

# An Evaluation of Community Engagement in Urban Service Provision, Kadoma City Health, 2016

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#### Abstract

Background: A community based organization (CBO) is a group of people who come together for service delivery in their community to improve their social and economic well-being. In 2013, Kadoma City replaced permanent employees with CBOs to improve community ownership in service delivery and reduce costs. Since 2013, no evaluation had been done to assess benefits and residents were complaining about inconsistencies in service delivery by CBOs. An evaluation was done to assess the benefit of engaging CBOs compared to city council employees.

Methods: A comparative cost analysis and a descriptive cross sectional study was conducted. Interviewer administered questionnaires, financial records and CBO contracts were used for data collection. Epi Info 7 was used to calculate means and frequencies. Microsoft-Excel 2013 was used to consolidate and analyze financial reports.

Results: Eighty-one residents, 30CBO members, 15councillors, 10 managers, five workers representatives were recruited into the study. CBOs provided a wider variety of services compared to city council employees. After an initial increase, there was a decrease in the costs for service delivery from \$849,000to \$590,000 per year. The benefits of engaging CBOs included reduced cost of services, improved service delivery and poverty alleviation.

Conclusions: There was net benefit from the engagement of CBOs, improved service delivery for less expenditure. On our recommendation, CBO contracts were renewed and more CBOs were engaged to cover other areas.

Keywords: Community based organizations, Kadoma, Zimbabwe

## **Background**

A community based organization (CBO) is defined as a group of people who come together and provide services in their community [1]. CBOs are usually representative of a community [2]. They are owned and managed by members who are placed on an equal level [3, 4]. It follows therefore, that the benefits accrued from the services provided are shared equally amongst the members. The main goal of a CBO is the improvement of the social and economic well-being of their immediate environment and of every member [4, 5]. Community based organizations are well positioned to deliver such services because they understand their local communities and are connected to the groups they serve [6].

In 2013, the Kadoma City Council took a management decision to subcontract some duties previously undertaken by council through employees to CBOs. The decision was made as a way of improving community ownership in service delivery, poverty alleviation as well as a cost reduction measure. The community based organizations (CBOs), to whom contracts were offered are not employed by the council as individuals, however, they are paid a lump sum for services rendered as a group. As these are not individual employees, there are no individual salaries, pensions or medical expenses incurred by the council. As a result, nine CBOs were engaged by the City Council Department of Health and Environmental Services. The services being provided by the CBOs include solid waste management, sanitation services and community education among others.

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Since 2013, there had not been an evaluation to assess the quality and cost of services being provided by the CBOs. There have been complaints by residents where services have not been consistently delivered in some areas. Middle level managers have also noted cases where CBOs fail to provide services in certain areas citing that they are not included in their contracts. We evaluated the changes in cost and quality of service delivery brought about by engaging CBOs.

#### Methods

A comparative cost assessment conducted to conclude on whether the engagement of CBOs was worthwhile. A descriptive cross sectional study was also conducted to capture the perceptions of stakeholders concerning the provision of services by CBOs. All the 51members in the nine CBOs, all the 17 councilors in Kadoma City Council, 14 managers in the Health and Environmental Services department, five managers in the Finance department and the eight workers' representatives in the Health sub-committee were purposively sampled. The community members were conveniently sampled from the Kadoma Central Business District (CBD). This included shop-owners, vendors and those who had come to conduct business in the CBD.A review of financial records and the contracts of the CBOs from 2013 to 2015 was conducted to compare the direct cost of service delivery in monetary terms and the exact services provided.

Interviewer administered questionnaires were used to collect data from CBO members, managers, councilors, workers' representatives and community members to document their perspectives on the changes in service delivery. As a proxy for consumer satisfaction, the community members were asked to rank the services being provided by the CBOs out of 10, with ten being the highest possible score representing the best service that could be provided. This was done in an attempt to quickly document the benefits and other changes brought about by engaging CBOs.

Data were captured from the questionnaires and analyzed using Epi Info 7TM (CDC, 2012). Frequencies and means were calculated using this software. Financial reports were consolidated and analyzed to assess costs using Microsoft Excel 2013. Written informed consent was obtained from all participants for both participation and publication. Permission and ethical approval was obtained from the Health Studies Office.

## **Results**

# **Demographic characteristics**

Eighty-one community members, 30 managers and 30 community based group (CBO members) were recruited into this study. Their demographic characteristics are presented in Table 1 and Table 2

## **Service provision**

The services being provided before and after engaging CBOs were compared. More services were being provided by Kadoma City Health after engaging CBOs. (Table 3)

# Cost of service delivery

The costs for service delivery per year increased from \$849,000 in 2012 to \$858,800 in 2013. This was then followed by a sustained decrease to \$590,924. A net benefit of \$258,076 was achieved. (Figure 1)

# Perceived benefits of engaging CBOs

According to the managers, the benefits of engaging CBOs are, reduced cost of services (70%), community involvement (50%), reduced workload (10%) and improved service delivery (20%). All the 30 CBO members mentioned that the benefit of engaging CBOs was poverty alleviation as they now had a source of income. All the 30 CBO members also reported that they had a platform to represent their communities and could communicate easily to the city council is there were problems in their communities.

On the other hand, the community members were citing improved service delivery (69%), better quality of service (21%), community involvement (6%) and reduced cost of services (4%) as the benefits of engaging CBOs.

#### **Discussion**

There was a net reduction in costs after engaging CBOs. It is clear from this analysis that CBOs do not require significant financial investment for them to deliver services. This is consistent with Seabroke (2014) who reported that not reliant on significant financial investment in order to be able to deliver their activities [7]. In the case of Kadoma city this is because the CBOs are only paid for work done. This also supports the theory by Abegunde (2009) that CBOs could act as vehicles toward sustainable socio economic and physical development of communities in developing nations [4]. This is because they provide essential services at a cost that is cheaper than engaging permanent employees which benefits the local authority.

The benefits of engaging CBOs are, reduced cost of services, community involvement, reduced workload, improved service delivery, poverty alleviation, better quality of service and reduced cost of services. This is consistent with a report by Service Opare (2007). It was noted in that report that CBOs are a valuable human resource that resulted in better services for the community [8]. It is also consistent with Ambaliet.al. (2014) who concluded that there was a significant positive relationship between economic status and participation in CBOs [5].

All the 30 CBO members also reported that they had a platform to represent their communities and could communicate easily to the city council is there were problems in their communities. This is consistent with Bhanet.al. (2009) it was concluded that CBOs play an important roles as an interface, access point and advocate for the community [9].

In Kadoma City, the services being provided by CBOs include refuse collection, clearing refuse heaps, street cleaning, toilet cleaning, borehole maintenance and unblocking sewer lines. Refuse collection, clearing refuse heaps, street cleaning, toilet cleaning and unblocking sewer lines show a steady increase in the mean scores. Using this as a proxy for consumer/ customer satisfaction, there has been an increase in the levels of satisfaction among the community members. It therefore follows that the introduction of CBOs brought about a positive change in the quality of service delivery. For the City council, increased community member satisfaction means an increased willingness to pay in a stable economy. As a result, the council will be in a better financial position to provide even better service.

From this study, it is evident that the introduction of CBOs brings about an improvement in service delivery at a lower cost. This could mean that for those city councils, that are not able to effectively provide services for their residents, CBOs are the way to go.

The stakeholders had different perceptions. The managers and councillors thought the move of engaging CBOs had been successful and they had influence in decision making regarding CBOs. On the other hand, the workers' representatives were not fully convinced of the success of the move and thought they had no influence at all in decision making.

While the gains made by the introduction of CBOs cannot be disputed, it is important that during the process, all stakeholders be engaged. This will ensure coherence and synergies between their specific roles in the process of anticipating and managing change [10]. The communication helps to improve the transparency of the decision-making process by ensuring that all staff affected by change are informed at the earliest opportunity of any potential changes in their work area and the reasons behind such a change. It also enables workers and their representatives to raise any concerns they may have so that these taken into consideration by management in the decision-making process [11]. There was difficulty in locating records on how often the permanent employees were receiving personal protective equipment and other equipment for their work. It was therefore not possible to cost these and compare with the CBOs.

# **Conclusions**

The costs for service delivery were higher before engaging CBOs. The benefits of engaging CBOs are, reduced cost of services, community involvement, reduced workload, improved service delivery, poverty alleviation, better quality of service, reduced cost of services and advocacy. The stakeholders had different perceptions. The managers and councilors thought the move of engaging CBOs had been successful and they had influence in decision making regarding CBOs. On the other hand, the workers' representatives were not fully convinced of the success of the move, thought they had no

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influence at all in decision making and had been left out of the process. On our recommendation, CBO contracts were renewed.

#### List of abbreviations

CBO: Community based organizations

CDC: Centers for Disease Control and Prevention

# Ethics approval and consent to participate

Ethics approval was obtained from Health Studies Office. Voluntary written informed consent was obtained from all participants before the interviews.

# **Consent for publication**

Voluntary written informed consent was obtained from all participants for publication of results.

### Availability of data and materials

Raw data can be made available on request to the corresponding author.

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# Figure legends

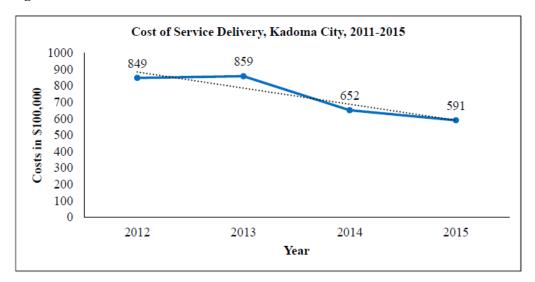


Figure 1. Costs of service delivery in kadoma city, 2011-2015

Table 1. Demographic characteristics of CBO members and managers in kadoma city, 2016

Variable	CBO Member	rs Councillors n=15	Managers n= 10	Workers' representatives n=5
Median age in years(Q1,	40(34, 50)	50(47,58)	34(30, 44)	50(40,50)
Q3)		14(020/)		4(000/)
Sex		14(93%)		4(80%)
Male	7 (23%)	1(7%)	6(60%)	1(20%)
Female	23 (77%)		4 (40%)	
Median time in post in year (Q1,Q3)	s 3 (3, 3)	3(3,13)	3 (3.5, 8)	2(2,4)

Table 2. Demographic Characteristics of Community Members in Kadoma City, 2016

Variable	Community Members n (%)	
Median age in years(Q1, Q3)	30 (27,38)	
Sex		
Male	38 (47)	
Female	43 (53)	
Area of residence		
Rimuka	35(43)	
Waverly	18(22)	
Eiffel Flats	10(17)	
Ngezi	6(7)	
Westview	5(6)	
Other	7(10)	
Years of stay (Q1,Q3)	13 (9, 26)	

**Table 3.** Comparison of Services before and after the Introduction of CBOs, Kadoma City, 2016

	Before CBOs	After CBOs
Refuse collection	V	
Clearing refuse heaps	inconsistent	$\sqrt{}$
Street cleaning	$\sqrt{}$	$\checkmark$
Toilet cleaning	$\sqrt{}$	$\sqrt{}$
Borehole security		$\sqrt{}$
Maintenance of council grounds	$\sqrt{}$	$\checkmark$
Unblocking minor sewer blockages	inconsistent	$\sqrt{}$
Operating pay toilets	$\sqrt{}$	