ELSEVIER
www.elsevier.com/locate/worlddev

World Development Vol. 67, pp. 1–10, 2015
0305-750X/© 2014 Elsevier Ltd. All rights reserved.
http://dx.doi.org/10.1016/j.worlddev.2014.09.026

Unintended Consequences of Community-Based Monitoring Systems: Lessons from an HIV Prevention Intervention for Sex Workers in South India

MONICA R. BIRADAVOLU [a], KIM M. BLANKENSHIP [a], ANNIE GEORGE [b] and NIMESH DHUNGANA [a,*]

[a] *American University, Washington DC, USA*
[b] *Independent Scholar, India*

Summary. — Studies have examined whether community-based monitoring systems impact desired program outcomes, but few provide field-based evidence on the implementation process itself. This paper fills the gap using ethnographic data on the community-based monitoring tools developed by an HIV prevention NGO for sex workers in south India. The tool was well conceptualized, with potential to enhance community participation in program design. Yet, despite best intentions, our findings show that the quantification process undermined community ownership, discredited existing and locally informed sex work practices and, rather than empowering, monitoring became a means to discipline and judge sex worker peer educators.
© 2014 Elsevier Ltd. All rights reserved.

Key words — community-based monitoring, participatory development, quantification, HIV, South Asia, India

1. INTRODUCTION

The turn in development toward community-driven and participatory programing has led to a simultaneous effort to institute monitoring systems that are also community-based (Estrella & Gaventa, 1998). Such an approach to monitoring has been embraced because of its potential to decentralize governance, improve accountability, lead to evidence-based planning, and empower communities to take ownership of development projects, thereby improving desired program outcomes (Bill & Melinda Gates Foundation, 2013; Mansuri & Rao, 2012). Studies have examined whether community-based monitoring leads to increased accountability of public officials (Afridi, 2008), better service delivery (Björkman & Svensson, 2009), and social change (Van Risjoort & Jinfeng, 2005). However, the literature is scant on the monitoring process itself, i.e., the challenges of quantifying complex social phenomena, how various actors (NGOs or the 'community') perceive the monitoring systems or the consequences that derive from the monitoring process.

This paper fills the gap in the literature using ethnographic data on the community-based monitoring systems designed for, and implemented by, female sex workers (FSWs) affiliated with an HIV prevention NGO in Andhra Pradesh, India. The data are drawn from Project Parivartan, a mixed methods study whose research objective was to understand both the process and the impact of the NGO's implementation. As a purely research organization, Parivartan was separate from, and independent of, the NGO and had no implementation responsibilities. This paper uses a sub-set of the ethnographic data that is relevant to the conceptualization and implementation of the community-based monitoring tool called the "SCA Visual Diary" (henceforth "Visual Diary). The paper's aim is to show how, despite the best intentions of an NGO committed to the goals of community participation and ownership, the pressure to quantify complex social interactions had the unintended consequence of undermining the key original community-based objectives of the intervention.

The overall goal of the NGO was to implement an intervention that mobilized and empowered FSWs to eventually take charge of the prevention intervention. The NGO viewed the Visual Diary as a tool to provide FSW input on the intervention, refine intervention strategies and enable FSW participation in decision-making. Inspired by the theoretical underpinnings of participatory development, the NGO spent considerable thought and effort to create monitoring tools that accomplished these goals which were also tailored for a largely non-literate population. As stated in an NGO document, "What is innovative here is that the monitoring is conducted by the community members themselves." (Care-Saksham Booklet, undated, p. 17).

This paper focuses on the monitoring of two activities that were critical to intervention goals: condom distribution and condom needs assessment. We show that the Visual Diary's fixed system of counting condom-related activities did not account for the variability and mobility of sex work practices and ignored the FSW community's existing counting strategies that were based on an intimate knowledge of the local sex trade. By devaluing FSW voices, the NGO undermined its own goals of implementing a 'community-led' intervention. In the process, monitoring became an imposition for both the FSWs and the local NGO staff, thereby thwarting the radical spirit with which monitoring was originally conceived.

* The authors thank Asima Jena, P.J. Manohar and Prem Garudadri for their able assistance in field work and Biju Rao for comments on draft versions of the paper. Support for this research was provided by the Bill & Melinda Gates Foundation, through Avahan, its India AIDS Initiative. The views expressed herein are those of the authors and do not necessarily reflect the official policy or position of the Bill & Melinda Gates Foundation. Final revision accepted: September 23, 2014.

The analysis for this paper builds on a vast literature on the social and political consequences of the processes of quantification. The generation of numbers, and the knowledge it creates, is not neutral nor is its impact uniform across time and space (Appadurai, 1993; Cohn, 1984; Espeland & Stevens, 2008; Hacking, 1990; Porter, 1995). Quantitative measures are attractive because numbers combine the properties of order, stability, mobility, combinability, and precision (Hansen & Porter, 2012) but the social life that numbers attempt to capture is oftentimes fluid and imprecise. While monitoring systems allow for standardized methods of tracking an intervention which is essential for "scaling-up", it can also have unintended consequences. This paper examines some of those unintended consequences.

We begin by describing the NGO's community-led structural approach to HIV prevention that aimed to create a group of empowered FSWs called "Social Change Agents" (SCAs) and how such an approach guided the development of the community-based monitoring tool for use by SCAs to enhance their participation in program activities. We then present findings that show that despite best intentions and a staff committed to the goals of community empowerment, the quantification processes of monitoring (a) undermined community ownership, (b) discredited existing and locally informed FSW practices and (c) became the basis to discipline and punish the FSW community. We conclude by considering the lessons that can be drawn from the analysis on the design and implementation of community-based monitoring tools.

2. THE NGO'S COMMUNITY-LED STRUCTURAL INTERVENTION (CLSI) IN RAJAHMUNDRY: 2004–09

The NGO is one of 130 interventions funded in six high-prevalence states by the Bill & Melinda Gates Foundation's Avahan India AIDS Initiative. It began operations in Rajahmundry in October 2004. Rajahmundry is a semi-urban town of 400,000 in the largely rural, agriculturally rich East Godavari district in Andhra Pradesh state. East Godavari, of which Rajahmundry is the commercial hub, is among the districts most severely affected by HIV, particularly among its FSW population (Rachakulla *et al.*, 2011). Here and throughout the state, sex work takes different forms, including in brothels, homes, agricultural fields and lodges, on the streets and highways, and in various combinations of these forms (Dandona *et al.*, 2005).

The NGO used the terminology "Community-Led Structural Intervention" (CLSI) to describe its community-based approach to empower FSWs (Care India, 2008). The NGO's intervention combined, from the very start, three elements considered integral to implementing CLSI: control over access to services (through condom distribution and STI treatment); community mobilization (through peer education, community building and formation of sex worker community-based organizations (CBOs)); and creation of an enabling environment by advocating with the police, challenging wrongful police actions, organizing public events to oppose sex worker stigma and media advocacy to encourage positive portrayals of sex work (Biradavolu, Burris, George, Jena, & Blankenship, 2009; Blankenship, Biradavolu, Jena, & George, 2010; Care-Saksham booklet, undated).

The NGO's mandate was to emulate the Sonagachi Project in India that was set up in the early 1990s and is recognized as a successful model for improving condom usage, lowering STIs and HIV, and creating empowered FSWs (Jana, Bandyopadhyay, Saha, & Dutta, 1999; Pardasani, 2005; Swendenman, Basu, Das, Jana, & Rotheram-Borus, 2009). The NGO, in turn, would serve as a demonstration site from which other implementers in the Avahan program could learn.

The NGO began by identifying 32 FSWs to serve as Social Change Agents (SCAs) and training them to be peer educators and community organizers. The term 'SCA' was a deliberate choice away from the traditional 'peer educators' nomenclature.[1] Drawing on the participatory education work of Freire (1970), SCAs were conceptualized as 'change agents' who not only educated peers for behavior change but also understood the 'structural determinants of behavior' (Care India, 2008, p. 1). Such a conceptualization took into account "socio-economic contexts, habits, attitudes and emotions....and recognized that powerlessness at the community or group level, and the economic and social conditions inherent to the lack of power, are major risk factors for poor health" (Care India, 2008, p. 2). The number of trained SCAs rose to 70 by the end of the first year. Each SCA was responsible for 10 FSWs, to cover the approximately 700 FSWs enumerated in the initial round of mapping.

To further empower the FSW community, the NGO's goal was to hand over control of the intervention to a sex worker CBO they helped initiate, as had been accomplished in Sonagachi through a sex workers' union. For the handover to be a realistic goal, there was a strong recognition among the NGO's senior leadership that the SCAs had to be encouraged, trained and empowered to be at the forefront of all programmatic activities. Therefore, SCAs participated in continuous training workshops on sexual health (to recognize STI symptoms and promote correct condom usage), 'power analysis' (to recognize the importance of power differentials in their home and workplace), interpersonal communication (to convince peers to use condoms and clinical services), advocacy and networking (to effectively communicate with powerful groups such as the police, the media, politicians, etc.), basic clinical skills (to learn techniques of sterilization of medical instruments, proper disposal of used syringes, etc.) and program management (to gain skills in agenda-setting, running meetings, documenting minutes, and creating budgets). The SCAs ran several committees that met on a regular basis to provide input on various programmatic activities, e.g., a health committee on clinical issues and a crisis response committee to tackle violence (Care-Saksham Booklet, undated).

Both field staff and clinic staff worked closely to monitor SCAs' work. Clinic staff, comprising a full-time counselor, an auxiliary nurse midwife (ANM) and a part-time doctor, was responsible for running an STI clinic, stocking and distributing condoms and providing psychological counseling. The field staff was in charge of all non-clinical intervention activities, e.g., overseeing outreach to FSWs peers, running CBOs, organizing events, etc. Both clinic and field staff reported to the NGO's senior staff in the Rajahmundry office, who in turn reported to the NGO's central office in Delhi. Over time some FSW community members were recruited as NGO staff, however, for the time period covered in this paper (2005–07), there were no staff members who were also FSWs and there was a clear distinction between 'FSW community' and 'NGO staff'." The table below shows the organizational structure.

Download English Version:

https://daneshyari.com/en/article/7394111

Download Persian Version:

https://daneshyari.com/article/7394111

Daneshyari.com