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DEPARTMENT OF LOCAL GOVERNANCE STUDIES

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

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Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

APPROVAL FORM

The undersigned certify that they have read and recommend to Midlands State University for acceptance, a research project entitled: *"**Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District**,"* submitted by Mutale Quegas in partial fulfilment of the requirements of the Bachelor of Science Honours Degree in Local Governance Studies.

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Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

DECLARATION

I, Quegas Mutale do here by declare that this is my own original work; it has not been

plagiarized and where others' work has been used it was duly acknowledged; and it was

neither submitted for similar degree at this or any other University before.

Signed ……………………………… Date …………………………………..

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

DEDICATION

My young brothers, Pioneer Mutale, Adonija Mutale; Ducer Mutale, Amos Mutale and Tubone Mutale; sisters Grace Mutale, Piccasso Mutale and Edina Mutale; and my parents Kingston Mutale and Julia Munsaka I share and dedicate to you this piece of work, the long dream that could hardly be imagined.

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

ABSTRACT

This research was built upon the thrust to assess the factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe, citing the case of Luunga ward 1 in Binga. The objectives that drove this research were: to identify the types of social services being offered by NGOs to the community of Luunga Ward 1 in Binga District; to identify the strategies used by NGOs in the provision of social services to the community of Luunga Ward 1 in Binga District; to examine the factors that affect NGO interventions in the provision of social services to the community of Luunga Ward 1 in Binga District; and to establish how NGO social services programming in Luunga ward 1 in Binga assists in meeting the rural poor's basic social needs. The concepts NGO, social service, rural poor and communities in line with how they were contextualised in the study were reviewed. Global, African and national overview was synthesised to indicate that NGOs' presence is noted at every level in the world intervening in diverse aspects of human lives. As a human development focus, NGO social service delivery efforts were examined in the literature basing on the research objectives so as to create rapport between theory in literature and the empirical findings. A mixed research methodology was applied for this research. Both qualitative and quantitative research designs were adopted in this study. To enhance the validity and reliability, both probability and non-probability sampling techniques were employed. 40 respondents were sampled out of a target population of 236, and these involved 20 community members, 6 government officials, 4 NGO representatives, 6 ward level local leaders and 4 extension workers. Research instruments used were questionnaires, interviews with both open-ended and closed ended questions, and also observation. Empirical evidence from this research revealed that nature of Zimbabwean politics, lack of adequate funding, socio-cultural and religious issues, the legal framework, environmental factors, poor roads and communication infrastructure, community attitudes, poor monitoring and evaluation, lack of meaningful community participation, engagement and involvement, lack of ward development plan, poor coordination and the knowledge gap among others contributed significantly to the failure of NGO interventions in social service provision in Luunga ward in Binga. It was however discovered that despite the NGO efforts, the rural poor in Zimbabwe are still subjected to lack of adequate social services. The research concluded that the government, NGOs, donor organisations and communities all played a significant role in the level of success of NGO interventions in social service delivery in Luunga ward, Binga. There had been failure of adequate coordination among the partners in development. Therefore, recommendations were passed in the research that the government need to create an enabling environment for NGOs to successfully deliver social services, and also empower locals not to just wait for NGO assistance but also strive to make ends meet. NGOs need to intensify needs assessments, donor organisations need to consider that their conditions should be pro-poor, and that communities should work hand-in hand with all development partners. Therefore, the interventions need to be stakeholder wide and inclusive.

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Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

ACRONYMS

AU	African Union
BRDC	Binga Rural District Council
BRDDC	Binga Rural District Development Committee
CADEC	Catholic Development Commission
CBO	Community Based Organisation
CSO	Civil Society Organisation
EU	European Union
HIV/ AIDS	Human Immune-Deficiency Virus/ Acquired Immune-Deficiency Syndrome
MDGs	Millennium Development Goals
NANGO	National Association of Non-Governmental Organisations
NGO	Non-Governmental Organisation
PVO	Private Voluntary Organisation
SPSS	Statistical Package for Social Sciences
UN	United Nations
WB	World Bank
Zim Asset	Zimbabwe Agenda for Sustainable Socio-Economic Transformation
Zimstat	Zimbabwe National Statistics

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CHAPTER 1
INTRODUCTION

1.0 Introduction

Non- Governmental Organisations (NGOs) have long been involved in the development of rural and urban communities world-wide. At global scale NGOs do operate in various spheres of life that include human rights, advocacy, environmental management, humanitarian relief, and in social service provision. Though present in urban areas, "the reality of non-governmental development organisations has been more evident for longer in rural than urban areas" (Chatiza, 2010). Therefore, community poverty is to a large extent measured by the socially perceived necessities of life, and the availability or lack of certain goods and services (Mack and Lansley, 1985 cited by Poverty Reduction Forum Trust, 2013). The major concern underpinning this research is assessment of the factors that affect the NGO sector when intervening to provide social services to Zimbabwe's rural area of Binga, ward 1. Selection of Luunga ward 1 in Binga was based on poor social service provision in the area which is the remotest and at the periphery in the district. For the purpose of this research, social services include but are not limited to education, water and sanitation, health, social amenities, and civic protection. This chapter therefore gives an introductory note to the research by highlighting the background of the study, statement of the problem, justification of the study, research objectives, research questions, limitations and delimitations of the research.

1.1 Background of the study

The study was conducted in Binga district. Binga is regarded as one of the least developed districts in Zimbabwe, with women and children being among the poorest (United Nations, UN, 2012). According to the Zimbabwe National Statistics Agency (Zimstat) census report

(2012), 96, 2% of the population in Binga is in the rural part of the district, and there is an average household size of 4, 3 persons. Binga is the home of the BaTonga people who were victims of the resettlement from *Kasambabezi* River (well known as Zambezi) in 1957 to give way for Lake Kariba. Tremmel (1994) confirms that the BaTonga were basically neglected by the colonial government, such that there were no schools, clinics or hospitals, even as late as 1957. The study area (Luunga, ward 1) has an estimated population of 3 165 people, 1 490 of whom are males and 1 675 are females. There are 764 households with an average size of 4, 1 persons (Zimstat Census Report, 2012). Such statistical presentation portrays the levels of high dependency ratio in the area which is a clear indication of poverty. As a result, NGOs prioritised provision of social services in a bid to save lives of poor people in the district, but have since scored limited success.

Luunga ward, predominantly occupied by BaTonga ethnic group, has two chieftainships, Sinakatenge and Sinamusanga. It is located almost 150 kilometres from Binga Township to the North-Eastern direction. Luunga ward comprise of Sizemba, Luunga, Sinamusanga and fishing camps like Mujele and Sengwa. The ward is bound by the Zambian border to the North along the shores of Lake Kariba, and shares a boundary with Mashonaland west province to the east. There are only two satellite secondary schools which were both established in 2013. The area has four primary schools and one of which is a satellite opened in 2014. The schools have poor infrastructure and are poorly resourced. The ward has no healthcare centre, except for village health workers who are also not resourceful. People travel to Tyunga ward 22 to access health care, for a distance ranging from 5 kilometres as the shortest and around 20 kilometres as the longest to the nearest health care centre. Tyunga ward health care centre has low standards, characterised by understaffing and fewer medical resources. It serves about 5 794 people from Luunga and Tyunga wards combined, as depicted from 2012 population census data. People in Luunga ward 1 in Binga solely

depended on fishing and seasonal subsistence crop growing as the major economic activities. On a very smaller scale they also reared livestock. Intermittent droughts posed a threat to people's livelihoods. Hence, failure to access quality social service was exacerbated by poor living standards. Thus, external aid has been at the table in Luunga ward for decades since Zimbabwe attained its independence. People fetch water from open unprotected sources in streams during rainy season and in the river during the dry season, risking contracting diarrhoea and other communicable diseases. Only a few boreholes are functional and these experience intermittent breakdowns. According to Binga Rural District Council (BRDC) Strategic Plan (2016-2020) (not published) areas such as Luunga require piped water schemes. There are few sanitary facilities like toilets built with help from NGOs, and hence the bush system is the predominant alternative. In the area, many children managed to attend ordinary level but failed to excel beyond that level due to failure evidenced by low pass rates and lack of social support. According to Poverty Reduction Forum Trust (2013)'s analysis of the Zimbabwe Schools Examination Council (ZIMSEC) 2012 Ordinary level results indicated the decline in Zimbabwe's levels of education in the last decade. This is the status quo regardless of the presence of NGOs such as Basilwizi, Save the Children, Mvuramanzi Trust, LEAD, and Caritas (CADEC) in social services programming. Luunga ward in Binga District lag behind in terms of accessing basic social services, with notably poor and shortage of social amenities such as schools, clinics, roads and water sources. Hence, this pose concerns over the lives of the poor remote rural populace in Luunga ward in Binga. Such a background is resolute enough to outline the uniqueness of Luunga ward 1 in Binga that set this research into motion which inquired and assessed on the status quo in line with social service delivery by a host of NGOs. Below is the map showing the study area.

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Figure 1: Binga Map showing the study area
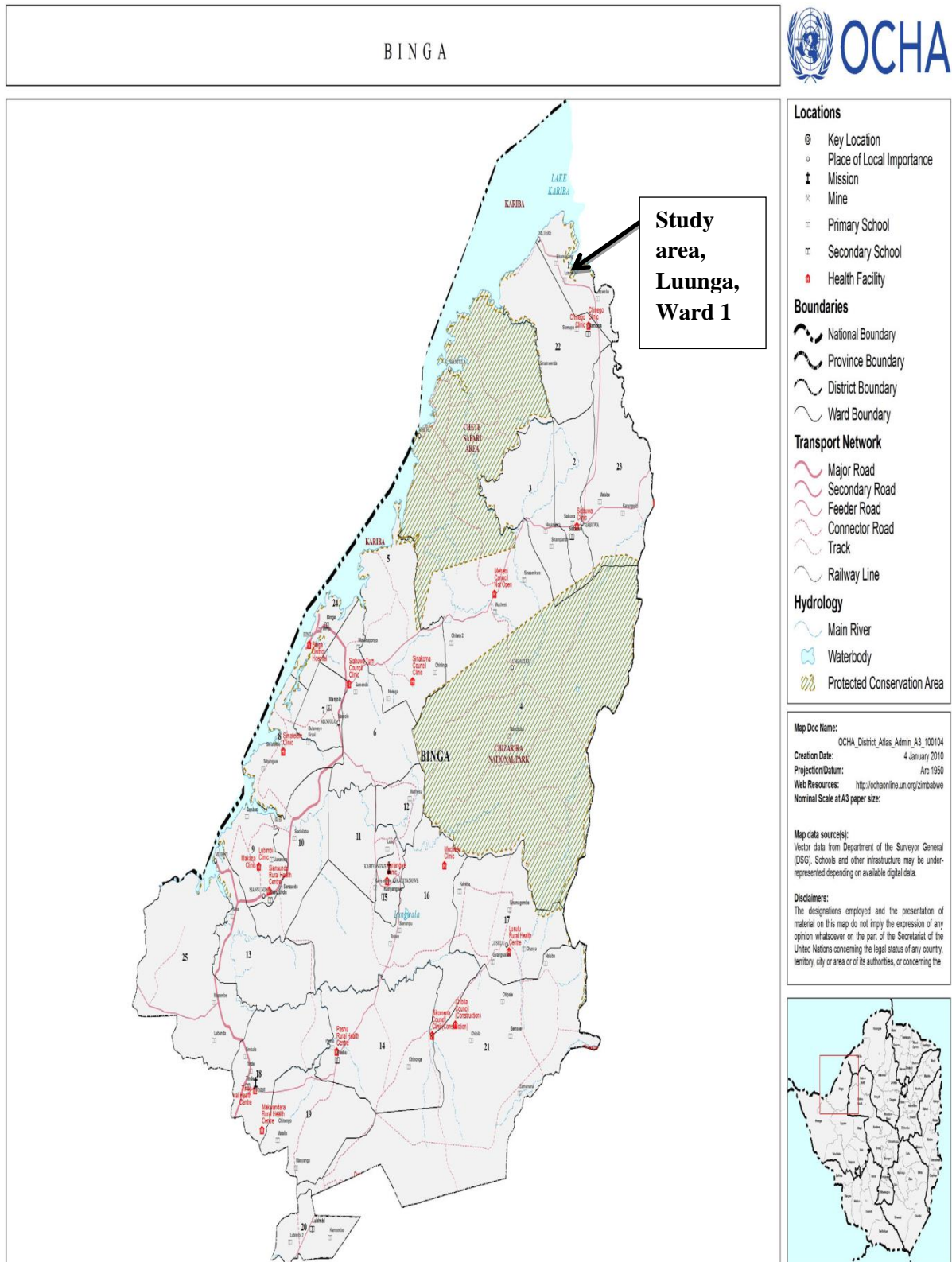
Source: Adopted from OCHA, Binga District map

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

1.2 Statement of the problem

Binga Rural District Council has failed to fully provide adequate social services like water and sanitation, education, health, civic protection; and other social amenities to the community of Luunga in Binga. The problem of poor service delivery has negatively and stringently affected mostly the poor rural populace. Deterioration of service delivery increased social vulnerability of people and hence accelerating the human suffering. Despite interventions by NGOs in the provision of social services, the success of such interventions was not much visible among the rural poor in Luunga ward, who are experiencing increased poverty. It is upon such a background that the research sought to assess on the factors which impinge on the success of the social service interventions by NGOs in Luunga (ward 1) in Binga.

1.3 Research Objectives

1. To identify the types of social services being offered by NGOs to the community of Luunga Ward 1 in Binga District.

2. To identify the strategies used by NGOs in the provision of social services to the community of Luunga Ward 1 in Binga District.

3. To examine the factors that affect NGO interventions in the provision of social services to the community of Luunga Ward 1 in Binga District.

4. To establish how NGO social services programming in Luunga ward 1 in Binga assist meeting the rural poor's basic social needs.

1.4 Research questions

1. What are the types of social services that are delivered by NGOs in Luunga ward 1 in Binga Rural District community?

2. What strategies do NGOs use when providing social services in Luunga ward 1 in Binga?

3. What are the factors that affect interventions by NGOs when providing social services to the poor people in Luunga ward 1 in Binga?

4. How do the social services brought by NGOs in ward 1 in Binga assist meeting the rural poor's basic social needs?

5. Why do rural people in Luunga ward 1 in Binga continue to endure in poverty amidst NGO efforts in the provision of social services?

1.5 Rationale/ Justification of the study

The major drive of this research was the continued shrinking of social service delivery in Zimbabwe in general and in Luunga ward in Binga district in particular. Since the government is facing challenges to meet its social services delivery mandate, NGOs snatched the opportunity to come up with projects and programmes to provide social services to the rural poor. Regardless of their efforts, NGOs left the rural people under served by social services. Hence, this research helps unearth the issues and circumstances surrounding failure by NGOs to pull out the rural poor from the pool of poverty through not only provision but also access to social services delivery. The results of the research contributes significantly to the current academic debate that informs interventions by NGOs in Luunga ward in Binga in terms of providing quality and adequate social services. Though much is documented concerning NGOs, little effort has been put to specifically check at factors that affect their operations in social service provision, a gap which this research sought to minimise. Also, this kind of research was exploratory in the area studied, hence bringing marginalised areas into the academic platform. The research further helps justify how desired impact and sustainability in social service provision to the rural poor by NGOs can be reaped in future programming. To the researcher, the study partially fulfils the academic requirements to

attain the Bachelor of Science in Local Governance Studies (Honours Degree). Midlands State University as an academic institution will gain privilege in the area of research.

1.6 Limitations of the study

This research has its limitations. However, such limitations cannot be treated to compromise the outcome of the research process, but rather to create a leeway for further research along the gaps that this research may leave; and for the researcher to design strategies to counter the limitations. This research was confined to only one ward out of the 25 administrative wards in the district of Binga. This could leave out issues in other parts of the district. Therefore, to solve such a weakness NGO representatives and other district stakeholders were involved in the study as respondents to ensure maximum representation. Again, some of the sampled respondents were illiterate and not able to fill in the survey questionnaires. This could delay the data collection process which required enough time for quality assurance. To counter this, the researcher administered the survey questionnaires for the illiterate respondents who were involved in the research. Also, the survey questionnaires were translated into the ChiTonga language which is spoken locally.

1.7 Delimitations

The study was confined in ward 1 (Luunga) in Binga district, Matabeleland North province, Zimbabwe. The research assesses the factors militating against NGOs to deliver effective social services for the rural poor in Luunga Ward 1 in Binga District.

1.8 Summary

This chapter introduces the major aim of the research which was to assess the factors affecting the success of NGOs as they intervene in social service provision in Luunga ward in Binga District. The plight of poor service delivery prompted the research to unveil the circumstances underpinning failure by NGOs to fully deliver the highly demanded but

lacking social services in Luunga ward, a poor rural community in Zimbabwe. The research notes that social service delivery scores a significantly role in indicating the levels of poverty that an area is subjected to. The next chapter therefore provides a critical review of literature on the delivery of social services at global, African and national scales so as to put the study into context.

CHAPTER 2

LITERATURE REVIEW

2.0 Introduction

The previous chapter set a background to this research. In this chapter, literature review is premised and placed on the research objectives. It focused on the review of the types of social services being offered by NGOs; strategies used by NGOs in the provision of social services; factors that affect NGO interventions in the provision of social services and expresses how NGO social services programming assists in meeting the rural poor's basic social needs. Review of literature is based on the understanding that at global, regional and national levels, rural communities suffer from poor social service delivery regardless of the NGO interventions in the sector.

2.1 Literature review

Literature review refers to evaluative report of studies found in the literature related to the selected area of research (Boote and Beile, 2005). Literature review is crucial in this research in that it assists the researcher to describe, summarize, evaluate and clarify literature (Boote and Beile, 2005). In other words, literature review puts the research into the specific context and gives an insight into what other researchers have found on the aspect under inquiry so that the research can contribute significantly to the body of knowledge. The review of literature in this context informed the researcher to synthesise researched work and acted as a tool to cross-examine the research findings. Hence, review of literature gives a theoretical basis for the research and helps the researcher to determine the nature of his research (Boote and Beile, 2005).

2.2 Conceptual framework

2.2.1 Non-Governmental Organisations (NGOs)

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The World Bank (WB) (1996) defines NGOs as private organizations that pursue activities to relieve suffering, promote the interests of the poor, protect the environment, provide basic social services, or undertake community development. Prabhakar and Latha (2011) as well define NGOs as non-profit making agencies that are constituted with a vision by a group of like-minded people, committed for the uplift of the poor, marginalized, unprivileged, underprivileged, impoverished, and downtrodden and the needy and they are closer and accessible to the target groups. From the above definitions it can be confirmed that NGOs do not constitute a homogenous sector (Kabeer, Mahmud and Castro, 2010). They are categorised into Grassroots NGOs who work directly with beneficiaries, Intermediate NGOs who are regionally based and Global/ International NGOs who work across borders in multiple countries and continents (Rensburg and Simelane, 2011). Impelled by the inadequacies of the state and the market, citizens across the globe have developed NGOs to deal with a diversity of social needs (Chakawarika, 2011). National Association of NGOs (NANGO) (2006) outlines the main characteristics of an NGO which include: independence, non-partisan and not for profit, for the good of the public and voluntary. These definitions therefore assents the foundation upon which this study is built.

2.2.2 Provision of Social services

Social services are services provided by public or private organizations aimed at addressing the needs and problems of the most vulnerable populations (Better Care Network and Global Social Service Workforce Alliance, 2015). Darling (2002) cited in Sameti, Esfahani and Haghighi (2012) identifies that many empirical studies consider health, nutrition, education, sanitation, water supply, and housing as basic functions necessary for a decent life. Rural development has always had a wider concern with health, education, participation, and social protection (Ashley and Maxwell, 2001). Rural areas, with persistent patterns of poverty and rapidly changing economies, need social service programs to support poor families as they

seek work, transition to new jobs, return to school for more training, or address mental health and substance use barriers to employment (Rural Policy Research Institute, 2008). Hence, this research founds a firm background upon the expressed social service concept which is of reference in forthcoming sections.

2.2.3 Rural poor and service provision

The terrain for defining the terms 'poverty' and 'rural' is characterised with a plethora of ambiguities, and there has been no single agreed definition, and hence contextual definitions have been used in this study. Spatial and individual characteristics of countries and regions allow for different definitions of what really is called a rural area. International Fund for Agricultural Development (2001) cited by Ashley and Maxwell (2001) agree that rural areas constitute the space where human settlement and infrastructure occupy only small patches of the landscape, most of which is dominated by fields and pastures, woods and forest, water, mountain and desert. In understanding poverty, scholars have drawn into the debate issues around poverty datum line, failure of capabilities, social exclusion, and access to resource endowments. Bradshaw (2006) puts poverty in its most general sense as the lack of necessities like basic food, shelter, medical care, and safety, which are generally thought necessary based on shared values of human dignity. Spatial inequality in poverty is most common and deepest in rural than in urban areas (Poverty Reduction Forum Trust, 2013). According to Mack and Lansley (1985, quoted by Poverty Reduction Forum Trust, 2013) community poverty is to a large extent measured by the socially perceived necessities of life, and the availability or lack of certain goods and services. The author understands and appreciates the complexities involved in measuring poverty, but for the purpose of this research lack of necessities of life is contextualised to understand the rural poor as popularised by the above definitions. Hence, the author regards the rural poor as those people staying in rural communities who struggle to meet, access and who lack the basic necessities

essential for human survival like health, education, water and sanitation, civic protection and other social amenities.

2.2.4 Defining the concept of Community

A community involves members of a group of people who have some form of collective claim over a territory and who recognise some form of collective governance (International Fund for Agricultural Development (2009). Aggarwal (n.d.: 68) cites Boothroyd (1990) who defines a community as 'a human system of more than two people in which the members interact personally over time, in which behaviour and activity are guided by collectively-evolved norms or collective decisions, and from which members may freely secede'. Lee (1992) quoted in Aggarwal (n.d.) defines community, simply as a group of people who have something in common. Hence, the community under study share the common norms and values, and wield a shared burden of social service delivery challenge despite many spirited efforts by NGOs to end poverty.

2.3 Social service delivery

2.3.1 Global overview of service delivery

Globally, poverty continues to have a rural face (World Health Organisation, 2010). Social problems of poverty, health, education and gender issues are still present in developed countries as well as in developing countries, though to differing degrees (Osborn, Cutter and Ullah, 2015). The dwindling of the delivery of social services to the rural populace is a major global concern. "By focusing essentially on social objectives and basic needs such as health, education, and water, the Millennium Development Goal (MDG) framework didn't give enough consideration to the underlying reasons for, and main drivers of poverty" (European Union, EU, 2012:17, cited in Prammer and Martinuzzi, 2013:8). In 2015, the United Nations (UN) agreed on the seventeen (17) Universal Sustainable Development Goals which need to

be attained by 2030 and social services coin part of these. Therefore, provision of social services is a development strategy (Odia and Omofonmwan, 2009).

NGOs function alongside the government as well as profit based enterprises in delivery of social services for the upliftment and well-being of the society (Odia and Omofonmwan, 2009; Allard and Martinez, 2008). The plight of rural communities in social service delivery is recognised by UN in their development debates. The topics that were regarded as most important for a post-2015 framework by UN were food security and sustainable agriculture, water and sanitation, energy, education, poverty eradication and health (Prammer and Martinuzz, 2013), and these fall under the essential social services. Development of rural areas is synonymous with social service delivery, which is currently a sorry phenomenon at global scale, despite the fact that some regions of the world are at advanced scale of accessing them. In Palestine, NGOs/Community-Based Organizations (CBOs) filled an important service delivery gap (World Bank, 2013). Hence, the reality of the factors affecting NGOs in social service delivery in the rural world communities is taken cognisance of in this research.

2.3.2 African overview of service delivery

Social service delivery in the African continent has been backsliding despite many spirited efforts to move out of the abyss. "Global poverty did not fall much, with Sub-Saharan Africa remaining the lagging region" (EU 2012:19, cited by Prammer and Martinuzz, 2013: 9). Africa has set a 2063 agenda for the eradication of poverty by year 2063, with aspiration number 1 focusing on "a prosperous Africa based on inclusive growth and Sustainable Development" (Africa Union, 2015: 6). Africa wants to see African people living a high standard of life and wellbeing; with educated citizens; where no child misses school due to poverty; citizens who are healthy; well-nourished and citizens who have long lives; rural communities equipped with modern communication, sanitation, education and health

facilities; and maintenance of healthy ecosystems (African Union, 2015:). Such concerns indicate the extent to which social service provision, especially in rural Africa is a major development focus. In the 2063 agenda, Africa called for participation of NGOs to assist in the delivery of the social services. In the social service sector, Africa has own challenges. Food insecurity and malnutrition is, as in other rural areas in the Democratic Republic of Congo (DRC), to a large extent related to distal factors including the government being unable to deliver basic services to rural areas such as agricultural support, infrastructure development, health, access to clean drinking water and education (Kismul et al 2015: 11 citing Kandala et al, 2011). Therefore, in this research factors that affect NGOs in delivering social services in rural communities took precedence.

Bassey (2008) argues that in the pursuit of solutions to developmental problems besetting the African continent, the donor community is increasingly regarding NGOs as an important agency for empowering people thereby leading to more effective and sustainable local development services than those promoted by the government. Lack of meaningful impact by NGOs points out clearly to the fact that something is wrong with the present structure and operational procedures of these organizations, especially within the Sub-Saharan African region where economic and social issues have remained persistently repressive (Ezeoha, 2006). From such a view point, this investigation was made necessary to expose the factors affecting NGOs in their social service delivery intervention.

2.3.3 National overview of service delivery

Zimbabwe experienced a deteriorating economic and social environment since 2000 (Government of Zimbabwe, 2013). Social welfare programs by the government are no longer functioning due to the macroeconomic challenges that the country is facing especially after dollarization (Poverty Reduction Forum Trust, 2013: 33). The 2013 Constitution of Zimbabwean (2013) legalises provision of basic services like education and health facilities,

water, and social amenities to marginalised areas (Government of Zimbabwe, 2013). Unfortunately, "social protection programmes such as the Basic Education Assistance Module (BEAM) have …been heavily affected by limited fiscal space and the liquidity crunch in the economy, hence adversely affecting the welfare of the poor, orphans and vulnerable children" (Government of Zimbabwe, 2013:22). Some NGOs assisted in the support of school children in terms of school fees payment, provision of school uniforms and books. In a stronger analysis, this is attributable to that BEAM in most rural areas is failing to cope with the ever-increasing number of vulnerable children in need of such assistance making the targeting and screening of beneficiaries a very complicated and complex process (Poverty Reduction Forum Trust, 2013). Significant challenges were experienced in education, health delivery, water and sanitation, development within human settlements, as well as social protection services in Zimbabwe (UN, 2011). Service delivery by local authorities in sectors such as water provision and sanitation is below acceptable standards (EU, 2014). This research then sets in motion an analytical approach to answer the question why social service provision is still below the desired standards with a set of NGOs channelling funds towards that.

More than a decade of economic decline in Zimbabwe has led to under investment in basic social services which resulted in the acute shortage of essential commodities in the social services sector (UN 2013). Health and education were adversely affected with people succumbing to cholera and other epidemic diseases, while the quality of education was compromised, as evidenced by the growing number of school dropouts and low pass rates in primary and secondary levels (Government of Zimbabwe, 2013:). Many development partners, NGOs included have drawn their attention towards reducing school dropouts and increase pass rates. It is questionable enough why rural communities are trapped in the quagmire of failure to graduate from such mishaps with a notable presence of NGOs.

Section 30 of the Constitution of Zimbabwe (2013) states that 'the State must take all practical measures, within the limits of the resources available to it, to provide social security and social care to those who are in need'. Thus people in various circumstances and the disadvantaged should access social services. Section 19 of the Constitution of Zimbabwe confirms that "the State must adopt reasonable policies and measures, within the limits of the resources available to it, to ensure that children have shelter and basic nutrition, health care and social services". The legal tone somewhat leaves a gap that needs to be filled, especially where it provides that 'within the limits of resources' as it may be difficult to determine when resources are not limited, and such terminology is very fluid and subject to manipulation by responsible authorities.

Government of Zimbabwe put the Result Based Management system into context in 2013 through the Zimbabwe Agenda for Sustainable Socio-Economic Transformation (Zim Asset), an economic blueprint with its second cluster premised on social service and poverty eradication. The president of Zimbabwe called for government ministries and agencies, the private sector and development partners, and the nation at large to work together in championing the implementation of Zim Asset (Government of Zimbabwe, 2013). This indicates the seriousness of the requirement of social service delivery as a necessary tool for ushering development in poor rural communities.

2.3.4 Situation of NGOs in Zimbabwe

The attainment of independence in 1980 ushered in a new era for the NGOs in Zimbabwe (National Association of NGOs (NANGO), 2006: 5). Immediately after independence the Welfare Organisation Act (1968) prescribed conditions of NGO registration and operation. There was a paradigm shift in the legislation of Zimbabwe where the current law setting conditions for registering NGOs falls under the Private and Voluntary Organisation (PVO) Act [Chapter 17: 05]. In Zimbabwe NGOs are categorised as PVOs and Trusts. Trusts are

registered under the Deeds of Trustee through the Deeds Registries Act [Chapter 20:05], which allows the Registrar of Deeds to register notarial deeds in donation or in trust (EU, 2014). Around 993 Civil Society Organisations (CSOs) were registered as PVOs in Zimbabwe (EU, 2014). In Zimbabwe NGOs have participated in empowering persons with disabilities, providing socio-economic needs of the elderly, children's issues, youth empowerment, environment, women and gender, human rights, health sector and poverty alleviation NANGO (2006: 4). Thus, NANGO (2006) classifies NGOs as first generation (Relief and Welfare before independence), Second generation (development NGOs after 1980), Third generation of NGOs (advocacy in 1990s), and the current status of NGOs engaged in multi-sectors including rural children's rights, advancement of women, disabled persons, HIV/AIDS, environmental protection, democracy and governance, vocational skills training, poverty alleviation to human rights, humanitarian aid and rural development. In 2004, NANGO ultimately rejected the draft NGO bill that was deemed to provide draconian rule towards NGOs. Since 2000, there was notable disruption of NGO operations in Zimbabwe (Chatiza, 2010).

Relations between the State and CSOs were constrained due mainly to mutual mistrust and hostility, in a context where civil society was often regarded by the State as an extension of opposition parties and therefore antagonistic to the government, driven by donor agendas and availability of funding, weakly linked to the citizens' constituency and highly political (EU, 2014). This is contrary to Slovenian situation where "the role of NGOs is formally recognised as an important part of the bargaining process" (Hrast, Somogyi and Teller, 2009: 116) in providing social welfare services.

2.4 Social services delivery by NGOs in Zimbabwe

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

At local, regional and international levels, NGOs intervene in delivering social services since local and national governments have failed to fully deliver these services. In their study in Bangladesh, Kabeer, Mahmud and Castro (2010) revealed that NGOs were regarded as the acceptable 'private' alternative to the state in the provision of social services, and that the government came under pressure to accept, and collaborate with, NGOs in the delivery of services such as healthcare, education, and sanitation. This is also a replica of the Zimbabwean situation where NGOs have long intervened in social service sector to assist the rural poor. In a research carried out in DRC, Kismul et al (2015) noted that in Bwamanda a local NGO has filled the gap in public service provision, by providing services such as health care, access to safe drinking water and agricultural support. In Lebanon, NGOs dominate in health care and education (Chaaban and Seyfert, 2012). In Hungary and Slovenia, NGOs have emerged as crucial partners with both the central and local governments in social welfare services as indicated by Hrast, Somogyi and Teller (2009).

"NGOs have traditionally taken on the role of gap filling; that is, taking on activities of basic education provision where the government lacks the capacity to do so or does not consider it a priority" (Ulleberg, 2009: 12). "The support that targets water, agriculture, fisheries, training, health, education, food, and microfinance, is provided by 12 national and international NGOs in Eastern Sudan" (Assal, 2008:2). The cholera outbreak of 2008 in Zimbabwe showed how non-governmental interventions have become critical to service provision (Chatiza, 2010: 19). NGOs were realised as an important platform that assisted the local authorities to handle the health sector after the economic and socio-political recession hit Zimbabwe. Chatiza (2010) notes that World Vision Zimbabwe's Area Development Programs (ADPs) have seen direct provision of social and economic infrastructure in many local authority areas. Hence, though failing somehow, NGOs are important actor in social service provision, especially in the rural areas.

2.5 Strategies used by NGOs in social service delivery

NGOs have evolved over the years in terms of the strategies used in assisting the rural poor. There were the first generation concerned with relief and welfare, second generation featured by small-scale self-reliant local development, and the recent third generation which are into sustainable systems development as advised by Korten (1987). Currently, most NGOs are in the third generation where they are involved in a series of sustainable development initiatives, though they also provide the welfare and relief services, with some promoting self-sustaining development. Through a third generation strategy, NGOs work with different partners and stakeholders, and these may include local and national governments, private enterprises, other independent sector institutions (Korten 1987). Among themselves, NGOs have also taken cognisance of consortia where two or more NGOs implement a programme, share and specialise on different project activities. In 1990 Korten discussed a fourth generational strategy in which NGOs are more closely linked with social movements and combine local action with activities at a national or global level aimed at long-term structural change (Banks and Hulme, 2012). Such strategies are in essence to coin sustainable development, which when meaningfully implemented in social service delivery NGOs could reap admired impact.

Understanding of challenges facing communities is a necessary trait in NGO social service delivery role. Kadzamira and Kunje, 2002: 22 cited by Ulleberg (2009: 13) confirm the Malawian situation where "NGOs use needs assessment and prioritisation as an entry point into the community". Nancy and Yontcheva, (2006) argue that there is not yet any cross-country empirical evidence on the actual determinants of non-governmental aid flows. In most cases, the donor informs the NGOs the programmes that have funding. "Participatory approaches are often used as a tool to involve communities in NGO-driven agendas…few NGOs have developed structures that respond to grassroots demands" (DOCHAS, 2008: 4). Many scholars have thrown failure by NGOs to involve target communities' participation in

social service programmes and projects as a cause downgrading success in their interventions. Whereas community participation and involvement is a matter of debate in the academic circle, this study sought to find other strategies through a primary inquiry, since they have a bearing on the success of NGOs in social service assistance.

2.6 Factors affecting NGOs when delivering social services to poor rural communities

2.6.1 Relationship between NGOs and National and local governments

The kind of relations existing between NGOs and National and Local Governments are characterised with suspicion, blame and attenuated autonomy. Bonye, Thaddeus and Sekyere (2013: 91) confirm that in Ghana the relationship between the government and NGOs has not always been cordial. The political environment varies across countries and regions where in some it is friendly and in others NGOs find it hard to get through. In Zimbabwe "there is still lack of cohesion and social trust between state and non-state actors" (Basilwizi Trust, 2010: 37). In a plurality of circumstances, relations between the state and NGOs remain a line of controversy that come to affect the social service delivery option by NGOs.

2.6.2 Accountability and transparency issues

NGOs face complexities in their accountability since they need to be accountable to many different sets of stakeholders which, separately and collectively, play an integral part in their operations, and these include institutional donors who provide funding; governments who provide legal and regulatory frameworks; supporters who provide their money and time; and beneficiaries who provide the basis for an organization's purpose and moral legitimacy (Lloyd and Casas, 2006). There are allegations that NGOs wear a mask of humanitarianism while corruption characterizes their activities (Bonye, Thaddeusand Sekyere, 2013). NGOs have frequently been found to lack accountability in the sense that their clients and beneficiaries have little influence over the NGOs' operations and/ or decision making

(Holmén and Jirström, 2009). Thus, accountability and transparency factor is paramount in assessing the factors affecting NGOs in delivering social services to the rural poor. This raises a question that, 'to whom does NGOs prioritise their accountability and transparency?'

2.6.3 NGO programming bias

NGOs have been involved in the duplication of activities and efforts in many countries of the world. Some parts of the communities are not easily accessible and hence NGOs and the government shun such areas that are really in dire need of social service delivery. In some instances, NGOs presume the interventions required. This is why Mpofu, (2012) argued that NGOs come to Zimbabwe with predetermined programmes and always give conditionalities in the provision of aid. Some NGOs' recommendations on development can easily be biased toward their own limited experience of their home countries, false assumptions or taken from the experiences of few countries (Mpofu, 2012). Assumptions and limited experience dwindled NGO performance in social service work.

2.6.4 Community participation and involvement

Participation and involvement of target communities is paramount though lacking somehow in NGO social service programme interventions as rose from literature. The community members do not have a prerogative to identify and decide precisely on what they want from the NGOs so as to avoid one size fits all solutions (Mpofu, 2012). Though community participation and involvement remain in theory than practice, evidence from research issues that meaningful participation and involvement of target communities can reap the benefits associated and can assist NGO's social service interventions. This is because participation stimulates knowledge and understanding among community members and attracting success in NGO interventions.

2.6.5 Knowledge gap

Williamson (2009) identifies the knowledge problem by both the donor and recipients of aid, who rely mostly on the bureaucratic structures to obtain knowledge necessary for local development. Holmén and Jirström (2009: 436) cite Lockwood, (2005: vii) who confirms that 'NGOs are no think tanks', they often make ideologically biased but misinformed 'analyses' of local realities. Keene (2007) outlines social incompatibility as a flaw, where outsiders interfere in the affairs of communities and states, but to do so without first attempting to understand and respect the existing context and be guided by local knowledge is both arrogant and absurd. The knowledge gap itself gives weight to explain the contextual failure of NGOs to succeed well in the social service delivery.

2.6.6 Donor or aid agency question

Aid agencies regularly make threats to the recipient countries stating that their aid will be lessened or suspended unless they use the funds only for the intended purpose (Mpofu, 2012). This indicates the highest levels of tight funding control thrown by donors upon NGOs. As a result, NGO innovation may become a rare phenomenon, and NGO performance may be measured in terms of compliance with donor priorities, not their responsiveness to the needs of their beneficiaries and partners (DOCHAS, 2008). Donors set conditions, priorities on the kind of programmes to fund and also determine what NGOs should achieve, but they are too remote to determine the affairs of the rural communities' interventions in the social service sector, hence affecting social service delivery interventions by NGOs.

2.6.7 Increased rural poverty gap

Rural communities face extreme cases of deprivation in accessing the required social services. NGO targeting failed to close the poverty gap which is very wide across rural communities. Reviewed literature does not provide satisfactory position on why NGOs are failing to close the rural poverty gap. Targeting the rural poor in the fight against poverty is a major challenge for development practitioners when everyone in the village is bartered by a

failing macroeconomic system (Poverty Reduction Forum Trust, 2013). To strike a balance, this study had to provide a vivid investigation on the matter.

2.6.8 Stakeholder coordination

At the World Bank it was realised that there is still precious little real will to be equal partners; more often than not the input of NGOs or civil society has been thought of, if at all, as "window dressing" or an afterthought, which is often required to appease other governments in international financial institutions (Stillman, 2006). The criticism of NGO work has been fuelled by bad experiences such as badly coordinated or ineffective NGO interventions (DOCHAS, 2008), and NGOs 'have shown little ability to form equitable relations, or true partnership, among themselves' (Fowler, 1998: 137; Bhatia, 2000; Chapin, 2004; Kapoor, 2005 cited by Holmén and Jirström, 2009: 435-436). Lack of adequate coordination among NGOs further strains the efforts of social service interventions among the rural poor communities, hence, the rural poor remain trapped in poverty.

2.6.9 Political factors

Civil society has gone through a polarising and traumatic experience characterised by disruption of operations, harassment, and blanket banning of activities and centrally fettered engagement with local government in Zimbabwe (Chatiza, 2010). On the other hand, NGOs in most developing countries are used to advance political/personal interest (Ezeoha, 2006). Such an instance signifies the difficult milestones that NGOs undergo in delivery of social services in rural communities. NGOs working in politically polarised countries are disturbed in their social service delivery activities.

2.6.10 Religious, traditional, social and cultural factors

Rural communities share varying cultural, social and religious set ups, which have influenced the outcome of NGO interventions. Though there are aid agencies which are offering compassionate assistance to the cultural communities in Zimbabwe in the areas of food aid,

education, and HIV/AIDS, some NGOs' agenda are simply judgments by donor countries on the Zimbabwean cultural communities aimed at dislodging the indigenous cultures (Mpofu, 2012). Sensitivity to culture and religious background of communities is a prominent causality for the success of NGO work in social service assistance.

2.6.11 Legal factors

A new government in the donor country may change the aid policy. For instance, Danish aid to Malawi was withdrawn in 2004 three months after a change of government in Denmark; there was no exit strategy, and village health initiatives were simply abandoned (Barber and Bowie, 2008). Chatiza (2010) confirms that in Zimbabwe, the non-governmental development organisations, under the leadership of NANGO, robustly resisted against the draft NGO bill in 2004, which sought to provide unfriendly environment for NGOs once passed into law, indicating the extent to which NGOs' operations in social service interventions can possibly be affected by the country's legislation. The legal instruments in Zimbabwe are not much friendly for NGOs to fully exert their potential to provide social services to the rural populace. Such examples are the Access to Information and Protection of Privacy Act (AIPPA), and the Public Order and Security Act (POSA) which reduces civil liberties to assembly. The conditions set upon them signing of Memoranda of understanding (MOU) reduce the autonomy of NGOs, who are mostly on the wanting side. Therefore, when assisting in the delivery of social services, NGOs divert their attention to the demands of those controlling them.

2.7 NGOs in meeting the rural poor communities' social needs

NGOs are major players in development aid today (Holmén and Jirström, 2009). Private, NGOs are channelling an increasing share of development assistance, who according to their proponents, care about the most vulnerable populations and represent the voices of the poor (Nancy and Yontcheva, 2006). With the persistent high level of poverty, hunger and diseases

in developing countries, the critics seem to have had their ways (Ezeoha, 2006). NGOs operate individually and collectively at all levels of society and have impact on many aspects of people's lives, including social opportunities (Nelson, 2007).

Though the NGO interventions are diverse and wide, their assistance in social service delivery attracted the concern to investigate if they were able to meet the poor's basic social needs, particularly in the rural world. There has also been a marked shift in orientation from relief and charity work towards a more pronounced role as development agents in diverse physical, social and cultural settings (Holmén and Jirström, 2009).Meyer, 1995 cited by Nancy and Yontcheva, 2006) opine that official agencies support NGOs in providing welfare services because of their assumed cost-effectiveness in reaching the poorest, and those NGOs are also seen as representative of the poor and most vulnerable.

NGOs have played an important role in addressing the social needs of communities and have pushed for long lasting and sustainable development (International Institute for Sustainable Development (IISD), 2013, cited by Eusebius, Mengo, and Brendon, 2014:3). The engagement of some NGOs in training and capacity building programmes is one positive step, but for local communities such soft programmes do not make sense when there is no food on the table (Assal, 2008). Hence, the challenge of communities understanding of NGO work against their expectations brews a mist in the development framework of rural backgrounds.

2.8 NGO efforts in social service delivery versus the recurring rural poverty

The tendency for NGOs to compete for visibility, clients and influence, and representation often leaves a lot to be desired (Holmén and Jirström, 2009). They have become more as competing agents than complementing social service providers, with each NGO pursuing its own agenda. NGOs may be able to provide humanitarian assistance, but they are not the

"magic bullet" in the development process (Williamson, 2009). Ulleberg (2009) argues that the common obstacles associated with NGO interventions are linked to the difficulties in scaling-up and ensuring sustainability because their action is local, implemented on a small scale and project based, hence such projects have proved to be short-lived. Therefore, "the impression has been created that NGOs are more interested in flag waving and fundraising than in upholding the moral values that their mission statements portray" (DOCHAS, 2008: 8). According to Assal (2008) research, there were delays of cash flows affected the implementation of the programme work-plan. These inconsistences delay the capability of NGO social service interventions to succeed. Africa despite vast differences among the NGOs most shares a common challenge of unlimited needs chasing limited resources (Batti, 2014).

A classic flaw of development projects and perspectives is the ignorance of project planners of the historical, political, social, economic and environmental contexts of a given community, country or region (Keene, 2007). Yet another way in which context can be ignored or inadvertently disregarded is if project planners fail to conduct multidisciplinary preliminary assessments before planning and implementation (Keene, 2007). This results in programmes that run parallel to community social service needs.

Assal (2008), in a research carried out in Sudan argues that it is not the fault of NGOs alone. The author identifies that the literature is skewed with blaming the NGOs. "While local level problems…contribute to the re-creation of dependency, the blurred lines between humanitarian assistance, security and development affect the ways aid agencies carry out their work" (Assal, 2008:2). "NGOs are not operating in poor countries primarily to save lives, but to satisfy their donors", and so, "if their behaviour is to be influenced, we need to start with the donors" (Barber and Bowie, 2008:751). On the other hand, failure to achieve the intended objectives is a result of the "government tendency to abdicate its responsibility

and leave the welfare of vulnerable citizens to NGOs" (Assal, 2008: 6). Communities have own challenges too that affect their access to social services.

In a research conducted in Sudan by Assal (2008) awareness-raising was absent from the programmes of NGOs, especially in rural areas. One Traditional authority delivered that due to poverty and other pressures, traditional leaders became toys in the hands of the government (Assal, 2008). By ignoring existing community structures and creating new ones, NGOs appear as if they do not trust the ability of local communities to address their problems (Assal, 2008). Hence, communities face lack of ownership and support of social service interventions. Such a phenomenon is catastrophic and may compromise the efforts to address the growing rural community social service needs.

2.9 Summary

The discussion brewed the diagnosis of the literature that sought to link with the objectives of the research. The major findings from reviewed literature indicates the presence of NGOs in most rural communities of the world, with the mandate of delivering social services mainly education, water and sanitation, health, and civic protection. Synthesised literature promulgates that the donor community, national and local governments, the targeted poor rural communities and NGOs themselves were to somewhat diagnosed since they each pose contribution towards inhibiting success of social service delivery by NGOs. The basic argument is therefore analysed with reference to the political, socio-cultural and religious, economic, legal and environmental connotations. Hence, the next chapter explores the methodology adopted to inquire how the identified and other factors manifested in Luunga ward 1 in Binga District.

CHAPTER 3

RESEARCH METHODOLOGY

3.0 Introduction

In the preceding chapter, the researcher reviewed related literature with the aim of contextualising the factors affecting NGOs in delivering social services in poor rural communities. This chapter appraised the concept of research methodology, and denotes how the adopted methodology answered the questions under assessment. The research adopted triangulation methodology to enhance validity and reliability of its findings. Hence, issues pertaining to poor social service delivery in poor rural communities in Zimbabwe remain pertinent and informed the methodological approaches used in this study.

3.1 Research methodology

Research methodology refers to the procedures by which researchers go about their work of describing, explaining and predicting phenomena (Rajasekar, Philominathan and Chinnathambi, 2013). The use of any research methodology should match the underlying questions being asked (Garcia and Gluesing, 2013). Research methodology is crucial in that it provides researchers with the necessary training in choosing methods, materials, scientific tools and training in techniques relevant for the problem chosen (Rajasekar, Philominathan and Chinnathambi, 2013). Kelly (2011) confirms the elements of research methodology as including overall approach and rationale; site and sampling method, research methods and data analysis procedures adopted, and these elements are therefore explained below.

3.2 Research design

Purposive selection of case of Luunga ward was premised on the cognisance of the social service challenges that the community face despite decades of social services delivery by NGOs. Case study is simply an in-depth study of a particular instance, or a small number of

instances, of a phenomenon (Hyde, 2000). A research design provides a framework for the collection and analysis of data (Kelly, 2011). In this research both quantitative and qualitative research designs were used. Quantitative data were collected using the survey questionnaires, and interviews and observations enabled collection of qualitative data. The pluralist position insists that both quantitative and qualitative strategies are equally valid since their different instruments of data collection and analysis capture different aspects of the social world (Kelly, 2011). Therefore, triangulation is encouraged in the current researches, and this study applied it to control its validity, meaningfulness, quality, credibility and reliability in the field of research. A Q-squared approach is that combinations of approaches permit the strengths of both approaches to be captured and that some of the weaknesses of a single approach are avoided or overcome (Hulme, 2007). Again, triangulation enhances the verification of qualitative analysis, adding depth and breadth to understanding of the issue under investigation (Yilmaz, 2013).

3.2.1 Qualitative Research Design

Qualitative research is an emergent, inductive, interpretive and naturalistic approach to the study of people, cases, phenomena, social situations and processes in their natural settings in order to reveal in descriptive terms the meanings that people attach to their experiences of the world (Yilmaz, 2013). Therefore, it seeks to provide in-depth, detailed information which, although not necessarily widely generalizable, explores issues and their context, clarifying what, how, when, where and by and among whom behaviors and processes operate while describing in explicit detail the contours and dynamics of people, places, actions and interactions (Tewksbury, 2009). In other terms, qualitative research, broadly defined, means any kind of research that produces findings not arrived at by statistical procedures or other means of quantification (Strauss and Corbin, 1990, cited by Golafshani, 2003:600 and Yilmaz, 2013). According to Hulme (2007:14) the strengths of qualitative methods are that

open-ended questioning reveals new or unanticipated phenomena, they provide a rich picture of social phenomena in their specific contexts thus revealing critical incidents, provides deeper insights into causes and direction of causal processes, and they provide a holistic interpretation of the detailed processes that have and are shaping people's lives. In this research, qualitative approach was chosen to better understand a topic by studying it simultaneously (triangulation) or concurrently with both methods (mixing quantitative and qualitative methods) as conveyed by Ospina (2004).

3.2.2 Quantitative Research Design

Quantitative research is defined as research that explains phenomena according to numerical data which are analysed by means of mathematically based methods, especially statistics (Yilmaz, 2013). Quantitative approaches are characterised by studies that apply mainly statistical analysis to data collected by standardised questionnaire(s) through survey methods that has been numerically transformed (and simplified) and that comes from a sampling frame that indicates it is representative of a broader population (Hulme, 2007: 6). Though quantitative data provides no detailed explanation, it indicates the extent to which the problem under study is widespread in numerical terms, a point which quantitative analysis can yield advantage of in this research.

3.3 Study area/ setting

The research was conducted in Luunga ward 1 in Binga District. The area was selected purposively since the problem of poor social service delivery is widespread there, regardless of the NGOs that assisted in delivering social services.

3.4 Target Population

Population refers to subjects that represent the whole group under inquiry. It is a group of elements or cases, whether individuals, objects, or events, that conform to specific criteria

and to which one intends to generalize the results of the research (McMillan, 1996). Under this study the target population were community members of Luunga Ward in Binga, but NGOs, district and ward level (local leaders) key informants, government extension workers and community members were sampled for the research. Selection of a wide range of groups in the study was aimed at acquiring perspectives of the various stakeholders in order to solicit and triangulate the responses towards the research objectives and answering the research questions. Below is a table showing the sampling frame.

Table 1 Sample size and sampling techniques

Population Category	Target Population	Sample size	% of sample	Research instrument	Sampling technique
Extension workers	8	4	50	Semi-structured Interviews	Convenience sampling
NGO representatives	8	4	50	In-depth interviews	Simple random sampling
Community members	200	20	10	Survey questionnaires	Stratified Random sampling
District level key Informants	10	6	60	Key informant interviews	Purposive sampling
Ward level local leaders	10	6	60	Key informant interviews	Convenience sampling
Total	**236**	**40**			

Source: Field survey data, 2016

3.5 Sample size and sampling methods

A sample is a group of subjects from whom data are collected (McMillan, 1996:86). On Probability sampling was employed for some samples whereas non- probability sampling was employed for other samples. This was done to reap value of employing different sampling techniques to enhance validity and reliability of the research. A sample size of at least 10% of the target population is justifiable for a research as it is representative enough and hence can be generalised over a huge population. Udofia and Nkereuwem (1995) cite Roscoe (1975) who argues that there are few occasions when samples less than 30 and larger than 500 in sizes can be justified. Hence, sample sizes larger than 30 and less than 500 are appropriate for most of researches (Roscoe, 1975). Justified from this, 40 respondents were sampled and reached for this research. The respondents were drawn from the various categories that included 4 NGOs, 6 Government ministries and departments, 6 ward level local leaders, 4 extension workers and 20 community members. This was primarily deliberated to collect responses on the factors affecting NGOs in social service delivery in Luunga ward from various angles so as to reach informed and reliable conclusions and proffer realistic recommendations. The researcher applied probability sampling on some samples and non-probability sampling techniques on others. This assisted triangulation of research results to fortify the meaningfulness and feasibility of the research to meet the set objectives. Data collected was on the types of social services offered by NGOs in Luunga ward, factors that affected NGO operations in social services provision, strategies used in the interventions, and how poor people in Luunga ward in Binga benefited from the social service interventions.

3.5.1 Probability sampling
Citing Henry (1990: 25), Latham (2007) understands probability sampling as having the "distinguishing characteristic that each unit in the population has a known, nonzero probability of being included in the sample". Probability sampling therefore improved the quality of data collected and acquainted the validity and reliability of the research due to wide

representation of the whole population depicted from equal selection chances in the research process, hence reduced discrimination of research respondents. It is important to give everyone an equal chance of being selected because it "eliminates the danger of researchers biasing the selection process because of their own opinions or desires" (Frey, et al. 2000:126 quoted by Latham, 2007). The two types of probability sampling, simple random and stratified random, were selected for this research.

3.5.1.1 Simple/ straight random sampling

Simple random sampling require that each member of the population has an equal chance of being selected (Latham, 2007), thus increasing the probability of inclusiveness of all the characteristics under study to eliminate bias. Simple random sampling was applied to NGOs. A simple random sample is selected by assigning a number to each member in the population list and then "use a random number table to draw out the members of the sample" (MacNealy, 1999: 155 cited by Latham, 2007). The strengths of simple random is that it is usually representative of the population, easy to analyse and interpret results, and easy to understand (McMillan, 1996). However, the weakness of simple random is that it has larger sampling error than in stratified sampling McMillan (1996). Hence, the researcher set stratified sampling into roll in this study to counter such a flaw.

3.5.1.2 Stratified random sampling

Community members were selected using stratified random sampling that aimed at obtaining data from people from different villages in order to control the quality of data collected in relation to this particular research. Stratified random sampling is one in which the population is divided into subgroups or 'strata,' and a random sample is then selected from each subgroup (Fink 1995 cited by Latham, 2007). The subgroups were assumed to be representative enough for the target population under study, with all the desired characteristics to fulfil the research objectives, answer the research question and give solution

to the research problem. Stratified random sampling is divided into proportionate and disproportionate. Proportionate stratified uses the same fraction for each subgroup and disproportionate uses different fractions for each subgroup (Latham, 2007). This research adopted the disproportionate stratified random sampling due to different group demographics from each village. According to McMillan (1996) the technique allows sub group comparisons, usually more representative than simple random, fewer subjects needed, and assures adequate numbers of elements in each subgroup. The author pointed the weakness of disproportionate random sampling that it is less efficient for estimating population characteristics. As contingency, the researcher applied nonprobability based sampling techniques for the district key informants and extension workers.

3.5.2 Non probability sampling

In non-probability sampling items under study do not have equal chance or probability of being selected. Thus, for the purpose of this study the researcher used purposive and convenience sampling techniques. Non-probability sampling techniques allowed the researcher to target the government officers, extension workers and local leaders who were assumed to provide required data due to their experiences in the social services sector. The advantage of non-probability sampling is that it is a convenient way for researchers to assemble a sample with little or no cost (Babbie 1990 cited by Latham, 2007).

3.5.2.1 Purposive sampling

Purposive sampling is selecting a sample "on the basis of your own knowledge of the population, its elements, and the nature of your research aims" (Babbie 1990: 97 cited by Latham, 2007). Irrespective of the kind of unit of analysis, the main aim of purposeful sampling in qualitative research is to select and study a small number of people or unique cases whose study produces a wealth of detailed information and an in-depth understanding of the people, programmes, cases, and situations studied (Yilmaz, 2013). Purposive sampling

was carried out to district key informants. The researcher was able to select participants based on internal knowledge of said characteristic (Latham, 2007), that they were knowledgeable about NGO social service delivery activities in Luunga ward. This allowed the researcher to quickly reach the targeted sample and this was convenient for the researcher who lacked adequate resources to spend a lot of time in the survey. In other terms, purposive sampling adds credibility to qualitative research and also allows receipt of needed information (McMillan, 1996).

3.5.2.2 Convenience/ accidental sampling

A convenience sample is a group of subjects selected because of availability (McMillan, 1996). Convenience sampling is a sampling technique that allows the researcher to rely on readily available respondents in a survey. This was employed on ward level key informants and the extension workers. The technique was of advantage in that it reduced cost in time and resources for the researcher to reach the respondents. Though there is no precise way of generalizing from a convenience sample to a population (McMillan, 1996), the technique was complemented with other sampling techniques in this research as a means to counter any irregularities involved.

3.6 Data collection methods and instruments

Use of different data collection tools for each sample unit was important for eliminating bias and gave a comparative advantage to the validity and reliability of the research. Thus, the weakness posed by one data collection tool was solved by the other technique. In collecting data the researcher's role was to deliver and collect, and at times administering the questionnaires and also carrying out the interviews. To solicit research results the researcher executed a literature search on the factors affecting NGO activities in social service interventions. Observation also gained precedence in collecting data. All the research tools used were developed by the researcher to answer the questions under inquiry.

3.6.1 Interviews

Interviews are (typically) structured conversations that researchers have with individuals (Tewksbury, 2009: 43). They remain the most common data collection method in qualitative research and are a familiar and flexible way of asking people about their opinions and experiences (Moriarty, 2011). The researcher employed a mixture of both open and closed ended questions, with face-to-face interviews. Closed ended questions allowed the researcher to prove the predetermined standpoints in a research. Open-ended responses let the researcher understand and present the world as it is seen and experienced by the participants without predetermining those standpoints (Yilmaz, 2013). Hence, utilising the two allowed the researcher to gain comparative advantages for each of the questioning techniques and hence verifying the quality of the study. Again, Interview data is "richer" than quantitative data in that not only does the researcher learn how the interviewee sees and knows something, but so too does the qualitative researcher get an explanation of that observation or knowledge (Tewksbury, 2009: 44). For qualitative data Key Informant interviews were conducted for stakeholders at district and ward level local leadership. Interviews were selected basing on their advantage that the researcher could probe to get more details of the aspect under inquiry. In depth interviews for the NGOs that operated in Luunga ward were conducted. The in-depth interviews aimed to get close to the subjects' view of the social world (Kelly, 2011). For government extension workers, semi-structured interviews were used.

3.6.2 Survey questionnaires

In collecting quantitative data there was use of questionnaires for community members in Luunga ward, some of which were translated into the local language (*ChiTonga*) for understanding and avoiding discrimination based on language. The questionnaires used involved both closed ended and open ended questions. The results of closed-ended questionnaires help the researchers to identify a general pattern of participants' reactions (Yilmaz, 2013: 313). Closed ended questions depicted the circumstances under search from

researcher's view point whereas open ended questions sought explanation from the standpoint of the respondents.

3.6.3 Observations

Observation is a qualitative research technique where the researcher observes the aspect under study. The researcher observed some factors that affected NGO interventions in Luunga ward 1 in Binga, and photos were captured to support observation. The actual data that an observational researcher collects (and later organizes and assesses for analysis and interpretation) are notes that the researcher takes while doing observation (Tewksbury, 2009: 45). Respondents' actions and body language were observed by the researcher since they provided insight into respondents' expression of their responses. Compared to interviews, observation gathers naturally occurring data to gather first-hand information about social processes (Silverman 2006 cited by Moriarty, 2011: 10). Data from observation were integrated with one from questionnaires and interviews for deep insight.

3.6.4 Content analysis

Secondary data was collected from sources like journal articles; textbooks; government, NGO, and United Nations Reports and Newspapers among them. Content analysis is the examination of some form of media or communications for purposes of identifying how such messages reflect construct and are a part of culture (Tewksbury, 2009). Content analysis can provide data that can be analyzed using both qualitative (interpretive) and statistical approaches (Tewksbury, 2009). Content analysis enhanced the significance of the research by asserting the linkage of issues for high quality information relevant for the study.

3.7 Data presentation, analysis and discussions

Data analysis is an on-going, inductive process where data are sorted, sifted through, read and reread (Castellan, 2010). The tone of data presentation and analysis focused on both qualitative and quantitative approaches. Quantitative data analysis involves deductive

process and statistical procedures whereas qualitative data analysis involves inductive process: codes, themes and patterns to theory (Castellan, 2010). Pie chart, tables and line and bar graphs were used to present quantitative data that was obtainable through this study on age, and period of work at an organisation. Data on frequency at which an NGO was mentioned, period of stay of community members in Luunga ward, types of social services provided by NGOs, responses on who came up with projects in social service interventions by NGOs, NGO accountability and transparency, and what NGOs have done were quantified as obtained from questionnaires. Statistical package for social sciences (SPSS), a software package meant for analysis of social science data was used to analyse quantitative data. Qualitative data from questionnaires, observations and interviews were grouped, integrated, generalised, interpreted and sifted to deduce meaning. Qualitative and quantitative data were both merged and analysed to be meaningful. Content analysis of secondary sources complimented the primary data.

3.8 Ethical considerations

Research ethics were greatly appreciated, prominently observed and promoted during the study. Relevant authority was sought from the District Administrator and Binga Rural District Council to gain access into the district, and from the Ministry of Primary and Secondary Education for access into schools. The researcher always sought informed consent from the respondents before administering the research tools. Thus, Moriarty (2011: 25) informs that "researchers… need to let participants know about the broad areas of their enquiry. This reduces the likelihood of … 'unintended disclosure' in which participants reveals something they had not intended to let the researcher know about". Also, confidentiality was fostered in that respondents' names were neither recorded anywhere, and collected data were applied solely for academic purposes. Plagiarism was extremely avoided by acknowledging every source as a means of respecting other scholarly work.

3.9 Summary

This chapter took a synthesis into the research methodology that underpinned this research. It relayed the processes, procedures, methods and approaches used in the research to find out the factors that affected NGO interventions in social service delivery in Luunga ward 1 in Binga district, one among the rural communities. Both qualitative and quantitative research techniques were adopted in this research, as a measure to counter the flaws by each approach to come up with comprehensive analysis of the research findings. Triangulation of research methodology justified the quality of the data obtained and the analysis that both quantified and qualified the research results. This assisted the researcher to reach the units under study that involved government officers, extension workers, local leaders, NGO representatives and the community members. Ethics were greatly apprehended as the researcher collected data through interviews, survey questionnaires, observations, and content analysis of literature. Hence, chapter 4 chapter details on presentation and analysis of collected data.

CHAPTER 4

DATA PRESENTATIONS, ANALYSIS AND DISCUSSIONS

4.0 Introduction

This chapter presents data collected from the field. Data were grouped, sorted and analysed. A check on the co-relationship between the research objectives and the actual findings was established in this section. Also, this part of the study established the link between the reviewed literature in the preceding section and the actual findings from primary research. Graphs, pie charts and tables were used to present quantitative data. Analysis of data was important in that the researcher managed to summarise and deduce meaning that was important for this research. The researcher put much effort in ensuring that no respondent's details were captured which could allow them to be traced. Qualitative data were coded to protect privacy and confidentiality of the respondents, and coding went as follows: D1 for district Key informants (government officers), N1 for NGO representatives, C1 for community members, W1 for ward level key informants (local leaders), and E1 for Extension workers.

4.1 Response rates analysis

Using village registers, community members were traced, grouped and sampled from the list of 5 villages (56%) out of the 9 registered villages in Luunga ward. Extension workers, government officers, and NGO representatives were traced at their work places. Table 2 below indicates the response rates of the sampled groups.

Table 2: Response rates

Sample group	Research tools used	Planned quantity of	Actual completed tools	Response rate

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

		research tools		
Extension workers	Interviews	4	4	100 %
NGO representatives	In-depth interviews	4	4	100 %
Community members	Survey questionnaires	20	20	100 %
District level key informants	Key informant interviews	6	6	100 %
Ward level local leaders	Key informant interviews	6	6	100 %
Total		**40**	**40**	**100 %**

Source: Field data, 2016

100% response rate was noted for all categories of sampled respondents. This was because the researcher made adequate effort to reach all the respondents. 100% response rate from the questionnaires was because time was allowed for the respondents to answer the questions through self-administration, but 10 % of the questionnaires were returned whilst partially completed. All community members sampled had more than ten years of staying in Luunga ward 1 in Binga. Also, the researcher administered the questionnaires (50%) to some illiterate community members. This served time required to collect data. Sampled NGOs consisted of 2 PVOs, 1 Trust and 1 CBO. The 100 % response rate reduced bias and gave assurance to the validity and reliability of research findings.

Table 3 below shows respondents by sex.

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

Table 3 Respondents by sex

Category	Males	Females	Total
Government extension workers	75 (%)	25 (%)	100 (%)
NGO representatives	75 (%)	25 (%)	100 (%)
Community members	50 (%)	50 (%)	100 (%)
District level key informants (government officers)	83 (%)	17 (%)	100 (%)
Ward level Key Informants (local leaders)	67 (%)	33 (%)	100 (%)

Source: Field survey data

Gender disparities have been noted in samples involving government officers, NGO representatives, Ward leaders and extension workers indicating greater gender imbalances in such positions in Binga District in general and Luunga ward in particular as portrayed by low percentage of women in these fields. However, the researcher mainstreamed gender upon sampling community members where both males and females had equal representation and avoided discrimination based on gender differences. Such gender imbalances create a negative bearing on community development, and also indicate prevalence of poverty among women who lack representation in governance positions in society.

In figure 2 below, respondents are categorised by age. This helped the researcher to examine perceptions of poverty and development from different age categories of the various respondents.

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

Figure 2 Ages of respondents
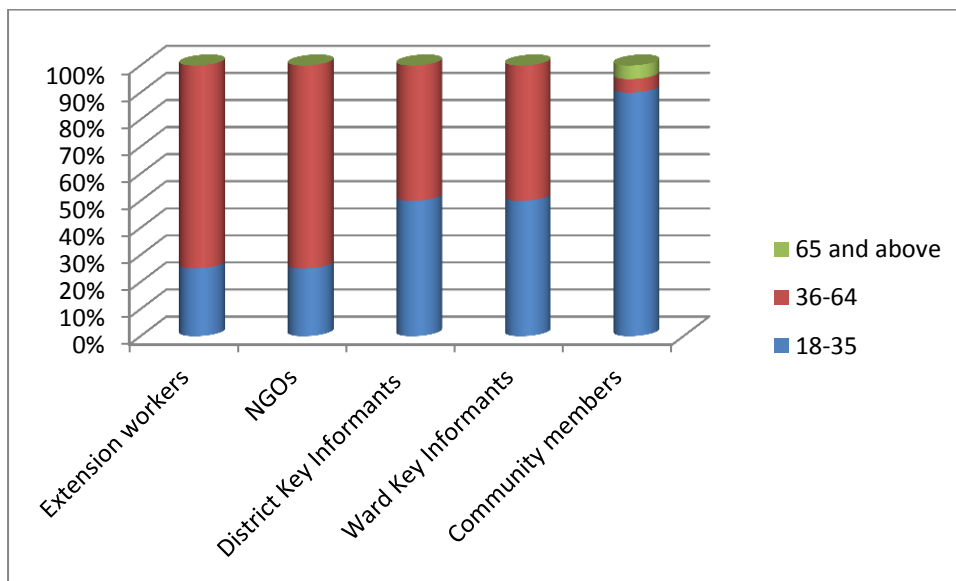
Source: Field data

65% of the respondents were in the range of 18 to 35 years of age, followed by those aged between 36 to 64 years (32.5%) and those 65 years and above (2.5%). Such figures signify that people aged between 18 to 35 years (youthful age) are mostly affected by the demand for social services which NGOs offered. Their failure to fully participate from the initial project stages compromised the outcomes and impact of the projects. Hence, considering the active age which is able bodied to fully participate in social service delivery projects is paramount, hence their exclusion from meaningful participation neglects development focus of rural communities.

Figure 3 below indicates the period that NGO representatives respondents worked at the NGO, expressed in percentage.

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

Figure 3: Period working at the NGO
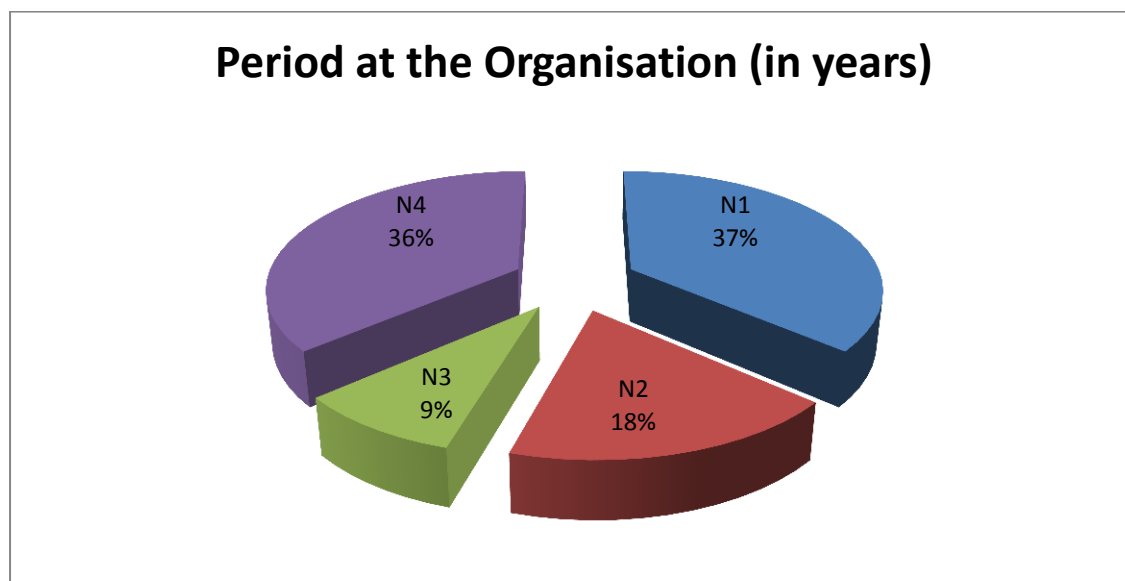
Sources: Field Data, 2016

Data on the period working at an NGO was collected so as to value the informant's experience in working with the communities whilst at the organisation with reference to the factors that negatively inhibited against their social service programmes in Luunga ward. Data presented in figure 3 depicts that most of the respondents were able to answer questions basing on their experiences, thus qualifying the research findings.

Table 3 below shows NGOs that operated in Luunga ward between 2006 and 2016.

Table 4: NGOs that operated in Luunga ward since year 2006

NGO	Frequency
Basilwizi	12 (%)
Save the children	14 (%)
Mvuramanzi trust	12 (%)
Caritas (Catholic Development Commission, CADEC)	14 (%)
Campaign for Female Education (CAMFED)	14 (%)
Kulima Mbobumi Training Centre (KAMTC)	13 (%)

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

Linkages For Economic Advancement of the Disadvantaged (LEAD)	9 (%)
Matabeleland AIDS Council (MAC)	8 (%)
Other (Christian Care, UNICEF, SNV, and Capernaum Trust,)	4 (%)
TOTAL	100 (%)

Source: Field data, 2016

Save the Children, Caritas and CAMFED were the popularly known NGOs in Luunga ward due to their long presence, and their activities which were very visible to almost all community members reached through this study. This was followed by, KAMTC, Mvuramanzi, Basilwizi, LEAD, MAC, Christian Care, UNICEF, SNV and Capernaum Trust.

4.2 Social services provided by NGOs in Luunga ward

Figure 4 below illustrates social services delivered by NGOs in Luunga ward.

Figure 4: Social services delivered by NGOs
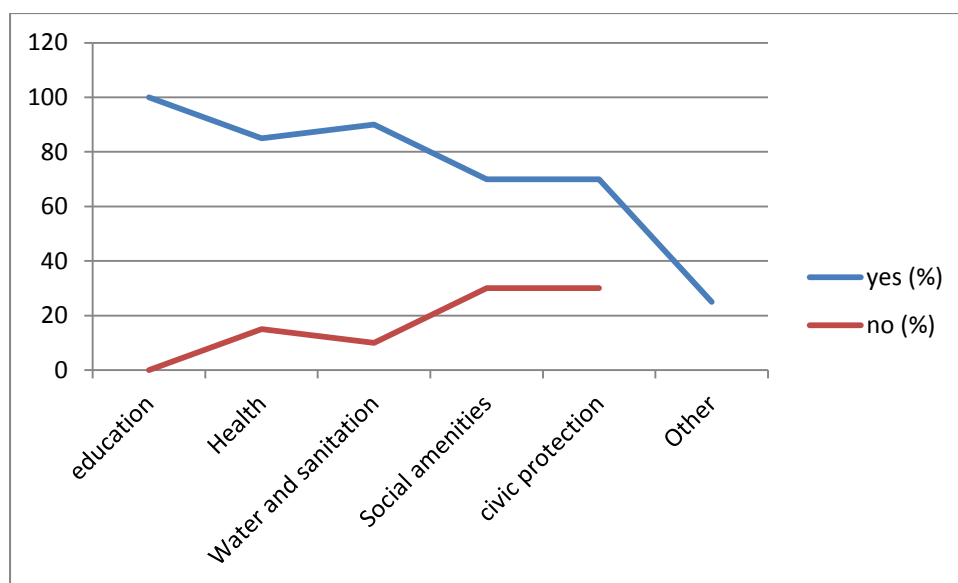
Source: Field data, 2016

Findings presented in figure 4 were crucial in investigating the levels of involvement and awareness by the community in NGO project activities. Therefore, evidence depicts that

community members were aware of the NGO activities in Luunga ward. NGOs that intervened in the education sector include Save the children, CAMFED, UNICEF, Capernaum Trust and Basilwizi Trust. In water and sanitation NGOs involved were Mvuramanzi, Christian Care, Stichting Nederlandse Vrijwilligers -Foundation of Netherlands Volunteers (SNV), (United Nations Children's Emergency Fund (UNICEF) and Caritas. Basilwizi Trust, MAC and CAMFED played part in the health sector. UNICEF and Save the Children were involved in provision of social amenities. Civic protection issues were dealt with by Basilwizi and CAMFED particularly in child protection. NGOs such as Caritas, KAMTC, Save the Children and LEAD intervened in food security. Therefore, it can be clearly depicted that NGOs have tried to compliment the government effort by delivering the social services that matter most in poor rural communities. Analysis also revealed that though some NGOs specialised in particular social services, others intervened in more than one social service, a multi-sectoral approach, bringing at hand the significance that NGOs yield in pursuing development endeavours in poor rural communities. Following sections present the services in more detail.

4.2.1 Education

Study findings depicted that 42 % of NGOs were involved in educational assistance in Luunga ward. Capernaum Trust, Basilwizi Trust, Save the children, CAMFED and UNICEF were main players in the payment of school fees to the Orphans and Vulnerable Children (OVCs), provision of stationery and uniforms school uniforms. 100 % of community members confirmed that NGOs provided assistance in the education of children. This was echoed by responses such as *"we had an education fund where we were paying school fees for children"* [N1]; *"Basilwizi links children in Zimbabwe to those in Italy. They write messages to friends in Italy, and they are then paid school fees"* [E3]. Thus, Basilwizi implemented the child scholarship project in Luunga ward that identified and linked the

Zimbabwe children between 9 to 12 years with interested people in Denmark and other related countries to fund these children (Basilwizi, 2014). UNICEF funded the training of teachers who had non-teaching qualifications, and the community based Early Childhood Development (ECD) teachers. Education was the major priority for the NGOS that operated in Luunga ward. Though NGOs could not fully meet the educational needs of the poor rural community their efforts assisted to some levels.

4.2.2 Health

Research results show that 33 % of the NGOs intervened in the health sector. Save the children provided mosquito nets; CAMFED, Basilwizi and MAC provided sexual reproductive health, Home Based Care givers' kit and HIV/AIDS education; and Mvuramanzi trained and helped increasing the number of village Health Workers (VHWs), training of Sanitation Action Groups (SAC), and training of school health coordinators. NGOs dealing with HIV/ AIDS issues conducted household sessions to make awareness for people to access services from health centres like condom, voluntary HIV counselling and testing, Anti-Retroviral Therapy, prevention of mother to child HIV transmission, voluntary Male Circumcision, and social behaviour change. 85 % of community members agreed that NGOs assisted in the health sector. Analysis of findings indicates that NGOs that intervened in health were mainly based on providing knowledge which was essential to assist people after the NGOs left. However, interventions suffered sustainability challenges since people could easily forget what they were taught, and also lacked supporting health facilities.

4.2.3 Water and sanitation

50 % of the NGOs were in the water and sanitation intervention. Mvuramanzi and Christian Care supported toilets and hand washing tanks construction. Caritas and Mvuramanzi assisted in the rehabilitation of boreholes and construction of the so called 'elephant pumps' type of well. SNV and UNICEF provided medical drugs and water treatment chemicals during

bilharzia and cholera outbreaks, and taught people on preventive measures in between outbreaks. Save the Children helped in the provision of aluminium cooking pots, water buckets, mops and brushes. 90% of respondents agreed that NGOs had water and sanitation programmes in Luunga ward, and this was confirmed by responses like, "*we had programmes that constructed latrines to the vulnerable communities; capacitating communities on behavioural change so that we create demand in self-funded latrine construction; and we did the formation and training of school hygiene clubs facilitated by trained hygiene co-ordinators* [N3]; "*NGOs assisted in provision of toilets but most of them were left at slab level*" [E3]. Also, NGOs funded the training of builders who were provided with start-up kits and assisted in the construction of self-funded latrines. Mvuramanzi Trust promoted community hygiene clubs and capacitated them on safe hygiene practices with the objective of reducing water borne diseases. Toilets construction project was successful in schools but left many incomplete toilets in the communities as shown by figure 5 below.

Figure 5: An incomplete toilet constructed through NGO assistance

Source: Field data, 2016

Research findings gave light that the government of Zimbabwe wants to move from full subsidised into zero subsidised interventions for sustainability. Therefore, the labour

constrained and economically challenged community members failed to finish the latrines because they were supposed to fend their funds to finish since the NGO supported them up to the slab level, as per the project design. Therefore, projects designed in that way created challenges to the poor rural community who lacked resources to fund toilets construction since they channelled the little resources they obtained to more pressing and urgent needs. Boreholes were drilled and finished in other villages but were left incomplete in some villages leading to community fetching water direct from Sengwa River and in open wells.

4.2.4 Social amenities

Only 17 % of the NGOs intervened in supporting Luunga ward with social amenities. Figure 6 below shows a classroom block constructed by support from UNICEF at one of the schools.

Figure 6 Primary school classroom block constructed from support by UNICEF

Source: Field data, 2016

Though a classroom block was constructed at the school, infrastructural gap was still notable at this and other schools, demanding for the call of more interventions to relieve the school infrastructure gap.

Figure 7 below shows a spray race constructed from support by Save the Children.

Figure 7: Spray race constructed under support from Save the Children

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

Source: Field data, 2016

UNICEF also supported erection of structures on ECD play centres in all the primary schools in Luunga ward in Binga. Though efforts to construct social amenities were made by NGOs, there was a notable gap of the shortage of the highly demanded social amenities that could support social service delivery in the poor rural community of Luunga ward in Binga.

4.2.5 Civic protection

Vulnerable groups of population that were targeted by NGOs are orphans and vulnerable children, the aged, the ill, the labour constrained, economically disadvantaged and women. Only 25 % of NGOs devoted their efforts towards civic protection. Basilwizi and CAMFED implemented the child protection project through which Child Protection Committees (CPCs) were put in place. They campaigned against child abuse, early child marriages, and abusive traditional, cultural and religious belief systems. During shocks like drought Save the Children and LEAD assisted with food aid in Luunga ward. 70 % of the respondents admitted that NGOS assisted in civic protection issues which mainly concentrated on children among all the social groups. Hence, this depicts that civic protection interventions were still minimum among other social groups of the poor rural community that is exposed to various shocks like flooding, drought, collapse of buildings among them.

4.2.6 Food security

In food security 42 % of the NGOs assisted Luunga ward community. KAMTC and LEAD intervened in conservation agriculture with Caritas and KAMTC implementing the small livestock projects. Food distribution was done by LEAD and Christian Care. Save the children assisted in establishing community nutrition gardens. Two NGOs delivered that "*we conduct trainings on conservative agriculture, livestock production, gardening promotion, small grain and seeds*" [N4]; "*we train them on food and nutrition whereby we formalise the fishermen to be in groups and be registered. We train them on business management, on how to handle finances, on Internal Savings and Lending where they group, put money together and lend each other at a 10% interest so that they can fight poverty at household level* [N1]. Though fisheries project assisted people, projects like conservation agriculture faced resistance challenge due to laborious nature of the project. Food aid could not provide sustainable food security though it was crucial in addressing the urgent food need.

4.3 Strategies used by NGOs in the provision of social services

Research results indicate that 25 % of the NGOs used demand driven strategy which involved community consultation on what they needed. This is in line with responses like "*they come to us and present what they want to do. When they find that it is in line with our ministry policies we give them green light*" [D3]; "*our entry point is through local leaders who we use to mobilise people. We use participatory kind of intervention*" [N1]. NGOs conducted workshops to teach the community in their interventions. 95% of respondents admitted that NGOs that operated in Luunga ward in social service delivery recruited volunteers. However, one NGO opined that "*the aspect of volunteering does not work, at this age how do you expect people to volunteer when they do not have food, shelter etc.?*" [N3]. To reduce dependency syndrome 25 % of NGOs enabled the communities to take the lead, with pilot projects carried out in other areas. Sometimes, surveys were carried out to determine

community needs. A certain NGO employed a home visit strategy used by a community behaviour change facilitator. At district level NGOs sensitised through Binga Rural District Development Committee (BRDDC). The WASH project was designed that it was facilitated by the District Water and Sanitation Sub-Committee at district level comprising of all Heads of government departments and NGOs, chaired by District Development Fund (DDF). At the ward it was facilitated by the Ward Water and Sanitation Sub-Committee chaired by the ward councillor. NGOs confirmed that they just facilitated the process and provision of logistics, but basically the programmes were implemented by the government. NGO plans were mandated to be in line with the BRDC strategic plan and Zim Asset.

4.3.1 Identifying projects

Most respondents (60%) confirmed that NGOs came up with social service interventions in Luunga ward in Binga, and only 30% noted that the community had contribution towards the choice of NGO interventions. Thus, BRDC, NGOs, Donors, government and the communities were to some level involved in identifying social service projects in Luunga ward. 50% of the respondents agreed that they had done project activities with NGOs. This concurs with responses such as, "*when an organisation is implementing we identify gaps, then we produce a project on that and seek funding but we have to also inform the local authority*" [N1]; "*when they help people, NGOs discover a lot of issues important for their interventions*" [C20]. Responses from government officers, NGO representatives and community members tallied in highlighting that NGOs, through their donors were mostly involved in identifying projects compared to the poor rural communities.

4.3.2 Conducting consultations, baseline surveys and inception meetings

From figure 5 below, respondents agreed that NGOs prioritised inception meetings (95%) followed by consultations (85%) and lastly the baseline surveys (35%). This was proved by responses such as, "a*fter an NGO is allocated to the ward the councillor could cascade the*

information to us and the community. NGOs then come and ask local leaders to mobilise people to assemble and do their activities" [W1]; "*we start by sensitising the local leadership and inform the deliveries of the project so that they can cascade the information to communities*" [N3]. However, it was revealed that NGOs imposed social service programmes on communities and their consultation was not meaningful since it was done mainly at implementation stage, and was biased towards what NGOs wanted. Similarly, research in India proved that there was notable lack of public participation in NGO programmes (Prabhakar and Latha, 2011). Excluding communities especially at project conception stage may translate that their problems and challenges in social service delivery remain untold to some extent. Therefore, consultation and involvement of the poor rural communities is crucial and need to be prioritised to avoid incidences of poverty caused by social exclusion.

Figure 5: community consultation, inception meetings and baseline surveys
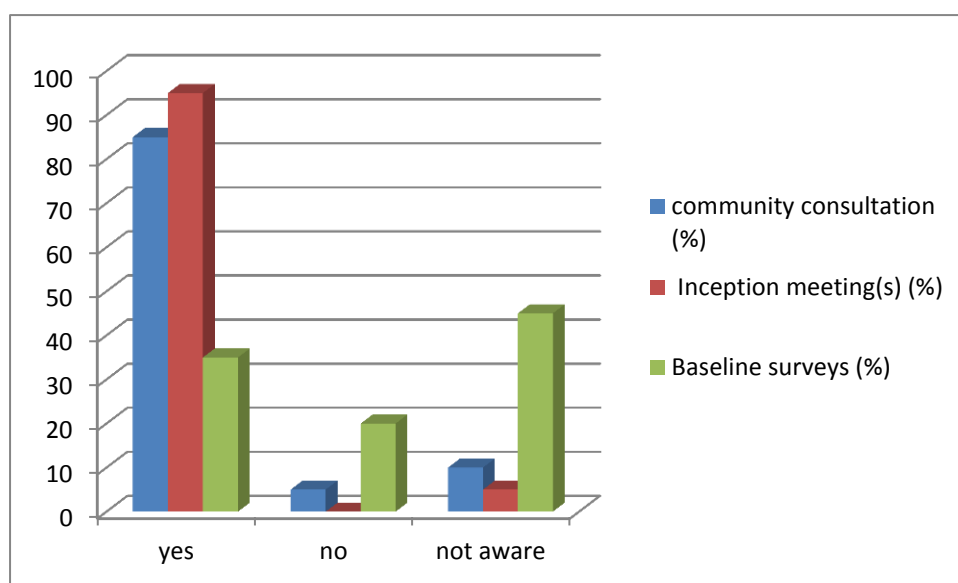
Source: Field data, 2016

There was an element that people would be forced to comply, for instance, in the construction of toilets by a two bag model which people did not like, hence their problems remained unaddressed. Though NGOs conducted the baseline surveys, the study findings indicated that some of the information would be fabricated. The tendency of falsifying findings was

perceived by the community as done to protect jobs and to impress the donor for more funding to trickle in. Sometimes, Luunga ward community did not form part of the sample for surveys carried out but NGOs relied on survey results from other areas, a 'one size fits all' approach, not considering the differences in community needs, thus recording failure.

4.3.3 Target groups and the selection criteria
Initially, NGOs targeted the vulnerable groups of the population who are the poorest of the poor using the people centred selection criterion. An extension worker and an NGO representative shared that "*when they give toilets they ask people in the community on who should benefit*" [E2]; "*local leadership and the community have a system of ranking, the better off or poor but we just give them guidelines*" [N4]. 25 % of the NGOs targeted everyone in the community to benefit from their social service interventions since they regarded them as poor. Others targeted 60% women and 40% men. NGOs consulted the school heads, School Development Committees (SDCs) and CPCs for selection of OVCs, but others assisted the intelligent and disadvantaged children, regardless of their social status. School children made applications and were selected through interviews, but others were randomly selected without any considerations. Research results also derived that some targeted people were left out due to biases in the selection criteria.

4.3.4 NGO strategies in social service delivery: were they satisfactory?
Satisfaction in NGO social service delivery projects suffered mixed reactions. 50 % of the extension workers shared that NGOs procured substandard material like chalks which were not usable in schools. Mixed reactions were expressed as noted by responses such as, "*in terms of food relief, we are not satisfied, for example LEAD gives a person 6kg of grains for the whole month considering the number of people in the household, although we are helped, this is not satisfying us*" [W1]; "*I am not satisfied. It is a top down approach, there is no community involvement and participation, people can be given up toilets when they do not*

need them" [D1]. This is in line with what was reported by ENERGIA International Network on Gender and Sustainable Energy, and Gender and Energy Network of Zimbabwe (2009: 14) that "the Blair toilets project was not accepted in other areas such as Binga because toilets were not a priority on their development list". Therefore, because of lack of community participation many social service delivery projects by NGOs have become white elephants. More was done in education (software) than physical infrastructure (hardware) development. However, local leadership involvement enabled some people to be satisfied with NGO strategies since they are the ones who knew the needs and problems of people. Again, though somewhat not acceptable, NGOs were delivering services important to the people. Posing doubts, the following responses pointed out that, "*to some extent as a ministry we are delighted to work with NGOs*" [D4]; "*they do complement the government, we appreciate, and it's our role as the government*" [D6]. There conflicted between what BRDC would define as people's problems and what NGOs offered through their response to the call for proposals.

4.4 Factors that affect NGO interventions in the provision of social services

4.4.1 NGO accountability and transparency
Figure 6 below illustrates NGO accountability and transparency as perceived by community members. The data were collected to measure the levels of knowledge and perceptions on NGO accountability and transparency and how these affected social service delivery in Luunga ward.

Figure6: NGO accountability and transparency

Sources: Field Data, 2016

Channels of NGO accountability and transparency were seemingly lost out as indicated by the 55% of respondents who shared that NGOs showed accountability and transparency at times. Only a few were not aware about NGO accountability issues (5%). However, 35 % of respondents agreed that NGOs always were accountable and transparent. Only 5 % of respondents agreed that NGOs were not accountable and transparent in their work. Findings indicated that NGO accountability and transparency framework, the Humanitarian Accountability Partnership (HAP) was mostly prioritised on paper but not much practiced, thus being accused of having poor accountability systems. This tallied with information on NGO involvement in corrupt activities like falsifying attendance registers and distribution of items, faking the receipts, and funds embezzlement. Hence, there is need to intensify NGO accountability issues at all levels of social service delivery interventions to boost stakeholder confidence and enhance community buy in for success and sustainability.

4.4.2 NGOs monitoring and evaluation

The monitoring and evaluation of NGOs was based on their achievement upon the set targets.

NGOs in HIV/AIDS support used key indicators found in the Zimbabwe National HIV and

AIDS strategic plan (2015-2018) such as number of households and young people reached, number of referrals to those reached out, and number of repeat visits conducted. Community members were used as resource persons to check on NGO success in their social service delivery projects. 50 % of the NGOs indicated that they made regular evaluations and reporting, and mid-term and final evaluations were done with consultants. 50 % of the NGO coined that they did not do monitoring and evaluation at all, and they mentioned poor road network as one factor that hindered them. With weak and unclear monitoring and evaluation, no learning could be deduced from the project interventions, hence leading to failure to note and rectify issues that derailed success in social service delivery.

4.4.3 Political factors

During times of political instability and elections NGO activities in Luunga ward were suspended. This is proved by responses like, "*if it is time of elections we are not allowed to influence gatherings. So, we will be seated and doing nothing*" [N3]; "*politics affect NGOs in that sometimes they are hindered to provide their assistance*" [C2]. Thus, by the time NGOs went back to the community they could find things in bad state, leading to failure. In politically stable times NGOs operated properly in Luunga ward. In their interventions NGOs were accused by government as ascribed to particular political parties, and that they were funded by the west. Therefore, Muponde (2014) in the Southern Eye newspaper reported that 'BRDC has castigated NGOs who take Binga as cash cow by getting funds in the name of the district purporting involvement in developmental projects and coming down to hold meetings and workshops that do not benefit the people". This can be analysed as a political ploy that aimed at eliminating some NGOs, as indicated by follow up delays in signing the Memoranda of Understanding (MOUs) in 2015 between NGOs and BRDC, thus brought disturbed projects timelines hence negatively affecting social service delivery activities. Furthermore, politicisation of NGO programmes allowed community members to wean themselves from

participating in the NGO social service programmes. This risked NGOs as shooting many bullets but missing the target. Study results indicate that politicians claimed that they were the initiators of the projects, and they directed assistance to members of particular political party alone. However, the researcher observed that three days before the 2 April 2016 councillor bi-elections in Luunga ward, one NGO distributed food with no disturbance, hence indicating that though politics at ward level disturbed NGO activities, at times the situation was friendly. Almost 20 % of interviewees agreed that NGOs that operated in Luunga ward were not aligned politically, but rather concentrated on their interventions only.

4.4.4 Economic factors
NGOs contested that the funding they received was not enough and not stable to fully assist poor people in Luunga ward community with social service. More than 90% of the community members echoed this view. This was supported by responses like, *"lack of funding is affecting our activities because we have ending projects now but beneficiaries have not reached maturity stages and funding is finished"* [N1]; *"NGOs lack resources to conduct workshops and meetings, therefore only few workshops will be done to educate people on the importance of their programmes"* [C4]. Donors dictated when to give or not unleash funds to NGOs. One NGO used local generation of funds from booking houses and money was used to meet their beneficiaries and to buy fuel but it was not sustainable. Therefore, due to the economic downturn and late disbursements, it has become difficult to make visible and quick impacts without redesigning project interventions or extending project expiration period in order to realise anticipated long-term and sustainable results (Basilwizi, 2010). Sole dependency on donor funding seriously crippled NGOs in terms of failure by the donor to timely remit them the funding. At times, when NGOs failed to perform the donor organisations withdrew the funding, leaving the rolling social service projects in suspense, and hence leading to failure.

4.4.5 Traditional, socio-cultural and religious beliefs

Research findings indicate that some social service projects faced resistance because people were used to traditional ways of doing things, for example toilets were provided but people continued using the bush system. Interviewees thus shared that, "*some people believe more in traditional healing and others in churches and hence they don't accept health interventions*" [C11]; "*people sometimes do not accept the teaching of NGOs and maintain their traditional, socio-cultural and religious beliefs*" [C4]. NGOs that assisted in girl child sponsorship had to hit on a rock before the community could be transformed to accept. It was shared that "*tumwi tunsiya-nsiya tupa kuti bamwi bantu balilangile ansi mbuli zya lwiiyo kubana basimbi*" (*some cultural practices cause some people to look down upon themselves, for example in education by girls*) [C6]; "*child marriages or pregnancies are still high and there is a cultural dimension in child marriage and pregnancy*" [N2]. It was also established that some school children belonging to one religious sect were taken to a church gathering (*musangano*) during school days for two months. On a similar note, some children belonging to 'African' apostolic sect were not allowed to eat nutritional porridge, and convents were not allowed to go to the clinic for any form of health care. Some sentiments were received that NGO teachings brought the western style of culture, and though crucial in the development discourse, people felt alienated. Research finding have shown that people's cultural and traditional practices negatively impacted against NGO assistance in social service delivery to some extent. NGOs were mainly opposed on the basis of fear of cultural erosion and superstitious beliefs. What NGOs regarded as abuse the community perceived it as a disciplinary measure for their children to be trained to grow responsibly. Thus, in delivering social services NGOs sailed against the big tide of culture and traditional beliefs which compromised success. However, other NGOs helped preserve and promote some cultural values that were of benefit to the community. NGOs managed to enlighten people on dangerous beliefs and practices. Research findings alerted that long back people believed in

witchcraft when ill but they engaged in risk behaviours like wife inheritance which made them susceptible to HIV/AIDS. Somehow, NGO interventions have led to behaviour change as noted by decrease in HIV/AIDS prevalence rate in Binga. It was reported that Binga District in Matabeleland North province has the lowest HIV and AIDS prevalence rate in the country (Zimbabwe Broadcasting Corporation, ZBC, 2015). ZBC (2015) reported the rates were standing at 13% in the outpatients, though further decrease was noted over time.

4.4.6 Legal factors

This research proved that NGOs' work in social service delivery was countered by the legal restrictions. This is indicated by responses such as *"we have prohibitive in terms of getting out to school children"* [N2]; *"imwi milawo ikachizya kuzwidilila kwamitabi iliimvwilidi"* *(some laws hinder success of NGOs")* [C6]. Around 40 % of respondents argued that the laws in Zimbabwe were friendly for NGOs to assist in social services, whilst others (30 %) proved lack of knowledge on any of the laws that affect NGOs. Only 25 % of the NGOs showed that they had no legal challenges since they always signed MOU with BRDC. Generally, the research found that NGOs were over-regulated and this delayed the implementation of social service projects. Thus there are some legal flaws and gaps that were fluid enough to allow BRDC to deliberately delay NGOs and later castigate them for failure.

4.4.7 Distance, road and communication networks

The researcher observed that Luunga ward is not only far from the heart of the district where NGOs have their offices, but also suffers from extremely poor road and communication links. The following responses shed light on the phenomenon: *"distance to Luunga ward is a challenge. If you were there last week you have to think twice to go back or not"* [N1]; *"mitabi iliimvwilidi ilikukakatizya biya kuzootugwasizya. Mugwagwa ulifwide pesi muluyando lwabo balaza kutugwasya"* (*NGOs are forcing themselves to come and help us. The road is poor but through their love they come and assist us)* [C13]. It was discovered that

Luunga area is remote and hence most NGOs shunned the area. During rainy season, Luunga ward was not easily accessible, with roads blocked by flooding rivers and streams, and muddy in some portions. Save the Children Alliance (2009) proves this by ushering that Binga is a remote, poor and often inaccessible district of the country, characterised by unpredictable climatic conditions, limited access to communication, impassable roads, and limited access to clean water and sanitation, and chronic food insecurity. Figure 9 below indicates the nature of the road along Mujele road to Luunga ward. Because of lack of internet connections NGOs did not meet with modern demands. This caused them to receive information about call for proposals late thereby losing funding.

Figure 8: Parts of the road linking Luunga ward and Binga urban

Source: Field data, 2016

4.4.8 Physical environmental factors

NGOs intervening in toilet construction project faced a challenge, the two bag model of toilets construction used by one NGO exposed the local community to danger since toilets collapsed, hence failing to meet the desired goal. Most of the underground water in Luunga ward is salty, thus rendering borehole construction and rehabilitation wastage of time and resources since the water is not potable. In places like Sizemba and Sinamusanga where water is less salty people gained access to water after borehole rehabilitation. Some areas were rocky and difficult to dig pits for toilets construction. Regardless of such conditions,

NGOs continued pouring in resources to assist in projects that do not suit the environment, leading to their failure to meet pre-set goals, thereby leaving the poor rural community as poor as before. Hence, the environmental factor needs to be considered by NGOs when intervening in water and sanitation projects in poor rural communities.

4.4.9 Coordination and relationships with stakeholders

About 50% of the NGOs perceived their relationships with stakeholders as fairly good, and that they got the necessary support, and government ministries were facilitators in NGO projects. In a bit contrary note almost above 50 % of the respondents rendered NGOs as failing to coordinate with the key ministries. Regardless of such perceptions, there was no way therefore those NGOs could run away from line ministries who were the ones implementing the projects objectives. However, it was discovered that some key government ministries could not attend the BRDDC meetings. Under such circumstances should one blame NGOs alone for failure? Relations among sister NGOs indicated that regardless of some cordial relations, there existed competition on social service interventions, as indicated by responses like, "*each wants to be more visible. Even where we do well others see it the other way round*" [N1]; "*there was an idea of NGO forum but we are not meeting*" [N4]. Although relationships appeared to be strong, coordination itself was weak. Lack of clear-cut coordination was a deep rooted problem that had significant contribution towards failure by NGOs to deliver social services in Luunga ward. Relations between NGOs and Luunga ward community were to somewhat good. NGOs implementing the rural WASH programme confirmed that they had good relations with the community but mentioned some obstacles to their success, for example, that the government asked communities to fend for themselves in WASH projects for sustainability. Communities attached negative attitudes to the programme since they were not supported fully. However, issues of behavioural change are difficult.

Alongside the community, the local leadership gave the NGOs necessary support to implement their social service deliveries.

4.4.10 Community attitudes

The findings indicated that Luunga community sometimes showed negative attitudes towards NGO interventions. This was argued from the point that same people always benefited from NGOs but others were not. Those who are left out usually decided not to participate in community development activities. In one of the villages community members had stolen the roofing materials for toilets and also destroyed the community garden fence. With such behaviours, it was difficult for NGOs to succeed in social service interventions with the poor remaining the most affected. However, some of the attitudes were created because of unfair selection criteria by NGOs. The community rankings done were also not accurate. For instance, people could say they had no livestock for the sack of getting assistance. Local people also demanded incentives from NGOs to participate in their own community development projects; this reduced their commitment and motivation.

4.5 Have NGOs managed to meet rural poor's basic social needs in Luunga ward?

The extent to which NGOs assisted in meeting the rural poor was measured through the availability and accessibility of social services to Luunga people. More than 50% of community members admitted that NGOs have to some extent succeeded in social service interventions. However, the success of NGOs can better be examined at sector level. NGOs funded mobile registration and some children in Luunga ward managed to access birth registration. Birth registration awareness was as well strengthened and reaped positive benefit. However, for a longer time, some children failed to obtain the birth certificates due to failure to meet requirements prescribed by the Registry department.

Another NGO called for behaviour change in reducing HIV/AIDS and managed to reach the most remote people, including those with disabilities. Luunga community accessed health services from the village health workers who were trained by NGOs. The following responses show NGO successes in Luunga ward, "*mitabi iliimvwilidi yakakonzya kuyiisya bantu atala amalwazi asiyene-siyene mbuli HIV/AIDS*" (*NGOs managed to teach people about different diseases like AIDS*) [C6]; "*nikutali mitabi eeyi bantu bayingi nibafwide mundawu yesu kwiinda mumalwazi alimbuli cholera*" (*if it was not because of these NGOs many people would have died from diseases like cholera in our community*) [C5]. Therefore, NGOs have not scored total failure in their work.

Figure 9 below shows a young girl fetching water from an open unprotected hand dug well. This suggests the levels to which people in Luunga ward had their lives exposed to hazardous health through the consumption of unsafe water.

Figure 9: unprotected hand dug well in Luunga ward

Source: Field data, 2016

Little was achieved in sanitation as evidenced by responses like "*we did very little on demand led sanitation and this causes us to fail*" [N3]; "*water and toilets are still a problem, we are*

still susceptible to water borne diseases" [E3]; "*an NGO may say I will provide this and community meet this, people have no resources and hence they fail*" [E1]. More toilets were constructed in schools and the community, though most of those were left unfinished. By observation there were very few homesteads with toilets. In schools hand wash facilities were erected and these improved hygiene. As observed, children and elders practiced open defecation at home where there were no toilets, nullifying the initial aim of eradicating open defecation. Village Health Workers were trained on how to use and handle the sanitation facilities. NGO interventions did best in instilling knowledge to communities on importance of toilets. In water supply, there has been little achievement because people still fetched water from the unprotected and unsafe sources.

Though residents appreciated improvement in water and sanitation health, they however argued that little was done to solve the water problem. They said that "*on water side there is no improvement in Luunga village, but in other villages the boreholes are there*" [C9]; "*they brought us boreholes to ensure that people do not drink water direct from the river*" [C16]. Therefore, CAFOD (2013) augmented that in Zimbabwe almost half of the people of Binga District don't have clean drinking water; it has one of highest rates of diarrhoea in children under five, and two cholera outbreaks in 2004 and 2008 killed 73 people.

Most disadvantaged children, especially girls managed to attend school through NGO assistance, and some excelled to tertiary institutions, thus scoring beautiful success. Following responses proves this, "*due to the sponsorship offered most of the children are now able to attend secondary schools, colleges and universities*" [C20]; "*we have high levels of girl child going to school, a girl child enjoys going to school and when going to school the inferiority complex have equalised*" [D6]. However, most of the girls who were sponsored by NGOs had fallen prey of early marriages and pregnancies and this militated against NGO efforts. Also, some girls could transfer to other schools, making it impossible for the NGO to

continue paying school fees. NGOs promoted education through provision of stationery in schools; and also capacitated teachers with non-teaching qualifications, and introduced the teaching of *ChiTonga* language in schools. Basilwizi (2014) reported that they spearheaded the teaching of ChiTonga language, and also linked with tertiary institutions to link aspiring trainee teachers to respective colleges. However, there are some children who did not attend school because they were not identified for assistance since mostly the in-school grab chances of assistance than the out-of school. Also, despite assistance provided, some children still travel long distances of about more than 7 kilometres to school and they still learn under trees and in sheds made from local materials (figure 11 below). This forced some of them to drop out of school. This indicates that NGOs failed to fully meet people's social needs, and hence future interventions should consider all these and relieve the suffering children in the remote rural poor communities. SDC members were reportedly shielding their children into NGO assistance, leaving out other needy children. Also, misappropriation of funds by the schools heads was rampant. Such malpractices need to be contained and discarded.

Figure 10: Infrastructure at one secondary school where children learn

Source: Field data, 2016

In civic protection, NGOs saw the training and capacitating of the CPCs on handling child protection issues. The community gained knowledge and people turned positive attitudes towards protection of children, however the practice faced challenges of attitudes and cultural pitfall. Failure to deal with child abuse cases by the stakeholders moved contrary with what NGOs targeted. During bad years NGOs provided food aid assistance that addressed the current pressing need for food as a response to disaster situation, seeking to protect the vulnerable civic population. During cholera outbreak, NGOs performed a significant role in the provision of water treatment chemicals and medication.

4.6 Why Luunga ward continue to be poor amidst NGO social service delivery efforts

Luunga ward lacked a strategic plan to profile the ward's development focus. However, even if a ward development plan is put in place, given the nature of NGOs operations it would be of doubt if they could consider it at all given that BRDC have had challenges in successfully implementing the strategic plans. NGOs were accused of duplicating their efforts in the Luunga ward. Moreover, Donor dependency syndrome was blamed for continued poverty in Luunga ward as shared that "*communities just think of being given*" [N3]; but one informant issued that "*NGOs give us ready fish instead of training us on how to fish*" [D4]. One widow who practiced fish trading shared that her children were not going to school because they were not supported by any NGO, clearly indicating that free hand-outs from the development agencies encouraged development syndrome in Luunga ward. Many people solely depended on hand to mouth, and waited for NGO assistance time and again, but NGOs dealt more with the symptoms than the problem.

In Luunga ward poverty was a traditional phenomenon. Basilwizi therefore indicated that some early marriages were caused by lack of economic stability of the communities (Basilwizi 2014). In Luunga ward there has been an historical failure by the government to

empower people for sustainable development. This is proved by responses like "*we have been far for too long in terms of development in Binga, of course the government is trying now, and people were not going to school*" [N4]; "*in our communities there are high levels of illiteracy especially among old women. These cannot be short changed*" [D6]. Respondents also lamented that they had resources in Kasambabezi but they were not utilising them. Exorbitant licensing and permit fees charged by BRDC left the locals with no option but to remain at the receiving end of NGO assistance which was not even sustainable.

Poor land for cropping coupled with pests and dangerous animals that attacked crops and livestock respectively, disturbed people's livelihoods. Luunga ward had no health care centre. The government had forgotten its responsibility of extending the social services to the poor people in rural communities. Wrong timing, wrong targeting and lack of adequate knowledge by NGOs on local culture and development dynamics led to failure. NGOs could not take much into account the grievances from the community, and they were accused of having poor implementation strategies which could not answer the poor people's challenges in the social service delivery discourse. As long such factors that impact negatively towards poor people's livelihoods in Luunga ward remain, some projects will always misfire leaving the vulnerable communities exposed more to poverty.

4.7 Importance of NGOs in social service delivery

95% of the community members agreed that NGOs are important in social service delivery. NGOs assisted the poor rural vulnerable people to access the basic social services in Luunga ward. This was echoed by responses like, "*kwataba mitabi iliimvwilidi kunooli kwafugwa nkaambo nzingi ziyandikana*" (*without NGOs we would die because we have a lot of needs*) [C5]; "*mitabi ilimvwilidi mibotu nkaambo ilikugwasya bantu bafwaba muluundu lwesu*" (*NGOs are very important because they are assisting the poor in our community*) [C18].

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NGOs operating in Binga District were members of the subcommittees of BRDDC. This tally with what Eusebius, Mengo and Brendon (2014) argued that NGOs understand the scope and social consequences of poverty and its potential to ignite social unrest. Despite such efforts, a lot was left to be admired since people are still in dire demand of social services.

4.8 Summary

The key findings established that NGOs in Luunga ward assisted mainly in social services like education, health, water and sanitation, food security, and civic protection which was limited but concentrated on child protection. NGOs, to some extent involved stakeholders in social service delivery projects. Baseline surveys, community inception meetings, and community consultations were done but on a limited scale. Key findings reveal that the factors that negatively impact against NGO social service delivery interventions among the rural poor in Luunga ward community are politicisation of NGO projects, poor environmental conditions, elnino effects which degrades food security initiatives, economic hardships widening the needs of people, NGO financing fatigue, unfriendly legal environment, lack of community participation and involvement in NGO projects, dummy projects that did not address people's social needs and unfriendly council bylaws that did not promote investment on poor people, poor road and communication networks, and wrong beneficiary targeting. Generally, NGOs have scored superficial success in delivering the social services in Luunga ward, though to some extent their activities were crucial in satisfying the locals but not in a sustainable manner. In the next chapter the researcher summarises, concludes and proffers recommendations of the study.

CHAPTER 5

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.0 Introduction

In the previous chapter data were grouped, summarised and synthesised with the major aim of assessing the factors affecting the success of NGO interventions in social service provision for the rural poor in Zimbabwean communities. Emphasis from the reviewed literature and key research findings indicates the peculiarity of the multi-variable of factors that casted a negative bearing towards NGO social service delivery in poor Luunga ward community, formulating the base upon which recommendations were premised.

5.1 Research summary

This research assessed the factors affecting the success of NGO interventions in social service provision for the rural poor community of Luunga ward 1 in Binga. Chapter 1 highlights the research problem which allowed the researcher to draw objectives that underpinned this study. Poverty in Luunga ward was indicated by the poor social service delivery. Poor social amenities, poor educational attainment by children, lack of health care centres, exposure to natural shocks, and continued food insecurity are all thematic areas that indicate poverty which basically have significant negative effects towards rural development.

Literature review in chapter 2 contextualised the social service delivery challenges in poor rural communities from a global, African and national picture. It was therefore discovered that issues of social service delivery are pertinent and mainly affect the rural poor. In turn, NGOs endeavoured to assist the delivery of social services to the rural poor communities, and these social services include education, health, water and sanitation, social amenities provision, civic protection and food security. NGOs used the first, second and third generation strategies in their interventions. However, lack of cohesion between NGOs and

government, reduced transparency and accountability issues, programming biases, lack of meaningful community participation and involvement, lack of knowledge by NGOs and donors, donor dictates, widened poverty gap, poor coordination among stakeholders, state politics, socio-cultural and religious connotations and unfriendly legislation were noted by literature as the major factors that negatively affected NGO work in social service delivery.

Issues in this study were raised through a mixed methodology, also called triangulation as explained in chapter 3. Methodology used sought to gain a comprehensive assessment of the factors affecting the success of NGO interventions in social service delivery for the rural poor communities in Binga, ward 1. 40 respondents were reached and these involved 4 NGO representatives, 6 Government officers, 4 extension workers, 20 community members and 6 local leaders. Both probability and non-probability sampling techniques were adopted to create rapport and validate the findings. Quantitative data was analysed using SPSS, and presented in forms of pie chart, tables, line graph and bar graphs. Research instruments used to collect data involved interviews, questionnaires, observations and related documentary content search. Qualitative data was arranged, grouped, summarised and analysed to reach to conclusions that informed sound recommendations. Ethics were greatly honoured in the research so as to respect research laws, protect the respondents and meet research standards.

Research findings in Chapter 4 show that in Luunga ward NGOs delivered social services such as water and sanitation, education, health, social amenities, food security, and civic protection. Though Luunga ward community was in strong demand of social needs, to some extent there has been lack of community participation in identifying NGO programmes, thus interventions were imposed upon the communities and created feasibility deficit. NGOs recruited volunteers; capacitated the local community through workshops; conducted baseline surveys and held inception meetings. NGOs and donors were the major players in coming up with the kind of programme interventions. However, NGOs suffered drawbacks in their

dependence on donors for funds, which are often scarce (Kapstein, 2000 cited by Allard and Martinez (2008:3). Community poverty rankings were used to identify target people though many were left out. Stakeholders showed mixed feelings on their satisfaction upon NGO strategies. Major issues that emerged to have a bearing on the success of NGO interventions in social service delivery in Luunga ward were politicisation of NGO work, lack of adequate funding for NGOs, lack of socio-cultural and religious coherence of some NGO activities, unfriendly legal framework, physical environment that was not palatable for toilets construction projects, reduced accountability and transparency of NGOs in their work in the communities, lack of adequate monitoring and evaluation; long distance, poor road and communication networks, community attitudes, and lack of comprehensive stakeholder coordination. Somehow, NGOs succeeded to provide the social services like support for school children, providing medical health care during diseases outbreaks, and rehabilitation of water facilities, toilets construction and relief during drought periods. With these factors at hand, NGOs failed to meet the social service needs of the rural poor communities. NGO social service programmes were more educative (software) than provision of tangible benefits (hardware). NGO contribution to development of Luunga ward remained sceptical. The reasons for continued poverty were established as a result of the dependency syndrome, programmes that did not address people's social needs, inadequacy of NGO assistance against people's social needs and lack of empowerment to local people.

5.2 Conclusions

The researcher concluded that:

1. Basilwizi, Save the Children, Mvuramanzi, Caritas, CAMFED, KAMTC, LEAD, MAC, Christian Care, UNICEF, SNV, and Capernaum Trust intervened in social service delivery in Luunga ward in Binga District. They provided social services

which include education, health, water and sanitation, social amenities, civic protection, and food security.

2. There was lack of active and meaningful, involvement and participation of Luunga ward community in identifying projects and this was limited to mere consultations, and in some cases resulting in wrong targeting of beneficiaries.

3. The key factors that provided a negative bearing to the success of NGO interventions in Luunga ward in Binga were minimum accountability and transparency by NGOs; lack of meaningful and robust monitoring and evaluation; politicisation of project activities; lack of adequate funding; traditional, socio-cultural and religious factors; legal restrictions; long distance from NGO offices and poor road and communication links; the physical environment; inadequacy of strong networking and coordination between NGOs and other stakeholders; and community attitudes.

4. Though NGOs somehow managed to assist social services to Luunga ward community, there was still a widespread demand for social services which indicated the increased levels of poverty in the area as noted by high school dropouts especially among the girl child due to early marriages and teenage pregnancies; poor schools infrastructure; lack of a health care centre; lack of clean and potable water; limited civic protection and vulnerability to drought.

5. Government failure to provide social services in Luunga ward coupled with limited capacity of the community and poor economic position hailed against NGO social service delivery assistance leading to continued existence of poverty.

6. NGOs remain crucial social service delivery partners in poor rural communities.

5.3 Recommendations

The researcher recommends that:

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

1. Perfect baseline surveys with no falsification of findings need to be enhanced in a collaborated manner among all the development partners and stakeholders in Binga.

2. NGOs need to: enhance accountability and transparency systems at all levels; cement their monitoring and evaluation frameworks; ensure transparent, rigorous and clear beneficiary selection criteria; implement pro-poor sustainable development projects that address the basic social needs of people in rural communities; strengthen the community needs assessments through complete and meaningful participation and involvement of poor people in rural communities.

3. There is need for the donor community to desist from the tendency of tying conditions that contribute negatively to the development of poor rural communities, as supported by Barber and Bowie (2008:751) who notes that if NGOs behaviour is to be influenced there is need to start with the donors. Donors also need to fund sustainable projects like dams, irrigation schemes and social amenities development.

4. The government should provide an enabling environment for NGOs through enacting enabling legislation, improving the transport and communication network, empower and capacitate poor rural people, and come in as a collaborative player rather than solely regulate NGOs in social service delivery efforts. BRDC as the responsible authority needs to allocate NGOs in all the wards as per the social service needs of the communities, and make regular monitoring and evaluation.

5. Luunga community is encouraged to: cooperate and participate meaningfully in NGO social service programmes; value add the available resources; stop politicising the NGO social service assistance to gain community buy in; and come up with an implementable ward strategic development plan that can inform all development partners on the priorities of the ward.

6. There is need to carry out further study on each of the individual social services.

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APPENDICES

APPENDIX I

Midlands State University

Department of Local Governance Studies

Interview guide for government extension workers

I am Quegas Mutale, a Midlands State University student conducting research on 'FACTORS affecting the success of NGO INTERVENTIONS IN SOCIAL SERVICE provision for the RURAL POOR COMMUNITIES in Zimbabwe: Case of Luunga Ward 1 in Binga District. This is in partial fulfilment of the Bachelor of Science in Local Governance Studies (Honours Degree). Collected data is solely for academic purposes and will therefore not be made public. Please note that there is no follow up benefit for participating in this research, and therefore, participation is voluntary.

Section A: Personal information

1. Sex: Male: [ ]   Female [ ]
2. Age: […|…] years
3. Category: …………………………….…………….
4. Years stayed in Luunga ward 1   […..|….]

Section B: Types of social services being delivered by NGOs

1. Which NGOs have operated in social services delivery in this area within the last 10 years?
2. Identify the types of social services that NGOs deliver in this community.

Section C: Strategies used by NGOs in the provision of social services

1. What strategies are used by NGOs to intervene in social service provision in this community?
2. Are you satisfied with these strategies? Please explain.
3. What selection criteria do NGOs use for their target group of the population in social service provision?
4. Have you participated in NGO project activities? If no, explain why. If yes, how have you participated?

Section D: Factors that affect NGO interventions in the provision of social services

1. Have NGOs succeeded in the social service interventions in this area?
2. What would you say as contributing to
    i.   Success and/ or
    ii.   Failure of NGOs in social service interventions in this area?
3. Explain how, if the following affects NGO work in this community

     i.   The political environment
     ii.   Economic factors
     iii.   Traditional, socio-cultural and religious beliefs
     iv.   Legal framework
     v.   Environmental factors
     vi.   Any other factors (Specify).

4. Of the factors affecting NGOs in social service interventions in Luunga ward 1, which ones would you say
     i.   That they originate from the community
     ii.   And those from the NGOs themselves?
     iii.   Any other source (Specify).

Section E: Meeting the rural poor's basic social needs

1. To what extent have the NGOs assisted the local community in accessing the basic social services?
2. What do you think are the causes of the continued poverty amidst NGO interventions in this area?
3. What do you think has to be done to improve the success of NGO interventions in social services assistance?
4. What additional information do you wish to tell me from this interview?

Thank you very much for cooperating in this interview.

APPENDIX II

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Midlands State University

Department of Local Governance Studies

<u>Questionnaire for community members</u>

</div>

Introduction

I am Quegas Mutale, a Midlands State University student conducting research on '**FACTORS affecting the success of NGO INTERVENTIONS IN SOCIAL SERVICE provision for the RURAL POOR COMMUNITIES in Zimbabwe: Case of Luunga Ward 1 in Binga District**. This is in partial fulfilment of the Bachelor of Science in Local Governance Studies (Honours Degree). Collected data is solely for academic purposes and will therefore not be made public. Please note that there is no follow up benefit for participating in this research, and therefore, participation is voluntary.

Instructions: Please mark your answers in the boxes [√] and/ or fill in the blank spaces provided; do not write your name anywhere; and complete this questionnaire on your own.

Section A: Personal information

1. Sex: Male   [ ]   Female   [ ]
2. Age: less than 18 [ ]   18-35   [ ]
                  36-64   [ ]   65 and above [ ]
3. Period of stay in this area (*in years*):
    Less than 1   [ ]   1-5   [ ]
    6-10   [ ]   More than 10 [ ]

Section B: Types of social services being delivered by NGOs

1. Which NGOs have operated in social services delivery in this area within the past 10 years?

    (i) Basilwizi Trust   [ ]   (ii) Save the Children   [ ]

    (iii) Mvuramanzi Trust   [ ]   (iv) Caritas (CADEC)   [ ]

    (v) CAMFED   [ ]   (vi) KAMTC   [ ]

    (vii) LEAD Trust   [ ]   (viii) MAC   [ ]

    (ix)   Other (*specify*) ……………………...

2. Has any NGO assisted in any of the following social services to this community?
    i.   Education   Yes [ ]   No [ ]
    ii.   Health   Yes [ ]   No [ ]
    iii.   Water and sanitation   Yes [ ]   No [ ]

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

iv.	Social amenities	Yes [ ]	No [ ]
v.	Civic protection	Yes [ ]	No [ ]
vi.	Other (*specify*)…………………………………………………………………….....		

Section C: Strategies used by NGOs in the provision of social services

1. Do NGOs operating in social service programmes recruit volunteers from this community?

   Yes [ ]   No [ ]

2. Who is involved in the identification of NGO project activities in this area?

   (i) The community [ ]   (ii) NGOs themselves [ ]

   (iii) Other (*specify*)…………………………………………………………………..

3. Have you ever done project activities with any of the NGOs?

   Yes [ ]   No [ ]

4. Do NGOs operating in this area conduct the following?

i.	Community consultation	Yes [ ]	No [ ]	Not aware	[ ]
ii.	Inception meeting(s)	Yes [ ]	No [ ]	Not aware	[ ]
iii.	Baseline surveys	Yes [ ]	No [ ]	Not aware	[ ]

5. What other strategies do NGOs employ when delivering social services in Luunga Ward 1 community?

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   ……………………………………………………………………………………………
   ……………………………………………………………………………………………

Section D: Factors that affect NGO interventions in the provision of social services

1. Have NGOs succeeded in the social service interventions in this area?

   Yes [ ]   No [ ]

2. Do you trust the NGOs as development partners?

   Yes [ ]   No [ ]

3. Do NGOs that operate in Luunga area show high levels of accountability and transparency?

   At times [ ]   Always [ ]   Never [ ]   I am not aware [ ]

4. Explain how, if the following affects NGO work in this community

   vii.   The political environment……………………………………………………….
   ……………………………………………………………………………………………
   ……………………………………………………………………………………………
   ……………………………………………………………………………………………......
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   viii.   Economic factors………………………………………………………………..
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Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

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ix.   Traditional, socio-cultural and religious beliefs……………………………

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x.   Legal framework…………………………………………………………..

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xi.   Environmental factors……………………………………………………..

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xii.   Any other factors (*Specify*)…………………………………………………..

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5. Please give details on the conditions of operations of NGOs in this community in terms of;

i.   Opportunities…………………………………………………………………

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ii.   Challenges…………………………………………………………………..

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6. What would you say as contributing to

iii.   Success and/ or…………………………………………………………….

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iv.   Failure of NGO interventions in social service interventions in this area?

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7. Of the factors affecting NGOs in social service interventions in Luunga ward 1, which ones would you say?

   iv. That they originate from the community…………………………………………..

   …………………………………………………………………………………..…

   …………………………………………………………………………………

   v. And those from the NGOs themselves..

   ....

   ....

   vi. Any other sources (*Specify*)……………………………………………………

   ………………………………………………………………………………

   …………………………………………………………………………………..

Section E: Meeting the rural poor's basic social needs

1. Do you think NGOs are an important option to provide social services for your area?

   Yes [ ]   No [ ]

   Explain your answer……………………………………………………………..

   …………………………………………………………………………………..

2. To what extent have the NGOs assisted the local community in accessing the following basic social services?

   i. Education………………………………………………………………….

   …………………………………………………………………………………

   …………………………………………………………………………………

   …………………………………………………………………………………

   …………………………………………………………………………………

   ii. Health……………………………………………………………………....

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   iii. Water and sanitation ……………………………………………………….

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   iv. Social amenities (e.g. schools, clinics, water facilities, etc.)………………..

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   …………………………………………………………………………………

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   v. Civic protection………………………………………………………………

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

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> vi.   Any other social services (*specify*)…………………………………………………..
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> …………………………………………………………………………………………
> …………………………………………………………………………………………......
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3. Is there any improvement that these NGOS brought to this community in terms of meeting people's basic social needs? Please explain your answer?

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> …………………………………………………………………………………………
> …………………………………………………………………………………………

4. Suggest reasons why people in Luunga ward community remain poor whilst NGOs assist in providing social services……………………………………………………..

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> …………………………………………………………………………………………
> …………………………………………………………………………………………
> …………………………………………………………………………………………
> …………………………………………………………………………………………..

5. What do you think that should be done for NGOs to make desirable impact in social service interventions in Luunga ward 1 community?

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> …………………………………………………………………………………………
> …………………………………………………………………………………………
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6. Please you may provide any additional information…………………………………..

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Thank you very much for your cooperation.

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

APPENDIX III

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Midlands State University

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Mbuzisisyo yabantu bamuluundu

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Manjililo

Ndime Quegas Mutale, ndiiya kuchikolo chitegwa Midlands State University ndilookuchita kuyanduulisya kweendelana amutwe wamakani uti **ZIJATAJATA kuzwidilila KWAMILIMU YAMITABI ILIIMVWILIDI (ma NGO) KUBANTU BAFWABA MUMINZI MUMAWUNDU amu Zimbabwe: Luundu lwa Luunga ward 1 mubbooma lya Binga.** Eezi nzyakuzuzikizya lwiiyo lwa Bachelor of Science in Local Governance Studies (Honours Degree). Twaambo ntundibweza tulalondolwa munsinswa alubo tulabelesegwa biyo kuli zyachikolo, peepe kuti tuyawulwe kuli fumbwa muntu. Inche, ndilomba kuti umvwisisisye kuti taako mpindu pe musule akugwasizya mukuyanduulisya ooku. Aboobo, nzyakuliyandila kuti mundigwasye kumbuzisisyo eeyi.

Malayilile mapati: inche, maka nsandulo zyako mumayake aliko [√] naa kuti ulembe mumyeenya njupedwe; utalembi zina lyako pe; alubo, sandula mibuzyo eeyi akulikke.

Chibaka A: zyako webo

4. Uli muntu nzi: Wachaalumi [ ] Wachanakazi [ ]

5. Minyaka: munsi a 18 [ ] 18-35 [ ]
    36-64 [ ] 65 kaziya kunembo [ ]

6. Chiindi chakukkala mundawu oomu (*muminyaka*):
    Ansi a 1 [ ] 1-5 [ ]
    6-10 [ ] kwiinda 10 [ ]

Chibaka B: Zyabukkale (social services) zigwasizya mitabi iliimvwilidi (maNGO)

3. Kwaminyaka ili kkumi yayinda, njiili mitabi iliimvwilidi yakabeleka mukugwasizya zyabukkale bwabantu (ma social services) oomuno?

    (i) Basilwizi Trust [ ] (ii) Save the Children [ ]

    (iii) Mvuramanzi Trust [ ] (iv) Caritas (CADEC) [ ]

    (v) CAMFED [ ] (vi) KAMTC [ ]

    (vii) LEAD Trust [ ] (viii) MAC [ ]

    (ix) Imwi mitabi (*amba*) …………………...

4. Oomuno, kuli mitabi iliimvwilidi na yakagwasizya mulizezi zitobela?

vii.	Zyalwiiyo	Iiyi	[ ]	Peepe	[ ]	
viii.	Zyabulondozi (Health)	Iiyi	[ ]	Peepe	[ ]	
ix.	Zyameenda abusanambi	Iiyi	[ ]	Peepe	[ ]	
x.	Zyamayake	Iiyi	[ ]	Peepe	[ ]	
xi.	Zyakukwabilila bantu	Iiyi	[ ]	Peepe	[ ]	
xii.	Zimwi (*amba*)………………………………………………………………….....					

Chibaka C: Nzila zibelesya mitabi iliimvwilidi mukugwasizya zyabukkale bwabantu

6. Mitabi ilimvwilidi ibelekela oomuno ibeleka abantu balipeda (ma volunteers) na?
   Iiyi [ ]   Peepe [ ]

7. Ngwani uzwa amilimu (ma project) ichitwa amitabi ilimvwilidi mundawu oomuno?
   (i) Luundu   [ ]   (ii) Lwayo mitabi iliimvwilidi   [ ]
   (iii) bamwi (*amba*)………………………………………………………………..

8. Kuli milimu na njwaakachita ayimwi mitabi iliimvwilidi?
   Iiyi [ ]   Peepe [ ]

9. Mitabi iliimvwilidi ilachita na zitobela mundawu oomuno?

iv.	Kwaambuuzyana aabamuluundu	Iiyi	[ ]	Peepe	[ ]	
		Tandizi pe	[ ]			
v.	Miswaano yakupandanuna milimu yabo	Iiyi	[ ]	Peepe	[ ]	
		Tandizi pe	[ ]			
vi.	Kuyanduulisya kwaziyanda bantu kabatanachita milimu yabo			Iiyi	[ ]	
		Peepe	[ ]	Tandizi pe	[ ]	

10. Mitabi iliimvwilidi ibelesya nzila zili mukugwasizya zyabukkale bwabantu (social services) muluundu lwa Luunga Ward 1?
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Chibaka D: Zijatajata mitabi iliimvwilidi mukugwasizya zyabukkale bwabantu

8. Mitabi iliimvwilidi yakazwidilila na mukugwasizya muli zyabukkale bwabantu (social services) mundawu oomuno?

   Iiyi [ ]   Peepe [ ]

9. Uliisyoma na mitabi ilyiimvwilidi mbuli basikugwasizya mulusumpuko?
   Iiyi [ ]   Peepe [ ]

10. Mitabi iliimvwilidi ibelekela muLuunga ichita zilaantanganana na kumilimu yabo?
Chimwi chiindi	[ ]	Lyoonse	[ ]
Taakwe	[ ]	Tandizi pe	[ ]

11. Pandanuna kuti eezi zitobela zijatajata biyeni mitabi iliimvwilidi mumilimu yabo muluundu oomuno
    xiii.   Zyabutongi bwanyika………………………………………………………

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

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    xiv.   Zyabuvubi bwanyika…………………………………………………..

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    xv.   zyamakkalilo, bukkale, tunsiyansiya azyansyomo……………………………

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    xvi.   zyamilawo yanyika ……………………………………………………..

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    xvii.   zyabwiime bwanyika (Environment)…………………………………..

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    xviii.   zimwi (*amba*)…………………………………………………..

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12. Inche, pa bukamboni mumabelekelo amitabi iliimvwilidi muluundu oluno katulangene;

    iii.   azibagwasizya……………………………………………………………

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    iv.   abuyumuyumu mbubaswaania……………………………………………..

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13. Niinzi nzunga ulati zipa

    v.   Kuzwidilila, naa…………………………………………………………

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Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

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vi.   Kukwachilwa kwamitabi iliimvwilidi mulugwasyo lwabo kulizezyo zigwasya bantu mundawu oomuno?

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14. Kulizezyo zikachizya/zigwasizya mitabi iliimvwilidi mukugwasizya zyabukkale bwabantu (social service) mu Luunga ward 1, nziili nzunga ulati?

vii.   Zizwa kuluundu………………………………………..

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viii.   Zizwa kumitabi iliimvwilidi lwayo...

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ix.   *Akumwi nkuzizwa* (*amba*)………………………………………………

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Chibaka E: kugwasizya kuzuzikizya ziyandika kapati muli zyabukkale bwabantu

7. Uyeya kuti mitabi iliimvwilidi mibotu na/ ilayandika na kugwasizya muli zyabukkale bwabantu (social services) muluundu lwanu?

Iiyi [ ]   Peepe [ ]

Pandanuna nsandulo yako…………………………………………………..

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8. Mitabi yakakonzya biyeni kusikila mukugwasizya luundu lwanu mukuzuzikizya eezi zitobela?

vii.   Zyalwiiyo ..……………………………………………………………….

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viii.   Zyabulondozi (Health)………………………………………………...

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ix.   Zyameenda azyabusanambi ………………………………………………

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x.   zyamayake (mbuli zikolo, makkilinika, kwakutekela meenda, azimwi)……

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

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    xi.   Zyakukwabilila bantu .……………………………………………………….

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……………………………………………………………………………………………
……………………………………………………………………………………………

    xii.   Imwi milimu igwasya bukkale bwabantu (social services) (*amba*)…………

……………………………………………………………………………………………
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9. Kuli kuzwidilila na kwakachita mitabi ilyiimvwilidi muluundu oolu mulizyakugwasya bantu muliziyandika kapati mubuumi (basic social needs)? Inche pandulula nsandulo yako.

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10. Amba kuti nkaambonzi bantu bamuluundu lwa Luunga nibakkede kabali mubuchete kakuli mitabi ilimvwilidi igwasizya muli zyabukkale bwabantu……………………..

……………………………………………………………………………………………
……………………………………………………………………………………………
……………………………………………………………………………………………
……………………………………………………………………………………………

11. Uyeeya kuti niinzi zyeelede kuchitwa kuti mitabi ilimvwilidi ikonzye kuchita milimu iboneka mukugwasizya kwabo muli zyabukkale muluundu lwa Luunga ward 1?

……………………………………………………………………………………………
……………………………………………………………………………………………
……………………………………………………………………………………………
……………………………………………………………………………………………
……………………………………………………………………………………………

12. Zimwi zyakuyungizya………………………………………………………………..

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Ndalumba loko mukundigwasizya

APPENDIX IV

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Midlands State University

Department of Local Governance Studies

Key Informant Interview Guide for District and Ward level stakeholders

</div>

Introduction

I am Quegas Mutale, a Midlands State University student conducting a research on '**FACTORS affecting the success of NGO INTERVENTIONS IN SOCIAL SERVICE provision for the RURAL POOR COMMUNITIES in Zimbabwe: Case of Luunga Ward 1 in Binga District**. This is in partial fulfilment of the Bachelor of Science in Local Governance Studies (Honours Degree). Collected data is solely for academic purposes and will therefore not be made public. Please note that there is no follow up benefit for participating in this research, and therefore, participation is voluntary.

Section A: Personal information

1. Sex: Male: [ ]   Female [ ]
2. Age: […|…] years
3. Category: ………………………………………………….

Section B: Types of social services being delivered by NGOs

1. Which NGOs have you worked with in the social service sector in Luunga Ward 1 community for the past ten (10) years?
2. What interventions were done by NGOS in the following social service areas
   i.   Education
   ii.   Water and sanitation
   iii. Civic protection/ child protection
   iv.   Social amenities
   v.   Health
   vi.   Other social service interventions (*specify*).

Section C: Strategies used by NGOs in the provision of social services

3. What strategies are used by NGOs in their interventions in the social service sector?
4. Are you satisfied with these strategies? Why do you say so?
5. Do these NGOs consult you or the communities before implementing the projects?
6. Have there been any baseline surveys carried out so far by NGOs operating in Luunga Ward 1 community? Please explain further.

Section D: Factors that affect NGO interventions in the provision of social services

1. What selection criteria do NGOs use for their target group of population in social service provision?

Factors affecting the success of NGO interventions in social service provision for the rural poor communities in Zimbabwe: Case of Luunga Ward 1 in Binga District.

2. What factors contribute to the
    i.   Success and/ or
    ii.   Failure in social service provision by NGOs in Luunga Ward 1 community?

Section E: Meeting the rural poor's basic social needs

3. In terms of social services assistance, how has been the performance of NGOs in Luunga ward 1 community?
4. Do the poor rural community benefit from social service interventions by the NGOS? Explain in detail.
5. How has NGOs managed to address the basic social needs in Luunga ward 1 community?
6. What additional information do you wish me to know from this interview?

Thank you very much for your time with me.

APPENDIX V

<div align="center">

Midlands State University

Department of Local Governance Studies

<u>In-depth Interview guide for NGOs</u>

</div>

Introduction

I am Quegas Mutale, a Midlands State University student conducting research on '**FACTORS affecting the success of NGO INTERVENTIONS IN SOCIAL SERVICE provision for the RURAL POOR COMMUNITIES in Zimbabwe: Case of Luunga Ward 1 in Binga District**. This is in partial fulfilment of the Bachelor of Science in Local Governance Studies (Honours Degree). Collected data is solely for academic purposes and will therefore not be made public. Please note that there is no follow up benefit for participating in this research, and therefore, participation is voluntary.

Section A: Demographic information

1. Sex: Male [ ]   Female   [ ]
2. Age: [….|….] Years
3. Highest academic/ professional qualification: [……………………………………]
4. How long have you been at this organisation? [………|…years……|……Months]
5. Categories of the NGO   (i) Trust   [ ]   PVO   [ ]
                                (ii) Local   [ ]   International [ ]

Section B: Types of social services being delivered by NGOs

1. What do you understand by social services?
2. What social service interventions did you conduct to rural communities from the past 10 years in Luunga ward? explain in terms of
   i.   Health
   ii.   Education
   iii.   Water and sanitation
   iv.   Social amenities
   v.   Civic protection
   vi.   Other (*specify*).

Section C: Strategies used by NGOs in the provision of social services

1. What groups of people do you target for social service delivery?
2. Explain on your selection criteria for the target population/ beneficiaries in social service interventions.
3. What strategies do you use in these social service interventions? Please explain in detail.
4. Do you ever consult Luunga ward communities in social service programmes and projects that you have? Explain.

5. Have you ever conducted the baseline surveys in Luunga Ward as you assist with social services? If not, why?

Section D: Factors affecting NGO interventions in the provision of social services

1. How often do you conduct monitoring and evaluation?
2. Is the funding you get enough to assist Luunga ward 1 community with social services?
3. Who prescribes the type of interventions which you make in Luunga ward?
4. What is the nature of your relationship with

   i. District stakeholders: (a) Good   [ ]   (b) very good [ ]

                        (c) Poor   [ ]   (d) very poor [ ]

   ii. Sister NGOs   (a) Good   [ ]   (b) very good [ ]

                          (c) Poor   [ ]   (d) very poor [ ]

   iii. Luunga ward community   (a) Good   [ ]   (b) very good [ ]

                                   (c) Poor   [ ]   (d) very poor [ ]

   iv. Local leadership like village heads, chiefs, councillors, etc.

        (a) Good   [ ]   (b) very good   [ ]

        (c) Poor   [ ]   (d) very poor   [ ]

5. What is the nature of coordination between you and all other development partners in social service provision in Luunga community?

   (a) Strong   [ ]   (b) Very strong   [ ]

   (c) Weak   [ ]   (d) very weak   [ ]

6. What legal, political and economic constraints or enablers do you face in the delivery of social services in rural communities?
7. What would you say as the factors that contribute to

   i. Success of your interventions in social service provision

   ii. Failure to address desired results in social service provision?

8. What indicators do you use to measure your success or failure in social service interventions?

Section E: Meeting the rural poor's basic social needs

1. How far have you managed to meet the rural poor's basic social needs in Luunga ward 1 in Binga?
2. What do you think are the causes for continued poverty among the people of Luunga ward amidst your social service interventions?
3. What do you think has to be done in order to close the social services gap in Luunga ward 1 in Binga district?
4. If you have any additional information please feel free to share.

Thank you very much for the time and your participation in this interview.