

Self-Help Project as a Tool for Community Development: The Case of Igboja Community Health Centre in Ondo State, Nigeria

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ABSTRACT This study examined the execution of self-help projects as effective tool for community development. The study focused on a Health Centre built by communal effort at Igboja in Ondo State of Nigeria. 110 respondents were selected, comprising of the Initiators, Legitimizers, Project leaders and ordinary community members. A combination of Positional, Social participation and Reputational approaches were used to identify the various categories of leaders while stratified systematic sampling was used to select the ordinary community members. Majority (74%) of the respondents could be categorized as youths, not being older than 50 years. About 77.5% were literate while only 32.5% were engaged in farming as their primary occupation. Some of the project *initiators* were also identified as the project *legitimizers* while all the initiators were identified as some of the project *leaders*. Meetings, campaigns and launchings were the means by which people were made aware of the project. Methods of resources mobilization were mostly voluntary donations, launchings, levies, and loans. Level of participation varied with 28% being 'high', 46% and 15% being 'medium' and 'high' respectively. Chi square test revealed that educational level was significantly related to project leadership while t-test results showed no significant difference between expectations of community members and benefits derived from the project.

1. INTRODUCTION

Community development is a social action process in which people of a community organize themselves for planning and action. They identify their common and individual needs and problems make group and individual plans to meet these needs, execute these plans with a maximum reliance upon community resources (Ajagbe, 1997). The United Nations Organization views community development as "the process by which efforts of the people themselves are united with those of governmental authorities to improve the economic, social; and cultural conditions of communities, to integrate those communities into the life of the nation, and to enable them contribute fully to national progress" (UNO, 1963). With many developing countries facing increasing fiscal constraints many of the rural communities are gaining less attention from government, hence the need for the residents to mobilize themselves for the task of community development.

The realization for community development has given rise to the formation of various Community Development Associations (CDAs) to actualize the dream. These associations embark on Self Help Projects (SHP). SHP is an empowerment strategy which enables local people to exploit to their advantage community

human and material resources which would otherwise lie dormant and perpetuate ignorance and poverty. It enables the people to embark on development projects through their concerted efforts with little or no help from the government.

The main thrust of SHP is high degree of citizen involvement that can only be assured where the initiative of the people is sufficiently stimulated to arouse their enthusiasm and wholehearted involvement (Anyanwu, 1992). However, the response and enthusiasm towards SHPs come out of the realization that the government cannot provide all the needs of the people. Ogolo (1995) views people's participation as an act through which the beneficiaries of a development effort share in the identification of the development priorities, planning, implementation consumption and evaluation of the development programs.

The success of any community action also rests on the quality of leadership. Ekong (1988) attributes the effectiveness of group to leadership, submitting that when good leadership exists there is every tendency for the success of group action. Anyanwu (op. cit) observes that any scheme which is imposed upon a community or which is executed through unpopular leaders is bound to fail.

This study intends to investigate a rural health project conceived and executed by the

residents of Igboja, a rural community in Ondo State of Nigeria. Specifically, it investigated:

- a) the desirability of the project among community members;
- b) the goals for which the project was embarked upon;
- c) the leadership structure involved in the execution of the project;
- d) strategies used in mobilizing people and resources for the project;
- e) government involvement in the project; and
- f) the extent to which the expectations of the citizens from the project have been met.

Hypotheses were stated in the null form as follows:

- I There is no significant relationship between selected personal characteristics of respondents (age, marital status, level of education, primary occupation, cosmopolitaneness and religion) and project leadership.
- II There is no significant difference between the expectation of the community members before the execution of the project and the benefits derived after the execution.

2. METHODOLOGY

The primary data for this study were obtained from residents of Igboja community in Ondo East Local Government area of Ondo State of Nigeria. The community is a rural one of about 3000 inhabitants. The data were collected through the administration of pre-tested and validated interview schedule.

Stratified random sampling was used to select the respondents. The community was divided into 4 blocks and 2 alternate blocks chosen. Thereafter, alternative houses were chosen from the selected blocks and their household heads interviewed. Where the household head was a male and was away, the most senior female was interviewed. The respondents were asked to mention the community leaders. Lists of those mentioned were drawn and those names not mentioned by at least 30% of the informants were dropped as not being popular as community leaders. Six community leaders were thus chosen for inclusion among the respondents. The project initiators and the project leaders were also detected using the same method above. Finally, 110 respondents were chosen for the study.

Statistical tools like frequency counts, percentages, chi square analysis and t-test were used for data analysis and testing of hypotheses.

3. FINDINGS AND DISCUSSIONS

3.1 Personal Characteristics of Respondents

The data analysis in Table 1 revealed that about 57% and 43% of the respondents were male and female respectively. About 64% were married while 26% were single. The respondents were predominantly Christians (91%); only about 8% were Muslims.

The data further revealed that majority (73.8%) could be categorized as youths, being less than 50 years old. Only 22.5% were not literate while about 38% acquired secondary education. About 32.5% were engaged in farming as their primary occupation while about 24% had it as their secondary occupation. About 31% and 24% were engaged in trading as primary and secondary occupations, respectively. The respondents were highly cosmopolitan because about 56% and 25% visited urban places 'very frequently' and 'frequently', respectively.

From the above findings the high level of literacy and cosmopolitaneness found among the respondents was likely to have influenced decision making, planning and execution of development programs positively.

3.2 Project Initiation, Legitimization and Leadership

The respondents identified six initiators. The least recognized was mentioned by about 13% of the respondents (probably because she was a female) while about 13% of the respondents could not identify any initiator. This is not surprising since many people may not even hear of a project until it reaches the executions stage.

Project legitimizers were those who formally approve a project to be executed in a community. These people may hold formal or informal power in the society but hold the aces for the success of a particular project in the community. Incidentally, three of the initiators formerly identified were included in the list of the four legitimizers identified for this particular project, the fourth being the traditional ruler of the community in whom all local traditional authority was vested. Perusing the data in Table

Table 1: Personal characteristics of respondents

Characteristics	F	%
<i>Gender</i>		
Male	63	57.3
Female	47	42.7
Total	110	100.0
<i>Age</i>		
< 31 yrs	17	15.0
31 – 40	36	32.5
41 – 50	29	26.3
51 – 60	15	13.8
> 60	13	12.4
Total	110	100.0
<i>Marital Status</i>		
Single	25	26.0
Married	79	64.0
Widowed	6	8.0
Total	110	100.0
<i>Religion</i>		
Christianity	100	91.3
Islam	9	7.8
Traditional	1	0.9
Total	110	100.0
<i>Level of Education</i>		
No formal education	25	22.5
Adult literacy classes	2	1.3
Primary school	36	32.5
Secondary school	41	37.6
Post secondary	6	6.1
Total	110	100.0
<i>Primary Occupation</i>		
Farming	36	32.5
Trading	34	31.3
Civil service	25	22.5
Schooling	11	10.0
Artisan/Technician	4	3.7
Total	110	100.0
<i>Cosmopolitaness</i>		
Very frequently	62	56.3
Frequently	27	25.0
Often	15	13.3
Rarely	6	5.4
Total	110	100.0

Source: Field survey, 2001

2, only about 14% of the respondents felt that the project could succeed without the legitimizers. This was probably due to ignorance of the existence of the initiators (8%) or of their roles in the initial stages towards actualizing the project. Such roles included provision of land for the project, motivation of the citizenry, and liaison with government authorities.

The six initiators of the project were also identified as the most visible project leaders who were actively involved at every stage of the project planning and execution. These had already constituted themselves into a reliable team in case of future projects.

Table 2: Distribution of respondents by recognition of legitimizers

Reasons for recognition	f	%
Provision of land for project impossible	20	18.2
Nobody to motivate community citizens	13	11.8
Legitimizers hold the ultimate authority	25	22.7
They are the recognized leaders	29	26.4
Liaison with government impossible without them	8	7.3
Project could succeed without them	15	13.6
Total	110	100.0

Source: Field survey, 2001

3.3. Awareness, Mobilization and Execution of Project

The most widely used source of awareness was conveyance of meetings both at the ward and community levels as confirmed by 66.4% of the respondents. Other sources were campaigns embarked upon by the project leadership as mentioned by about 29% and pre/post execution launchings of the project (4.5%).

Mobilization of resources for the execution of the project were through Voluntary donations (67.3%), Launching (26.4%), Levies (16.4%) and Loans (10.9%). The sources from which the resources for the project were realized confirmed that majority of the people in the community regarded the project as a priority one. That majority confirmed that most of the resources were realized through voluntary donations indicated a high level of commitment by community members. Those who gave out loans for the completion of the project also exhibited their commitment to the project.

The data in Table 3 indicates the roles played by individuals in the execution of the project. About 60.9% of the respondents donated money alone while about 17.3% donated both money and materials. About 8% visited the project leaders and the project site from time to time to offer useful advice while about 9% offered their labour at the project site free of charge. The largest percentage donated money because of the levy, which was made compulsory but which in reality was voluntary because nobody was forced to pay. The indices of participation in Table 3 were scored, summed up for each respondent and measured on a three-point categorization scale. About 28% were found in the 'High' participation category, 46% and 15% in the

'Medium' and 'Low' categories respectively, while 11% did not play any role at all. Surprisingly, all the non-indigenes sampled played prominent roles in the actualization of the project.

Table 3: Distribution of respondents by roles played in the execution of project.

<i>Roles (Participation indices)</i>	<i>F</i>	<i>%</i>
Publicity + Money	46	41.8
Donation of Materials	19	17.3
Money	67	60.9
Money + Labour	23	20.9
Personal labor	10	9.1
Advice	9	8.1
No role	12	11.0

Source: Field survey, 2001 Multiple responses

The Local and State governments' involvement in the project was significant even though such involvement in past projects was acknowledged. The State government gave out the plan of the building in order for it to conform with standard. Thereafter it took charge of the payment of salaries for the staff of the health centre. The Local government donated materials and vehicle for the numerous trips involved in the planning and implementation of the project.

3.4 Gains of the Project

The data in Table 4 revealed that about 55% of the respondents considered receipt of good medical care as the greatest benefit of the project. This meant a drastic reduction in the patronage of quack health personnel. Other benefits included nearness to medical care (11.8%), opportunity for immunization (44.5%), Cheap medical care (10.9%), general improvement in community health (8.2%) and employment opportunities (32%). Perceived benefits which

Table 4: Distribution of respondents by benefits derived from the project

<i>Benefits derived</i>	<i>f</i>	<i>%</i>
Improvement in community health	9	8.2
Good medical care	60	54.5
(no more patronage of quacks)		
Immunization	49	44.5
Nearness to healthcare services	13	11.8
Cheap medical care	12	10.9

Source: Field survey, 2001 Multiple responses.

the community residents looked forward to included free medical care, maternity services, and surgical operations.

3.5 Hypotheses Testing

The chi square test revealed that only educational level was significantly related to project leadership. Those who were project leaders had higher level of education than the average community member. This was necessary for sound decisions to be made and also for good management of community resources. The result of the t-test revealed no significant difference between the expectation of community members and the benefits derived from the project after completion. This would strengthen their resolve to participate in future projects.

CONCLUSIONS AND RECOMMENDATIONS

The project was well conceived and the consent of community members was obvious. The high level of literacy in the community influenced the residents' positive contributions to the planning and execution of the project. Credible people were also chosen to lead the project, hence its success. High cosmopolitaness found among the residence would have influenced their acceptance of a health centre a priority project.

It is recommended that provision of adult literacy classes be improved upon to further increase the literacy level in the community. Community leaders are also advised to always carry along majority of the residents in matters of community development.

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