explain a multi-dimensional problem, for the purposes of this research three theories are used. These include the Communication for Social Change: an integrated model for measuring outcomes by development communication researchers, Figueroa and others, the Spiral of Silence and the Diffusion of Innovations theory.
The Literature review is given in chapter six. It looks at studies that have been done in the area of community involvement in donor assisted projects worldwide and participatory communication in CCF affiliated projects.

Chapter seven provides analysis of the data from the field using the methodologies provided in Chapter 3. The last chapter (eight) looks at the possible recommendations for enhancement of community participation in CCF affiliated project in the areas of planning, monitoring and evaluation.
CHAPTER 1

1.0. Zambia: Country Profile

1.1 Location

Zambia is situated in South-Central Africa in a zone previously known as the British Central Africa. Zambia lies between latitudes 8 degrees and 18 degrees South and between longitudes 22 degrees and 33 degrees 48 seconds East. Zambia covers an area of approximately 752,614 square kilometres or 290,586 square miles (Africa South of the Sahara, 1987:1090). Zambia has no sea-coast and is bordered by eight countries, namely: The Democratic Republic of Congo, Tanzania, Malawi, Mozambique, Zimbabwe, Botswana, Namibia and Angola. The land-lockedness means that Zambia’s exports have to go long distances to the sea-ports in other countries, which is quite dear for the economy.

1.1.2 Relief and Climate

Zambia forms part of the Central African Plateau. The country has three relief zones as follows: Areas lying 1,200 metres above the sea level, such as the Zambezi – Congo watershed in the North and North-west, the Mbala highlands in Northern Province and the Nyika Plateau on the Malawi border (2,164 m) which makes the Zambia Malawi watershed.

The main part of the country lies in a plateau area that is between 900 metres and 1,200 metres. The plateau is broken in the South by the Zambezi escarpment that fades into the Zambezi valley, which lies below 900 metres. The Muchinga escarpment also separates the main plateau in the eastern parts of the country from the Luangwa valley. To the west the country lies in the Kalahari basin and is sandy.
Map 01. Zambia, showing Lusaka and Mwembeshi
There are a number of lakes formed by down warping of the earth's surface. These include lakes Mweru and Bangweulu and the Lukanga swamps in the north. Lake Tanganyika is part of the East African rift valley system and so are the Zambezi and Luangwa valleys. The principal river systems are the Zambezi and its tributaries the Kafue and the Luangwa that drain into the south and the Luapula and the Chambeshi that drain into the north. The Zambezi has been dammed to form a man made lake known as the Lake Kariba.

Zambia, by virtue of her location in a tropical interior area has a tropical continental type of climate. The climate is characterized by three seasons as follows:-

(i) The Cool-dry season: – this starts from about May to August. The mean minimum temperatures during this season are between 5 and 10 degrees Celsius.

(ii) The Hot-dry season: – this starts from August to October. The mean maximum temperatures in this season are around 35 degrees Celsius but temperatures may exceed 36 degrees Celsius on certain days. This is the hottest period of the year owing to little or no cloud cover in the atmosphere most of the time.

(iii) The Hot-wet season: – this is the period during which Zambia receives her rainfall. It starts from mid October to April. Zambia mostly receives convergence rainfall that is controlled by the positions of the Inter-Tropical Convergence Zone made by the convergence of the moist Northeast and the often-dry Southeast winds. Rainfall in Zambia decreases from the north to the south.
1.1.3 Historical Background

Zambia has a rich history. Evidence of the middle stone age (Broken Hill Man) was excavated at Broken Hill, now called Kabwe. The late stone age and iron age works are scattered all over the country as shown by different artefacts such as stone tools, rock paintings and pottery. Of great importance among the Iron age sites is the Ng’ombe Ilede. Ng’ombe Ilede is located close to the confluence of the Lusitu and Zambezi river’s confluence. Evidence from Ng’ombe Ilede indicate existence of groups of people distinguished by wealth and social status. Graves that date back to about the fourteenth or fifteenth century AD bear evidence of metal works in copper and gold as well as trade with the outside world (Roberts, 1976:56).

Zambia became an independent country on 24th October 1964. Before 1964, Zambia was occupied and ruled by the British South African company (BSA) in June 1889 after Lewanika granted concessions to Henry Ware outside the Lozi Kingdom which later saw the BSA company’s charter in October 1889 conferring extensive rights upon the company both north and south of the Zambezi (Tindall, 1968:188). The 1890 Lochner treaty gave the BSA company mining rights on one hand and offered Lewanika protection and extension of education and communications in his territories. The provision for the administration of the western half of Northern Rhodesia by the BSA company under an administrator nominated by the company and appointed by the British High Commissioner was done through the Barotseland-North-Western Rhodesia Order in Council of 28th November 1899. Secondly, the North-Eastern Rhodesia Order-In-Council dated 29th January 1900, provided for the administration of the eastern half of Northern Rhodesia by an administrator nominated by the company and appointed by the Consul-General and the Commissioner for the British Central
African Protectorate. In 1911, North-Western Rhodesia and North-Eastern Rhodesia merged to form Northern Rhodesia with Livingstone as the capital.

In 1924, Northern Rhodesia became a British Protectorate up to 1953 when the Federation of Rhodesia and Nyasaland was introduced. The Federation ended in 1963 and in 1964, Northern Rhodesia became independent and changed the name to Zambia. In 1972, Zambia became a Second Republic that was manifested by nationalization of industries and introduction of a single party political system. In 1991, multi party politics and a free market economy were re-introduced.

1.1.4 Demographics

The population of Zambia according to the 2000 census (CSO, 2002: 8) totals 9,337,425 of which 4,594,290 are males and 4,743,135 are females. The rural population stands at 5,990,356 whose composition by sex is 2,931,551 males and 3,058,805 females and the urban population totals 3,347,069 of which 1,662,739 are males and 1,684,330 are females. The females constitute 50.8 percent while males constitute 49.2 percent of the population. Zambia’s population growth rate is 2.3 percent. It has declined from 3.1 percent in 1969 – 80 and 1980 – 1990 census periods. The growth rates in rural areas are higher than those of urban areas.

There has been an increase in female-headed households from 16.9 percent in 1990 to 18.9 in 2000. The population has remained mostly composed of young people. The fertility rate of the country is 6.0. The birth rates stand at 35.9 per thousand for the country, 39.9 per thousand for the rural areas and 28.6 per thousand for urban areas (CSO, 2000:27). The Infant Mortality Rate (IMR) which is a measure of the children aged one year and below who
have died per one thousand live births, and the Under-five Mortality rates (UFMR) which is a measure of the children aged below five years who have died per thousand, have increased in the country from 99 and 121 per thousand in 1980 to 123 and 151 per thousand in 1990 and to 110 and 162 per thousand respectively in 2000. The IMR and UFMR have been higher in rural areas than in urban areas. Life expectancy stands at 50 years. Trends in infant and under-five mortality rates from 1980 to 2000 are provided in the table below:-

Table 1.


<table>
<thead>
<tr>
<th></th>
<th>Infant Mortality Rate</th>
<th>Under-Five Mortality Rate</th>
<th>Infant Mortality Rate</th>
<th>Under-Five Mortality Rate</th>
<th>Infant Mortality Rate</th>
<th>Under-Five Mortality Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zambia</td>
<td>99</td>
<td>121</td>
<td>123</td>
<td>151</td>
<td>110</td>
<td>162</td>
</tr>
<tr>
<td>Rural Areas</td>
<td>106</td>
<td>132</td>
<td>133</td>
<td>164</td>
<td>117</td>
<td>180</td>
</tr>
<tr>
<td>Urban Areas</td>
<td>89</td>
<td>108</td>
<td>106</td>
<td>128</td>
<td>91</td>
<td>126</td>
</tr>
<tr>
<td>PERIOD</td>
<td>1980</td>
<td>1990</td>
<td>2000</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Derived from CSO, p.32&34.
Table 2.

ZAMBIA: Life expectancy in years

<table>
<thead>
<tr>
<th></th>
<th>1980</th>
<th>1990</th>
<th>2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zambia</td>
<td>52</td>
<td>47</td>
<td>50</td>
</tr>
<tr>
<td>Rural Areas</td>
<td>50</td>
<td>45</td>
<td>48</td>
</tr>
<tr>
<td>Urban Areas</td>
<td>54</td>
<td>51</td>
<td>54</td>
</tr>
<tr>
<td>Census Year</td>
<td>1980</td>
<td>1990</td>
<td>2000</td>
</tr>
</tbody>
</table>

Source: CSO, Census of population and housing, 2000

1.1.5 Economy

The main economic sectors in Zambia are mining, which is the most highly developed, agriculture, manufacturing and tourism. Agriculture contributed 31.9 percent of GDP in 1994. About 67.1 percent of the labour force was employed in 1994 (Europa vol. 11,1996: 1239). In the year 2000, agricultural production represented 20 percent of the Gross Domestic Product (GDP). The major food crops are maize, cassava, millet, sorghum and beans. Other crops grown include wheat, rice, cotton, tobacco, sunflower seeds, groundnuts, sugarcane, soya beans and horticultural products are also cultivated. Floriculture is also growing and contributing to foreign exchange earnings. Cattle rearing is also important. During the period 1990-94 agricultural production GDP declined by an annual average of 2.1 percent (declining by 19.9 percent in 1994). Poor policies have contributed to the decline in agricultural production. Main problems in agriculture are low producer prices, poor marketing strategies and inefficiencies in the distribution of inputs. The Mwanawasa government, which assumed
power in 2001, has tried to revamp agriculture by giving subsidised inputs. This boosted agricultural production for the 2002/03 agricultural season.

Industry that includes mining, manufacturing, construction and power contributed 33.4 percent of GDP in 1994 and engaged 37.4 percent of all wage-earning employees in 1989 (Europa vol. 11, 1996). In 1990 mining and quarrying contributed 9.6 percent of GDP, and in 1989 engaged 15.1 percent of wage earning employees. In 2001, the copper industry was fully privatised. From that time the mining industry has been in doldrums as the investors have been unstable. Copper is the main mineral export accounting for about 77.3 percent of total exports, while coal, gold, emeralds, amethyst, limestone and selenium are also mined. Zambia has reserves of phosphates, fluorspar and iron ore. During the period 1989 – 93 mining GDP declined by 3.1 percent.

Manufacturing contributed 21.6 percent of GDP in 1994 and engaged 14.2 percent of all wage-earning employees in 1989. The main manufacturing activities in Zambia are the smelting and refining of copper and other metals, petroleum refining, food canning and the production of fertilisers, explosives, textiles, bricks and copper wire. The main source of energy is hydroelectric power mainly generated at Kafue and Kariba stations, in which Zambia is self-sufficient though rural areas are yet to be connected. Imports of fuel and energy comprised about 5 percent of the value of the merchandise imports in 1993.

Main sources of imports in the sub-region are South Africa, Botswana, Lesotho, Namibia and Swaziland while the main overseas suppliers are the United Kingdom, the United States of America, Germany and Japan. The principal market for exports is Japan. Others are France, Thailand and India. Main exports are copper, cobalt and zinc. The principal imports are machinery, transport equipment, mineral fuels, lubricants and chemicals.
Since the mid-1970s, Zambia’s economic performance was adversely affected by fluctuations in the world prices for copper and high fuel prices, while the agricultural sector remained underdeveloped and vulnerable to unfavourable weather conditions. Zambia belongs to a number of regional economic groupings such as the COMESA, SADCC, and the Nacala corridor among others.
1.2 The Christian Children’s Fund

Christian Children’s Fund is an international non-profit, non-sectarian, humanitarian organization, dedicated to serving the needs of children worldwide through person – to-person assistance programmes.

The Christian Children’s Fund has the status of a major child welfare agency assisting approximately 2.5 million of the needy children of the world without discrimination of caste, creed, race, colour or sex. CCF programmes are people centred rather than service centred because they are concerned with the development of children and their families based on the principle of sustainability.

1.2.1 Establishment and development of CCF

The CCF was founded in 1938 by Dr. Clarke J. Calvitt and his wife Helen Clarke but it was not until 6th October, 1939 that it was incorporated. Dr. Clarke was inspired by the suffering of Chinese children as a result of the war, especially the Second World War (1939-1945). China’s war torn children were mostly orphans without shelter, food and all other basic needs. As a result of the suffering Chinese children in mind, Clarke embarked on a receptively simple fundraising strategy that has proved successful up to date. Clarke’s fundraising strategy was through individual person-to-person child sponsorship. This meant that only individual people who cared about others and were willing to send small amounts of money on a regular basis to help an individual child in need acted as sponsors or donors to the agency. Initially the agency was named China’s Children Fund Incorporated (CCF) due to its concentration on children in China.
Throughout the Second World War the CCF continued to grow and, by 1944, CCF was assisting 45 orphanages. By 1950, CCF’s operations spread worldwide to all continents including Third World Countries. At present, CCF operates in 40 countries of the world including Zambia. Since the 1950s CCF took focus into economic deprivation, poverty, basic health care and literacy (specifically on essentials like clean drinking water, sanitary disposal, housing, and environmental issues). In view of the spreading CCF operation, its official name was changed on February 6, 1951, from China’s Children Fund to Christian Children’s Fund.

In 1967 CCF adopted two major system wide policy changes: Firstly, national programmes wherever possible were to be headed by indigenous qualified people and secondly, there was the introduction of Family helper programmes to be administered by locally enrolled families. There was a change in CCF Policy such that instead of helping needy children by putting them in ‘orphanages’, emphasis shifted towards assisting children within their families and their communities with full participation of parents.

Since establishment, CCF operates only in countries where it is accepted by the host governments. However, it operates in accordance with limits of existing laws. CCF is not political in nature. At present CCF has taken particular interest in the “Rights of the Child” as has been legally acknowledged and upheld worldwide. CCF has fully participated in United Nations Conventions on the rights of children. Following adoption of the ‘Right of the Child’ by United Nations, on January 20, 1991, CCF came up with the ten steps to the year 2000, CCF’s plan for implementing the declaration of the World Summit and the new evaluation system known as Annual Impact Monitoring and Evaluation System (AIMES).
1.2.2 CCF Operations in Zambia.

CCF began work in Zambia in January 1983 and has 21 affiliated projects (child and family programmes) in Lusaka, Chongwe, Kafue, Luangwa and Chibombo districts. Some projects were dropped due to management problems. So far as of September 2004, there were Seventeen thousand (17,000) enrolled children out of which thirteen thousand (13,000) were sponsored (Sponsored Children by NO, 2004: 67&68) and 6230 assisted families.

The programme's initial aim was to ensure the survival of children in the poorest areas by providing adequate food, basic health care, clothing, shelter, and education. Schools, clinics and other community-based projects have been undertaken as part of the holistic approach to achieve the well-being of children. CCF in Zambia currently renders assistance through Family Helper Projects and Social Service Centres.

1.2.3 CCF Organisation and Communication Structure

Communication channels in CCF follow the organizational chart. The channels are two-fold at a country level and at Programme-level. The first level is at the national office and the second level at the Programme. The boards of directors at the national office and the programme levels ensure that policies are implemented. This is a way of enhancing participation in programmes with CCF’s belief that the interests of children are best served if CCF has guidance from expert local leadership. Through encouragement and initiative of such leadership CCF hoped to create and foster appropriate services for children within family and community contexts according to national and local development goals.
1.2.4 CCF’s PROGRAMME PLANNING, MONITORING AND EVALUATION SYSTEM

The Christian Children’s Fund uses the Project Management Tool (PMT) in the management of its programmes. The system was completely standardised by 1997.

1.2.4.1 THE PROJECT MANAGEMENT TOOL (PMT)

The PMT is a Standardized, agency-wide monitoring, evaluation, and planning process using key management indicators. It is an information system designed to measure project performance. The PMT integrates programme impact, sponsor relations and finance indicators so that they are reflected in the overall management system. The mission for PMT is stated below.

“To promote the well-being of children and accountability to the donor through effective and efficient project management that assures and improves performance based on minimum, practical standards” (PMT Manual, 1996: Appendix)

PMT represents a feedback loop between the child and the donor. The purpose of the PMT is to strengthen and assure the link between a child and a donor in a linear form of communication as shown below.

```
Child
  ↓
Project
  ↓
National office
  ↓
International office
  ↓
Donors
```

Communication links in CCF
The programme expects a financial base, improvement, training and supervision, guidance and technical support from CCF. The national office and international office expect quality, efficacy, accountability, leadership, impact and cost effectiveness. Finance, sponsor relations, management, and programme. Role, operation under the theory that “the whole is greater than the sum of its parts” the PMT not only summarizes the critical indicators from the different areas, but looks at ways to tap the synergy between them (PMT Manual, 1996: Appendix). The importance of community participation is viewed as the fundamental premise of PMT since actions in response to PMT findings must start and end with community members. PMT is thus a preventive community-based decision-making tool. The PMT is designed fundamentally for use by projects parents, staff and community members.

Chart 3. The component parts of PMT

(PMT Manual, 1996 : Appendix)
According to Figueroa et al (2002:15), a community is defined using location as a group of people who reside in the same locality and or for groups in which members do not reside in the same locality as a group of individuals who share common interest.

Community members in CCF operational areas in this study refer to all individuals who have direct or indirect participation in CCF related activities either as direct or indirect beneficiaries.

Because of the interest in the health and education systems in CCF, it is vital that the AIMES framework is dealt with in much detail. The other sectors of PMT that include FIT and SSIMS will not be the point of focus in this study.
1.2.4.2 THE AIMES SYSTEM

The AIMES system is a monitoring and evaluation system (M&E) designed to show if the interventions are making a positive difference in the lives of the children and communities served by CCF Projects. The system is based on a core set of standardized indicators that fall into two major sectors of health and education. All CCF programme activities are focused on these two sectors, as they are critical for children’s growth and development.

The AIMES system is based on three impact indicators and eight process indicators as follows:

**Impact Indicators:**

(i) Under Five and infant mortality rates.

(ii) Moderate and severe malnutrition among children under five years of age.

(iii) Adult literacy.

The impact indicators are meant to initiate programme interventions that are geared to reduce infant and child mortality, effectively contain malnutrition among under-five children and enhance adult literacy with special emphasis on female literacy.

**Process Indicators:**

(i) Children born with Tetanus Toxoid second dose (TT2) protection.

(ii) One to two year olds fully immunized, (received BCG, DPT3, Polio 3 and the measles vaccine.

(iii) Under-five-year-old malnourished children who progressed to normal.

(iv) Families that have access to safe water.

(v) Families that practice safe sanitation.
(vi) Families that correctly know how to manage a case of diarrhoea.

(vii) Families that correctly know how to manage a case of acute respiratory infection.

(viii) Boys and girls who are participating in a formal or non-formal educational programme. (In Zambia non formal education is not well defined and therefore not measured in the AIMES SITE)

In addition to the eight indicators above, the Zambian situation has called for the addition of three other process indicators as follows:

(i) Families that know how to control malaria.

(ii) Families that have the knowledge about the transmission and prevention of HIV and AIDS.

(iii) Families that know family planning.

Process indicators represent pathways to effect change in the three core areas of impact, and have a proven or accepted correlation to impact. These are standard indicators applicable to all CCF Projects. Although they are the basic minimum essential to create the expected impact, they are strong enough to promote the kinds of programme interventions necessary to ensure children’s well being and improve the quality of life in a given community. According to CCF State of Children (2000: 12), consistent and effective interventions made in response to these eight process indicators can create an environment conducive to children’s healthy growth and development on a sustained basis and can lead to a qualitative change in the given community.

AIMES is meant to capture the impact and does not prescribe any strategy of programme intervention by itself, it is a monitoring and evaluation tool.
AIMES is also a tool that provides energy for action. Ideally community members and project staff should capture and act on family level information through regular and purposeful home visitations. Information so gathered is aggregated to provide an overall status of children, families and the community. The community should use this information as a guide for making decisions on how best to prioritise interventions, allocate resources and take follow-up actions. Community level information is then aggregated at the national office level and used in the same manner.

1.2.4.3 Data Entry and Verification Sources in the AIMES System according to the PMT Manual 1996 and CCF State of Children 2000 are as follows:

(i) Family Cards:
A family card contains all information regarding each member of the family – children, parents and other care-givers residing in a household. All vital events like pregnancy, birth, death and migration (in and out) should be captured in the family card as and when they occur. Parents, volunteers and programme staff and all community members who deal in health care and children’s developmental needs can use these cards.

(ii) Service Rosters:
Rosters give health and educational progress of individual family members. Each roster separately tracks the key demographic groups: children under five years old, five to 15 year olds, and parents/heads of households. Rosters enable the information users to know which families they are working with and the type of follow-up support each family member requires.
(iii) **Vital Events Registers:**
Vital Events Registers capture pregnancies and pregnancy outcomes (births), deaths, and in and out migrations. The project staff and the parents use the information compiled to plan pre- and post-natal services for women and basic health care, including immunization for new-borns. The registers also enable the projects to stay abreast of the changing population trends in their projects.

(iv) **Standard Impact Tool for Evaluation (SITE):**
The SITE provides annually or quarterly aggregated data from rosters, vital events and family cards. It is a one-page document that gives a snapshot of where a community stands. Programme strengths and weaknesses are detected by analysing the impact indicated by the SITE. The weaknesses or the **red flags** identified help to prioritise areas that require further attention and additional resources.

National Offices in turn aggregate data from all project SITES to produce a national level snapshot of its programme activities. The international office adds together national office SITES for the same purpose. It is on the basis of this annual exercise that programme priorities and plans are developed, from the bottom up.

(v) **Tool Used For Focus (TUFF):**
The TUFF is the tool that helps a project community examine competing priorities to determine the most critical red flags for follow-up. It is therefore a tool for the programme planning.
The AIMES toolbox is meant to provide day-to-day information that can help programmes continually evolve to address the changing needs and population dynamics of a community. As a system, AIMES requires the aggregation of community-level data so that the national office or the international office can create supportive management strategies in tune with the community level efforts.

The importance of these tools is in the capturing of data that is used in planning. They are monitoring as well as evaluation tools. The importance to the study is how the tools are used, who captures the family data and who uses the information? Are communities in Zambia involved in the use of the above tools?
1.2.5 Overview of Projects

In CCF terminology a project is a legally existing entity affiliated to the Christian Children’s Fund through a Letter of Agreement (LoA) that clearly spells out the affiliation conditions. The term project will be used to facilitate the understanding of the areas through which CCF interacts with grass root communities. In CCF – Zambia, some front line operational areas are registered as projects while others as programmes, for example, Mtengo, is registered as “Mtengo Family Helper Project,” whereas, Mwembeshi is registered as “Mwembeshi Child and Family Programme.” Despite the criteria for registration, they will all be referred to as projects in general though particular full names may also be used.

1.2.5.1 Location of Projects

The projects include Mwembeshi, Mtengo, Namayani, Kalundu and Kabile. The Mwembeshi Child and Family Programme is about 40 kilometres along Mumbwa Road west of the capital city Lusaka, and covers the Mwembeshi Settlement, Munyeu, Mulundu, Mubanga and Makombwe villages. Namayani project covers an area of approximately 81 square kilometres. It is in Shabwalala village in Chief Jungule in Chibombo District. Kabile covers an area of approximately 508 square kilometres. It is in Kalusa village of Chief Mungule in Chibombo District and about Eighty kilometres from Lusaka. Kalundu Programme covers an area of approximately 300 square kilometres. It is in Mumbwa district, chief Shakumbila. It’s catchment area includes Mulimba Mashili, Chinchebu, Mwanamumbula, and Kalakusa villages among others. It is about seventy-two kilometres from Lusaka and about twenty kilometres south of Situmbeko on the Mumbwa-Lusaka Road.

Mtengo is in peri-urban areas of Lusaka West in a residential area known as Kalundu in Kafue District. It is about ten kilometres from Lusaka.
1.2.5.2 Relief and climate of Projects

The Projects lie in an area with a tropical continental climatic zone characterized by seasonal rainfall, a cool dry period, and a hot dry period. Droughts and dry spells are common features during the rain season. The vegetation is composed of mainly deciduous savannah trees. Soils vary in fertility. In Namayani, the Chunga river and Namayani stream drain the area where as in Kabile Drainage is good due to undulating land-surface but there are no rivers, nor streams. Mtengo is a flat area which becomes waterlogged with heavy rains. Drainage is poor and there are no rivers in the area.

1.2.5.3 People and livelihoods

Mostly people of low income who lack basic requirements of food, water, clothing etc inhabit the projects. Residents stay in small brick or cement houses usually thatched with grass and/or corrugated sheets. There is high incidence of illiteracy and lack of educational facilities. Diets are poor and so is sanitation. The population is made up of a larger proportion of women than men, with a large percentage of those below the age of 15 years. Mostly the people are subsistence farmers who grow crops seasonally during the rain season. Most of them do not have the necessary farming implements and hence their low productivity and food insecurity. Women make up a vital labour force. Except for the consumed staple food, all other materials are obtained from Lusaka city. Meeting places for the people include churches, homes, water points and schools.

In Kabile and Namayani, the Kulamba-Kubwalo traditional ceremony is practised once in a year at Chief Mangule’s palace.
Map 03. MWEMBESHI CLUSTER PROJECTS AND MTENGO

Drawn by James Sikalima
CHAPTER 2

2.0 Statement of the Problem and Attachment Context

2.1 Statement of the Problem

In Christian Children’s Fund programmes in Zambia, community members do not commit themselves wholesomely to community-based activities. Care for communal utilities such as boreholes, wells etc and attendance at meetings is very poor. Contributions in terms of labour and money towards communal activities are equally poor. All in all community participation is very low at all levels of planning, implementation, monitoring and evaluation of programmes.

2.2 Objectives of the Study

The research was aimed at obtaining information for the following purposes:

i. To determine whether the registered families or members of the community in Christian Children’s Fund affiliated projects took an active role in the planning, monitoring and Evaluation of the activities carried out in the communities.

ii. To determine CCF project communication structures, strategies and tactics and how they have impacted in enhancing community participation.

iii. Determine if participatory communication has led to any form of social change in communities and provide recommendations for future development of Participatory Communication in CCF.

2.3 Rationale

The study is important for human development in CCF-Zambia. Since human development was about enlarging people’s choices and capabilities, the involvement of the communities in identifying problems that they face empowers them to find solutions that would be within
their means and capabilities to enforce. If people of a given community are involved in the planning, monitoring and evaluation of the communal development activities, they will develop a sense of responsibility and ownership. The resultant effect would be proper and accountable utilization of the infrastructure. Facilities such as water points and health posts would not be neglected, thereby promoting sustainable livelihoods.

2.4 Research Questions

To help arrive at reasonable conclusions on whether the above objectives have been achieved, the following questions were necessary:

(i) Was there a planning, Monitoring and Evaluation system in CCF affiliated Programmes?

(ii) Were the communities involved in monitoring and evaluation of the activities? If so, what was the equity of participation?

(iii) Had there been innovations in the management of CCF projects that had been adopted since inception and had the innovations been internally or externally generated? How was the change process managed in CCF projects? What was the reaction of the community to such changes?

(iv) What social change practices needed to be introduced to ensure active participation of all concerned members of the community?

(v) What forms of communication were used in CCF projects and how effective were they in enhancing participation of all stakeholders?

2.5 Attachment Context

With the observed difficulties in communication and participation in CCF projects it was important that the researcher was attached to CCF. Being a CCF Project Development Manger
at Mwembeshi Project, the researcher had observed over the period of his employment that changes were necessary to improve communications and the levels of participation in the organisation in Zambia.

The choice of the organisation CCF was purposely taken so that internal participatory communication systems could be evaluated. The importance of this lay in the fact that in addition to the few schools CCF had built, most of the other communal utilities such as boreholes, wells, clinics, pre-schools were in very poor condition or non functional. Even in early times (1980s) when the communities themselves planned and purchased materials for various activities, sub standard programmes and structures resulted. Sub-standards in all sectors of programmes have continued to-date.

The CCF-International Office (CCFIO) has made changes to the management of CCF programmes by introducing the PMT. The PMT was introduced in 1995 but in 1998 CCF – Zambia re-implemented its operations which led to the closure of some programmes and merging of others. With the problems above, the researcher found it necessary to contribute to the CCF programme management by finding the root cause of the problems CCF-Zambia was facing and the possible solutions.

The attachment began in February 2004. The main programme areas of attachment were the Mwembeshi Cluster and Mtengo projects. Being an employee of the organisation and chairperson for the Mwembeshi Cluster, there wasn’t any problem of induction into the organisation which made it possible to commence data collection straight away through questionnaires and interviews.
On the other hand the researcher continued with his normal duties as a Project Manager at Mwembeshi Project. While on attachment, there were a number of activities done by the researcher some of which included:-

(i) Introducing the Mwembeshi Child and Family programme to participatory appraisal of the high sponsor cancellation rate which was at 24% (January 2004 Report). Sponsor cancellation level is an indicator of the quality of services rendered to the community as well as Sponsors. Through Participatory Communication, the causes and solutions to the cancellation problem were identified. Everyone's role was discussed and understood and appreciated. The result was that in 2 months time, the cancellations reduced to 18% (March 2004 Report).

(ii) The researcher was also drafted into a team that supported the development of the logical framework for the Australian Partnership with African Communities (APAC) project in Zambia. This was done at the CCF-Zambia National Office located in Kalundu- Lusaka, for two days from 25th to 27th February 2004. The APAC project was aimed at intervening in the impact of HIV/AIDS to orphans and vulnerable children and youths in Kafue and Chongwe districts.

(iii) The other area that could be of interest was the workshop organised for the cluster to review the PMT implementation for the quarter January – March 2004. The researcher being the chairman introduced to the workshop participatory approaches that were appreciated by all the participants. The workshop took place from 15th – 16th April 2004 at the Commonwealth Youth Centre.
CHAPTER 3.

3.0. METHODOLOGY

3.1 Detailed Research Questions

For the research objectives to be achieved and a thorough analysis to be done the research was based on the following three main points:

3.1.1 The Structure of CCF’s Communication System;
   (i) Was there an organisational and/or communication structure in CCF?
   (ii) What was the communication structure in CCF projects and how did the structure affect the flow of information and ultimately participation?

3.1.2 The nature and level of Participation in Programme Activities;
   (i) What did the CCF planning, monitoring and evaluation system involve and who was involved?
   (ii) Did parents and other members of the community take part in any CCF related activities and what was the level and equity of participation?

3.1.3 Outcomes of the participatory communication in the communities;
   (i) What social change innovations with regard to participatory communication have been adopted by CCF communities?

3.2 Data Collection Methods

Data for the research was collected using both the probabilistic and non-probabilistic sampling methods. A sampling frame was produced after which stratified, systematic, simple
random methods were used to select respondents. This was done to avail equal opportunity to all members of the population to answer questions. Purposive sampling procedure was used to choose groups of people to answer questions and to avail equal opportunity to all groups and for easy access to projects for the convenience of the researcher. In depth interviews were also used to collect data.

3.3 Sampling Frame

The sampling frame included all the registered household heads in the projects as they appeared in the family rosters and family cards for the five projects. All the registered families in the five projects added to 1448. Household heads were chosen because they were the custodians of the children and also because they represented the families at meetings and provided labour requirements for any CCF related activity or work. It was also the household heads that could get the positions of Parent Family Educators and could be elected into the Project Board of Directors known as the Parent Advisory Board.

3.4 Sample size

From the sampling Frame of 1448 Household Heads, 155 respondents provided the information required for the research. Thirty One, (31) respondents were randomly chosen per programme using the sampling method given below (sub-heading 3.5). The sample size of 155 was opted to give a reasonably representative figure for generalization of findings in the CCF programmes covered in Zambia on one hand and also because of the easy accessibility of the respondents to the researcher. The other factor considered was that of limited time as a larger sample could have called for more time. 150 respondents (30 per Project) answered the structured questionnaires while five respondents (One per Project) were interviewed.
3.5 Sampling Methods

The study applied purposive as well as stratified, systematic and simple random sampling procedures. The choice for the programmes of Mwembeshi, Mtengo, Namayani, Kabile and Kalundu was as a result of personal preferences of the researcher. The preference was based on proximity to the programmes. Mtengo was chosen because its population had urban characteristics due to its location on the fringes of the main city of Lusaka, which, as a result gave a good representation of the two CCF programmes in the city of Lusaka, which are Ng’ombe and Tiyanjane. The other programmes i.e. Mwembeshi, Kabile, Namayani and Kalundu gave a good representation of all the other CCF rural programmes.

The population that consisted of household heads was stratified into three sub-groups in each programme as follows; The Programme Advisory Board (PAB) members, the Parent Family Educators and the ordinary household heads. This stratification was necessary because of the differences in the roles and functions of the three groups in the carrying out programme policies. The Project Advisory Board members were the executive organs of the programmes that promoted and carried out programmes and policies. They approved budgets and plans and supervised all programmes. The Parent Family Educators were the representatives of parent focus groups in the smallest divisions of programmes called Sections. Both the Parent Family Educators and the Project Advisory Board worked with household heads and other members of the community to carry out development projects. The ordinary household heads were the other parents who did not hold portfolios within the programme structures but were available for every programme that concerned the health and education of children and adults in the community. Because their main roles differed, it was decided to put them in the three strata stated above.
The selection of respondents within each sub-group at any programme was done using the systematic random sampling. This ensued evenly picking of respondents from the sampling frame that included 1448 household heads. Firstly from the Project Advisory Board, two respondents were chosen, four respondents from the Parent Family Educators and twenty-five from the ordinary household heads per project. The choice of the numbers to be selected was merely done to achieve fair distribution in relation to the size of the sub-group.

The first respondent in each category was chosen by simple random sampling while the rest were done by the Kth as given below. For the Project Advisory Board the next position was every 3rd, which was the same for Parent Family Educators, while for ordinary household heads it was every 9th.

The systematic sampling framework was chosen because of its simplicity in selection of respondents, its fairness and its ability to select evenly. After the selection of the respondents, thirty respondents were issued with questionnaires, which they filled in. The questionnaires were structured and coded for easy use and analysis using the Statistical Programme for Social Sciences (SPSS). One ordinary household head per programme was given an in-depth interview.

3.6 Administration of Questionnaires

Questionnaires were numbered from One to One hundred and Fifty. This was because 150 respondents answered the questions irrespective of the category in which they fell into. The questions were closed ended with alternatives using the Likert scaling. This was done for easy coding and easy use in the data interpretation and analysis of results using SPSS. Five
questionnaire administrators were trained per programme to administer the questionnaires to the respondents.

3.7 In-depth Interviews

Five in-depth interviews were conducted at the rate of one per project. The in-depth interviews were conducted by the researcher himself. They were done in order to obtain people's inner feelings and views, about CCF operations. This gave ideas vital in the analysis of results from questionnaires and also in coming up with recommendations.

3.8 Participant Observation

The researcher used a lot of information gathered from work experiences. Situations observed in the last five to eight years provided a good base for results analysis and interpretation. This was combined with routing the learned theories to the actual situation on the ground.

3.9 Data Analysis

Owing to the fact that the data was collected using the structured questionnaire and in-depth interviews, the information from in-depth interviews, both sources of information provided the skeleton and flesh of the findings respectively.

Data was analysed using the Statistical Programme for Social Sciences (SPSS) computer package to produce Frequency tables, Spearman's coefficient of correlation, charts, graphs and Pie Charts. Spearman's coefficient of correlation gives an indication of association between two variables. Frequency tables, graphs and charts give an easy understanding of relationships between variables to help interpret results.
Analysis of the findings was made easier by the use of the information parents gave on their personal experiences which they spelt out in their responses in the in-depth interviews.
CHAPTER 4

4.0 Conceptual and Operational definitions

The main concepts used in the research that required to be defined are Participatory Communication, Monitoring and Evaluation and Peoples Participatory Process (PPP). Since all the processes listed above require that communities should be empowered to develop and thereby change for the better their styles and ways of living, it was also important that the concept of social change was explained.

4.1.0 Participatory Communication.

The concept of Participatory Communication still lacks an accurate definition that could contribute to the better understanding of the notion (Gumucio, 2001, p8). White, (1994:16) also states that:

"the word ‘Participation’ is kaleidoscopic, it changes its colour and shape at the will of the hands in which it is held ... it can be very fragile and elusive changing from one moment to another... is a complex and dynamic phenomenon seen from the ‘eye of the beholder’ and shaped by the; hand of the power holder.‘

Participation according to Dordenave (in White, 1994: 36) is the process by which a person sees himself or herself as a unique individual and at the same time a member of the community. Dordenave’s concept of participation matches with what Pijnenburg and Nhartumbo (JIPEMOYO, Vol. 4, 1981:193) terms 'participation as an end.' This is when a group or community establishes a process by which it can control its own development; in
other words, the emphasis is on empowerment and promotion of collective community action. Pijnenburg and Nhantumbo define participation as a means to refer to the accomplishment of a project more efficiently or more effectively.

Dordenave (White, 1994: 43) defines Participatory Communication as that type of communication in which all the interlocutors are free and have equal access to the means to express viewpoints, feelings and experiences. Robert White defines Participatory Communication as a 'Public Sphere' referring to that dimension of social action, cultural institutions, and collective decision making that affects all people in the society and engages the interests of all people in the national body. 'Particular sphere' are the interests of the limited sectors of society, different occupational or economic groups, different social classes and statuses, religions or ethnic cultures, regions and local communities (White, 1994: 99). What comes out in his definition is that the public sphere must respect the existence of particularistic interests but all particular interests must define themselves in relation to and in support of the public sphere. The main importance of this is that individual participants' interests and contributions should not be overlooked when planning for the community.

Participatory Communication in this case involves communication for social change. According to Figueroa (2002: iii), the Communication for change model shows how social change can happen through a process of community dialogue leading to the collective action that affects the welfare of communities as a whole as well as their individual members. Figueroa's assertion of social change is one of the main factors embodied in participatory communication. Participatory Communication processes done through communication for social change bears participatory development which according to Ogun and Smith (1990:12) happens when people are empowered with the knowledge and the means to decide their own
priorities, to improve their own skills, to meet their own needs and to find their own fulfilment. The process gives group members a strengthened self-image, greater confidence and a heightened sense of willingness and capacity to take action in their own best interests (Ogun and Smith, 1990).

Ogun and Smith (1990) also maintain that Participatory Communication should be an ongoing process, a conscious and voluntary process involving choice and decision on the part of those participating. It is a process in which people organize themselves in groups to solve problems they have in common, gaining access to information they need and learning to manage them effectively. Equity among all those involved is the basis of Participatory Communication.

Having seen the definitions above, we can conclude that Participatory Communication seeks to improve an individual's capabilities to make decisions, control development activities through opportunities and equity enhancement working through collective action and using appropriate communication channels and methods based on existing local conditions.

The importance of defining Participatory Communication for this research lies in the fact that CCF stands to improve the welfare of children and their families. If this has therefore to be realised, it is important that such concepts as participatory communication are understood by the implementers. As we have already seen that the Project Management Tool CCF uses was developed to promote participatory communication by empowering parents to decide on programmes, problems of participation could not have been encountered if the implementers had the understanding and appreciation of participatory communication. Parents could have been given the opportunity to effectively decide on their activities. Another important aspect
is that the designers of projects should not do it remotely. When ever a problem comes out
during implementation, it is always advisable to let the concerned people solve it. While CCF
has taken time to enhance the public sphere activities such as schools and water points,
particularistic interests such as individual family requirements should have been attended to
by empowering them so as to complement the other sphere.
4.2.0 Degrees / Levels of Participation

While participation has been defined, its characteristics need to be well presented into measurable indicators. These are still difficult to come by as they are dependant on a number of variables based on the programmes being implemented, their design and how they involve the community. Arnstein, however, came up with the rungs or a ladder that gives a measure of participation on Eight levels and Collaborative Development Research (CDR) Associates came with the Spectrum of Participation both of which are explained below.

4.2.1 Arnstein’s Rungs of Participation

(i) Rung 1, Manipulation and 2 Therapy.

These first two rungs are considered non participative. The aim of the leader or the initiator of the project or agent is to cure or educate the participants. The proposed plan is considered to be the best and the job of participation is to achieve public support by public relations. Another dimension of this level is that the plans are made by outsiders excluding the concerned community. The Planner(s) or initiator(s) of the programmes consider themselves superiors taking progress to the poor community.

(ii) Rung 3, Informing.

Informing could be considered as an important first step to legitimatisre participation. However, where the emphasis is on a one way flow of information, there is no channel for feedback. The community has to get the information rightly from the informers. It becomes a command process without the participation of every stakeholder.
(iii) **Rung 4, Consultation.**

Consultation could also be considered a legitimate step, but where the emphasis is on attitude surveys, neighbourhood meetings and public enquiries it becomes a mere window dressing ritual. This stage if well applied could mark the beginning of the participatory process.
(iv) **Rung 5, Placation.**

Placation may include the co-option of hand-picked individuals onto committees. It allows citizens to advise or plan activities but retains for power holders the right to judge the legitimacy or feasibility of the advice. In evaluation settings it includes the selection of few individuals purposely with the intent that the chosen individuals will provide assumed answers. It also includes selecting few people to parade in front of cameras for false representation with banners or posters. In this way it is a token form of participation. It is common where leaders have too much hunger for power or where there are a lot of hidden agendas.

(v) **Rung 6, Partnership.**

The sixth rung is about co-operation. Power is in fact redistributed through negotiation between citizens and power holders. Planning and decision-making responsibilities are shared e.g. through joint committees. In community projects, partnership is realised when the change agent or external organisation places itself on equal terms with the community in sharing responsibilities. All stakeholders express their shared interests.

(vi) **Rung 7, Delegated power.**

At this level citizens will hold a clear majority of seats on committees with delegated powers to make decisions. The Public will then have the power to assure accountability of the programme to themselves. There is thus, the empowerment of the community.
(vii) **Rung 8, Citizen Control.**

At this last stage, Arnstein suggests that the have-nots or the impoverished communities handle the entire job of planning, policy making and managing a programme e.g. neighbourhood corporation with no intermediaries between it and the source of funds. What is implied at this stage is that the financiers will not give directives as to specific areas of their specific interests without the consent of the recipients.

In addition to the 8 rungs of participation outlined above, the CDR Associates developed a spectrum of Decision-Making and Public Participation Process. The spectrum gives broad indicators with increasing participation levels from the left to the right. See the diagram below.

### 4.2.3 The CDR Associates Spectrum of Decision Making and Public Participation

According to the spectrum, developed by the Collaborative Development Research (CDR) Associates,

(i) The first stage involves the agency planning on its own without public input. It is a clear indication of non participation by the communities.

(ii) This is followed by minimal inputs from the community usually characterised by meetings where the community is encouraged only to comment. This is an indication of token participation.

(iii) The third level gives opportunities for substantive inputs to the public. At this level, the targeted stakeholders and the general public are involved in
series of events. Again here, the role of the stakeholders is not clearly spelt out and is an indication of token participation.

(iv) At the fourth level, decisions concerning activities, plans, monitoring and evaluation are based on recommendations from stakeholders. The role of the agency is limited to advice giving. The agency still plays an important role in shaping the direction of activities.

(v) The fifth level which is considered to be highly participative as it involves consensus-based decision making with stakeholders.

Having defined the levels or degrees and the spectrum of participation, what is important for our research is to give a grade or level of community participation to the research results. The levels may not give an absolute picture of participation, however, what stands out is that some measure of some kind to participation have to be given and will help in rating the responses to the level of community participation. This will be done by rating the number of respondents per variable to the rung or spectrum characteristics and then come up with an opinion on the level of community participation in planning, monitoring and evaluation of CCF activities at the grassroots. Most donor funded programmes are designed away from beneficiaries. Our only way of the level to which agents, donors and poor interact is by way of the spectrum or the rungs.
Chart 5. SPECTRUM OF DECISION-MAKING AND PUBLIC PARTICIPATION

- Decision by Agency Alone ("Decide and Announce")
- Decision with minimal Input for Informed Consent
- Decision with Repeated Opportunities to Provide Substantive Input
- Decision Based on Recommendations From Stakeholder Negotiations
- Decision Based on Consensus with Stakeholders

DECISION MAKING PROCESS

Less Public Involvement

PUBLIC PARTICIPATION METHOD

- No Public Input or Involvement
- Public Hearing(s) for comment on proposed Action or Policy
- Series of Public Involvement Events with Targeted Stakeholders and General Public
- Advice-Giving Advisory Group WITH Key Stakeholders
- Consensus-Based Decision-Making Group (Stakeholders and Agency)

Source: Minnesota Pollution Control Agency, p.2
4.3.0 Monitoring and Evaluation

Since there is widespread recognition in CCF’s PMT that participatory communication is critical for sound human development, this requires a more flexible and evolving process to planning for change. It also requires major individual and institutional re-orientation at the policy level to local demands and to enable communities to take an active role. This means that the programme level detailed outlines for action should no longer be made at the outset since problem solving should be based on co-operation and partnerships and not the quest to achieve externally generated goals. With this in mind, it is a challenge to build participatory and system based monitoring and evaluation in CCF. What is important is how to maintain relationships and co-operation between communities and CCF and at the same time maintaining its task.

Monitoring and evaluation go hand in hand. Monitoring provides raw data which in and by itself could be useless. Evaluation is putting the data into use. CCF has a monitoring and evaluation system in PMT. In the AINES we presented the different monitoring and evaluation tools. For us to have a better understanding of how participatory the system is appropriate for us to discuss in detail monitoring and evaluation.

4.3.1 Monitoring

The UNAIDS (2002: 3) refers monitoring to the routine, daily assessment of on going activities and progress. Monitoring is said to look at what is being done. According to ILO (1998:46) Monitoring is defined as the continuous or periodic review of programme/project implementation by management to assess delivery, identify difficulties, ascertain problem areas, and recommend remedial action(s). The purpose of monitoring is to ensure the
efficient and effective programme/project implementation. It provides timely information on
the work planned and done to all the parties concerned and on which evaluation is based.

The basic concerns of monitoring are the delivery processes which ensure that inputs,
through activities, are changed into outputs, and analysing their quantity and quality.
Monitoring tools include the work plans, registers, log books, and the progress reports. In
this case monitoring is itself an activity of a project or programme that must be accounted
for in the project implementation plan, and in the project budget. We can, therefore, sum up
monitoring as a continuous process of data collection and information gathering during the
life span of an activity. When therefore the collection of data is done by the affected
communities, it is refereed to as participatory monitoring.

4.3.2 Evaluation

Kalemu David (Journal of Social Development in Africa, vol. 17, No 1, 2002: 10) defines
evaluation as:

"the assessment of the planned intervention, determining whether their
processes and activities are worthwhile and whether they actually add value to
people's lives. ... involves value judgments, which must be understood as
public statements, which are open to questioning and demand demonstration."

In addition to Kalemu, we can say evaluation is a retrospective assessment of performance
against objectives at a particular point in time of a project. An evaluation is meant to
investigate the effects and consequences of project activities against well-defined criteria such
as determining the extent to which a project has reached its explicitly formulated goals. In
this case evaluations are conducted at specific intervals in order to compare the monitored results and processes of the project with the projected results and processes contained in the original plans.

According to ILO (1998:47) there are at least three evaluations in the life of a project that include an "ex-ante evaluation" (an evaluation of the proposal to decide on the funding), a "mid-term review" (which is an on-going evaluation in the implementation phase of the project), and a "final evaluation" at the end of the project. The three phases of evaluation can also be referred to as formative evaluation, process evaluation and summative evaluation respectively. Longer projects are usually evaluated once a year, and often there is an additional "impact evaluation" conducted one or more years after the project has ended. It assesses the overall effectiveness of a programme in producing cognitive, belief and behavioural effects on target populations. Only impact evaluation is a reliable evaluation of the project’s sustainability.

Effective monitoring and evaluation is based on a clear, logical pathway of results, in which results at one level are expected to lead to results at the next level, leading to the achievement of the overall goal. Therefore, if there are gaps in the logic, the pathway will not lead to the required results. For participatory monitoring and evaluation to bear fruits UNAIDS gives the following procedures to be followed in implementation (UNAIDS, 2002: 38&4):

1. **All implementing partners should collect complete input and output data.** Many implementing partners should collect some process data. In this case it would require most of the parents and PFEs to collect data in the situation of CCF.
2. **Internal self-assessment and external verification.** This requires the implementing partners to collect their own internal data and an external agency verifies the completeness and accuracy of the data collected by those implementing partners. Supervisory visits should be based on the analysis of internal self-assessment and externally verified primary data.

3. **Monitoring and Evaluation systems must be as simple as possible.** Simple programmes are easy to use while more complex monitoring and evaluation systems, are difficult to use and likely to fail.

4. **Use of standardized indicators.** If each implementing partner uses different systems or tools, the data cannot be analysed or summarized effectively. No proper comparisons can be made. However this does not preclude individual implementing partners from collecting additional, situation-specific monitoring and evaluation data.

5. **Programme Monitoring and Evaluation should be analysed together with the financial information.** There are several reasons why this is desirable, which are listed below.

   (i) It provides a basis for crosschecking financial and activity data and ensuring sound finance-programme data cross-verification.

   (ii) Programme monitoring and evaluation entails complex data gathering management capacities, and it is usually easier to purchase established capacity than to establish it afresh.

   (iii) Financial management monitoring systems and procedures are almost always the best-developed subcomponent of monitoring and
evaluation. It makes sense to link programme monitoring to the stronger process of financial monitoring.

(iv) Outsourcing financial and programme activity monitoring to a single entity ensures that financial and programme reports are linked and provide a more comprehensive picture.

6. **Monitoring and Evaluation must be built into the design of a programme, and should be operational before grants are provided, rather than being added later.** A participatory process is essential to build ownership and buy in from the start.
4.4.0 The People’s Participatory Planning (PPP) process.

It is important at this time to also explain another participatory approach called the People’s Participatory Planning (PPP). Its importance lies in the fact that it gives some practical steps to programme planning that involves all stakeholders. Because of this it is importance that all CCF communities are introduced to it. Although the steps might not follow the same sequence, it is important for us to have a view of how participatory planning takes place. The People’s Participatory Planning according to De Koning et al, (1996:143)

“is a just and empowering social process in which the poor and marginalized are democratically involved in collective action, strive to articulate and design the vision, goal, objectives, path, direction, content, magnitude and process of a holistic social transformation in their favour, recollecting and analysing the past experiences, focusing on the present situation and projecting the future.... based on their own value orientation, knowledge, critical awareness and skills, through rediscovery, regeneration and generation, elaboration, evaluation, consolidation and sharing of people’s own knowledge as well as other relevant knowledge”

A vital characteristic of the People’s Participatory Planning is that it takes a position in favour of the poor and marginalized. It is therefore, important that we analyse it as well. In other words it is a communication process that is community-based. People’s Participatory Planning process consists of twelve modules or stages that may lead ultimately to a people’s plan of action. This plan is designed to identify future programme and activity needs by and for the people themselves. In summary, the modules contain the following procedures and processes (De Koning et al, 1996:143-144): -

2. **Inauguration of PPP.**

3. **Recollecting the past and our journey towards development.** (To recollect and identify past events and adjoining areas with a view to learn lessons. To identify the trends to extrapolate into the future. To rediscover indigenous knowledge, skills and ability etc.)

4. **Our village today.** (To map the various physical resources in a village and locate the financial and social resources and other institutions. To identify the present social, political and economic resources and other institutions.)

5. **Analysis of the societal structure of the village.** (Analysis of the social and class structure of the village. Identification of inequality.)

6. **Analysis of the micro-macro relationship.** (Examine the relationships, problems etc. between villages, unions, districts, your country and other countries. Is there an impact of outside problems on the existing problems of one’s village?)

7. **Analysis of the causes of the problems.** (What are the root causes of the structural problems? Why is this a factor?)

8. **Responding or addressing the problems.** (Responses of the villagers, CCDB and government should be marked separately and the similarities be compared with what comes from the critical analysis.)

9. **Determine physical and financial resources.** (Determine physical and financial resources and how much people can utilize for their development.)
idea that there is the give and take of ideas that take place without deliberation of either donor or receiver, which is called diffusion. Niehoff gives the following approaches to change:

i. The economic approach
This approach looks at changes in the means of production, distribution and consumption of wealth overtime and how they spread from economically advanced nations to less advanced nations and how they spark economic growth,

ii. Transfer of technical know-how and,

iii. The socio-cultural components that encompass the cultural and economic systems to give elaborate patterns of customs and beliefs, which can either, act as sanctions or barriers to technical or economic change. Niehoff’s main assertion is that the socio-cultural approach should be applied so that cultural differences should not stand in the best-intentioned economic and technical approaches.

Triandis (King, 1972; 129) defined social change as a new set of social relationships and social behaviours that is likely to lead to rewards. Triandis assumes the causes of social change to be the physical environment; for instance when a resource is exhausted and new economic activities are needed for survival, or in the social environment when a new institution emerges, or a particular social group acquires greater power, as happens after conquest, war or revolution. He further adds that as a result of social changes, political changes are born, and these are involved with the redistribution of power, which he termed as “changes in the locus of enforcements.” Triandis here adds the factors of geography as agents of social change.
In short, we can say that the existence of resources, the struggle for resources and the control of such resources and the resultant institutions operating over a period of time is what social change is all about. In community development issues, it is important that social change is explained because it is not only individuals who change but also systems and collective values, beliefs and responsibilities and this is true with CCF. Understanding of social change will help us analyse why despite the assistance CCF has rendered to the communities, their economic levels and styles of living have not improved and sustainability has not been achieved.

Social change where participatory communication is in use is seen by having an enlightened, innovative and responsible leadership and where information equity exists. In addition all programmes are conducted with a high degree and equity of participation by all stakeholders. It is also manifested by a high sense of ownership of programmes, well defined social norms and social cohesion. These are important factors that will help explain if CCF communities have undergone some social change since 1983 when CCF was introduced in Zambia and also it gives the importance of defining the social change concept.
CHAPTER 5

5.0 Theoretical Framework

There is no single theory that can help explain a process such as participatory communication because of the many processes that are involved. However one can not again use all the interactive and communication theories as these would not give a focused analysis. I have decided to use three important theories for this research. These include the Communication for Social Change: an integrated model for measuring the process and its outcomes, the Spiral of silence and the Diffusion of Innovations theories. Other theories that are inclined to communication and group network analysis are merely highlighted in the analysis of the results. The above three mentioned theories are explained in detail below.

The Communication for Social Change: An integrated model for measuring the process and its outcomes is one of the theories I have decided to use in this study. The Integrated Model of Communication for Social Change (IMCFSC) has been chosen because it wholesomely describes the participatory communication process in people-centred development activities. It also describes an iterative process where “community dialogue” and “collective action” work together to produce social change in a community that improves the health and welfare of all of its members. The theory was developed by development and communication scholars namely Maria Elena Figueroa, D. Lawrence Kincaid, Manja Rant and Garry Lewis and is diagrammatically illustrated in chart 6 below.

The model is significant for this research because it does not only outline participatory communication but it further explains how to reach consensus in a group and how to share responsibilities (processes and outcomes). It is, therefore, ideal to use in the design, implementation, and evaluation of community based development programmes. Relating the IMCFSC model to PMT will help explain and measure outcomes in the AIMES interventions and also most importantly the process of moving towards the outcomes.

It states that, a stimulus develops in a community that leads to community dialogue, then to collective action that also leads to individual and social change, which ultimately impacts heavily on society. The model is based on the principle that community dialogue and collective, cooperative action is required to solve problems.
Chart 6. Communication For Social Change: The Integrated Model

A. Catalyst
- Internal stimulus
- Change Agent
- Innovation
- Policies
- Technology
- Mass Media

B. Community Dialogue
- Recognition of a Problem
- Identification and Involvement of Leaders and Stakeholders
- Clarification of Perceptions
- Expression of individual and shared Interests
- Vision of The Future

C. Collective Action
- Action Plan
- Consensus on Action
- Options for Action
- Setting Objectives
- Assessment of Current status

D. Individual Change
- Skills
  - Ideation
  - Intention
  - Behaviour

E. Social change
- Leadership
- Degree and Equity of Participation
- Information Equity
- Collective Self-Efficacy
- Sense of ownership
- Social Cohesion
- Social Norms

F. SOCIETAL IMPACT

Source: Figueroa et al, p.15
The model stresses that dialogue occurs when participants with differing points of view listen to one another, paraphrasing the other’s point of view to the other’s satisfaction, and when one acknowledges the conditions under which the other’s point of view can be accepted as valid, and when each one acknowledges the overlap or similarity of both points of view.

When dialogue leads to disagreement and divergence, especially when the dialogue makes it clear each individual’s true interests and values are in conflict, the social-change model considers these missing elements unlike other convergence models of communication and advocates for symmetry in the relationship of participants and equity of information sharing (action). The model here simply provides a process of solving the disagreement through advocacy.

The development of a community according to the model (Figueroa et al, 2002: 6) can occur through a variety of change processes as listed below:

1. *Externally generated change*, such as the construction of potable water systems, roads and health clinics by outsiders that lead to a reduction in the prevalence of disease within the communities affected.

2. *Individual behaviour change*, such as the adoption of chlorinated water, oral dehydration solutions for diarrhoea and visits to local health clinics that, when aggregated, leads to a reduction in the prevalence of disease within the communities which experience sufficient individual change.

3. *Social influence* for individual behaviour changes where individuals who adopt new health behaviour publicly advocate its adoption to other individuals, so that the rate of change (decline) in the prevalence of disease increases.
4. *Community dialogue and collective action* in which members of a community take action as a group to solve a common problem, such as high rates of diarrhoea, lack of potable water and so forth, which leads not only to a reduction in the prevalence of disease within the community but also to social change that increases the *collective* capacity to solve new problems.

The four types of change are said not to be mutually exclusive. Figueroa state that externally-generated, government-development projects can also involve individual adoption of new behaviour with social influence and that collective-action project, such as getting every household to eliminate stagnant water sources to eradicate the spread of malaria fever by mosquitoes, may require individual behaviour change as a result of social pressure from neighbours. At this point what is of interest is how much pressure and in what form can society influence a community member.

### 5.1.1 Stimulus (What initiates an Action?)

Figueroa et al, (2002: 6) identifies six potential catalysts for development, shown under ‘A,’ i.e. catalyst, in the diagram on page 58 which are outlined below:

1. **An internal stimulus** such as noticeable increases in maternal mortality or, perhaps, the suggestions of a local leader that stimulates members of the community to talk to one another about a health problem.

2. **A change agent,** such as the ones used in most NGO community interventions, may visit a community to initiate a discussion of “felt needs” or of a specific health problem in order to induce the community to take some type of collective action.
3. **An innovation**, such as a new oral dehydration solution, a new vaccine or the availability of a new type of chlorine water disinfectant, may stimulate a community to talk about its adoption. In CCF these may be improved ventilated pit-latrines, pot holing e.t.c

4. **Policies** that prompt the community to act, such as a new law that requires all children to complete primary education.

5. **Availability of technology**, such as the injectable method of contraception or mechanical digging equipment, may stimulate a community to talk about family planning or to reconsider the construction of new wells. We may also refer to the female condom.

6. **Mass media**, including messages designed to promote individual behaviour or collective action, may stimulate members of a community to adopt the behaviour or to emulate other communities that have achieved some common goal by working together.

What starts an action in a community could be one of the six above. However, the model could have omitted the type of leadership and the various decision making processes as some causes of action. Having examined the catalysts the model then examines **community dialogue**.

### 5.1.2 The community dialogue process

Figueroa gives ten steps of community dialogue shown under B in chart 6 and explained below (Figueroa et al, 2002: 8):
1. **Recognition of a Problem.**

A catalyst, enlightens the community of the existence of a problem such as severe episodes of diarrhoea. The individuals then ask each other why this is happening. A point to note here is that the problem should be universal in the community.

2. **Identification and Involvement of Leaders and Stakeholders.**

At this level people talk about the problem to each other and may involve their own leaders such as women’s development leaders until someone exercises leadership and takes responsibility for solving the problem through a process of sequential networking. The leader(s) may identify other opinion leaders and resource persons who can help in the process for solving the problem. Once the problem is labelled (say) as diarrhoea and dehydration, informal community leaders may call a meeting to discuss the problem.

3. **Clarification of Perceptions.**

Different perceptions of a problem may exist among different members of the community. A consensus should be reached regarding the nature of the problem and its causes for the group to find an adequate course of action that is acceptable to everyone. Dialogue is necessary to create a mutual understanding (common framework) with which to solve the problem. Only after such perceptions have been clarified and different points of view rectified can the process move forward with a clear understanding of how the problem should be addressed.
4. **Expression of Individual and Shared Needs.**

What is key here is the involvement of those individuals that are among the most disadvantaged in the community. It is important to avoid the risk of involving groups that may not be representative of those in the bottom of the scale and whose perception of the problem and needs may be different.

5. **Vision of the Future.**

This represents the ideal “picture” of how the community wants to see itself in the future. The question is: Where do we want to be in a year from now, with respect to the problem? It is important that this vision involves representatives of all affected groups (stakeholders) in the community so that it becomes inclusive of all interests. The common vision expresses all of the changes that will occur and the benefits that everyone expects to receive.

6. **Assessment of Current Status.**

At this stage, the community should make an objective measurement of the size of the problem. Quantification of the problem would give a clear idea of the magnitude of the problem, for example, the number of children progressed from one grade to the other, the number of children that died from immunisable diseases in the last quarter, the number of new orphans resulting from AIDS related deaths and so forth. Qualitative assessment would consider what kind of diarrhoea is occurring and how it differs from previous years and if it responds at all to antibiotics and oral rehydration therapy. Unless a clear measure of the problem is established it will be difficult to set goals for action, and then determine if any progress is being made later.
7. **Setting Objectives.**

When setting objectives the question to ask is: What is a reasonable expectation about what the group itself can do about the problem? Can the number of children and adults experiencing diarrhoea be cut in half in three months if a certain number of families take the appropriate action? Can it be eliminated altogether? Turned into a rare rather than a common event? The act of comparing one’s current status with one’s desired status and then setting realistic goals is the source of group motivation.

8. **Options for Action.**

What is important here is coming up with different kinds of action to be taken so as to accomplish the objectives with which everyone agrees. It requires the identification of resources both inside and outside the community as well as persons or groups that can carry them out. Following the example of diarrhoea, the community needs to decide whether to build new latrines, establish locations further from the village for defecation, get community members to wash their hands appropriately after defecation and before preparing and handling food, increasing water treatment or boiling, new well construction, etc. One or all of the above? In what order of priority? In PMT this is done at the TUFF level.

9. **Consensus on Action.**

Once a detailed plan is at hand, a new process of getting consensus among the community needs to take place. Getting consensus is important not only for summing up resources but also for getting people to volunteer or for assigning
courses of action to various members of the community. The more the community participates and sees the proposed actions as “theirs,” the more likely that they will take action. Likewise, the more a community is “involved and committed” the higher the empowerment and sense of collective self-efficacy that the community will develop.

10. **Action Plan.**

A specific timetable for when each activity has to be accomplished will help the community to have clear deadlines for effectively moving toward the solution of the problem. This box will be the answer to the question: Who does what and when do we need to do each activity and organize ourselves to accomplish our goals?

5.1.3 *The collective action process*

The collective action portion of the model describes the process of effectively executing the action plan and the evaluation of its outcomes. The model identifies five key action steps (Figueroa et al, 2002: 5) as follows:

1. **Assignment of Responsibilities.**

To convert a plan into action, specific people must take responsibility to accomplish specific tasks within specified periods of time. Leaders must ask for volunteers or else assign tasks to individuals and/or community subgroups (existent or newly created for executing the action plan). Someone must take responsibility for each of the activities identified in the action plan. Depending on
the complexity of the problem it may be necessary to create community task forces focused on specific project goals and sub goals.

2. **Mobilization of Organizations.**

   It may not be necessary for members of the community to take responsibility for all of the tasks that need to be accomplished.

3. **Implementation.**

   This step refers to the actual execution of the action plan and its monitoring. No plan can be successful if the required work is not done. Furthermore, leaders, members and/or subgroups should take responsibility for monitoring all the tasks that have been assigned making sure those activities are moving according to the timetable and everyone is fulfilling their responsibilities.

4. **Outcomes.**

   This step refers to the actual results that the community is able to achieve given the resources, organization and mobilization process specified by the action plan and then carried out. If the problem was an unacceptable level of diarrhoea among children under 5, then the solution — the action taken — should be followed by a reduction in diarrhoea among that group. If a certain number of tube wells were planned for the preceding year, then how many were actually constructed? To know the results of community projects, some type of observation and/or counting of events/incidents need to be done to measure the level of achievement.
5. **Participatory Evaluation.**

The achieved outcomes may or may not be what the community originally planned in their specification objectives. The comparison of the outcomes to the shared vision and original objectives is an important *self-evaluation* process. For purposes of group motivation and reward, it is important that most of the community participate in the evaluation process so that the lessons learned about what worked and why can be shared throughout the community. The result of the participatory evaluation should be a *new reassessment of the current status* of the community with respect to the problem. This is shown in the diagram by the arrow moving back up to the shared vision and the assessment of current status boxes in the model. From here, the community is ready to renew the process, moving forward into further action for the same problem, perhaps, or on to a different problem. It is by means of this reassessment process that the community reinforces its sense of collective self-efficacy, which in turn leads to and increases the community’s belief in and *value for continual improvement* (see vertical text going up from this box to the “Vision of the Future” box). This improvement is shown in the model as one of the primary outcomes of continual reassessment of the current status followed by a renewal of community dialogue and collective action.

*External Constraints and Support* refer to any factor outside the control of community members that can either inhibit or enhance dialogue and collective action. Extreme poverty, the drastic consequences of a flood or famine, or even the distance between homes in a community make it difficult to engage in a participatory process. The model shows two-way arrows from community dialogue and collective action to external constraints and support.
implying that over the long run community action itself can be taken to remove external constraints and to obtain external support.

The model examines seven outcome indicators of social change such as Leadership, Degree and Equity of Participation, Information Equity, Collective self Efficacy, Sense of Ownership, Social cohesion and Social norms which determine the capacity for co-operative action in a community. This gives approval for my use of the model for finding out if there has been any social change in CCF communities brought about by CCF programmes. The model is, however not elaborate on the role of external agents. Because of this, the role of external agents should be limited to that of being advisory.
5.2.0 The Spiral of Silence Theory.

Another important theory I have decided to use is the spiral of silence theory. I have decided to use this powerful effects theory in the sense that it gives a good understanding of how people can be influenced by other people or organisations that pose as the "public." As a result the theory can help us understand how participatory communication can be affected by certain individuals even if people are given equal chances to air out their views.

Chart 7 Noelle-Neumann’s Spiral of Silence

Opinion expressed as dominant by the media

A mount of people not openly expressing deviant opinion and/or changing from deviant opinion

Inter personal support for deviant opinion

Source: Chris Witham, page1

The spiral of silence is one of the powerful effects theories. The theory was developed by Elizabeth Noelle – Neumann. According to Infante (1997:253) Noelle-Neumann argues that people form impressions about the distribution of public opinion. To do this people try to find
out if they are in the majority of a particular opinion and then try to determine whether the public opinion is changing to agree with them. The theory states that if people feel they are the minority, they tend to remain silent on the issue. According to Severin (1992:252) there are three characteristics of communication in this theory as follows: its cumulation, ubiquity, and consonance. It is the three that produce the powerful effects on public opinion. Consonance according to Severin (252) refers to the unified picture of an event or issue that can develop and is often shared by different newspapers, magazines, television networks, and other media. The media shape the impressions about which opinions are dominant whereby one can utter in public without becoming isolated and about which opinions are on the increase.

In other words she considers public opinion a *tangible force* that controls people's decisions. The phrase "spiral of silence" simply refers to how people choose to remain silent when they feel that their views are in the minority. Noelle-Neumann blames the spiral of silence on fear of isolation.

She gives a clear explanation on when and why people speak out and when they decide to keep their mouths shut: Individuals who notice that their own personal opinion is spreading and is taken over by others, will voice this opinion self-confidently in public. On the other hand, individuals who notice that their own opinions are losing ground, will be inclined to adopt a more reserved attitude.

According to Witham (http://oregonstate.edu/instruct/theory/spiral.html, 3), the model is based on the following three premises:
(i) people have a "quasi-statistical organ," a sixth-sense if you will, which allows them to know the prevailing public opinion, even without access to polls,

(ii) people have a fear of isolation and know what behaviours will increase their likelihood of being socially isolated, and

(iii) people are reticent to express their minority views, primarily out of fear of being isolated.

From the model it is not only the Mass media that affects public opinion. It is all sorts of communication strategies and tactics which could include brochures, posters distributed to poor communities. Public opinion for organisations working for social change may include the official statements, internal memoranda, policy documents all meant to influence the achievement of the particular organisation's goals. Hence by mere statement that the organisation's structure is changing does not give the vulnerable and needy communities beneficiaries chance to contribute towards the new structures at the community level because the 'public world wide agency' has said so to the minority community members who simply have to follow or lose the financial assistance. Press statements by Public Relations Officers or Managers shape opinions about directions the community can take. This is why it is important to examine this theory in this research and why I have decided to use it.
5.3.0  The Diffusion of innovations Theory

Wherever new ideas are discussed and new practises are introduced, individuals tend to differ at the rate at which they adopt them. The rate of participation can therefore be determined by the rate at which innovations are diffused and people adopt them. It is therefore, important that we analyse and examine the Diffusion of Innovations Theory and relate it to participatory communication in CCF projects. Since not all instructions, ideas and messages passed by the international office are adopted by CCF communities it is vital that this theory is dealt with. It will help explain why certain CCF innovations have not been adopted. Diffusion as well as the characteristics of Innovations will receive particular attention.

5.3.1 Diffusion

Diffusion is the process by which an innovation is communicated through certain channels over time among the members of a social system Rogers (1983:5). The four main elements of diffusion from the definition above are the innovation, communication channels, time, and the social system.

Rogers and Shoemaker (1971:12) define diffusion as the process by which an innovation spreads to the members of a social system. They say the concern of diffusion is on messages that are new ideas. The main elements according to this definition are 'innovation,' ‘spreading’ and ‘social system.’

Hamblin et al (1973: 4) defines diffusion as the spread or usage of a particular invention throughout a society or cultural area in a given time period. The main elements in this definition include; spread and/or usage, invention and society and/or cultural area.

G.H. Barnett (1953: 291) in his definition of diffusion states that:
"The growth in popularity of a new idea within the society of its origin, then comes under the heading of 'adoption,' 'acceptance,' or some similar term, whereas the passage of an idea across ethnic boundaries is usually referred to as it's 'spreading,' 'borrowing,' or 'diffusion.'"

Barnett here gives another dimension of diffusion by stating that it happens by passage of ideas across ethnic boundaries or the transfer of innovations between social systems (immanent and contact ideas). This definition is based on the diffusion approach that was rooted in the postulates and implicit assumptions of exogenous change theory. Its main thrust was on the spread of innovations from highly developed Nations to Less Developed Nations as Golding quoted in Melkote (1989:76) states:

"...suggests that societies are brought to life by outside influences, resources and financial assistance and (in a slightly different form) by the diffusion of ideas. The strong hold of apathy, stoicism, fatalism and simple idleness is held to have gripped the peasantry of the third world until advanced countries produced both the tools and the know how to coax them into action."

However, the fact that adoption and acceptance have to take place whether the innovation is from outside or from within the social system, it still goes back to the passing from one person or social system (spreading) to the other or getting from the other person/ borrowing or agreeing to employ (acceptance) or getting inclined to/ getting use of (adoption). In this case all the terms are synonymous and will be used to mean diffusion as long as they refer to the spread or adoption of innovations by a social system over time.

Therefore, from the four definitions above, the following have been identified as the common elements of diffusion:
(i) Innovation (Rogers, 1983: ), or Invention (Hamblin et al (1973: 4), or New Idea (G.H Barnett, 1953: ),
(ii) Communication Channel
(iii) Time (Hamblin et al (1973: 4), (Rogers, 1983: ),and
(iv) The Social System.

The ideal transfer of innovations requires some means of communication between a person who already has the idea in question and another person who is to be made acquainted with it.

The possessor of the idea reveals his acquaintance with it in some way, and those to whom it is revealed either accept or reject it for themselves. However, some innovations can be imposed on people through authoritarian decisions and impositions. Diffusion focuses on bringing about overt behaviour change. The knowledge and persuasion effects of diffusion campaigns are considered mainly as intermediate steps in an individual's decision-making process leading eventually to overt behaviour change.

Diffusion can also be looked at as a kind of social change. A social change according to Rogers and Shoemaker (1971: 7) is the process by which alteration occurs in the structure of a social system. The examples they give are national revolutions, inventions of new technologies, formation of new village management structures and so on. To sum up the definition of diffusion, Barnett (1953:330) states:

"All acceptance is diffusion, and all diffusion is stimulus diffusion when the acceptance of a new idea is understood as a mental process of the acceptor and not as a logical construct to explain resemblances."
Having identified the elements of diffusion, we shall now examine briefly each of them and see how they build up diffusion.

(i) **Innovation**

An *innovation* is an idea, practice, or object that is perceived as new by an individual or other unit of adoption. The perceived newness of the idea for the individual determines his/her reaction to it (Rogers, 1983:11). This is in line with what Rogers and Shoemaker (1971:12) state:

"It matters little as far as human behaviour is concerned, whether or not an idea is 'objectively' new as measured by the lapse of time since it's first use or discovery. It is the perceived or subjective newness of the idea for the individual that determines his reaction to it. If the idea seems new to the individual it is an innovation,"

Newness may be expressed in knowledge, attitude, persuasion, or regarding a decision to use it. Therefore newness bears with it some degree of uncertainty that refers to a number of alternatives that are perceived with respect to the occurrence of an event and the relative probability of these alternatives. It implies a lack of predictability or structure.

Innovations can be material or nonmaterial. The adoption of material innovations brings about changes in social relations, which means that non-material issues arise in the adoption of material innovations. That is, culture changes with changes in material conditions. Understanding relationships among culture, values, existing practices, and political / social / economic relations is a necessary element of technology transfer.
Innovations can also be explained in terms of whether they are discontinuous or incremental. Discontinuous innovations are not on a continuum with previous technologies; they involve the application of a new technology. The printing press, telegraph, telephone and computers form a series of discontinuous innovations. Such innovations cause a dramatic shift in the way people or firms perform some activity. Discontinuous innovations typically disrupt an industry and occasionally disrupt the way consumers engage in some activity.

On the other side of the spectrum are incremental innovations. Once a technology is commercially accepted, firms compete by incrementally adding functionality and improving performance. Most innovations are incremental; people and firms continue to perform an activity in a familiar way. The innovations simply improve performance, functionality or ease of use. An example is the broadening of participation in an organisation’s programmes. Innovations may be desirable or undesirable and may bring direct or indirect consequences or anticipated or unanticipated consequences.

(ii) Communication channels.

Before we examine communication channels, it is vital that we define communication. In fact there are multiple definitions of communication all-trying to mean the same thing. Communication involves different kinds of parties depending on who, why and what level the process is being carried out. In the interactive model, the source and receiver must send and receive messages, communicate otherwise no effective communication is taking place. It should be multi-ways and multi-directional at every level of hierarch (Narula: 1994) be it institutional or national. Diffusion occurs within the context of communication, this is to say while diffusion looks at messages that are new ideas, communication encompasses both new and old ideas.
It is vital at this point to define a communication channel. It is simply a means through which messages are passed from one to the other. These may include mass media channels such as the Radio, Television, Newspapers, and Brochures or may include interpersonal channels such as face-to-face dialogue.

At this point it is useful to state that people who are alike (homophilous) are most likely to transfer or share ideas between themselves (enhanced communication). This process is known as homophily. Because the homophiles have similar ideas and other characteristics, the transfer of new ideas cannot easily take place, hence cannot promote diffusion. However, heterophilous individuals promote the spread of new ideas.

(iii) Time

The time dimension in the diffusion of innovations deals on the innovation-decision process, the innovativeness of an individual or their adopting unit and also in the innovation's rate of adoption in a system.

Rogers (1983:20) define the innovation –decision making process as the process through which an individual (or other decision making unit) passes from first knowledge of an innovation to forming as attitude towards the innovation, to a decision, implementation and confirmation. Of interest at the implementation stage is the likelihood that an innovation may be given another away from the intended. This process is known as re-invention. After the use of an innovation, an individual may reinforce the decision or reverse it at the confirmation stage.
The second dimension of time is **innovativeness**. This refers to the degree to which the individual or other unit of adoption is relatively earlier in adopting new ideas than the other members of a social system (Rogers, 1983:22). This can also be clarified into five categories as follows: Innovators, Early adopters, Early Majority, Late Majority and the Laggards. Innovators are active information seekers about new ideas while laggards are the last.

The third dimension of time is the **rate of adoption**, which denotes the relative speed with which members of a social system adopt an innovation. The rate of adoption can be measured using a graph showing the numbers of people adopting an innovation against time. An S-shape is formed whose inclination is dependent on the response of the adopters to the innovation overtime. A normal distribution can also be used.

**(iv) A Social System**

Rogers and Shoemaker (1971:28) define a social system as a collectivity of units, which are functionally differentiated and engaged in joint problem solving with respect to a common goal. The members or units of a social system may be individuals, informal groups, complex organisations or subsystems. All members co-operate at least to the extent of seeking to solve a common problem or to reach a mutual understanding.

The basic notion of the systems effect is that norms, social statuses, hierarchy and so on of a social system influence the behaviour of individual members of the social system. Diffusion also changes the social structure of a system by the new ideas that restructure the social system. Some system norms can be a barrier to change.
While on the social system it is important to highlight individuals who are the custodians of diffusion. These include Opinion Leaders and Change Agents. An Opinion Leader is an individual who is able to informally influence other individual’s attitude or overt behaviour in a desired way with relative frequency. This individual does not use the formal position or status in society. It is a quality that is earned and maintained by the individual’s technical competence. The aggregate qualities of an opinion leader according to Rogers and Shoemaker, (1971:28) are exposure to all forms of external communication, more innovative, and hence a higher social status. Change agents are individuals who influence client’s innovation decisions deemed desirable by a change agency. They always seek to obtain the adoption of new ideas, but may also slow down diffusion or even prevent it at all. Change agents are usually highly trained professionals and hence not homophilous to their clients.

5.3.2 Characteristics of Innovations or Change

(i) Relative Advantage

Rogers and Shoemaker (1971:22) define relative advantage as the degree to which an innovation is perceived as better than the idea it supersedes. Relative advantage, therefore, refers to the extent to which an innovation is more productive, efficient, costs less, or improves in some other manner upon existing practices. Of greatest importance in defining relative advantage is whether the adopting individual perceives the innovation as being advantageous. In a marketing field for example, relative advantage would be the degree to which the innovation is perceived by consumers to be superior to products it is designed to supersede regarding how it satisfies their needs and wants. Relative advantage is the key success/failure factor for new products. Products with a relative advantage are perceived to better satisfy consumer desires and solve customer problems than competitive offerings. This
is critical because, marketing boils down to effectively serving customer needs and wants. A new product must have a competitive edge or discernible, meaningful difference along one or more key buying criteria. The new product should be unique and superior to the competition.

In the educational field, the new innovation that has been adopted is that girls who fall pregnant before they complete grade 12 can be allowed to continue school, be given maternity leave to deliver and then go back to school. The relative advantage it has over the traditional deregistering of pupils is that it promotes girls' education, reduces the number of deaths of girls from attempted abortion, increases the literacy levels and adds to human resources that plays a massive role in the improvement of the national economy.

Participatory communication development is replacing centralised development approach in community-based development programmes because it is participative, problem-solving oriented, understood by community participants and sustainable.

It might seem like relative advantage alone should be enough to persuade persons to adopt an innovation. Certainly relative advantage is a key indicator of adoption. But sometimes, relative advantage is a matter of debate. Good ideas do not sell themselves because "good" can be relative as examples below show:

- Considered to be morally abhorrent, in this case we can give the example of allowing schoolgirls into class when they are pregnant. The practice has led to semi marriages amongst school going boys and girls. This is considered a morally abhorrent activity. Therefore, even if there are advantages of letting girls return to school, they are still questionable.
• Difficult to implement: (e.g., sustainable agricultural practices), These practices require a lot of manual labour to pothole and weed. The practice is only good for small-scale production, which cannot raise enough income for other family needs apart from nshima.

• The advantages of family planning are nowadays considered paramount, but the main disadvantages are that it leads to small populations that cannot provide a reasonable market to products within a given country.

(ii) Compatibility:

This is the degree to which an innovation is perceived as being consistent with existing values, past experiences, and needs of potential adopters (Rogers and Shoemaker 1971:22). Compatibility is the trump card for all innovations, even those with high relative advantage.

It is the extent to which consumers believe that a new product is consistent with their current ways of thinking and behaving (values, norms, customs, and all of the other cultural characteristics). Katz (1963: 2) sums up the definition as the match of the potential adopters and the attributes of an innovation. In family planning for example, male sterilisation has not been socially accepted even though it is the surest way of controlling pregnancies. This is because a male has always been looked to produce children. That is why a barren man is allowed to marry a second wife if they have not produced a child with the first wife, but a woman will not be allowed to have two husbands even if she has no child with her husband. An innovation must be considered socially acceptable to be implemented. And some innovations require much time and discussion before they become socially acceptable.
Innovations that conflict with deeply held values or beliefs are adopted much more slowly. This may happen as a result of technological development or as a result of "transplanting" an innovation from one culture into a very different culture. Rogers (1983) says that many champions of some technological innovation have been guilty of the "empty vessel fallacy." That is, they assume that they are introducing the innovation to a group with no pre-existing beliefs or values. Rogers points out that ignorance of indigenous knowledge systems can quickly undermine the most promising innovation.

In defining culture, it is important that the question of how to characterise culture in terms of the value orientations is considered. Very few attempts have been made to develop a set of categories for the comparison of cultures. Therefore, it is still difficult to decide which elements of culture are predominant and compatible of a particular innovation. It is difficult for example to define Zambian culture because of the so many ethnic groups each having its own culture. Where a conflict in culture occurs it becomes difficult to measure compatibility.

The other problem is on the definition of the concept of compatibility as it can be defined from the observer point of view or from the potential adopter and a distinction should be made between short term and long-term compatibility. The definition should include legislations such as codes of conduct and constitutions of adopting communities even if they are new to a society.

Perception has it that old ideas are the main mental tools that people use to assess new ideas. People deal with innovations on the basis of the familiar. This can lead to problems.

- Sometimes the innovation seems more similar than it really is and so is utilized according to the previous one.
- Sometimes the innovation is so different that adopters simply do not have the know-how to utilize the similarity of an innovation to older ideas. This, however, does not necessarily mean that it will be adopted more quickly. While this may be the case for many technological innovations, the opposite appears to be true in the area of art. The more radical a piece of art is, the quicker it is disseminated.

Rogers also points out that innovation naming and positioning (presenting how it is both like and unlike other more familiar ideas) are key compatibility strategies. Sometimes it is necessary for the change agent to offer innovations that match a population's felt needs. While this is not easy, there are several methods for determining just what the members of a population feel that they need. The strategy then is to match that need to an innovation.

Sometimes it is necessary for a change agent to make clients aware of a need. Members of a population are not always cognizant of a need. A change agent can increase awareness by introducing an innovation and its benefits.

When felt needs are met, innovations generally are adopted at a faster rate. If the idea seems morally irreconcilable, then the innovation will not be adopted. If the innovation is very or sometimes even just a little bit different than current practices, then the innovation will not be adopted.

(iii) Complexity:

Rogers (1983:15) defines complexity as the degree to which an innovation is perceived as difficult to understand and use. An innovation need not be particularly complex from the viewpoint of its developers. Feminists, for example, often complain that the public simply
doesn't "get it." It is the perception of the end user that means the most for achieving public adoption of a new technology.

Leslie-Martinich

(http://216.239.37.104/search?q=cache:UiSUAs87UTwJ:faculty.stonehill.edu/glantos/Lantos1/ PDF%20Folder/BA347_PDF/Exercise%252036.pdf+characteristics+of+innovations&hl=en&ie=UTF8&f=8&idx=11) states that sometimes **complexity** is called **simplicity**, and is related to compatibility, and is concerned with the innovation's perceived ease of being understood and used, not complexity of technology.

**(iv)** **Trialability:**

Trialability is the degree to which an innovation may be experimented with on a limited basis (Rogers and Shoemaker 1971:23). Innovations are easier to adopt if they can be tried out in part, on a temporary basis, or easily dispensed with after trial.

**(v)** **Observability:**

Observability is the degree to which the results of an innovation are visible to others (Rogers and Shoemaker 1971:23). The chances of adoption are greater if folks can easily observe relative advantages of the new technology. In fact, after some adopt, observability can improve the diffusion effect, a critical component of technology transfer.

A no-tilled field had negative observability at first because "good" farmers did not leave plant residue on their fields; they instead left the ground clean of plant residue with deep furrows.
CHAPTER 6

6.0 LITERATURE REVIEW

A very important study was done by Power et al. (Development Practice, vol.12, No.3, Aug. 2002: 275-276) in which they examined a number of International Non Governmental Organisations (INGOs) on the use of the Bottom-up Organisational Learning (BUL). They described BUL as a sub-discipline of Organizational Learning (OL). Organisational Learning has been defined as a process of developing new knowledge that changes an organisation’s behaviour to improve future performance.

In practicing bottom-up learning, an organization makes a moral choice to draw insights and feedback from people at the low end of a socially constructed hierarchy (that is from those who are most vulnerable in the system). It refocuses and redefines itself, its operational choices, and its performance measures in light of its accountability to the poor.

Bottom-up-learning asks organizations to adapt their internal structure, systems, and culture to the complex and evolving struggles of those in poverty, including even the choice not to be ‘developed’. Bottom-up-learning is contrasted with Organizational Pragmatism in which the primary agenda is to ‘adjust’ the poor to fit in (and thus benefit from) standardized INGO programmes usually through the promise or provision of material assistance.

The importance of this study is that it revealed the approach that all development advocates could use in all aspects of communication for social change processes. They further defined alternative development, or democratic development as a process of vision driven organizing, initially at the local level, which focuses explicitly on the moral relations of persons and households, and it draws its values from that sphere rather than from any desire to satisfy material wants, important as they may be. Advocacy of the poor in defence of their rights (to
land, capital, and other productive assets) can go hand in hand with sensitive, tailored support for local people’s self development, self reliance and increased ability to sustain their own desired developments.

Similarly a study was done in Chile by Anthony Bebbington and Denise Humphreys (Bebbington et al, 1997) on NGO evaluation Policies and Practices. The aim was to get the dimensions of NGO evaluation in Chile in general and how Pinochet’s rule affected NGO evaluations. The research discussed a number of innovative lines of evaluation methodology and the different experiences and sources of impact assessment.

Their findings were that no evaluations were focused in NGO activities during pinnochets’s rule. Only minor internal reviews concerning the nature of their mission was done. When these low scale evaluations were done, NGOs hand-picked members of the evaluating team (Bebbington et al, 1997:5). It was also found that the evaluations were heavily qualitative and process-minded, and concerned less with efficiency and effectiveness or development impact. They were meant for donors to continue funding NGOs. In short, they were not participatory.

Even after Pinnochets’s era, they concluded that there was relatively little evidence of NGOs working with participatory approaches to evaluation. The quantifiable results that the NGOs used did not lead to building grassroots’ capacities. Local people could still not monitor their progress.

Esther Mebrahtu also did a research on the involvement of communities in Monitoring and Evaluation (M&E) of all INGOs working in Ethiopia under the theme, “Perceptions and Practices of Monitoring and Evaluation: International NGO experience in Ethiopia” (Development Practice, vol.12, No.3, Aug. 2002: 501 ). The study analysed how eight large United Kingdom based INGOs with programmes in Ethiopia have progressed along with the
monitoring and evaluation path. She found out that the heightened pre-occupation with effectiveness on the part of international donors has had a real impact on INGOs. Terms such as “impact,” “performance”, “results”, and “accountability”, have assumed a new prominence in monitoring and evaluation documentation, she observed (Development Practice, vol.12, No.3, Aug. 2002: 502).

INGOs were experimenting with ways to develop more friendly and qualitatively oriented monitoring and evaluation systems at field level with the realization that monitoring and evaluation systems are more likely to be effective if they are made sensitive to and developed within the immediate context of projects themselves.

She observed that most INGOs had built-in hierarchical monitoring and evaluation frameworks that operated at four key organizational levels (i.e. field, country, management and Trustees) on the basis of indicators linked to the monitoring and evaluation objectives. For the majority of INGOs, the process of monitoring was part of the decentralized system of periodic data collection and reporting that frequently required the collection of quantitative data.

She observed that, in case of CARE International, as an example, the monitoring and evaluation system instituted in 1994 was composed of ‘organisational and sectoral objectives, with corresponding generic indicators, against which country and regional offices could report annually’. By its very nature, the system did not include other context specific indicators that might have been more appropriate to the information needs of the project community, i.e. managers, partners and the local community.

She further observed that a lot of importance was placed on obtaining continuous feedback. Action Aid provided a good case in which one official was quoted saying:
“Feedback is critically important if monitoring and evaluation is to have any meaning, and to be of any use to the organization. Without feedback, we have just a reporting system and data gathering and forwarding is just an activity like other activities.” (Development Practice, vol.12, No.3, Aug. 2002: 503)

What came out in her research was that clarity was needed on who needed what information, how often and in what form? She discovered that at least three policy documents (3 INGOs) identified ‘feedback’ of monitoring and evaluation finding to the community as particularly weak, and that there was minimal discussion about how it could be improved or what actions may result.

On the participation of local actors in monitoring and evaluation she found that all INGO policy documents explicitly expressed the need for some form of local participation. While most INGOs required local communities to be involved in all monitoring and evaluation activities only a third specified the precise from this had to take, and the significance that would be attributed to their views. In other words, most INGOs did not involve the communities in M&E.

She discovered that the methodological tools and approaches to monitoring and evaluation used by most INGOs were end of term and Mid-term evaluation tended to be undertaken by outside consultants whose operational parameters were frequently defined by the Logical Framework analysis. Reports were written from the perspective of donors and their information needs. This left out the beneficiaries.
On the selection of indicators and information needs she found out that in the more devolved or decentralized INGOs, appropriate process indicators were decided upon mostly at project or sectoral levels. Impact indicators were generally decided at national or headquarters levels. In centralized INGOs, field staff were required to use externally pre-designed and pre-selected indicators. Quantitative indicators were favoured by INGOs regardless of the organizational level at which they were formulated.

Thokodzile Mavuso did a research in 2000 in Ng’ombe and Tiyanjane CCF affiliated projects to find out how CCF ran its educational programme through its affiliated projects and the problems they faced. She was interested in finding how CCF identified children from poor families and sponsored them for education, sourced for funds and how the funds were distributed to the children and whether the money was meeting the children’s requirements.

Secondly, she was also interested in finding out how CCF communicated with children and collecting views of children and parents concerning education and their grievances. She did the research using In-depth interviews at national office and programme staff, focus groups and participant observation in the field.

In her research she identified the following problems with CCF programmes in Zambia:

At National Office:

(i) Difficulties in analysing educational reports;

(ii) Late submission of reports from affiliated programmes.
At Ng’ombe Child and Family Project:

(i) Parents did not understand CCF Policies i.e. Parental contribution as opposed to free materials;

(ii) Parents’ apathy towards children’s education as shown by high drop out rate;

(iii) Lack of ECD centres;

(iv) Lack of career guidance and counselling for enrolled children;

(v) Poor communication between project and community – not following procedures laid down and delays in information.

At Tiyanjane Child and Family Project:

(i) Lack of teaching and learning materials;

(ii) Inadequate classroom accommodation;

(iii) Parental apathy towards children’s education;

(iv) Impending disaffiliation of the school.

Her main findings, conclusion and recommendations were that at the national office, there was low reciprocity between the national director and other personnel. The communication structure did not offer reciprocity. She concluded that educational programmes in CCF were not participatory, there was a poor education monitoring mechanism and a lot of parental apathy to work. She recommended that children had to be involved in the development process from problem identification to implementation. Thokozile did not, however, propose a method to be used in achieving her recommendations. Further, her findings did not reflect much on her objectives, for example her finding at the national office have no correlation to participatory communication.
CHAPTER 7

7.0. DATA ANALYSIS AND RESEARCH FINDINGS

Data analysis and research findings are a presentation of the responses from the respondents and observations and analysis of the responses by the researcher. The findings are presented in such a manner that CCF communication structure is analysed first followed by participation levels in various CCF activities. In the analysis of the communication structure, communication within a project is done first, followed by inter project communication. Communication between the national office and projects is a formal top down beauracratic one and was only highlighted.

7.1.0 INTRA PROJECT COMMUNICATION

Intra project communication involves the exchange of information amongst all stakeholders at a project level within the confines of the programme catchment's area. Therefore, all communication strategies, tactics, the project organisational structure, and group structures present the needed components of internal organisational communication. Intra project communication was measured using the following indicators:

(i) The existence of a formally established way of sending and receiving information.

(ii) The frequency with which activity information was relayed in sections and amongst sections.

(iii) The modes or tactics through which information was passed from one household head to the other.

(iv) The modes or tactics through which information was passed from project offices to PFEs
The findings are as follows:

7.1.1 Existence of formal Communication

On whether formal communication exited the respondents gave the responses as tabulated in table 3 below:

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
<th>Valid Percentage</th>
<th>Cumulative Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does not Exist</td>
<td>11</td>
<td>7.3</td>
<td>7.3</td>
<td>7.3</td>
</tr>
<tr>
<td>Exists</td>
<td>139</td>
<td>92.7</td>
<td>92.7</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>150</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

As the frequency table 3 shows, a formally established way of sending information in CCF programme areas exist. Only eleven household heads representing 7.3 percent did not know of the existence of an information flow system. This, however, raised doubts of the effectiveness of the system if some parents did not know of the system.

7.1.2 The frequency with which information was relayed in sections

This was a measure of the time taken for information on a number of activities to reach the household heads within and between sections. The results are shown in tables 4 and 5 below:
Table 4. Frequency with which household heads received information at a Section |

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
<th>Valid Percentage</th>
<th>Cumulative Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not get it at all</td>
<td>3</td>
<td>2.0</td>
<td>2.0</td>
<td>2.0</td>
</tr>
<tr>
<td>Within a Day</td>
<td>61</td>
<td>40.7</td>
<td>40.7</td>
<td>42.7</td>
</tr>
<tr>
<td>Within a Week</td>
<td>41</td>
<td>27.3</td>
<td>27.3</td>
<td>70.0</td>
</tr>
<tr>
<td>Within a Month</td>
<td>45</td>
<td>30.0</td>
<td>30.0</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>150</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Table 5. Frequency with which parents receive information about other sections within a project.

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
<th>Valid Percentage</th>
<th>Cumulative Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not get it at all</td>
<td>15</td>
<td>10.0</td>
<td>10.0</td>
<td>10.0</td>
</tr>
<tr>
<td>Within a Day</td>
<td>26</td>
<td>17.3</td>
<td>17.3</td>
<td>27.3</td>
</tr>
<tr>
<td>One Week</td>
<td>49</td>
<td>32.7</td>
<td>32.7</td>
<td>60.0</td>
</tr>
<tr>
<td>One Month</td>
<td>60</td>
<td>40.0</td>
<td>40.0</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>150</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Tables 4 and 5 above show the frequencies measured in terms of a day, a week or a month within which information disseminated about project activities took to reach the household heads at the section as well as the entire project levels. Examining the flow of information at the section level presented in table 4 revealed that 30 percent of the household heads received information once in a month while 27.3 percent within a week. Two percent did not even get any information. Since a section had a maximum number of 18 households next to each other, it showed that there were inefficiencies in the information flow system. From table 5 we find even a larger number of households that did not get any information on programme
in the neighbouring sections. Both graphs conclude that there are big lapses in time before information could reach the targeted population.

7.1.3 Communication Tactics

To help us explain the ineffective and inefficient communication, we need to examine the internal modes of communication. The responses are indicated in table 6 below.

Table 6. Internal Modes of Communication

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
<th>Valid Percentage</th>
<th>Cumulative Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not get any information</td>
<td>6</td>
<td>4.0</td>
<td>4.0</td>
<td>4.0</td>
</tr>
<tr>
<td>Hearsays</td>
<td>10</td>
<td>6.7</td>
<td>6.7</td>
<td>10.7</td>
</tr>
<tr>
<td>Section Representatives (PFEs)</td>
<td>127</td>
<td>84.7</td>
<td>84.7</td>
<td>95.3</td>
</tr>
<tr>
<td>Children</td>
<td>3</td>
<td>2.0</td>
<td>2.0</td>
<td>97.3</td>
</tr>
<tr>
<td>Posters</td>
<td>2</td>
<td>1.3</td>
<td>1.3</td>
<td>98.7</td>
</tr>
<tr>
<td>Zonal Heads</td>
<td>2</td>
<td>1.3</td>
<td>1.3</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>150</strong></td>
<td><strong>100.0</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

As the table clearly shows, the information transmission made use of mostly (84 percent) the section representatives (PFEs). Apart from PFEs there was still heavy reliance on unconfirmed and un-official information which constituted 6.7 percent and children (2 percent). Four percent did not receive formal project information. There were no community radio programmes. The use of PFEs as information transfer agents without supporting systems accounted for the inefficiencies sited above.
7.1.4 Modes of information delivery from offices to household heads

Another Method used to examine information flow was by analysing the modes used to disseminate information to PFEs and household heads from Project Offices. The results which are given in table 7 below show that the ‘Word of Mouth’ was the main way of conveying messages as it accounted for 57.3 percent. It is followed by small un-official notes which accounted for 36 percent. Posters accounted for 4 percent while News-letters and Brochures accounted for a meagre 2.7 percent.

<table>
<thead>
<tr>
<th>Mode of Information Delivery</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small Un-official Notes</td>
<td>54</td>
<td>36.0</td>
<td>36.0</td>
<td>36.0</td>
</tr>
<tr>
<td>Word of Mouth</td>
<td>86</td>
<td>57.3</td>
<td>57.3</td>
<td>93.3</td>
</tr>
<tr>
<td>Posters</td>
<td>6</td>
<td>4.0</td>
<td>4.0</td>
<td>97.3</td>
</tr>
<tr>
<td>News letters and Brochures</td>
<td>4</td>
<td>2.7</td>
<td>2.7</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>150</strong></td>
<td><strong>100.0</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

The fact that the word of mouth was the most used, explains why even hearsays were common and the biggest time lag as PFEs and parents could just forget to relay the information. Project news-letters and brochures could be of great help but were lacking. Projects produced news-letters annually which were only meant to inform sponsors about the progress of the projects. Parents had no access to the news-letters. Brochures were not available.
7.1.5 Frequency with which Household heads passed information to the other.

Most of the parents were not willing to relay information to fellow parents as shown in Table 8 below. Sixteen percent had not told any other parent about a meeting, 12.8 percent did it once only while 6 percent did it thrice. This further explains the delays in information flow. This could as well be a factor for low participation as it will be seen later.

**Table 8. Household heads’ informing of others for Meetings/ Programmes.**

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
<th>Valid Percentage</th>
<th>Cumulative Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not inform any</td>
<td>24</td>
<td>16.0</td>
<td>16.0</td>
<td>16.0</td>
</tr>
<tr>
<td>Informed another Once only</td>
<td>19</td>
<td>12.7</td>
<td>12.7</td>
<td>28.7</td>
</tr>
<tr>
<td>Informed another Twice only</td>
<td>12</td>
<td>8.0</td>
<td>8.0</td>
<td>36.7</td>
</tr>
<tr>
<td>Informed others Thrice</td>
<td>9</td>
<td>6.0</td>
<td>6.0</td>
<td>42.7</td>
</tr>
<tr>
<td>Informed others More than three times</td>
<td>86</td>
<td>57.3</td>
<td>57.3</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>50</strong></td>
<td><strong>100.0</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

To sum up on intra project communication, it is important to link the communication structure at projects to the findings. The current communication structure is shown in chart 8 below. The formal lines of communication after the restructuring in 1997 at the project level involved the transfer of messages from both the offices and household heads through PFES and is shown by the vertical arrows in chart 3. This structure was well understood by most parents. Any conveyance of messages between the programme offices and household heads directly was regarded as informal except in emergencies. However, the fact that some parents took
too long to receive the messages and the use of hearseys simply shows that the information flow was very ineffective. One other finding has been that at the project level in CCF, organisational communication tends to be replaced by interpersonal communication as it progresses into the community and that group communication was not well developed.


Interpersonal communication according to Narula (2003:13) is not a linear process and requires feedback where the communicator is required to reduce incongruence by interpreting feedback cues correctly and trying to adjust the message content to achieve greatest effectiveness and accuracy in a process known as role taking. The enhancement of interpersonal communication was not planned for in the CCF communication structure though it is better for sharing ideas and can work well for participatory communication through groups.
The ineffective communication in CCF programme areas could as well have emanated from the hasty formation of sections and related appointment of PFEs. This could have been so bearing in mind that households were grouped into sections on the basis of proximity in terms of distance. There was no communication network analysis at the beginning of the exercise in 1997. As a result the communication network shown in chart 9 was established in programme areas.

Chart 9  Communication network Sociogram after PMT introduction in CCF Projects.
The communication network sociogram above shows how PFEs and household heads were interconnected. From the network it is clear that there were some households that did not have links with other households in a section. Such are represented by households 3 and 6. Other characteristics found within this kind of set up is that of poor symmetry or the degree to which the members connected by a link interact on an equal basis. In a symmetrical relations, the members give and take information relatively equally. The interaction frequency was very poor and so was the reciprocity. Reciprocity according to Littlejohn (1991:319) is the extent to which members agree about their links. If one person believes that he or she often communicates with another but the other denies it, the link is un reciprocated. This was the case with some PFEs who claimed to have links with all household heads when they did not.

The content of interaction which concerns communication about work, social matters or other topics was very poor. Poor communication network came about because the sections and zones were brought in so abruptly such that people did not have time to try, observe, weigh the relative advantages of the new innovations as the diffusion of innovations theory explains. In addition, Anthony Giddens’ structuration theory which according to Littlejohn (1991:308) says that “human action is a process of producing and reproducing various social systems,” explains the poor links in CCF sections. Groups should act according to rules to achieve their goals and in so doing they create structures that in turn affect future actions. As such structures like relational expectations, group roles and norms, communication networks, should be advanced in every group as these structures provide individuals with rules that guide their actions and that their actions in turn create new rules and reproduce old ones. All these were not observed in CCF focus groups. The sections did not have any regulations. This resulted from lack of citizen participation at the formation of sections. At the planning level, household heads were not consulted and were only told to implement through
meetings. Though ground truthing could have been done about the system elsewhere, the system could not just be applied to Zambia because of the different socio-cultural contexts. Participation was at the informing, placation and consultation levels of Arnstein’s ladder and was compounded with lack of equity of participation explained in the IMCSC model.

7.2.0 INTER PROJECTCOMMUNICATION

Communication between or amongst projects involves the exchange of information amongst programmes. Therefore, all information tactics, and the organisational structure present the needed components of internal communication. In CCF projects inter communication was measured by finding out if Formal Communication existed amongst the programmes. Formal communication in this case is characterised by official letters, memos, posters, brochures and / or verbal messages relayed by people with the responsibility to deliver messages. These in CCF included the chairpersons, board members, managers, other employees and PFEs.

As chart 10 below shows, 20.7 percent of respondents had not experienced any formal communication between programme areas while 64 percent had doubts. 15.3 percent were definitely sure that it existed. The facts are clear here that formal communication is not straight forward and never exists. The factor that lead to this finding was that CCF Programme areas existed as independent entities with no formal obligation to each other. Respondents who had doubts did so because of the grouping of the programme areas into loose illegal entities which prompted staff from the various programme areas to meet and at times have un official communication.
7.3.0 PARENTS’ KNOWLEDGE ABOUT THE PLANNING, MONITORING AND EVALUATION SYSTEM

Before we examine the actual community involvement in the planning, monitoring and evaluation, it is imperative to find out if the parents were knowledgeable about the system in use. The project management tool as explained earlier was introduced in 1997. To this effect parents gave the responses which are given in Chart 11 below. As the Chart shows, more than 80 percent of the parents knew about the introduction and use of the PMT system. The PMT system was however introduced to the programme areas without the input of the parents. This accounts for why the number of parents who are not even aware about the system is large. It falls within the first three rungs of participation on Arnstein’s ladder.
7.4.0 PARTICIPATION LEVELS

Levels of participation at the planning level were measured by the following methods:

(i) Number of parents who attended planning, monitoring, and evaluation meetings,
(ii) Equity of participation during meetings,
(iii) Involvement of the community in the generation of project proposals, quarterly and annual reports, and
(iv) Involvement of parents in budgeting.

Secondly participation in monitoring and evaluation were measured by:

(i) Monitoring and evaluation sessions, continuous or terminal that were held in projects and,
(ii) Roles played by parents in externally (Donor) initiated evaluations
7.4.1 Household heads' in Planning, Monitoring and Evaluation meetings

A frequency table was used to tabulate the responses that the parents gave with regard to their attendance to planning, monitoring and evaluation meetings. This indicator was based on the physical presence of parents at meetings duly called for the purposes of planning, monitoring and evaluation. It is not a measure of their inputs but their being in attendance. The responses are given in table 9 below.

Table 9. Participation in Planning, Monitoring and Evaluation meetings

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never attended a meeting</td>
<td>32</td>
<td>21.3</td>
<td>21.3</td>
<td>21.3</td>
</tr>
<tr>
<td>Sometimes attended meetings</td>
<td>45</td>
<td>30.0</td>
<td>30.0</td>
<td>51.3</td>
</tr>
<tr>
<td>Attended most of the meetings</td>
<td>73</td>
<td>48.7</td>
<td>48.7</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>150</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

As the table above shows, 21.3 percent of parents did not attended any planning or evaluation meetings. Thirty percent have sometimes attended while 48.7 percent of the respondents said they always attended. Because the PMT requires that all concerned stakeholders, household heads inclusive should attend all meetings and take part in planning monitoring and evaluation, the fact that 51.3 percent of parents were not active participants explains for itself that more than half of the household heads did not know the planning system, the monitoring and evaluation system, which explains why they did not take part in the activities.
The In-depth interviews carried out further verified the above finding as none of the respondents knew the tools used in planning, monitoring and evaluation. They did not know the primary data entry records such as family cards, service rosters and vital events registers. Secondary data forms such as sites were not known either. They had not seen an end of quarter report, annual plans and annual reports.

This clearly shows that the Planning system still needed to be re-applied to involve all the parents and other stakeholders at all levels of the project. The planning tools such as the SITEs were too advanced and complicated for ordinary household heads. The design for the PMT tools was done by consultants outside Zambia. Even if they were to be used by household heads, they would require simplification. The other main difficulty with using the SITES in planning was that the captured red flags could not reflect the felt needs of the community.

7.4.2 Equity of Participation

Since meetings or public gatherings are the main avenues of sharing ideas in CCF Projects, it was decided that the level of equity of participation in all processes i.e. planning, monitoring and evaluation had to be measured by checking whose ideas were mostly taken during discussions. This was done to find out if all households had an equal say or whether opinion and community leaders had an upper hand. The results are shown in table 10.
Table 10  Equity of decision making  in section meetings.

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid Parent Family Educators</td>
<td>25</td>
<td>16.7</td>
<td>16.7</td>
<td>16.7</td>
</tr>
<tr>
<td>Village Headmen and Chairpersons</td>
<td>1</td>
<td>.7</td>
<td>.7</td>
<td>17.3</td>
</tr>
<tr>
<td>Parents</td>
<td>100</td>
<td>66.7</td>
<td>66.7</td>
<td>84.0</td>
</tr>
<tr>
<td>One whose views are better</td>
<td>24</td>
<td>16.0</td>
<td>16.0</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>150</strong></td>
<td><strong>100.0</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

As table 10 above shows, village headmen took a very low profile (.7 percent) followed by parent family educators (16.7 percent). Equity of participation takes into account analysing issues by giving facts and taking better views from whoever presents them. The finding shows that only 16.0 percent of respondents gave this view, indicating that the decision making process was not clear to the respondents. What ever decisions parents wanted could be taken without weighing them. It therefore meant that influential parents could direct the decision making process. Any other parent who opposed was regarded deviant. Since all respondents were household heads, regard for others was not there.

This is attributed to the fact that CCF has always placed emphasis on parents doing most of the work and has become a protective shield even when parents are not involved. Therefore with reference to the IMCFSC, it shows community dialogue is not effective as the process ignores the expression of individual and shared interests and opting for the better. This has a
positive correlation to what the spiral of silence theory says, "people want to be associated with the majority even when the majority are wrong and not concerned."

7.4.3 Generation of Project Proposals

Another important aspect of the planning process is the production of a Project Design Document (PDD) and a project proposal with a list of activities and a full budget for marketing to would be financiers. These activities are normally done in the planning phase. According to the IMCFSC model these activities are done in the community dialogue and collective action stages. The research found only a small number of small to medium sized proposals generated by project management for possible funding.

All the projects were, however, involved in the water and sanitation project for the Mumbwa area projects that started in 2000; and all, except for Mtengo in the Food Security Pack Project that was carried from 2002 to the time of the research whose proposals were written by the national office. Findings as to who generated the proposals were alarming as people did not know about them. The responses are shown in table 11 below.

<table>
<thead>
<tr>
<th>Table 11. Involvement in Project Proposal Generation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>-----------------------</td>
</tr>
<tr>
<td>Valid</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
Table 11 shows that 14 percent of the respondents simply did not know who came up with project proposals. Others assumed that either the CCF-Zambia national office, CCF-Australia, project management and sections wrote the proposals that led to the funding of the programmes they were doing. In-depth interviews revealed that the communities did not know who came up with the proposals for the water and sanitation as well as the food security pack projects. The respondents were only called for a meeting to be told about the projects and were later given materials to commence the activities. There was no collective recognition of the problems, no involvement of stakeholders, no clarification of perceptions, no expression of individual and shared interests and vision of the future. The community was not involved in the assessment of their current status, setting of objectives nor in coming up with options for action. There was no consensus for action. The community did not come up with the action plan. This explains why some of the wells and bore-holes were neglected after installation in a period of just less than four years, despite workshops being conducted to emphasise community ownership, encouraging monetary or other contributions in kind for use in times of breakages and the making up of the fragile water point committees. We can conclude here that social change did not take root in the CCF communities at the community levels as per explanation of the IMCFSC model. What relative advantage did the new programmes have to the older ones? Was the formation of maintenance committees and payment of fees compatible with the culture of communities? There was no time given to observe how the new programmes would do. Observability. The application of the diffusion of innovations theory should have been done by the initiators of the programmes.
7.4.4 Participation at the Budgeting Level

A budget helps to plan and co-ordinate the efforts of disparate functions and departments to achieve pre-determined, clearly understood targets. A critical assessment of participation at any community project level using any acceptable process such as the logical framework, the integrated approach and the peoples planning process outlined above is the involvement of the community at the budgeting level in the budgeting process. This is a critical stage done after all the needs and the solutions identified that need to be expressed in financial terms. This type of budgeting is known as participatory budgeting. Participatory budgeting according to J. Walker et al (2000: 257) is a “system in which all budget holders are given the opportunity to participate in settling their own budgets.” This is also referred to as bottom-up budgeting.

The advantages of participative budgeting according to Walker (2000: 257) are:

(i) Improved quality of forecasts to use as the basis for the budget. Stakeholders who do a job on a day to day basis are likely to have a better idea of what is achievable, what is likely to happen in the forth-coming period.

(ii) Secondly, there is improved motivation. The budget holders are more likely to want to work to achieve a budget that they have been involved in setting themselves, rather than the one that has been imposed on them from above.

Participatory budgeting brings a sense of ownership and allows the stakeholders to accept responsibility for the achievement of the targets in the budget. The findings of the Parents’ participation in budgeting and budgetary control are given in chart 12 below.
The chart outlines that 72.7 percent of parents did not take part in budgeting while 27.3 percent took part.

Budgeting on the everyday activities was done by the programme management involving the board members and project staff. Interviews revealed that zones were only subjected to coming up with a series of activities that were likely to alleviate problems encountered in sections. The lack of involvement of sections rendered the budgeting process non participative. It raises high expectations from sections as each section wants all its problems solved within the shortest possible period. Some activities were not well done because of the perceived unnecessary delays in implementing them due to financial problems which households at sections were not aware of. This is a serious problem that requires immediate attention.
7.4.5 Household heads reasons for non Participation

Fifty one percent said they did not attend because they were not invited where as 31 percent said they did not know the process of meeting for plans, monitoring and evaluation while 18 percent said they were aware but pre-occupied with their personal businesses. The 51 percent said they were not invited. Thirty one percent did not know because the whole PMT process could not have been introduced well in the area. There was no commitment shown by the 18 percent of those who had not participated. This could be as a result of lack of understanding and ownership of the programme by this number of people.

Table 12. Reason for non Participating

<table>
<thead>
<tr>
<th>Reason</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>No invitation</td>
<td>20</td>
<td>13.3</td>
<td>13.3</td>
<td>13.3</td>
</tr>
<tr>
<td>Not knowing the process</td>
<td>12</td>
<td>8.0</td>
<td>8.0</td>
<td>21.3</td>
</tr>
<tr>
<td>Aware but busy</td>
<td>7</td>
<td>4.7</td>
<td>4.7</td>
<td>26.0</td>
</tr>
<tr>
<td>Not applicable</td>
<td>111</td>
<td>74.0</td>
<td>74.0</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>150</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

7.4.6 Projects evaluated by Donors

Monitoring and Evaluation are important processes in seeing that conformity to achieving targets are realised. The AIMES system requires the use of SITES, quarterly and annually to gauge success. While the use of PMT by the board and programme employees was very evident, it was not the case with ordinary household heads' monitoring and evaluation were not evident in zones and sections.
While the above pertained to the daily activities that were done in programme areas, other externally generated projects done in all the programme areas required some monitoring and evaluation. The main programmes included the water and sanitation programme that saw the drilling and installation of bore-holes, rehabilitation of wells, formation of water point committees, and the construction of the ventilation improved pit latrines.

The research showed that donors and the CCF Zambia staff monitored and evaluated the programmes. However, only the Mwembeshi programme had a final evaluation of water and sanitation project as well as the Food Security Pack project. The aim was to find out if the household heads knew about the evaluations and the roles they played. The results of the research are given chart 13 and table 13 below.

**Chart 13 Preparations for Donor’s Evaluation**

![Chart showing percentage of donors who evaluated projects and those who did not, with a legend indicating Yes and No responses.](chart-image-url)
From the chart and the table below there was a strong link between monitoring by the national office and donors and the advance preparation of the communities for the visits. There was a correlation of 0.5 which means that the national office had a lot of input to influence parents on what was to be said to preserve the image of CCF to the donors. In view of this, independent decision making lacked in household heads as they had to give prescribed answers to the donors. This is a high measure of placation which denotes token participation as explained in Arnstein’s ladder above. It shows lack of participatory monitoring and evaluation.
<table>
<thead>
<tr>
<th>Project</th>
<th>Kabile</th>
<th>Kalundu</th>
<th>Mtengo</th>
<th>Mwembeshi</th>
<th>Namayani</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advance Preparations for Evaluators</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Donors evaluating a Programme</td>
<td>Count</td>
<td>Count</td>
<td>Count</td>
<td>Count</td>
<td>Count</td>
</tr>
<tr>
<td>Yes</td>
<td>8</td>
<td>5</td>
<td>16</td>
<td>1</td>
<td>13</td>
</tr>
<tr>
<td>No</td>
<td>1</td>
<td>17</td>
<td>6</td>
<td>24</td>
<td>6</td>
</tr>
</tbody>
</table>
In conclusion the findings of the research included the following:

1. Communication system

(i) Information flow within and between sections was slow. It took between a week and a month for information to be received by 57.5 percent of household heads while 4 percent of household heads did not receive any formal information within a section at all;

(ii) Information was mainly transmitted using PFEs (84 percent) and by word of mouth (57.5 percent) - Interpersonal communication - and un official notes (36 percent).

(iii) Inter Project Communication was not adequate and was mainly informal.

2. Community participation levels

(i) There are low levels of participation. 21.3 percent of the families did not attend while 30 percent have sometimes attended planning and evaluation meetings;

(ii) In decision making processes, communities did not pay account to the validity and reliability of submissions thereby making equity and quality of participation poor.

(iii) Communities did not know who planned for the activities especially big projects that were done in their catchment areas and the majority of community members did not take part in the budgeting process. It shows that they were marginalized in the planning process;

(iv) The findings on evaluation were that communities rarely evaluated their programmes. Externally initiated projects such as the water and sanitation and the food and security pack were evaluated by external funders. All that parents were made to do was merely to show themselves up during such evaluations (a measure of placation).
3. Social change outcomes

Since participation is very low, it shows that innovations that CCF was advancing have not been adopted by the majority of the communities. This shows that social change has not taken place in participatory communication. The only social change indicator achieved is the structural organisation of communities into sections and zones.
CHAPTER 8

8.0 RECOMMENDATIONS

From the findings in Chapter 7, it is recommended that the following actions and programmes to enhance participation in CCF projects are implemented i.e. development and improvement of the communication networks, and enhancement of public participation through re-examination of the implementation process to use of the participatory budgeting system. Change is inevitable and CCF should strive to deliver comprehensive problem solving programmes to communities. The following detailed procedures will improve participation in CCF:

8.1.0 Development and improvement of Section communication networks.

It has been found that there is poor communication networks within and between CCF projects. Where poor communication exists, it is difficult to involve the communities in meaningful participation. CCF should improve at the section level. Communication can be improved in the first instance by:

(i) Reducing the number of households in a section

This will require the number of households in a section to be reduced to between 8 and 10 in the current structures. This would reduce the long distances a PFE travels around delivering messages. Information would, therefore, easily reach the households. It would also be easy for section members to hold gatherings for diverse activities with maximum contributions from communities. This can work better if households remain grouped in sections that belong to the same community in terms of villages or settlements.
Developing ideal group networks where all members are interlinked.

Where members are linked to each other in a community or two different communities, it is easy to pass verbal information even if the distances apart are vast. Therefore, with this in mind compounded by the fact that interpersonal communication is prominent in CCF projects, isolated households in a section should always be tracked and have their communication links established. This implies that the current existing sections should be revisited so that membership is established in terms of communication linkages to each other.

This requires that the alternative new section structure should have groups of households based on communication links to each other rather than the current structures based on proximity in terms of distance. The advantage of such a structure is that it leads to fast flow of information. The proposed links are explained in the proposed network sociogram in chart 14 below.

According to the sociogram, house holds 2 and 4 are isolated in their own sections in the current set up of sections shown by circles. However a network analysis shows that household 2 had more links with households in section 2 even though it was located in section 1. Equally, household 4 had more links with section 1 households though it is physically in section 2. Therefore to re-define the boundaries of sections to be based on links would hasten the information flow and improve communications naturally as shown by arrows in the sociogram. The strategy is very good though it requires a lot of time. The problem that could be associated with the model is that it would be difficult for manual work to be done by people linked to distant sections.
8.1.1 Improvement and development of the means of communication

The other major communication problem in CCF projects is the conveyance of messages through word of mouth. Because of the various problems associated with sending messages using human beings, it is recommended that projects should:
(i) Produce newsletters and brochures

These should be developed and circulated within and between projects. It is not ideal to produce only for the sponsor without regard for nearest stakeholders such as children and other community members. It would encourage the non literate household heads to attend adult classes conducted in projects.

(ii) Use of community radio stations.

Broadcasts would enhance equal accessibility of information to all households. In the Mwembeshi and Mumbwa clusters for example, Radio Mazabuka would be ideal for communicating messages. To ensure maximum benefits of the radio programmes, it would be ideal for CCF projects to buy radio sets to be given to different groups of people within catchment areas.

(iii) Development and use of official message forms

Apart from the vital events forms used by PFEs, other forms should be developed where official information can be written and distributed to households. Officially designed posters can be of great help also.

8.2.0 Application of the planning, monitoring and evaluation system

CCF utilises a well defined Planning, Monitoring and Evaluation System (PMT). The problems that were identified with PMT in the research were two fold. The first being the haphazard introduction of the tool to the community and the second being the complexities associated with its indicators for the ordinary household head.

PMT was introduced in stages starting with AIMES and then SSIMS and FIT. The tool was developed by the International Office (CCFIO) with the help of consultants in the United States of America. The tool was not developed within the cultural context of the Zambian communities, neither, was it through popular participation of the beneficiaries. The tool is
mostly understood by project employees and board members while ordinary parents don't. The main problem is that some household heads do not even want to take the trouble to learn the system as it is time consuming and would rather spend time looking for food. Improvement can be done by:

(1) **Involvement of all stakeholders in all activities**

The best way is to redesign the whole planning, monitoring and evaluation system to include all stakeholders. Project activities should be designed to solve the existing problems in the communities. PMT requires the above processes but information has not been availed to others. The PPP process, the Figueroa model and M&E processes all refer to the same requirement.

In the planning process it is important that the participatory budgeting process that includes all stakeholders is carried out. The budgeting problem in CCF projects has been that while some sections could make their plans with well articulated activities, no links to financing was done. Budgeting in projects was done by the PAB which did not transmit the information to other community members. The result was that some activities planned by households in sections were not given financial backing to take root. High expectations from members of the sections were raised in terms of what they had planned. However, when funds were not allocated and activities did not take place, it lowered the rate of parent participation, created resistance to planning and evaluation meetings, and led to non compliance to communal work.

It is worth suggesting therefore, that the participatory budgeting process should be applied through the following Five Stage Participatory Budgeting Process (FSPBP):
(i) **Stage 1**

This first stage should be done at the section / zone level where all households and PFEs should hold discussions. At this stage the main activities should include problem identification. To help with this, SITES in all areas of programmes should be analysed. In addition, all other main problems identified such as natural calamities that require attention should be given attention. The zones at this time should not only restrict themselves to the events in their own zone but should have statistics from other zones as well. In addition, financial information from the offices should be availed to the participants. Expected average income should be estimated and used in the planning. Prioritisation should be done, objectives set, a budget and activity plans initiated. The project management should also at this time draw up a management departmental budget. Copies of budgeted activities should then be forwarded to the project level discussions. Appropriate monitoring and evaluation documents should be produced.

(ii) **Stage 2**

All PFEs and project staff should meet to examine the section / zonal plans and budgets including the management budget. The plans should be re-examined to address critical areas based on the expected income to address root causes of problems. A full project plan, objectives should be consolidated for a specific period of time. This plan should indicate what activities will be done in every department/ zone in the various areas of health, education, sponsor relations and communications and other critical
areas. Monitoring and evaluation documents should be consolidated to form a master M&E document.

(iii) Stage 3

This would include the presentation of the final plans and budgets to the zones. At this stage all stakeholder at the zone would confirm the activities to be done, responsibilities and the time frame. In this way households in one section should know the activities being done in other sections.

Chart 15 Proposed five Stage participatory process
(iv) **Stage 4**

This is a stage where all agreed activities are implemented according to the plan. All the shared responsibilities should be carried out at this phase. Information capturing should be done using agreed upon documents.

(v) **Stage 5**

At this stage, there should be participatory evaluation in all sections, zones and the project level.

(2) **Reducing Complexities associated with the PMT**

To reduce the problem of complexity with indicators, it could be vital if local indicators could be developed, that should centre on health and educational targets of the communities. The AIMES SITE need to be simplified at section level to make it relevant while at the same time maintain its form at the National level.

(3) **Capacity building for PFEs and communities**

Capacity building for PFEs and communities needed in planning, monitoring and evaluation. The whole planning process using the PPP or the IMSCS model on community dialogue and collective action processes. These include assignment of responsibilities, mobilisation of resources, implementation and participatory evaluation. Leadership training is also necessary. Assessment of current status, setting of objectives, options for actions, consensus on action and action planning would be required. During the sharing of responsibilities, competencies and personal attributes should be well defined and rightful coaching should be provided to needy individuals.
8.3.0  Policy change advocacy

A flexible policy is required in all dealings. Projects should be part and parcel of CCF not merely as affiliated projects. Policy should change to enhance learning and adjustments to reality. Policy documents should be readily available.
8.4.0 Conclusion

In all the projects under research, the participation of households was very minimal in the decision making process monitoring and evaluation. While the programmes CCF did were beneficial to the communities, sustainability could not be guaranteed because parents did not own the ideas. Communication was discovered to be very poor.

It would therefore be beneficial for the CCF National Office to involve parents in the decision making process, development of Monitoring and Evaluation indicators and in total implementation. This will increase the Public decision making and participation as seen in the CDR Associates’ Spectrum of Decision – making and Public Processes in chart 5, the Rings of Participation (chart 4) and other models above. Thus for Project Proposals there is need for the decentralisation with only technical input from the National Office. Where proposals are entirely generated by the national office it means that sustainability would not be there.
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Appendix 01

In-depth interview Questionnaire

1. In what ways have you benefited from CCF programmes?

2. How have you been involved in CCF activities?

3. For how long have you been enrolled with CCF?

4. Have you ever been in CCF Project Management structures?

5. If yes, for how long have you served in CCF Management?

6. If no, why haven’t you been in CCF Management?

7. In which ways should CCF Project Management be improved?

8. Some people say that only members of staff for the Project do the monitoring. What is your view about?
9. Are there any meetings that were called to discuss the would be program evaluation/monitoring at your Project?


10. If they have been there, what is your understanding of the same?


11. Are there any tangible developments that you as a parent has enjoyed from the Project Management Tool?


12. What is your view of the Project Management Tool?


13. To what extent have the Project or National Office been helpful in implementing the PMT?


14. Did all participants contribute without being jeered by other participants?


15. Did you develop any benchmarks that you would use to monitor the progress of your planned activities?
16. How did you view the whole planning session?

17. How have you monitored progress in activities taking place at your section or zone?

18. In your view, is the monitoring process transparent?

19. If it was transparent what do you mean by that?

20. Have people from outside the Project monitored a programme activity at your project?

21. How was the monitoring done? (Explain the steps taken)

22. Examine the Document Below: (AIMES SITE) given in appendix

23. What name is given to the document?

24. Have you ever used the document shown?

25. What is the use of the data that is collected in this document?
26. In your opinion how has the document been used in your section?

____________________________________________________________________

____________________________________________________________________

27. What do you know about this? (A family card given)

____________________________________________________________________

____________________________________________________________________

28. What is the importance of a Family Card?

____________________________________________________________________

____________________________________________________________________

29. Identify the document below.

____________________________________________________________________

____________________________________________________________________

30. Have you attended any meeting at your section or Zone where you planned activities for your section?

____________________________________________________________________

____________________________________________________________________

31. If you have attended one, What did it involve?

____________________________________________________________________

____________________________________________________________________

32. Were you happy or satisfied with what you planned?

____________________________________________________________________

____________________________________________________________________

33. What do you understand by Planning, Monitoring and Evaluation in CCF Projects?

____________________________________________________________________

____________________________________________________________________

34. What activities have you been involved in Planning, Monitoring and Evaluation?
35. What are the weaknesses of Organising Parents into sections?

36. What are the strengths of organising parents into sections?

37. How would you describe the relations amongst members of your section?

38. What is your view of the way you receive and send information in your CCF Project in general in your section in particular?
STRUCTURED QUESTIONNAIRE

SECTION 1 (tick one)

1. Sex
   1. Male
   2. Female

2. Position
   1. Ordinary Household Head
   2. PFE (Parent Family Educator)
   3. Board member (PAB)

3. Project Name
   1. Kabile
   2. Kalundu
   3. Mtengo
   4. Mwembeshi
   5. Namayani.

4. Education Level
   1. None
   2. Primary
   3. Secondary
   4. Tertiary

5. Marital Status
   1. Single
   2. Married
   3. Widowed
   4. Divorced.

SECTION 2

6. How long has your family been enrolled with the Project?
   1. Less than one year
   2. Once to Three years
   3. Four to Five years
   4. Over six years

7. Is there a formally established way of sending and receiving Activity information in your section?
   1. It does not exist.
   2. It exists

8. How often do you get information about Programme activities in your section?
   1. I don’t get it at all
   2. Within a day
   3. Within a Week
   4. Within a month
9. How do you MAINLY get information about what happens in other areas of your Project?
   1. I don't get it at all
   2. Through rumours
   3. Through our section representative
   4. Through my children
   5. Through Posters
   6. Other ____________________________

10. How often do you get information about developments in other areas of your Project?
    1. I don't get it at all
    2. Within a day
    3. Within a week
    4. Within a month

11. Do you get Formal information about Programmes in other CCF Projects?
    1. Not at all
    2. Sometimes
    3. Always

12. Have there been major changes in the way your Project runs its activities since you joined?
    1. No visible changes
    2. Somewhat
    3. Minor changes
    4. Major changes

13. How many times have you seen Programmatic changes in your Project?
    1. Never
    2. Once
    3. Twice
    4. Three times
    5. More than three times
14. Have you ever been informed that a meeting would be held to decide how Projects should be operative?
   1. Never
   2. I have been informed **ONCE**
   3. I have been informed **TWICE**
   4. I have been informed **THREE TIMES**
   5. I have been informed **more than Three times**

15. Have you ever attended a meeting that discussed Community management roles of Projects?
   1. Never
   2. I have attended **ONCE**
   3. I have attended **TWICE**
   4. I have attended **three times**
   5. I have attended **more than three times**

16. Project Employees, Community members, Parent Family Educators and Board Members all take part to make plans, review plans for the quarter or the year.
   1. Strongly disagree
   2. Disagree
   3. Agree
   4. Strongly agree
   5. I don’t know

17. The section, the zones and the Board make Annual Activity Plans.
   1. Strongly disagree
   2. Disagree
   3. Agree
   4. Strongly agree
   5. I don’t know
18. Parents enrolled in CCF projects get involved in activities upon the enrolment of their children.
   1. Strongly disagree
   2. Disagree
   3. Agree
   6. Strongly agree

   5. I don't know

19. Parent Family Educators were not in project structures during the first 10 years of the Project, CCF operation.
   1. Strongly disagree
   2. Disagree
   3. Agree

   5. I don't know
   6. Strongly agree

20. Parent Family Educators are elected at meetings held at sections.
   1. Strongly disagree
   2. Disagree
   3. Agree
   7. Strongly agree

   5. I don't know

21. Have you at any time, either at your section, zone or Board taken an active role in planning, monitoring and evaluation of the activities your project is carrying out in the area?
   1. I have never participated at all
   2. Sometimes I participate
   3. Actively participated

22. If you have never participated, what could be the reason?
   1. Never got invited
   2. Not aware of such a process
   3. Aware but was Busy with other work

   4. Not interested
   5. Other
   6. Not applicable
23. Have you at any time been involved in calling other members in your community for a meeting?
   1. No interest
   2. I have done it sometimes
   3. I always do it

24. Have you contributed in the form of labour, material objects or money towards a CCF community Project?
   1. No
   2. Labour
   3. Money
   4. Both money and labour
   5. Materials

25. In section meetings, you discuss, among other things the births, deaths and migrations that have occurred.
   1. Strongly disagree
   2. Disagree
   3. Agree
   4. Don't know
   5. Strongly agree

26. Social Workers, Community leaders all keep forms and books with information used in planning, monitoring and evaluation.
   1. Strongly disagree
   2. Disagree
   3. Don't know
   4. Agree
   5. Strongly agree

27. Has there been a big difference in the way projects now run programme activities than 10 years ago?
   1. Strongly disagree
   2. Disagree
3. I don't know
4. Agree
5. Strongly agree

28. Families which are not registered with CCF do not benefit from project activities.
   1. Strongly disagree
   2. Disagree
   3. I don’t know
   4. Agree
   5. Strongly agree

29. Was your project involved in programmes such as the Water and Sanitation, Food Security and others done in the past three years on a large scale?
   1. No
   2. Yes.

30 If yes, were you as a parent involved in coming up with the decision to start the Programme at the problem identification level?
   1. No
   2. yes

31. Were you as a parent involved in coming up with the decision to start the Programme at the solution identification level?
   1. No
   2. yes

32. Were you as a parent involved in coming up with the decision to start the Programme at the budgetary level?
1. No
2. Yes

33. Who came up with the proposal for the Programmes listed in questions 27 to 31?
   1. I don't know
   2. The Project Administration
   3. The National Office
   4. The Australian Office
   5. The section

34. Have you ever been called for a meeting to prepare for the coming of visitors especially Donors to your Project for a particular Programme in terms of what you are expected to Say, produce or show to the visitors?
   1. Yes
   2. No

35. Have donors other than CCF-Zambia evaluated a Programme that was implemented at your Project?
   1. Yes
   2. No

36. How has Project Information been transmitted to you from Project Offices?
   1. Small notes
   2. Word of mouth
   3. Posters
37. In Section meetings that you hold, whose views are most of the time taken?

1. The Parent Family Educator
2. The village Headman/ Chairman
3. Parents
4. Whoever presents better views
5. I don't know

THANK YOU FOR YOUR CO-OPERATION

LIST OF INTERVIEWEES (INDEPTH INTERVIEWS)

1. MAXTER SITUMBEKO  MWEMBESHI PROJECT
2. ELIZABETH SUSU  KABILE PROJECT
3. BORNFACE KATONGO  MTENGO PROJECT
4. MARY MBASO  KALUNDU PROJECT
5. JOHN ZULU  NAMAYANI PROJECT