Beyond Basic Needs: Programming for marginalised and vulnerable groups – The Australian Partnerships with African Communities (APAC) Programme

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The Australian Partnerships with African Communities (APAC) programme is a five-year cooperation agreement (2004-2009) between the Australian Agency for International Development (AusAID) and Australian NGOs to address emerging development challenges in Southern and Eastern Africa, using community-based approaches. With the end of the five-year agreement in sight, it is time to look at the key lessons, successes and innovations of the programme. This briefing is the second of three. The first explored People in Planning processes (Samuels, et al., 2008) and the third will highlight the innovative ways in which Australian and African NGOs have worked together.

This Briefing focuses on aspects of service delivery that go beyond the provision of basic services. It explores the ways in which APAC partners in Kenya, South Africa, Uganda and Zambia have, increasingly, recognised the need to address issues of vulnerability and exclusion to achieve lasting changes.

Sub-Saharan Africa, where APAC is operating, has seen the convergence of a number of factors that have increased the vulnerability and marginalisation of people who are already poor. These factors have included high HIV prevalence rates, humanitarian emergencies (both man-made and natural) and poor governance structures. This has been referred to as a Triple Threat (UN, 2003). While the provision of interventions to meet basic needs are essential where poverty is pervasive and where the majority of people live on less than $2 per day, there is growing recognition that these should be accompanied by strategies that empower people to know their rights and demand equitable access to services.

Why ‘Beyond Basic Needs’ (BBN)?

Development and human rights are interdependent and mutually reinforcing. For development to be sustainable, marginalised and vulnerable groups need secure and long-term access to the resources required to satisfy their needs, including economic, social, cultural, civil or political resources.

A rights-based programming approach (Box 1) is one approach that acknowledges the need to go Beyond Basic Needs (BBN). BBN includes issues of respect, safety, the need to ‘belong’ and trust (see Box 2). Examples of BBN-type of approaches can be found in APAC programmes that address stigma and discrimination and in those that provide psychosocial support to orphans and vulnerable children (OVC) and other marginalised and vulnerable groups.

Two broad approaches are seen among APAC partners. First, those that started out by addressing basic needs and used their success to go beyond their original goals, realising that lasting change would only be possible if they also addressed issues of rights and exclusion. And second, those that started with...
The original purpose of CF’s pro-

Box 1: Rights-based programming

According to the United Nations Development Programme (UNDP): ‘A human rights based approach leads to better and more sustainable outcomes by analyzing and addressing the inequalities, discriminatory practices and unjust power relations which are often at the heart of development problems. It puts the international human rights entitlements and claims of the people and the corresponding obligations of the State in the centre of the national development debate’ (http://www.undg.org/?P=221). Underpinning this are the Convention on the Rights of the Child and the Convention on the Elimination of all Forms of Discrimination against Women.

Box 2: Concepts related to Beyond Basic Needs (BBN) and Basic Needs (BN) as defined by the APAC technical team


Basic Needs: Shelter, food, water and sanitation, education, health.

From BBN to BN and back again

Three examples of the work of partners are described below: the ChildFund (CF), working in Kenya, Uganda and Zambia; Plan/FIDA (the Association of Women’s Lawyers) in Uganda, who began with BBN and moved to BN; and Chikuni, in Zambia, who started with a focus on BN and shifted to BBN.

From BBN to BN: ChildFund (CF), Kenya, Uganda and Zambia. The original purpose of CF’s programme was to improve the psychosocial wellbeing of children and youth living with HIV by strengthening community-based support systems. Findings from baseline surveys showed that communities were unable to adequately care for and support HIV-affected and other vulnerable children and youth in their own communities, and that counselling and other psychosocial support services for vulnerable children/youth were extremely limited.

In response, programmes were developed that included: vocational training for vulnerable households; HIV prevention education; peer education; life skills; child/youth mobilisation, empowerment and participation; and provision of children’s/ youth clubs. Psychosocial support to children was also provided by building the capacity of teachers and carers in the community. Training caregivers, teachers and a range of other stakeholders, such as the police, meant that it was not only the individual child and his or her family who received support, as was occurring in CF’s earlier child sponsorship programmes, but the community, in general, became more involved in providing a supportive environment for vulnerable children and their families.

Children whose psychological and material needs are met are much more likely to become self-sufficient and participate actively in their own development (Richter et al., 2006). The move beyond the provision of basic needs has been facilitated by food security initiatives with caregiver groups and in schools. One example is the establishment of school gardens, where food from the gardens is used to enhance school-feeding initiatives, or sold to generate income to benefit pupils, particularly OVC. Children and parents involved in the gardens also benefit through acquiring farming skills and learning about appropriate technologies.

From land-grabbing to domestic violence – from BN to BBN: Plan/FIDA. The Plan/FIDA programme works explicitly on rights issues, both the abuse of individual rights and the barriers to accessing services (e.g. education) that stem from stigma and discrimination. FIDA works on the basis that people can only assert their own rights and respond to the rights of others if they are aware of those rights. The programme has improved access to legal services by children, women, and men affected by HIV and AIDS through training clan leaders, religious leaders and law enforcement officers in will-making, succession and inheritance laws.

From BN to BBN: Chikuni Mission. This Catholic mission in Southern Zambia is a partner of the Australian Foundation for the Peoples of Asia and the Pacific in the APAC programme. The Mission has developed a Home Based Care (HBC) programme to provide care and support to people living with HIV in the mission area, and runs a hospital and a community radio, as well as many other community projects.

The Chikuni HBC programme has had remarkable success in reducing levels of stigma and discrimination towards those living with HIV, and a number of local leaders are open about their positive status. Support groups are now involved in local decision-making bodies and a weekly radio programme is designed and delivered exclusively by people living with HIV. At the outset, the Chikuni HBC programme aimed to reach those living with HIV with basic health care and support. It soon moved beyond this, as it became clear that stigma and discrimination played a big part in the community response to HIV and AIDS. The success of the programme is due, in large part, to the broad range of activities led by people living with HIV.

What makes the BBN approach work?

Using a rights-based programming framework, APAC’s Beyond Basic Needs programming has empowered marginalised and vulnerable populations. There are six key elements in this success:

- Participation and responsibility. The APAC programmes have demonstrated clearly that where participation is part of decision making, planning and execution the chances of success are higher,
with participants taking on increased levels of responsibility. Many of the APAC programmes took a nuanced approach to participation, with different groups with different levels of adherence to the programmes having different levels of participation. In the Chikuni HBC programme, for example, people living with HIV formed Positive and Living Squads (PALS), but this was backed by the active support of traditional and community leaders, which legitimised the initiative in the eyes of the whole community. There is a high level of both individual (e.g. adherence to antiretroviral therapy (ART)) and community responsibility in the Chikuni programme, which augurs well for sustainability of its initiatives.

In both of the CF programmes, child participation was central to success. Children took responsibility for planning and carrying out the activities and campaigned actively for their rights with government officials and politicians.

**Breaking the barriers.** Partners aim to break the often hidden barriers to accessing services. For example: HIV-testing facilities only make a difference if they are used; antiretroviral drugs only work if taken at the right time in the right way and with sufficient food; and counselling services for victims of domestic violence can only protect if domestic violence is recognised as abuse. The APAC programmes work on these issues through stigma and discrimination programmes, psycho-social support initiatives and through legal and community counselling services.

The Chikuni Mission boasts a near 100% HIV-testing rate and there are, at present, no cases of treatment adherence failure. This is the result of intensive and innovative work to address stigma and discrimination. The work by Plan/FIDA on legal and paralegal services has brought the issue of domestic violence to the forefront in communities. Debate on discrimination programmes, psycho-social support initiatives and through legal and community counselling services.

The psychological wellbeing index contains 13 variables, including:
- I blame myself for what happened;
- I feel like leaving this world;
- I have an upset stomach when I think about some things in my life;
- I am satisfied with my life.

The social wellbeing index contains seven variables, including:
- I have arguments with family members;
- I feel loved and wanted by my family;
- I trust my relatives to look out for my best interests;
- I have an adult to comfort me when I am sad or sick.

Responses range from: ‘never’, ‘rarely’, ‘sometimes’, ‘frequently’, to almost always. These indices were used in group sessions and fed back to children and carers as a form of real time monitoring. The programme was adjusted according to the results. The indices were also a formal part of the impact evaluation at mid-term and will be used in the final evaluation.

**Targeting and working with unconventional partners.** APAC partners have developed innovative ways to identify target populations. FIDA, for instance, included men – an often neglected but critical group – as key players in rights-based programming. CF ensured that head teachers were included in work on protection, stigma and discrimination, providing leadership within schools. Similarly, CF was supported by the community to identify vulnerable youth and children, while FIDA recognised the key importance of clan leaders, including them as principal targets for capacity building.

**Standard and innovative ways of measuring change.** Strong monitoring and evaluation systems, the use of baseline surveys and continuous documentation have helped APAC partners identify and address the vulnerabilities facing marginalised and vulnerable groups. As well as measuring ‘hard’ outcomes, such as the numbers of children staying at school, and the numbers of people testing for HIV, APAC partners have measured ‘softer’ issues, such as self belief, self worth, safety and security. CF, for example, has made progress in developing monitoring instruments that have been used by community members to judge the impact of activities. These included measures of self esteem and confidence (see Box 3). Other programmes have shown clear examples of people who were once ‘invisible’, including children and young people, being empowered to speak about their situations and lobby for change.

**Significant involvement of the community allows for sustainability.** Community involvement in planning, implementation, monitoring and evaluation offers an opportunity both for learning and for following the future progress of the intervention. Plan Kenya has, for example, involved communi-
ties in data collection, analysis and dissemination. Other APAC partners have involved traditional leaders, which has made the adoption of programmes at community level much easier. Such leaders are respected as the custodians of culture and are major community power brokers. Stigma and discrimination has decreased where those living with HIV are now involved in decision-making and communities are, increasingly, accepting them. The success of the Chikuni HBC programme in Zambia is a prime example.

Lessons learned
BN and BNN are not mutually exclusive – they need to go hand in hand. Meeting Basic Needs addresses only the most immediate vulnerabilities faced by marginalised and vulnerable groups and the needs are likely to be continuous. At the same time, offering only Beyond Basic Needs, without addressing basic needs, is likely to result in resources being diverted to meet those basic needs. Programmes should address both basic needs provision as well as long term strategies to deal with policy changes and higher level outcomes.

Scale-up requires addressing BN and BBN from the outset. BN and BBN should be addressed together, though not necessarily simultaneously, from the initial design of the programme. Indicators on when the programme should shift from one to the other should be clear from start-up. The situation and context will determine whether interventions should start with BN or BBN programming. During implementation, interventions should be sensitive, flexible and have a strong learning framework in which staff continuously review and document progress, lessons, strengths, challenges and threats.

Strategic partnerships are crucial to empower vulnerable populations. The BBN model has shown that strategic partnerships with civil society, community leaders and government structures are complementary and will help to provide a comprehensive response to vulnerable groups. Partnerships with civil society will help to increase resources, for instance, while government partnerships will provide an opportunity for policy development, change and implementation.

Rights and responsibilities form the bedrock of sustainable development. All of the APAC programmes reviewed showed that it is impossible to address chronic poverty without acknowledging that poverty is, in itself, a rights violation, and ensuring that excluded and marginalised communities benefit directly from programmes. The programmes that have resolved this issue have some common ground. All worked with ‘vulnerable’ groups and gave active support to their leadership and involvement. All have worked with sustainable and long-lasting structures.

BBN approaches need validation through measurable impacts and tangible results. The ability to measure and demonstrate results is essential in going Beyond Basic Needs. The case studies were selected largely on the basis that they demonstrated tangible results, such as increased access to HIV testing or in decreased cases of property grabbing. But, very importantly, they show how and why these improvements have happened. This means that the models can be replicated.

Constant monitoring and flexibility is necessary to ensure that programmes respond to differing forms and levels of vulnerability. One of the hallmarks of the success of these programmes is that, although there are clear indicators to measure success against baselines, programmers are constantly reviewing who is vulnerable and who is accessing care. Programmes can, therefore, not only be refined to meet their initial goals, but to ensure that new lessons learned can be applied as vulnerabilities change, or as hidden vulnerabilities become more transparent.

The provision of Basic Needs and Beyond Basic Needs services are interlinked and are complementary. Both are critical for the achievement of long term and sustainable empowerment for marginalised and vulnerable groups.

References and resources

References:


Useful resources: