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The Organisation and Delivery of Social Services to Rural Areas*

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ABSTRACT

A critical challenge now facing social development education in Africa is the urgent need to specify, in concrete terms, the content of social development, to isolate the basic ingredients of the roles and tasks of social development practitioners, to determine the knowledge, skills and behaviour requirements of those roles and tasks, to design and produce the necessary teaching materials, and to arrange relevant field learning experiences.

Introduction

This paper attempts to contribute to the effort currently being made by social development educators to meet the need for more specific content and tasks in social development. A diagnostic profile of rural life is presented in order to highlight the typical problems of the rural dweller that call for social development intervention. Social development intervention is conceptualised here as the systematic assessment of human needs, the design and production of social services, and the delivery of these services. Viewing social services as an interventional instrument, whose inherent strengths and limitations ought to be adequately appreciated by the social development practitioner, this paper proposes a somewhat unorthodox conception of social services but one which is deemed to be appropriate to social development in poor countries. A typology of social services is attempted as one step towards sensitising social development practitioners to the spectrum of non-traditional social services that might be available in their environment, and to enhance their discriminating competence in choosing services for inclusion in their intervention package.

Some of the critical issues that underlie the organisation of social services, the common obstacles to successful delivery of benefits to intended recipients in rural Africa, and the implications of all of these for social development curriculum and research are briefly considered.

In brief then, this paper divides into five themes, namely, a diagnostic

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profile of rural life, the nature of social services, basic questions underlying social service organisation, challenges to the delivery of social benefits to rural communities, and some implications for social development curriculum and research.

Diagnostic profile of rural life

The profile of rural life presented here is necessarily selective and is intentionally biased. Its purpose is to direct attention to the phenomena in rural areas that call for social development intervention. Thus, no attempt is made to describe the brighter aspects of rural life, such as the caring social relationships that exist among neighbours and relatives, the untapped intellectual assets of rural people, the unexploited natural resources of the land, the unpolluted atmosphere, and the relatively high moral standard with which rural people normally conduct their public affairs.

The choice of the aspects of rural life to be described here has been inspired by Robert Chambers' powerful concept of the 'deprivation trap' (Chambers:1988a). The concept suggests five areas of assessment for the social development practitioner intending to make a diagnosis in a rural community. These areas include basic needs, the physical fitness of rural people, the capacity for absorption of episodic shocks, access to critical services, and their ability to influence policies and decisions that intimately affect their lives. These are, among others, the areas of basic concern for the social development practitioner. The necessary data has not been collected which will lend empirical support to what is being said here about rural life, but the purpose of the exercise is to articulate personal observations and to draw implications for intervention and research. The discussion now turns to a consideration of each of these five cases.

The basic needs, of which the development literature currently speak, are nutrition, safe drinking water, reasonable clothing, reasonable housing, adequate health care, education, and participation in critical decision making. If one chooses an African country at random and assesses a random sample of rural communities on these areas of basic need, the probability is very high that a vast majority of rural dwellers would be found to be malnourished, drinking unsafe water, wearing very old or torn clothing, sleeping in poor, unhygienic houses, lacking access to health care and education, and excluded from meaningful participation in making decisions that are of vital consequence to them, like fixing the price of the products upon which their livelihood depends. Specially designed social services, of one form or another, are needed as a direct or indirect means of reducing deprivation in these areas of basic need. For example, organising the people of a community and linking them to the technical advice and other services of public health personnel might lead to the establishment of primary health care in the community and to the eventual reduction of morbidity in the

community. Morbidity reduction is likely to have widespread positive consequences for other areas of basic need, and to reduce poverty in the long run.¹ The sad scenario is that food supplies are erratic and are quantitatively and qualitatively inadequate, and a substantial proportion of the rural population suffers from seasonal hunger; water supplies are far from developed and little or no technology exists in the rural area to tap underground water, to conserve rain water, or to protect existing wells and springs; many of the diseases rural people suffer from are preventable and are associated with drinking unsafe water, and a significant proportion of rural people's precious time is spent on collecting water from very distant sources. This scenario implies that there are many potential areas of entry for social development intervention.

The deprivations outlined above have the effect of undermining the physical fitness of household labour. Because they have insufficiently nutritious diets, drink unsafe water, and live in unsanitary environments, rural people are constantly exposed to debilitating diseases which, in the absence of adequate health care, remain insufficiently treated and undermine physical fitness. Many rural households often experience labour crises, particularly during the rainy seasons (Chambers:1983b). A recent series of research studies in Africa and Asia have established that there is a seasonal dimension to rural deprivation and that deprivation reaches a peak during the wet seasons when food supplies run out, malnourishment mounts, water-borne diseases increase, and labour-demanding activities assume the greatest urgency. Physically unfit, many village people fail to undertake productive agricultural activities at the right time and are exposed to further deprivations.

A very important area of rural life, that calls for continuous assessment, is the capacity of households in the community to absorb episodic shocks that may occur in their environment. Episodic shocks in the rural environment include the unanticipated, unfavourable, sharp discontinuities in conditions of survival. They include natural hazards like drought, floods and visitations of locusts, which may lead to total crop failure or death of livestock. They also include man-made problems, like civil wars conducted in the rural areas. An outbreak of human disease may have the same effect on the household's economic survival (Muzaale:1980). The ability of a household or community to withstand the impact of negative events like this is a function of the size of its buffer stocks, cash savings and other reserves. The longer the duration of the environmental shock the larger the reserves needed to sustain the household. Unfortunately, however, the vast majority of rural households live hand to mouth and are constantly subject to pre-harvest hunger, and episodic shocks are exceedingly dangerous to rural life. Community assessment on this criterion would result in a ranking and counting of households according to their resilience. Social development

intervention would take remedial, preventive and developmental forms — food relief, promotion of famine insurance crops like cassava — and facilitate as well as accelerate agricultural development or otherwise create employment for the landless. Preventive action would require the establishment and efficient operation of a social monitoring and early warning system. This is a critical area of social development intervention, needed to reduce vulnerability.

An equally important area of rural life that deserves assessment is the degree to which a community has physical and social access to the vital resources of health care, schools, agricultural and veterinary extension services, essential consumer goods, and marketing facilities. Again, even in this regard, many African villages are isolated from these resources, either physically or socially. Health care, educational facilities, marketing facilities, and consumer goods tend to be concentrated in the national and district capitals. In some countries the cost of transport to utilise services in the urban centres often exceeds the money value of the services likely to be secured there. This is especially true of health care. Moreover, even the carriers of publically financed technical services, the extension workers, tend to stay away from rural areas during the wet season, a season during which their services are most needed — the so called dry weather bias of urban rural development workers (Chambers:1983a/b). Even when they do visit rural communities, extension workers tend to prefer to serve only certain kinds of households: those of progressive farmers. The latter do not only pay the extension workers special *per diem*, but also offer the higher probability of success of extension services. Social development intervention is needed to reduce the physical and social isolation of rural households from critical services.

The final area of need assessment to be considered here is that of the rural dweller's ability to influence decisions and policies that affect their lives. This ability may be assessed in terms of the number of effective channels of participation in public decision making that are open to them. These may take the form of pressure groups (like cooperatives) and have been appropriately referred to as upward representation linkages (Person in Leonard et al:1982). In most African countries these upward linkages have either not been established or not allowed to develop to levels of effective functioning. Thus, the typical rural dweller is unable, for example, to influence decisions on produce pricing and on the location of social service facilities. While this is a legitimate area for social development intervention, little consensus exists among practitioners as to whether the profession has as yet developed a 'safe' interventional technology for use in countries with regimes that cannot tolerate concepts of power sharing. The challenge for social development practitioners in this area is to devise strategies for imparting leadership and management skills to the rural dweller, while at

the same time finding ways of convincing the intolerant politician that power sharing is in the interest of all, including the politician himself. In this way the day may come when the voice of the ordinary rural dweller will be institutionalised in the conducting of national affairs.² Institutionalisation of that voice is a crucial means to, as well as a significant index of, social development.

The nature and role of social services

A careful examination of the social history of any society would reveal that social services are an important instrument of social intervention. Their substance, specific purpose, and manner of provision may vary over time, as social policies vary, but their essential role remains that of collective provision designed to meet selected human needs. To use an imperfect but useful analogy, the role of social services in dealing with individual and collective needs is like that of medical drugs in curative and preventive health care. Just as medical practitioners must thoroughly understand the nature of the drugs they prescribe, so also must the social development practitioner understand the nature of the social services he prescribes. This section of the paper proposes what the present author assesses to be the conception of social services that is appropriate to the unique concerns and conditions of social development in poor countries. The set of social services that is suggested by the conceptualisation to be presented here will include many that are, admittedly, unconventional social services. But conventional social services cover only a subset of the concerns of social development in poor countries. In order to sensitise the social development practitioner to the spectrum of unconventional social services that may be available or organisable in his environment, and to enhance his discriminating skill in the choice of services and in the composition of his intervention packages, a typology of social services is also presented. The presentation is prefaced with a brief review of conventional conceptions of social services.

Concepts of social services in Western Europe and North America, which inform much of social work education and practice in Africa today, were originally developed from a residual view of social policy. Social services were originally conceived as social benefits organised and financed by the many, that were well-off, for the individual consumption of the few, that were assessed to be deficient and incapable of fending for themselves. They addressed the recognised needs of the minority seeking to overcome personal, rather than systemic defects (Brown:1977). While this conception of social services still appeals to the conservatives of the West, it is being abandoned by an increasing number of social analysts in favour of the institutional view, which confers a much wider societal role upon social services (for instance Wilensky and Lebeaux, 1985; Wolins, 1967). But even this emerging, wider role of social services in advanced countries has the

human problems of industrial society as its focus, and is only partially relevant to the primarily rural, agrarian problems of mass poverty in developing countries. There being very few rich people in poor countries, social services must be organised for, and sustained by, the majority of the poor themselves, to address primarily rural, agrarian problems of living.

Now the discussion turns to the construction of a concept of social services that is relevant to social development in Africa. The concept includes the material benefits, technical services and emotional support services provided by government technical ministries, voluntary organisations, and local mutual aid groups. They are distinguishable not by the occupational identities of those who produce the individual services but by their direct focus on increasing the capacity of households to improve their own resource base and to apply it effectively to the solution of problems and the satisfaction of felt needs. This set of largely unconventional social services includes, among others, agricultural extension; public health; health education; marketing services; the construction of various infrastructural services, like roads and food storage; water development schemes; and producer and service cooperatives.³ As their large number and diversity indicates, they are scattered and are to be found in all governmental and non-governmental organisations. They are not concentrated in one single ministry, as conventional social services tend to be. They are distinctively social services if they are produced, synthesised, and delivered to the recipient individuals, households, or communities, guided by an all-embracing vision of the beneficiaries' needs and social situation. Since the social development practitioner's intervention is typically guided by an aggregated view of the needs of a human being, it is normally the participation of the social development practitioner in the organisation and delivery of these services that is likely to give them the distinctive character of a social service, as here defined. This also means that any other kind of professional may convert these discrete services into social services, if he is guided by that all-embracing view of people's needs. Social services are validly evaluated if they are examined in terms of their contribution to a timely identification and correct assessment of needs, and increasing the capacities of individuals, households, or institutions to meet the needs.

At this stage it is necessary to present a typology of these very broadly conceived social services in order to clarify their important dimensions and to deepen the social intervener's understanding of his tool. A social service, or set of social services, may be classified by its dominant *objective*, its primary *auspices*, or the dominant *form* it takes. On the basis of these criteria a number of social service typologies may be generated. Each of these dimensions will now be considered in turn.

Considered in terms of typical dominant objectives, social services divide into three categories, corresponding to the three conceptually distinguish-

able emphases of social development, namely, the *developmental*, the *preventive* and the *remedial*. Developmental social services include, but are not limited to, formal education, extension education, and the services of all organisations that serve producers. The consumption of developmental social services are hypothesised to result in an increased quality of life based on increased higher productive capacity, both actual and potential.

Preventive social services include, among others, family planning programmes, youth service programmes, public health and health education programmes, soil conservation and afforestation programmes, meteorological data, devices of social monitoring and the early warning signals they might provide, and the steps taken to encourage the production and maintenance of buffer stocks, as well as to promote famine-insurance crops, such as cassava. As can be seen, preventive social services are highly diverse and, accordingly, demand the co-ordinative contribution of the social development practitioner. Preventive social services are hypothesised to reduce the vulnerability of, especially, rural households and communities, by increasing their ability to absorb episodic shocks that may occur within their environments. By episodic shocks is meant, as earlier defined, the unanticipated, unfavourable, sharp discontinuities in the survival situation of a social entity which could seriously endanger its life, unless there are back-up resources available. The main purpose of preventive social services, therefore, is to increase absorptive capacity and social resilience by increasing social preparedness against episodic shocks (Muzaale:1980).

Remedial social services, alternatively known as social welfare services, are the more familiar category of social services. These largely correspond to those originally conceived in Western Europe and North America, as already explained in the preface to this description, and do not need further elaboration here. Remedial social services include, but are not limited to, services for the mentally and physically handicapped, probation services, services for the abused or battered child, various child welfare and adoption services, marital counselling services, and reformatory schools. Professional skills for dealing with these problems are regarded as social development skills only to the extent that they include a capacity and concern for relating correctional actions in this area to long term, developmental objectives. The common feature of this category of services is that they are highly resource-demanding, although their social benefits are highly uncertain and typically take very long to be realised. It is assumed that, where developmental and preventive social services are effective, the need for remedial services will decrease rapidly, though not disappear altogether.

If social services are categorised by *auspices* three sub-categories are discernible as follows: *statutory*, *voluntary*, and *communal* social services. The significance of viewing services in terms of auspices is that it directs attention to the policies of the supplying agency regarding who is entitled to

services, methods and sources of funding, and mechanisms of delivery to recipients. Statutory social services are established by social legislation, which specifies the target group, sanctions which tax revenue shall finance the services and establishes the bureaucracies that will produce and distribute the services. Statutory social services include all the technical services and other social benefits administered by governmental bureaucracies, as earlier explained.

Voluntary social services are provided voluntarily by, and on the initiative of, philanthropic private agencies, like the Red Cross, Save the Children Fund, Oxfam, the YMCA, YWCA, and Family Planning Associations. These services are conceived, financed, produced and delivered by these private organisations. Although private charitable organisations receive government subventions through the national councils of social services, the hallmarks of voluntary social services are private initiative and private funding. Further, it is important to note that these services have historically been critical to the growth of statutory social services, in that the former have typically pioneered the identification of some needs and the creation of provisions for them, thereby stimulating social legislation to establish corresponding statutory social services. It must be pointed out, however, that social legislation has also influenced voluntary social services, encouraging or retarding their growth, through the legal provisions that govern the establishment and operation of those services.

Communal social services are those organised informally for a household in need by local mutual aid groups, under the supervision of *ad hoc* traditional village leadership.⁴ A good number of services that are of grave importance to rural families fall into this category. The first example of these are the services organised for a bereaved family by others in the neighbourhood, which consist of contributions of food, funeral expenses and spending a number of nights in the home of the bereaved family in order to provide social-emotional support. Other examples include the benefits of rotating credit and saving groups and those of labour-sharing groups, especially during such periods of acute labour demand as the planting and harvesting seasons. It would be a good idea for social policies at the national level to formally recognise, support and build on these local mutual aid groups, in the same way they support formal voluntary social service agencies.

Finally, it is also important to classify social services according to the form they take.⁵ Some forms of benefit offer a greater degree of choice to the recipient as to use and to delivery agency. The greater the freedom of choice as to use, as in the case of cash, the more difficult it is to ensure that the benefit shall be used for the socially intended purpose. Gilbert and Specht (1974) discern six categories, namely, opportunities, services,⁶ goods, credits, cash and power. This is a much more precise way of analysing social

services than limiting the categorisation to 'cash' and 'in kind' forms, and a grasp of these very many forms should be helpful to the social development practitioners in creatively conceptualising or discerning social services within their operational environment.

Considering the many criteria for classification of social services that have been discussed here, numerous forms may be discerned. If the sub-categories discernible under the main criteria of *objective*, *auspices*, and *form* are juxtaposed, numerous other sub-categories may be generated and further precision achieved, but there has to be a limit to the pursuit of precision, and this will of course depend on the practical purpose under consideration. It must be pointed out, in conclusion, that a social development practitioner needs to be acquainted with a wide spectrum of social services and understand what professional objectives he can achieve with each type of social service.

Critical issues in social service organisation

As may have become evident, social services are benefits collectively organised and provided to consumers on non-market criteria. The organisers are normally employees of sponsoring agencies, the organisations under whose auspices the services are provided. When goods and services are provided to consumers through the market, the critical organisational questions involved, like what should be produced, how much, for whom, who shall pay for them, how they shall be produced and distributed to the intended consumers, are all answered through the technical market signals of supply and demand, which every experienced business manager can, by and large, decipher. When it comes to the creation and delivery of social services, however, the policies of the sponsoring agency, and the professional judgement of the social development practitioner who implements them, must take into account the role of the market mechanism in assessing need, determining the extent of need, gathering information concerning the location of intended recipients, and designing an appropriate mechanism for delivering the services to them. In the forthcoming paragraphs these issues are elaborated, except the issue of service delivery, which is separately dealt with in the next section. Given the limited amount of time and space available, these issues and questions are to be considered only briefly.

On the question of need assessment, the diagnostic questions that are relevant to work in the rural areas have already been elaborated upon in the presentation of a diagnostic profile of rural life. The role of the social development practitioner is to interpret, and apply imaginatively, the policies of his employing agency in determining the areas of need and target groups that his agency allows him to serve. He must, of course, provide information to the relevant agencies regarding needs and the target groups

which he identifies but which agency policy does not permit him to serve. In principle, the issue of whom to serve is determined by agency policy as interpreted by the implementer, while the questions of how much service to provide is determined by the assessed extent of need, on the one hand, and by the agency budget and other organisational constraints, on the other.

Determination of what service to produce is jointly determined by agency policy and the professional judgement of the implementer. The latter is guided by his theories regarding the causal relationship between assessed needs and the available alternative need-satisfiers, the social services. It is here that a deepened understanding of social services, as instruments of social development intervention, becomes one of vital importance. The social intervener must use both theory and practical experience about needs and services to compose his social service intervention package.

Answers concerning the question of financing social services differ, depending on the type of auspice involved and have been largely dealt with already in the discussion of social services by auspices. Suffice it to say here that social services have redistributive effects if the group that pays for them is different from that which consumes them. In the case of statutory services, for example, resources are transferred from the rich to the poor, if such services are financed by revenue from a progressive tax and consumed predominantly by the poor. If, on the other hand, a statutory service is consumed predominantly by the rich and financed by revenue derived from a largely regressive tax system, as is the case with urban-based social services, like education and health in developing countries, it redistributes resources from the poor to the rich. Export taxes, which are levied on export crops via marketing boards on a flat tax rate basis, and which governments in poor countries are best able to use, are examples of a regressive tax. In a regressive tax system, the proportion of the tax payer's income paid out in taxes decreases as income increases. This is an important organisational issue to remember in designing statutory social services and in thinking about their consequences with regard to social justice.

The question of how to produce social services is exceedingly difficult to answer in definitive terms. Social services, as they have been conceptualised in this paper, often require to be produced in relevant packages, which are rarely produced by one single agency. There has to be established a number of operational inter-agency linkages through which a social service package may be produced and implemented. The type of social development skill needed here is one of use of inter-agency collaboration. It requires a thorough knowledge of the geography of local services and the policies under which they are provided.

In summary, the organisation of social services calls for a very wide range of skills, all of which have to do with deriving answers to questions about production and distribution, which are answered through the market signals

of supply and demand in the case of goods and services provided to consumers on market criteria. Other skills have to do with establishing and using inter-agency collaboration.

Obstacles to social service delivery in rural areas

A most elusive, yet critical, objective in social development is to deliver social benefits to those whom social agencies have assessed as needing them for the purpose of improving their own situation and society at large. The obstacles to social service delivery are baffling, particularly where the recipients to be served are rural dwellers. The search for explanations of the problem and for analytical frameworks to guide diagnosis and improved future performance has engaged the attention of many outstanding social analysts over the past decades. The achievements made by the analysts so far are primarily analytical, and many incisive observations of the magnitude of the problem, as well as tentative prescriptions, have been reported in the literature' (Esman et al, 1980; Leonard, 1982:1). Indeed, the comparative difficulty of the task of rural development has been aptly summed up by Leonard (1982) in an interesting note:

President Nyerere once remarked that while the United States was trying to reach the moon, Tanzania was striving to reach its villages. It appears that Tanzania had the harder task and one more critical for development. While the United States reached the moon seventeen years ago, Tanzania is still groping for an effective organisational arrangement and optimum strategies, as well as linkages, through which development agencies at the centre might reach the villages at the periphery with needed services. The number of alternative institutional approaches tried in Tanzania is a vivid testimony to the intricate nature of the task of delivering services to the rural dweller.⁷ In this paper, four basic obstacles to service delivery have been distilled from the growing literature on the subject. In brief, these four basic obstacles, which are presently to be considered here, are bad rural roads and sparseness of rural populations, unfavourable rural social structures, problems of personnel administration, and inadequate inter-agency collaboration.

Bad rural roads and sparseness of rural population are the problems of access and isolation already described in the diagnostic profile of rural life. The majority of African countries have few all-weather roads in the countryside, with the result that a significant proportion of rural communities are inaccessible to service providers during wet seasons and many cannot be reached with relief food in cases of severe famine. In fact, this accounts for what Chambers has termed the 'dry weather bias', 'tarmac bias', 'road side bias' and 'urban bias' of technical service providers (Chambers:1988b). The sparseness of rural populations also presents a serious problem for service delivery. To enhance the access of the scattered

people to services means spreading the available resources thinly over wide geographical areas, which may not only render some services meaningless and too costly per person served, but also in some cases technically impossible. The situation implies a choice between centralisation and decentralisation of services. For example, a curative emphasis in health care, which often involves indivisible technology, would require services to be centralised, while a preventive emphasis permits a greater degree of decentralisation. It has been said that it was the need to overcome the problem of a sparse rural population that led Tanzania to adopt the *Ujamaa* approach to rural development. It appears, however, that this highly innovative social policy did not receive the complete support of the rural population which it was designed to serve. The present paper has not had the benefit of exposure to the literature documenting experiences and processes of the government's 'villagisation' campaigns in the rural areas, and can only speculate that the participation of the affected rural population in the programme was inadequate. It is entirely possible, for example, that the very people whose condition called for the interventional package of services developed in *Ujamaa* villages did not perceive the move as a helpful solution. Tanzania's villagisation experience confers in this respect a degree of validity to Leonard's prescription that, given the always incomplete knowledge of the rural environment, implementation of rural development programmes need to be adaptable and prepared to adjust their procedures and assumptions in the light of the incremental knowledge obtained from unfolding programme experiences. Leonard discerns and explicates four organisational requirements for implementing agencies, and these are of relevance here: a special commitment of programme staff to the delivery of services to the poor; adequate programme resources and technical resources; adaptability; and community participation.

Social structures are a variable of exceedingly great importance to service delivery, more especially in rural areas. First, their characteristics tend to be the critical determinant of the ease, or lack of ease, with which meaningful community participation may be incorporated into the delivery process. Secondly, they influence the likelihood of a social programme being 'hijacked' before its benefits are delivered to the intended recipients. In this regard, Leonard has observed that certain kinds of social structures 'are more likely than others' to permit the local elites to 'appropriate' programme benefits, and, further, that certain types of social programmes are more likely than others to be 'vulnerable' to such appropriation. Vulnerable programmes are to be found in all sectors, be it in agriculture, education, health or public works. One pertinent example of the kind of programme that is likely to be vulnerable in agriculture is one involving monopolised input or product marketing facilities. Social development practitioners need to be keenly aware of these unfavourable possibilities and

to act accordingly, both in programme design and implementation.

Another set of service delivery problems in rural areas lies in the dimensions of programme personnel administration. To maintain morale and motivation among field staff requires the provision of favourable working conditions, including reasonable housing, impartial treatment, timely payment of salaries and allowances, consistent personnel policies, and promotion based strictly on merit. Secondly, in order to ensure efficient and effective field performance, as well as adequate accountability within the programme, effective field supervision is critical. All of the above-mentioned personnel management requirements are likely to be a missing ingredient in most of the rural service delivery systems operating in Africa today.⁸ It is situations like this, among other factors, that often make for inadequate commitment to the delivery of services, especially to the rural poor, by programme staff.

Finally, there is the problem of achieving adequate inter-agency collaboration. As pointed out at the beginning of this paper, the social services that are relevant to social development are best conceived as consisting of an intervention package made up of specialised services mobilised from different service agencies in order to address complex human needs. From that perspective, it can be readily realised that the social service delivery system of a country, considered as a whole, may suffer from the sibling rivalry and selfishness that commonly exists among service agencies whose collaboration is essential to the processing and delivery of a package of needed services. For example, the field staff of the ministries of health, agriculture, veterinary services and education can often be seen going to the field to meet 'their own clients' individually on different days of the week, each team using its own transport, and some teams not visiting at all for lack of transport! It is impossible under such a system to produce and deliver an integrated and effective bundle of services to the rural community. The remedy lies in the establishment of some effective, co-ordinating authority equipped with adequate administrative resources as well as inter-agency collaborative skills. In the Ugandan example the Prime Minister's office is responsible for co-ordinating the numerous rehabilitation programmes that have been offered by both national and international relief agencies. However, because of the magnitude of the task and the service delivery bottlenecks referred to earlier, co-ordination is being performed with limited success.

Implications for social development curriculum and research

The observations made in this paper concerning organisation and delivery of social services to rural areas have such wide implications for social development curriculum and research that all that can be attempted within the time and space available is to categorise them and to discuss the resulting

categories briefly. The implications to be considered here relate to knowledge and skills requirements, teaching methods, teaching materials, and the relevant areas of research.

The demands of rural development require that the training of a social development practitioner equip him with a systematic knowledge of rural life and crucial aspects of the rural environment. He needs to know, for example, what is making it difficult for the rural dweller to adequately meet the basic needs of nutrition, clothing, shelter, health care, education, safe drinking water, and participation in vital decision making. He also needs to know what forces are acting together to increase the vulnerability of rural households, especially vulnerability to sharp seasonal changes in his livelihood-producing environment. Unfortunately, there exists little reading material that can provide information in down-to-earth terms.

In addition to this knowledge, the development practitioner needs to acquire such intervention skills as human assessment, interviewing, problem formulation, social programme development, resource mobilisation, programme implementation and programme evaluation. To acquire these skills, there must be a fieldwork component in the training. Among the most suitable placement agencies for this purpose would be those agencies operating in the rural areas, and which have suitably trained staff to supervise the student. Since few agencies employ suitably trained student supervisors, training institutions ought to mount regular training workshops for field supervisors in order to prepare them for that responsibility.

The choice of teaching methods in social development needs to take into account the nature of knowledge, skills, and attitudes that a student must be enabled to acquire. Theoretical knowledge calls for systematic lectures, followed by small group discussions or seminars. The acquisition of relevant skills requires the involvement of the student in carefully designed field experiences. This requires the training institution to find out the types of experiences that currently-implemented field programmes are generating. In this regard, there is a need for close collaboration between training institutions and rural development agencies. The two need to cooperate in order to enable students to learn from suitable practical experiences.

As already pointed out, there is little locally-relevant reading material available to recommend to students. There are a variety of textbooks on rural development, but these tend to be too global in focus and are in nearly all cases generated by international researchers, many of whom generalise from limited observations. There is, therefore, an urgent need for the production of locally relevant materials based on adequate observations and conceptualisations of the local scene. Among the reading materials of potential value that are immediately accessible to many African training institutions and which could be creatively used, are the field reports and dissertations of past students, as well as research reports of the teaching staff.

Unfortunately, however, the focus of the latter tend to be dictated by research funding agencies which nearly always determine the areas of research to be undertaken.

Potentially important areas of relevant research in social development include those concerning the emerging survival strategies of rural people; the factors that tend to make them successful or to frustrate them; the distribution of vulnerable households in the countryside; the trends that are generating various types of vulnerability and the characteristics of local social structures in rural areas, together with their impact on rural service programmes, to mention a few. Since the knowledge sought through research is to be used collaboratively by the social development practitioner and his clients, students and their teachers need to engage in participatory research. In this type of research, the villagers and the researchers will jointly define the problem that needs to be studied, agree on the reasons why it is necessary to carry out that study, agree on the strategy for collecting the necessary information, co-operate in the analysis of the collected information, attempt to achieve a shared interpretation of the findings, and discuss together the issue of what is to be done in the light of the findings. That type of research is likely to lead to the production of a more reliable fund of knowledge about the rural situation and to increase the knowledge of rural dwellers about their own situation. Above all, it is likely to make teaching, learning, and social development intervention more effective.

FOOTNOTES

1. It is now believed by a growing number of development professionals that the most meaningful indicator of development and poverty-reduction is the degree to which basic needs are met in a community. See Jossy Bibangambah, "Approaches to problems of rural poverty in Africa" in Kiros (ed) *Challenging Poverty*, 1983, OSSREA.
2. The current government of Uganda (since January 1986) of the National Resistance Movement has established a hierarchy of elective committees of the Movement, from the village to the national level, to which people of any political party are freely elected by the local people. These committees could become important upward representational linkages, if the top national leaders are genuinely committed to the idea of power sharing at all levels of society. It is now, perhaps, too early to assess this and the committees themselves are yet to mature into effectively performing groups perceived by the people as viable problem-solving instruments.
3. A recent series of studies on decentralisation and organisational linkages brings out the social service components of the work of these organisations and offer conceptual frame works for analysing the organisational requirements for serving the rural poor. See David Leonard, et al (ed) *Institutions of Rural Development for the Poor*, Berkley (1982).
4. The local committees of Uganda's National Resistance Movement (see footnote no 2) may in time earn leadership roles in this field of welfare, if they establish themselves as viable problem-solving instruments.
5. For an extended explanation of the social importance of providing benefits of one form rather than another, see Neil Gilbert and Harry Specht, *Dimensions of Social Welfare Policy*, Englewood Cliffs, New Jersey: Prentice-Hall, Inc 1974, pp 82-102.

6. Note that in Gilbert and Specht's Scheme of analysis 'Services' refers primarily to social work services. In our scheme everything is services, except that the words 'technical services' are used to identify all benefits in intangible form.
7. For an analytical review of some of Tanzania's frustrated experiments in institutional building for rural development, see Dan Mudoola's chapter 'The Pathology of Institutional Building', in Kiros (ed) *Challenging Poverty*, OSSREA, 1983.
8. In a recent study conducted by the author and associates for USAID Kampala office, concerning the contribution of central government institutions to the survival strategies of rural households in Uganda, the following service delivery bottlenecks were identified in the field: lack of transport, lack of programme funds, lack of housing and office accommodation for field staff, lack of stationery, and lack of contact with the Headquarters in Kampala. In many cases technical assistance was only being delivered to households which could meet the expenses of extension workers. See Carol Jaenson, Josephine Harmsworth, T Kabwegyere, and P J Muzaale, "Social and Institutional Profiles of Uganda", USAID Kampala, 1984.

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