An Asset-Based Community Development Initiative for HIV and AIDS Survivors

By

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DECLARATION

I declare that this thesis is my own work. It is being submitted for the partial fulfillment of the degree PhD (Community Psychology) at the University of Zululand. It has not been submitted before for any degree or examination at any other university.

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Cathrin Venter                              Date
DEDICATION

This work is dedicated to my husband and soul mate, Mias Venter for all his love, support and encouragement, and my family for their prayers and understanding.
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ABSTRACT

Many communities in South Africa are faced with difficulties which include poverty, violence and lack of resources. HIV and AIDS add to this burden. Although many families, organizations, and government try to help, resources are never enough to fill all the gaps. However, there are many untapped resources within the communities; many people with gifts, talents, and other assets that go unnoticed and therefore unavailable. Studies have shown that the involvement of community members in community development activities improves the chances of the development initiatives of being sustainable and less fragmented (Bouwer, 2008). The current study firstly focused on assessing whether Asset-Based Community Development as a community development method is able to tap into those unutilized and undeveloped assets. Secondly, whether it is able to provide a more empowering and sustainable answer to the needs of people in communities where HIV and AIDS is prevalent.

In light of the above, Sinosizo, a Non-Governmental Organization (NGO), stated their willingness to form part of the Asset-Based Community Development project. The community of Sundwini in the Amanzimtoti area was selected as the target community for the current research project because it has the least resources among the six communities assisted by Sinosizo. In response to the growing needs and difficulties faced by people living with HIV and AIDS and their families, Sinosizo Home Based Care (HBC) was established in 1995. They also form part of the Durban Aids Care Commission (CADACC). The current research included a preliminary study, an Asset-Based Community Development (ABCD) initiative, and an evaluation of the development process.

The use of Community-Based Participatory Research (CBPR) was considered to be the appropriate method to use for this study and focus group discussions as a qualitative research method were used to gather the necessary data for the current study. A thematic analysis technique was used to analyze the data.
The results indicated that the community and its members did indeed benefit from the Asset-Based Community Development process. The ABCD process allowed the participants to critically reflect on several aspects of community development in general and Asset-Based Community Development in particular. The community members initially thought that their community was one of the poorest communities with very limited or no resources; however their perception changed to an awareness that all communities and people have skills, gifts, assets, and resources that can contribute to community development. Apart from recognizing the assets, the community was also able to utilize the assets, making the community more self sufficient. Rather than being solely dependent on the well-meaning efforts from government and organizations outside of the community, they realized that they could take an initiative and draw from their own strength. This did not mean that outside help was of no value, but rather that the valuable resources could be allocated where needs in the community were critical. Despite several barriers experienced during the process, the Asset-Based Community Development process has shown itself as a flexible process and took into consideration the unique character of the community. The participants were also able to identify possible solutions to the barriers they identified.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>CONTENT</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>DECLARATION</td>
<td>2</td>
</tr>
<tr>
<td>DEDICATION</td>
<td>3</td>
</tr>
<tr>
<td>ACKNOWLEDGEMENTS</td>
<td>4</td>
</tr>
<tr>
<td>ABSTRACT</td>
<td>5</td>
</tr>
<tr>
<td>TABLE OF CONTENTS</td>
<td>7</td>
</tr>
</tbody>
</table>

CHAPTER ONE - Background and outline of research problem

1.1 Introduction                                      | 11   |
1.2 Clarifying the constructs                        | 15   |
1.3 Rationale for this study                         | 18   |
1.4 Aims                                            | 19   |
1.5 Objectives                                      | 19   |
1.6 Statement of the Problem                         | 20   |
1.7 Value of the study                               | 21   |
1.8 Proposed Scheme of work                          | 21   |

CHAPTER TWO - Literature Review and Theoretical Frameworks

2.1 Literature Review                                | 22   |
   2.1.1 HIV and AIDS                                 | 22   |
   2.1.2 Orphans and vulnerable children (OVC)       | 25   |
   2.1.3 Community Development in Context            | 25   |
   2.1.4 The Non-Governmental Organizations (NGOs)   | 28   |
   2.1.5 Community Psychologist as a community development agent and researcher | 29   |
   2.1.6 Asset-Based Community Development as a new paradigm for community development | 33   |

2.2 Theoretical Frameworks                          | 41   |
CHAPTER THREE - Research Methodology

3.1 Introduction 55
3.2 Research Design 55
3.3 Phase one - Voluntary care workers’ initial perceptions of a community development initiative for people living with HIV and AIDS were explored 56
3.4 Phase two – The implementation of an Asset-Based Community Development Initiative
   3.4.1 Gaining awareness of the asset-based approach 60
   3.4.2 Learning to focus on assets and capacities 61
   3.4.3 Identification and compiling a map of key assets 61
   3.4.4 Mapping access to assets, mapping relationships and mapping power relations 62
   3.4.5 Mobilizing assets, using the information from the asset map to build strong mutually beneficial partnerships in the systems 62
   3.4.6 Sustaining mobilization: continuing to work collaboratively to support individual empowerment and collective action. 62
   3.4.7 Reflecting on the process 63
3.5 Phase three- Participatory evaluation of the ABCD process 63
   3.5.1 Sampling 64
   3.5.2 Instrument development and data collection 64
   3.5.3 Analysis 64
   3.5.4 Ethical considerations 65

CHAPTER FOUR – Results

4.1 Introduction 67
4.2 Themes and sub-themes that emerged from the collected data  

4.2.1 Theme: Broadening of perceptions  

4.2.2 Theme: The roles of the key role players in the Asset-Based Community Development process  

4.2.3 Theme: Benefits of the Asset-Based Community Development  

4.2.3.1 Sub-theme: Increased Self Sufficiency  

4.2.3.2 Sub-theme: Increase in awareness and lateral thinking  

4.2.3.3 Sub-theme: Empowerment  

4.2.3.4 Sub-theme: New knowledge and learning  

4.2.3.5 Sub-theme: Flexibility of the process  

4.2.3.6 Sub-theme: Partnerships and shared benefits  

4.2.3.7 Sub-theme: More effective distribution of resources  

4.2.3.8 Sub-theme: Quick access to help  

4.2.4 Theme: Barriers Identified  

4.2.4.1 Sub-theme: Lack of financial resources  

4.2.4.2 Sub-theme: Poor Cooperation  

4.2.4.3 Sub-theme: Poor Strength of Character  

4.2.4.4 Sub-theme: Confusion and negative perceptions about the development process  

4.2.5. Theme: Suggested solutions to deal with the barriers  

CHAPTER FIVE – Discussion  

5.1 Broadening of perceptions  

5.2 Expected roles of the key role players in the Asset-Based Community Development process  

5.3 Benefits of the Asset-based community development initiative  

5.3.1 Self sufficiency  

5.3.2 Empowerment  

5.3.3 Flexible Process  

5.3.4 New knowledge and learning  

5.3.5 Partnerships and shared benefits  

5.3.6 More effective distribution of resources
5.4 Barriers Identified

5.4.1 Lack of financial resources
5.4.2 Poor strength of character
5.4.3 Confusion and negative perceptions about the development process

5.5 Suggested solutions to deal with the barriers

5.6 A comparison between the baseline study and the Asset-Based Community Development initiative

5.7 The researcher’s reflection on the ABCD process

5.8 Conclusion

5.9 Recommendations

5.10 Limitations of the Study

6. References

APPENDIX A
APPENDIX B
APPENDIX C
APPENDIX D
APPENDIX E
APPENDIX F
APPENDIX G
APPENDIX H
CHAPTER ONE
Background and Outline of Research Problem

1.1 Introduction

Many people remember or dream about a community where citizens knew their neighbors and often visited over the fence, where people stood together in times of need or solved problems together and where they shared their limited resources with each other. However, within poverty stricken contexts where violence had become the norm rather than the exception, the people that we knew became strangers (O’ Connell, 1990). Although it has tremendous potential, South Africa is not without its challenges. Its difficult political past and especially the marginalization of certain people and communities are still affecting its economy and people’s financial security. Although South Africa is in a new democratic dispensation, it still faces difficulties such as limited job opportunities, illiteracy, poverty, Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome (HIV and AIDS) (Ebersöhn & Eloff, 2006). HIV and AIDS is arguably the most serious challenge that South Africa faces. With an estimated 5, 3 million people infected with HIV, South Africa is currently seen as one of the countries with the highest HIV positive population (UNAIDS, 2009).

Due to the continued social and economic decline and despite huge amounts of money invested in community development, people in disadvantaged communities remain dependent on the charity from others (Brankin, Chapman, Diacan, Dickman, Dunn, & Evans, 2003). However, the South African government is financially burdened and as a result, only certain aspects of HIV and AIDS are focused on, for example: HIV and AIDS awareness campaigns, prevention, and treatment. Other important aspects such as the psychosocial care of HIV and AIDS survivors are neglected (Swartz & Roux, 2004). Capital investments are also limited and Kretzmann and McKnight (1996) indicated that it is highly unlikely that huge industrial companies or corporations will continue to invest vast amounts of capital in areas that are considered a risk. This necessitates communities’ involvement in their own development.
The original community development paradigm started with a needs analysis. This brought a list of seemingly unlimited needs and inadequacies from a particular community (Kretzmann & McKnight, 1996) and caused a feeling of “paralysis” (Brankin et al., 2003). The intervention was then implemented to address those respective communities’ needs, problems or deficiencies in a top down manner (Kretzmann & McKnight, 2005). This methodology, unfortunately, creates a perception that the community members are helpless and hopeless to contribute and intervene themselves (Brankin et al., 2003). Other negative consequences include “limited collaboration, fragmented and unsustainable services and a cycle of dependence on external expertise” (Ebersöhn & Eloff, 2006, p.14). It can also become a disempowering process where a person from outside becomes an “expert” who has the ability to deal with the problems and community members become dependent and have to wait patiently for the intervention to happen (Brankin et al., 2003). No mutual learning takes place and the valuable step of including community members in the decision-making process is often sidestepped (Brankin et al., 2003). Natural leaders from the community who form an important link between support structures and resources are often overlooked. One of the biggest problems is also that the sustainability of the interventions is questionable and often fragmented (Brankin et al., 2003). Furthermore, people in poorer communities often believe that they have special requirements and that their wellbeing depends on the provision of services from organizations and people outside their community (Kretzmann & McKnight, 1996). Therefore community members progressively lose their own creativity or incentive to become producers or suppliers and their focus shifts to becoming dependent on the well-meaning efforts of service systems (Kretzmann & McKnight, 1996).

The success and sustainability of community development initiatives are only possible if people in the community invest their skills and are willing to participate in the projects (Kretzmann & McKnight, 1996). The way to a new paradigm of community intervention was created when the traditional approach was changed. The power that was needed was changed to empowerment, where people took responsibility for their own people and community (O’ Connell, 1990). The Asset-Based Community Development (ABCD) approach emphasizes the importance of starting a community intervention with
“discovering and mobilizing the gifts, strengths, abilities, resources, or assets to be found in even the most challenged communities” (Kretzmann & McKnight, 2005, p. 31).

The most crucial move for community members would be to involve themselves in setting up specific goals, planning the intervention and the eventual implementation instead of only receiving the services from the “outside” (Kretzmann & McKnight, 2005). The focus on Asset-Based Community Development (ABCD) involves changing what is lacking and deficient in a community to what is available in a community (Brankin et al., 2003). The ideology of Asset-Based Community Development (ABCD) is based on the understanding that people from different communities have abilities, skills and opportunities that can be utilized to strengthen and improve their own lives, the family and the community (Ebersöhn & Eloff, 2006). This does not mean that needs are denied but merely the assumption that needs can be effectively addressed by concentrating efforts on available resources (Ebersöhn & Eloff, 2006). The change of focus also helps to counteract despondency and create positive intervention actions from ground level (Brankin et al., 2003). This does not mean Non-Governmental Organizations (NGOs), governments, and other role players’ involvement are superfluous; but that they are still vital and needed. However, focusing on the community’s strength and participation allows outside resources to be used more effectively and where they can have the most impact (Brankin et al., 2003). The Asset-Based Community Development model is sustainable and can be implemented in a relatively short period of time (Brankin et al., 2003). The main aim of the ABCD model is for people in poor and marginalized communities to restore their physical well-being and to rebuild their social and political structures through a process of empowerment (Brankin et al., 2003). Although the project should always be owned by the community, mobilizing the skills and resources of the residents in the community, generally need the assistance of an external catalyst. NGOs can play a valuable role in this capacity (Swanepoel & De Beer, 2004; Bergdall, 2003). The catalyst (NGO and community workers) plays an important role in facilitating practical strategies that would allow the residents from a particular community to mobilize their resources and achieve specific goals (Bergdall, 2003).
Sinosizo, a Non-Governmental Organization (NGO), agreed to participate in the Asset-Based Community Development initiative. Sinosizo Home Based Care (HBC) is a project of Catholic Archdiocese of Durban Aids Care Commission (CADACC). This project was established in 1995 in response to the growing need for care of people living with HIV and AIDS and their families. A core team of full time staff and several teams of community caregivers were employed. Many of the community care workers are residents from the respective communities that they serve. Sinosizo identified six communities with limited resources as their target area in and around the Durban Metropolitan. As the lead Non-governmental organization in CADACC, it does not only provide valuable assistance and home-based care to individuals, families and the community but also acts as a mentor to other church and non-governmental organizations in the province. This mentorship includes technical support, supervision and training. The NGO uses many voluntary care workers to execute its HIV and AIDS support programmes.

The Sinosizo’s voluntary care workers’ responsibilities and key work performance areas

The voluntary care workers’ duties and responsibilities are broadly divided into different working domains which include, teaching families to care for their sick members at home, providing emotional, social and spiritual support to patients, orphans and vulnerable children and their family members. They have to actively create an awareness of HIV and AIDS as an illness, and they are also involved in organizational efforts to reduce stigmatization and promote behaviour change for the prevention of HIV and AIDS.

Their service delivery includes regular patients’ visits to assess the patients’ physical conditions, to advice, to support the respective families and to discuss any concerns raised. Important issues, such as managing Tuberculosis (TB), the importance of Anti-Retroviral Therapy (ART) treatment and how to live a healthy lifestyle with HIV infection, are often included in their discussions with patients. To ensure a holistic approach, support groups are run for patients to learn more about managing their
diseases. They are also taught new skills such as beading, gardening, and weaving to help them earn some income.

The children of current and deceased patients are enrolled into an Orphan and Vulnerable Children’s (OVC) programme. The main objective of the OVC project is psychosocial support and includes services such as food parcels, counseling, monitoring the children’s physical and emotional wellbeing, and the enhancement of their coping skills.

The community of Sundwini (also called Izimangweni) in the Amanzimtoti area was selected as the target community for the current research project because it has the least resources among the six communities assisted by Sinosizo. The community workers that formed part of Sinosizo’s outreach programme were identified as ideal community mobilizers in the ABCD initiative because they are members of the community. They have already shown themselves to be committed to the welfare of their community and they formed an important link with the HIV and AIDS survivors. Approximately 192 orphans and vulnerable children (OVC) in the Sundwini community benefit from Sinosizo’s programme and approximately 350 adults and 55 children living with HIV and AIDS benefit from the programme. All the community careworkers that form part of the Sundwini project and the community members under their care is thus included into the current research target group.

1.2 Clarifying the constructs
The Asset-Based Community Development approach, developed terminologies and constructs unique to its character. These include the development of new concepts and redefining of existing terminologies. A list of definitions and constructs underpinning the Asset-Based Development paradigm is included to inform a better understanding of the terminology and concepts used in the present study. The following list of constructs and terminologies compiled by Ebersön and Eloff (2006, pp. 27-29) is seen as comprehensive and effective in supporting the understanding of the ABCD approach:
**Assets**

“These are skills, talents, gifts, resources, capacities and strengths that are shared with individuals, families, school, institutions, associations, the community and organizations.”

**Asset-based initiative**

“This is an initiative that builds up and strengthens a system’s capacity to thrive. It is directly dependent on the strengths of individuals, learning contexts, families and community organizations.”

**Asset-based community development**

“This is the kind of community development described in the work of John Kretzmann and John McKnight of the Asset-Based Community Development Institute of Northwestern University.”

**Asset mapping**

“This is the process of making a graphic representation of identified assets in the system in which the teaching and helping professional is working. This process of making assets “visual” is intended to initiate or “kick-start” the process of asset mobilization.”

**Associational communities**

“These are principal tools that we use for identifying and mobilizing the capacities, abilities, skills and gifts of individuals. They constitute the social space in which capacities, rather than needs, can manifest themselves.”

**Capacity**

“This means the potential for sharing assets, resources, gifts and talents. Inherently, it also relates to the belief in capacities, the intention to enhance capacities, and motivation to do so.”
Capacity building
“This is the mobilization of individual and organizational assets in the system which is worked in.”

Collaboration
“This is the process of sharing and working towards a common goal. It involves the interaction of two or more individuals with complementary skills and is based on the belief that the synergetic effect of working together is often more effective than individual effort. The concept of collaboration is predicated on the premise that all individuals involved bring equal, although different, levels of expertise to the process.”

Diversity
“This refers to many differences that make up individuals, families, learning context and communities. Diversity is evident in economics, culture, race, background, size of family, geographic location, talents/skills, natural environment, and so on.”

Enablement
“This is the process of recognizing the power that all people have. It is a mutual process that contains enormous potential for unforeseen benefits. It usually means identifying power and mobilizing this power for constructive change.”

Facilitator
“This is an individual who is present in a mediating capacity during the process of change. A facilitator supports another individual or group by assisting them in discovering, developing and realizing their own direction, goal, and outcomes. A facilitator is not considered to be the leader of the process.”

Gifts
“These are the personal characteristics, skills, abilities, resources, qualities, knowledge or interests of individuals.”
Institutions
“These are organizations run by professionals so that they have a specific locus for the provision of expertise to people with specific needs. Institutions include schools, social service agencies, libraries, hospitals, universities, and local, state and provincial government and law enforcement agencies.”

Learning context
“This is a place where learning takes place. It might refer to a classroom, a school, a university, a family, a community project, and so on.”

Needs-based initiative
“This is an initiative that is created on the basis of needs, deficits and inability. It tends to be reductionistic because it uses the needs in a system as a basis for intervention, thereby negating the possibilities inherent in mobilizing assets from within.”

Partnership (see also collaboration)
“This happens when two or more groups or individuals join together in a shared and mutually beneficial relationship and work towards a common goal.”

Reciprocity
“This means an exchange/interchange in which each party exchanges assets, capacities and resources.”

Resources
“In Asset-Based interventions, resources usually refer to whatever has the capacity to support asset mobilization and relationship building. Such resources may exist either inside or outside the immediate system. Resources assist those who are involved in the process of asset mobilization to reach the goals that they have set for themselves.”

1.3 Rationale for this study
Many people are overwhelmed by the sheer magnitude of their problems, which include HIV and AIDS, and they find it difficult to resolve them (Van Dyk, 2008). However, it is
important to remember that a collective effort and a combination of assets have the potential to address even the most difficult of problems (O’Connell, 1988). Although many organizations are doing their best to support poor and marginalized communities, their intervention methods are still based on the old, outdated needs-based principles and lack empowerment strategies. A powerful community is seen by O’Connell (1990) as a community which creates opportunities and security for its people and which takes care of its own while drawing on its collective wisdom. This study seeks to explore Asset-Based Community Development as an alternative community development strategy to empower people and communities faced with the consequences of HIV and AIDS.

1.4 Aims
The aim of this research was to initiate an Asset-Based Community Development model in a specific community with HIV and AIDS survivors and to evaluate the outcome of the development.

1.5 Objectives
- To identify a non governmental organization that will be willing to work in collaboration and in a partnership towards Asset-Based Community Development to provide support to HIV and AIDS survivors.
- To identify community facilitators who will assist and provide support to the community leaders to establish direction, goals and outcomes.
- To identify community leaders and care workers (Community mobilizers) who will be a link with the community and who will be actively involved in the mapping process and mobilization of the assets and eventually give feedback in a focus group discussion to the researcher in the process.
- To identify assets in a particular community and develop a graphic representation of the assets identified.
- To integrate the information and use the graphic representation to mobilize the assets.
- To reflect on the process in a focus group discussion to establish whether the Asset-Based Community Development initiative provided the community and individuals with development opportunities by answering the following:
Did transformation of perception take place during the ABCD process?
Did the participants experience the process as empowering?
Were the community members able to see the benefits of taking ownership of the process?
Did the ABCD process bring forth relevant and practical solutions to some of the problems experienced by the community?
Was this process flexible enough to fit the community’s unique context?
Could the development start without unnecessary delays?
Did the process allow for participation and collaboration?
Did this process allow valuable network connections to be established?
Were the participants able to identify possible barriers that complicated the development process?
Were the participants able to make recommendations to address some of the barriers they identified?

1.6 Statement of the Problem
Many communities in South Africa are faced with difficulties which including poverty, violence and lack of resources. HIV and AIDS add to this burden. Although many families, organizations, and government try to help, resources are never enough to fill all the gaps. However, there are many untapped resources within the communities; many people with gifts, talents, and other assets that go unnoticed and therefore unavailable. Studies have shown that the involvement of community members in community development activities improves the chances of the development initiatives of being sustainable and less fragmented (Bouwer, 2008). The current study firstly focused on assessing whether Asset-Based Community Development as a community development method is able to tap into those unutilized and undeveloped assets. Secondly, whether it is able to provide a more empowering and sustainable answer to the needs of people in communities where HIV and AIDS is prevalent.
1.7 Value of the study
It is hoped that the results from the study could inform guidelines for future policy development on sustainable community interventions.

1.8 Proposed Scheme of Work
The study will be presented under the following outline

Chapter one: The introduction and rationale for the study is presented.

Chapter two: The literature review and theoretical framework for the study is discussed.

Chapter Three: The research design and methodology is described in three distinct phases. This includes a discussion of the base line study that pre-empted the ABCD initiative, the procedures and progression of the ABCD process. The ABCD process is discussed as the second phase and the methodology used for formal reflection on the process will also form part of this chapter and discussed as the third phase.

Chapter four: The findings of the study are presented in chapter four. The findings were supported and substantiated by ‘thick descriptive’ data which is in keeping with the qualitative paradigm.

Chapter five: Focuses on the discussion of the findings and conclusion. The theoretical frameworks and literature review is used to assess and integrate the findings. The recommendations and conclusions drawn are also discussed. The researcher’s reflection on the process and lessons learned will also form part of this chapter.
CHAPTER TWO

Literature Review and Theoretical Frameworks

This chapter provides a discussion of the literature that is relevant to this study and a conceptual outline of the theoretical models that are appropriate and viewed as supportive in achieving the aim and objectives of this study.

2.1 Literature Review

2.1.1 HIV and AIDS

A majority of HIV positive people are in Sub-Saharan Africa, with an estimate of 22.4 million people who are infected. This represents 67 percent of all HIV infections worldwide (UNAIDS, 2009). South Africa is on top of the list with an estimated 5.3 million people who are infected. This figure includes 220,000 children under the age of 15 (UNAIDS, 2009). It is further estimated that 17.5% South Africans are infected with HIV (UNAIDS, 2009).

In spite of the magnitude of the problem, South Africa has a history of despondency and denial when it comes to the fight against HIV and AIDS. As early as 1990, ANC leader Chris Hani warned that if left unattended, the AIDS epidemic would cause damage beyond our imagination (AIDS Foundation South Africa, 2008). Despite the warning very little was done. While the apartheid government focused on political unrest, the new democratic government had the massive challenge of uniting a divided country (AIDS Foundation South Africa, 2008). It was civil society organizations led by the Treatment Action Campaign (TAC) that actively tried to create awareness regarding the seriousness of the HIV and AIDS epidemic (AIDS Foundation South Africa, 2008). However, under the leadership of former president Thabo Mbeki, it was difficult to give HIV and AIDS the focus it deserved, especially since the connection between HIV and AIDS was denied (AIDS Foundation South Africa, 2008). The then Minister of Health, Doctor Manto Tshabalala-Msimang’s treatment of choice focused on a healthy lifestyle and traditional medicine instead of anti-retroviral treatment (ART). This caused a further delay in the effective treatment of HIV and AIDS (AIDS Foundation South Africa, 2008). While confusion reigned, HIV and AIDS silently continued to destroy lives. It was only in 2003
that a serious effort was made to make ARV treatment accessible to people infected with HIV (AIDS Foundation South Africa, 2008), although this was a very slow process due to capacity problems. However, continued pressure and renewed trust led to the development of a strategic plan for the prevention and treatment of HIV and AIDS in 2007. This long-term plan was envisioned for the period 2007 to 2011 (AIDS Foundation South Africa, 2008).

During the initial years when prevention and treatment programmes were only debated and still far from implementation, the care for HIV and AIDS patients fell on the shoulders of family members (Van Dyk, 2008). Communities were faced with severely ill and dying members and an increasing number of children was left orphaned and vulnerable (AIDS Foundation South Africa, 2008). With resources stretched to their limits, people became overwhelmed by the burden. Non-Governmental Organizations (NGOs) and Community Based Organizations (CBOs) stepped up to the challenge and with the support of government slowly started to make some difference in the devastated communities (AIDS Foundation South Africa, 2008). However, some obstacles emerged. Community and home-based carers, either in their voluntary capacity or employed by the NGOs, became essential in the response to HIV and AIDS (AIDS Foundation South Africa, 2008). Lack of remuneration, training and resources contributed to some of the challenges that community workers faced (Van Dyk, 2008).

The strain that HIV and AIDS caused on resources, especially financial resources is well documented. Senior advisor and previous director of the HIV and Development Programme (UNDP), Desmond Cohen stated that before any HIV and AIDS related programme or development can take place, the bi-causal relationship between poverty and HIV and AIDS needs to be understood (Cohen, 2006). On the one hand, there is an impact that poverty has on the distribution of HIV and AIDS and, on the other hand, poverty impacts the different communities’ capacities to deal and cope with the disease. There is an understanding that HIV and AIDS contributes significantly to the draining of financial resources which lead to poverty (Cohen, 2006). To inform further understanding, it is also important to know that the poorest households in Africa are usually headed by women. There is therefore a specific gender dimension to poverty.
Poverty should further be seen in the context that social, economical, and political aspects all play a critical role. However, because there is a well known relationship between HIV and AIDS and poverty, a further complication is that, due to the focus on HIV and AIDS distribution amongst the poor, its spread amongst the not so poor has almost gone unseen (Cohen, 2006). The initial perception that the rich and the middle classes are mostly unaffected by HIV and AIDS has dramatically changed. This demonstrates that the issues relating to HIV and AIDS are more complex than originally thought (Van Dyk, 2008).

The stigma associated with HIV and AIDS infection also needs serious consideration. In the early days, with limited information available on HIV and AIDS as an infection, the disease was directly associated with promiscuity and death (Beacon, Stephney & Prosalendis, 2005; Van Dyk, 2008). Infected people and their families were marginalized and often ostracized. Furthermore, discrimination is often associated with the stigma that surrounds HIV and AIDS (Van Dyk, 2008). A clear example of this discrimination would be a story covered by a newspaper of a little girl who was orphaned after her parents died due to HIV and AIDS related conditions, was sent home from school because she could not afford the stationary necessary for her school tasks (Mhlongo, 2005). Although time has lapsed since the article, people infected with and affected by HIV and AIDS still experience discrimination.

There is also a relation between power and stigma (Beacon, Stephney, & Prosalendis, 2005). People who are stigmatized usually lose power, while the people stigmatizing create a sense of control for themselves (Beacon, Stephney, & Prosalendis, 2005). Stigmatization can also be used in power struggles where the stronger group could use stigmatization to alienate the oppositional group from support (Beacon, Stephney, & Prosalendis, 2005). This could lead to a loss of status and disempowerment on the part of the stigmatized group for example HIV and AIDS survivors (Beacon, Stephney, & Prosalendis, 2005).
2.1.2 Orphans and vulnerable children (OVC)
South Africa is estimated to have 1800 000 children who are orphaned or vulnerable as a result of the HIV and AIDS (UNAIDS, 2009). This figure is higher than any other country in the world (UNAIDS, 2009). Regardless of their HIV and AIDS status OVC are considered vulnerable because most of them come from very impoverished backgrounds and as a result often lack proper education, healthy nutritional food, and health care (Strebel, 2004; UNAIDS, 2009). They further have the emotional burden of dealing with the loss of one or both parents. Many of the children are taken care of by their grandparents or, as a last resort, by the older children in the household (Nemapane & Tang, 2003). They are mostly dependent on foster, care or child grants or the pension grants that their grandparents receive (UNAIDS, 2009). Despite South African legislation that supports OVC care in the form of Foster Care Grants (FCG) or Child Support Grants (CSG), Roby and Shaw (2006) argue that these responses are still inadequate to deal with the OVC crisis. Many NGOs and other organizations had to step in and provide support. However, a significant gap between needs and help still remains (Van Dyk, 2008).

2.1.3 Community Development in Context
Before a community development initiative could commence, it is important to understand the context of that particular community (Swanepoel & De Beer, 2006). Each community has unique obstacles that prevent development; however, it also has unique resources and assets that could support community development (Swanepoel & De Beer, 2006). The following dimension will affect any community research or development initiative and needs to be carefully considered. A system cannot be looked at without considering the interacting whole (Swanepoel & De Beer, 2006). The political dimension is seen as one of the most important aspects that need consideration when one works in a community. Political forces are at work in all communities, and politics plays an important part in community research and development (Swanepoel & De Beer, 2006). The politics involved could be specific to a region or include national political movements (Davids, Theron, & Maphunye, 2005). Traditional leaders are contextual factors in the political dimension that need careful consideration (Davids, Theron, & Maphunye, 2005). Each community has its own stakeholders that need to be approached and involved when community research or development is conducted. They control
access to the community and cannot be ignored. Sidestepping the gate keepers could be seen as disrespect for and disregard of community values and structures and could result in project failure (Swanepoel & De Beer, 2006).

A further consideration is the environmental dimension. The movement of communities to less favorable areas with less natural resources in the apartheid’s years causes constraints in developmental and research projects that need certain resources, for example a vegetable project needs to take into consideration the availability of water and soil type (Davids, Theron, & Maphunye, 2005). The social dimension also has political or economical connotations (Davids, Theron, & Maphunye, 2005). If poorer communities and communities that are more affluent are combined, the social elites would usually fill the leadership positions in the research or project and dominate the action (Davids, Theron, & Maphunye, 2005). Every community has its own economic dimension which is usually based on an informal system (Swanepoel & De Beer, 2006). However, the availability of money will often determine whether the research or the development project succeeds (Davids, Theron, & Maphunye, 2005). Past apartheid policies caused an unequal distribution of wealth in South Africa as a result some communities are exceptionally poor. Many communities have very poor infrastructures which in turn challenge the availability of education, work opportunities, and public transport (Swanepoel & De Beer, 2006).

The cultural dimension points towards values and morals of a society (Swanepoel & De Beer, 2006). Cultural norms and values differ from community to community and these include traditional leaders, the place and role of women, norms and beliefs. These contextual elements are important when one works in a specific community (Davids, Theron, & Maphunye, 2005). The psychological dimension is often ignored because it is abstract in nature. However, its impact is no less important than any of the other dimensions (Swanepoel & De Beer, 2006). People react differently in different settings and with different backgrounds and history; their different upbringings changes their perception (Davids, Theron, & Maphunye, 2005). For example people who were displaced due to resettlement will have a different perception from people who stayed in a place of their choice. Knowing a person’s political history and its ability to affect a
person’s perception is important when planning research or development (Davids, Theron, & Maphunye, 2005).

There are certain community development principles that should guide community development initiatives in order to ensure successful implementation (Swanepoel & De Beer, 2006). Research projects often focus only on certain aspects of the people that they deal with, for example the prevention of illnesses such as HIV and AIDS or other concrete needs like physical needs, and forgets about peoples’ other more abstract needs such as human dignity (Swanepoel & De Beer, 2006). In the process the individual’s dignity could be violated. When trying to address a person’s needs it is important to remember that a person is much more than his or her needs (Swanepoel & De Beer, 2006). A human orientation should be the key focus when research and intervention is considered (Swanepoel & De Beer, 2006).

Another principle that needs attention is the principle of learning. It is often only the researcher who gains knowledge during the research process, however, all the role-players should learn and teach, including the researcher, the NGO, and the government (Baldwin, 2004). The community worker and researcher should have an attitude of student as well as teacher (Baldwin, 2004; Swanepoel & De Beer, 2006). When skills are taught, they must also include the provision of enough information so that a person can make an informed decision to continue using the skills learned (Swanepoel & De Beer, 2006).

The power dynamics are frequently in favor of the researcher and not an equal sharing of power. Research and projects involving the community members and their lives should ensure that participation promotes equity (Swanepoel & De Beer, 2006). Although participation stands central to empowerment, empowerment is seen as more than the involvement of participants in physical work or being placed in a key position as a token (Swanepoel & De Beer, 2006). The project should be “owned” by the community and shared responsibility should be supported (Swanepoel & De Beer, 2006). It is especially decision making power that encapsulates the concept of empowerment and it is therefore
important to include community members in the decision making process. (Van Vlaanderen & Neves, 2004)

Community populations are unique and diverse in nature. Researchers are regularly faced with communities with different types of population. Therefore, a research methodology that is rigid and not flexible is not appropriate. A change of mindset is required and willingness to learn and to adjust according to circumstances is important (Swanepoel & De Beer, 2006). Furthermore, as mentioned above, each community has its own stakeholders that need to be approached and involved when community research or development is conducted. They are referred to as gate keepers. Sidestepping the gate keepers could result in a failed project (Swanepoel & De Beer, 2006).

The sustainability of projects is very important. Some projects and research bring relief activities to communities; however these are often not sustainable. The community members become discouraged and disappointed if their expectations regarding a specific community project are not fulfilled or if promises are not kept. Researchers and developers should be clear about whether their projects are addressing symptoms of deeper issues or the problem itself (Swanepoel & De Beer, 2006).

2.1.4 The Non-Governmental Organizations (NGOs)

Often referred to as the “voluntary” or “Third” sector; Non-Government Organizations had to step in because government and the private sector failed to effectively address poverty and other key issues such as HIV and AIDS (Davids, 2005 p. 67). They are usually non profit organizations that rely on donations to successfully execute their relief activities (AIDS Foundation South Africa, 2008). NGOs are privately set up without government interference and they are usually controlled by an independent board or trustees (Davids, 2005). Their focus is people-centered development that is sustainable and is at grass root level (Davids, 2005). Many NGOs were established for the sole purpose of helping to address issues relating to HIV and AIDS. Their interventions include research, education, advocacy and lobbying (AIDS Foundation South Africa, 2008). NGOs promote voluntary participation in development activities. In South Africa their micro level involvement is of cardinal importance (Davids, 2005). It is especially
their ability to communicate with and develop very poor communities that make their services essential (Davids, 2005). However, not all NGOs are able to uphold their good name and some NGOs’ projects never reach the poor but are wasted on people undeserving of their investment (Davids, 2005). Their projects are often not self-sustainable and rely on the continued financial injection of donors. The projects are often implemented in isolation and do not form part of a holistic approach (Davids, 2005). Nevertheless, their benefits overshadow their negative aspects (Davids, 2005). It is thus seen as important to enhance the aspects of NGOs that are seen as beneficial and the future that make them effective (Davids, 2005).

Guidelines that define a “good” NGO include; specialization in one specific area, the employment of staff that could relate to the poor, and a sensitivity to the needs expressed by the beneficiaries (Davids, 2005). One of the aspects that challenge the continuation of NGOs is the re-direction of funds. Before the democratic elections in 1994, overseas companies and donors preferred to invest in NGOs instead of the apartheid government. However, after the elections, their trust in government returned and they would rather invest in the new government (Davids, 2005). This caused many NGOs to close and as a result, many projects at grassroot level suffered (Davids, 2005). However the remaining NGOs renewed their efforts and some of them are very successful in addressing the needs in numerous communities throughout the country (AIDS Foundation South Africa, 2008).

2.1.5 Community Psychologist as community development agent and researcher

Nelson and Prilleltensky (2005, p. 140) suggest that “being a community psychologist is a question of identity, a definition of who we are and who we want to be”. We cannot separate our different roles and identities when we work in the community (Nelson & Prilleltensky, 2005). Rappaport and Seidman (2000) argue that our practice as psychologists is influenced by a paradigm or a view that is informed by social forces and values. The different roles that form the community psychologist’s identity include their life experiences, political, and social background (Nelson & Prilleltensky, 2005). Each community psychologist also has a unique history that guides him or her to become a community psychologist (Nelson & Prilleltensky, 2005). Most importantly, they work in
collaboration with the communities and not necessarily as professionals (Nelson & Prilleltensky, 2005). However, community psychologists are seen as highly skilled and they have to apply their knowledge to different community intervention strategies and the theoretical under-pinning without hesitation (Nelson & Prilleltensky, 2005). Despite their obvious knowledge, Swanepoel and De Beer (2006) indicated that the community psychologist is also a student and it is suggested that learning should form an integral part of his or her community intervention process.

Community psychologists and researchers are often employed in a variety of human service settings and organizations. They frequently face resistance when their intervention strategies challenge the status quo of the organization they work for (Nelson & Prilleltensky, 2005). Despite the obvious obstacles that are faced by the community psychologist who promotes social change, persistent efforts will certainly bare fruit (Nelson & Prilleltensky, 2005). Organizations are also encouraged to adapt to change. The internal structures of organizations should be flexible in order to ensure that they adjust to new circumstances when they are required to do so. Swanepoel and De Beer (2006) emphasized the importance of an atmosphere of equality and transparency in community interventions. The community psychologist can also work independently as a consultant or researcher often allowing them the opportunity to make a powerful contribution (Nelson & Prilleltensky, 2005).

The community psychologist is also seen as a social change agent (Nelson & Prilleltensky, 2005). Being a social change agent is difficult and full of obstacles. Despite being certain about their own standards and principles, community psychologists may encounter many conflict areas (Nelson & Prilleltensky, 2005). Ethical dilemmas and value contradictions are only some of the difficulties that they face (Nelson & Prilleltensky, 2005). It is important to understand that all communities are unique and the emphasis placed on values will differ from community to community (Duncan, Bowman, Naidoo, & Roos, 2007). Certain values carry more weight and will determine the methodology needed for intervention (Duncan et al., 2005). The community psychologist’s attitude plays an important role and he/she should approach a community with understanding, goodwill, respect and a keen understanding of his or her own
strengths and weaknesses (Ife & Tesoriero, 2006). Olivier de Sardan (2005) warned against arrogance when an intervention is planned and that it should not be based on “they have the problem, we have the solution” but should rather include the knowledge and the social capital of beneficiaries. Swanepoel and De Beer (2004) propose an enabling role for a person who works in the community, which can be achieved by creating the necessary environment, climate and atmosphere that would support the community members in their efforts. Their understanding of the cultural differences sends the message of respect and a willingness to embrace open-mindedness (Duncan et al., 2007).

Knowledge of cultural differences is also important when a psychologist needs to decide whether a person’s basic rights are affected or whether it is part of a community’s particular cultural traditions that may be in contrast to the community psychologist own cultural beliefs (Ife & Tesoriero, 2006). Kotzé and Kotzé (2008) suggest that the perception of the change agent is fragmented at best, due to their different training backgrounds and their individual realities. The acceptance and validation of cultural differences form part of community intervention and the community psychologist and researcher should always be aware of their own biases (Ife & Tesoriero, 2006). It is often difficult to challenge the existing perceptions and to change them to a new way of thinking (Kotzé & Kotzé, 2008).

Swanepoel and De Beer (2006) emphasized the importance of transparency and ethical conduct in community interventions. Despite the importance of ethical conduct, communities often consist of multi-cultural people from different groupings and can complicate the community psychologist’s ability to act in a way that generally would be considered ethical. A prime example would be that the community psychologist as researcher would have to be “objective”. However, Duncan, Bowman, Naidoo and Roos (2007, p. 397) argue that in many instances “it is precisely the subjective involvement of the practitioner that creates the space for change to occur and is a prerequisite for the community to place its trust in an outsider”. They also suggest that the community psychologist should negotiate his or her role within the community carefully, due to the
impact that it has on the quality of the intervention. Their relationship should be based on equality and mutual respect rather than distance and as an expert (Duncan, et al., 2007).

The process of development and growth is dynamic, and self reflection is important to guard against self-importance and superiority (Nelson & Prilleltensky, 2005). It also helps to create awareness regarding some community psychologist’s privileged upbringing in contrast to that of oppressed people in the communities (Nelson & Prilleltensky, 2005). Some communities are especially poor and vulnerable and in great need of resources in which case community workers themselves can act as resources (Swanepoel & De Beer, 2004). However, Swanepoel and De Beer (2004) warned that development workers should be careful not to over-play or under-play this role.

Duncan et al. (2007) recommend that a community psychologist should not only pay cognizance to the context of their own development but also to the history of the community they work in. The political and apartheid history in South Africa is of particular importance when one tries to intervene in under-served and marginalized communities (Duncan et al., 2007). The role of the community psychologist is to challenge the disproportionate availability of psychological interventions, and to elicit the help of different key role players, which includes health professionals, politicians, government and other social participants (Duncan et al., 2007).

By understanding the complexities of the contextual factors contributing to the HIV and AIDS pandemic and other bio-psychosocial problems, the community psychologist can play an important role in the struggle against HIV and AIDS and other problems by focusing on preventative measures (Duncan et al., 2007) and by helping individuals and communities to become more resilient (Nelson & Prilleltensky, 2005). Swanepoel and De Beer (2004) suggest that the community worker should play a guiding role and unmask the factors imposed on communities that result in disempowerment. This may include international and national ideologies, attitudes, values, and beliefs (Nelson & Prilleltensky, 2005). Community psychologists, as community workers, are in an ideal strategic position to challenge oppression and discrimination which are often at the core of many problems that are faced by the communities (Ife & Tesoriero, 2006).
2.1.6 Asset-Based Community Development as a new paradigm for community development

**Background information**

The original community development paradigm generally started with a needs analysis. This brought forth a list of needs and inadequacies from particular communities (Kretzmann & McKnight, 1996). The intervention was then implemented to address those respective communities’ needs, problems or deficiencies in a top down manner (Kretzmann & McKnight, 2005). The traditional needs-based community intervention has several drawbacks that can hamper development (Brankin, Chapman, Diacan, Dickman, Dunn, & Evans, 2003). One of the problems is that the focus is continuously on the numerous seemingly endless problems experienced by the communities and this can cause a feeling of “paralysis” (Brankin et al., 2003). It can also become a disempowering process if people from the outside become the “experts” who have the ability to deal with the problem and the people in the community become dependent and have to wait patiently for intervention to happen (Brankin et al., 2003). No mutual learning takes place in such a case and, to make things worse, the valuable step of including community members in the decision-making process is often sidestepped (Brankin et al., 2003). Leaders from the community, who form an important link between support structures and resources, are often overlooked. One of the biggest problems is also that the sustainability of the intended interventions is questionable and often fragmented (Brankin et al., 2003).

People in poorer communities further believe that they have special requirements and that their wellbeing depends on the provision of services from organizations and people from outside their community (Kretzmann & McKnight, 1996). They progressively lose their own creativity or incentive to become producers or suppliers. They become dependent on the well-meaning efforts of the service systems (Kretzmann & McKnight, 1996).

In some instances community organizations stand together and demand what they think is due to their members from outside institutions, for example better schooling, improved services and better grants (O’Connell, 1990). This collective power has the ability to
change circumstances for the community members. However, power and conflict are not always ideal ways to enforce change. O’ Connell (1988) suggests that some problems can be best solved by involving creative thinking and implementing the visions of people involved as opposed to the traditional following of protocols and the creation of programmes in a top down manner.

Research also indicates that community development can only be successful if people in a community invest their skills and are willing to participate in the projects (Kretzmann & McKnight, 1996). Kretzmann and McKnight (1996) also indicated that it is highly unlikely that huge industrial companies or corporations will invest vast amounts of capital in areas that are considered a risk. This necessitates communities’ involvement in their own development.

The way to a new paradigm of community intervention was created when the traditional approach was changed. The power that was needed was changed to empowerment where people took responsibility for their own people and community (O’ Connell, 1990). The Asset-Based community Development approach emphasizes the importance of starting a community intervention by “discovering and mobilizing the gifts, strengths, abilities, resources, or assets to be found in even the most challenged communities” (Kretzmann & McKnight, 2005, p. 31). The ideology of Asset-Based Community Development (ABCD) is also based on the understanding that all people have abilities, skills and opportunities that can be utilized to strengthen and improve their own lives, family and the community (Ebersöhn & Eloff, 2006).

Although the concept of community competency still lacks a clear definition, it is widely understood that within communities there are many assets and competencies that could be drawn on or developed if they are given the necessary attention (Roos & Temane, 2007). Despite a community’s context and the challenges it has to face, it is believed that all communities have positive aspects that could enhance the quality of life for the community members (Roos & Temane, 2007). Focusing on a community’s resilience does not repudiate the existence of serious problems; however the positive aspects are often overlooked due to the single minded focus on deficits and inadequacies. Instead of
using the deficits as a starting point in community development, it is better to draw on the strengths of the community to challenge difficulties (Rappaport, 1981). Later works also emphasize this perception (Diale & Fritz, 2007; Tseng, Chesir-Teran, Becker-Klein, Chan, Roberts & Bardoliwalla, 2002). Positive psychology forms the basis of the community competence concept (Roos & Temane, 2007). The positive psychology movement emphasizes both the positive and negative aspects in a community. This stands in sharp contrast to psychology’s tendency to focus on pathology (Roos & Temane, 2007). An important aspect that forms part of the community competence concept is the understanding that all community members are important despite their age or social standing. Community competence further encourages participation, equity, and mutual respect (Roos & Temane, 2007). The change of focus helps to counteract despondency and create positive intervention actions from ground level (Brankin et al., 2003). This does not mean NGOs, governments, organizations and other role players’ involvement are unnecessary; they are still vital and much needed. However, focusing on the communities’ strength and participation allows outside resources to be used more effectively and where they can have the most impact (Brankin et al., 2003).

The Asset-Based Community Development model is sustainable and can be implemented in a relatively short period of time (Brankin et al., 2003). The main aim of the ABCD model is for people in poor and marginalized communities to restore their physical well being, and to rebuild their social and political structures through a process of empowerment (Brankin et al., 2003). Although the project should always be owned by the community (Swanepoel & De Beer, 2004), mobilizing the skills and resources of the residents and the organizations based in that community, generally needs the assistance of an external catalyst (Bergdall, 2003) and the NGO can play a valuable role in this capacity. The catalyst (NGOs and community workers) plays an important role in facilitating practical strategies, which would allow the residents from a particular community to mobilize their resources and achieve specific goals (Bergdall, 2003). Although people in different communities have abilities and skills that can be utilized to strengthen their respective communities, there are many people in these communities who are overwhelmed by the amount of their problems and it would be unfair to expect that they resolve their own problems (O’Connell, 1988). Despite these problems, it is
important to remember that a collective effort and a combination of assets could address even the most difficult of problems (O’Connell, 1988). A powerful community is seen by O’Connell (1990) as a community which creates opportunities and security for its people and which takes care of its people while drawing on its collective wisdom. Projects that involve community members have a better chance of being sustainable (Kretzmann & McKnight, 2005). The most powerful position for residents would be to involve themselves in setting specific goals, planning the intervention and the eventual implementation, instead of only receiving the services from the “outside” (Kretzmann & McKnight, 2005).

However, Deborah McCoy, president of the Logan Square Neighborhood Association (LSNA) indicated that fear of people from different cultures, who are handicapped or who are just generally unlike us stand in the way of building a stronger community (O’Connell, 1990). Even the most unlikely people, for example elders, young children, disabled people and people that are generally marginalized could make a significant contribution (Kretzmann & McKnight, 2005). By marginalizing people the community loses out on those people’s unique potential and the community becomes impoverished (O’Connell, 1988).

Communities will be more self-sufficient and stronger if they overcome their fear and break through the barriers and reach out to people who are considered different (O’Connell, 1990). There are numerous examples to support this point. One example would be the development of the multi-million dollar Mecado Central Project in Minneapolis, housing over 40 small businesses. Although immigrants are generally viewed with suspicion due to their different way of dressing, and their unfamiliar behavior, this venture was based on the innovative skills of new Latino immigrants (Kretzmann & McKnight, 2005).
The following table provides a comparative understanding of the differences between a needs-based approach and the asset-based approach (Adapted from Ebersön & Eloff, 2006, pp. 24-25).

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<thead>
<tr>
<th>Needs-based Approach</th>
<th>Asset-based Approach</th>
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<tr>
<td><strong>Ontology</strong></td>
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<tr>
<td>• Focuses on deficits and needs</td>
<td>• Focuses on assets and capacities</td>
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<td>• The glass is half empty</td>
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<td>• Disabilities</td>
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<td>• A singular reality</td>
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<td>• Are experts</td>
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<td>• See dysfunction</td>
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<td>• Have exclusive Knowledge</td>
<td>• Offer shared Knowledge</td>
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<td>• Collect data about problems</td>
<td>• Collect data about assets and capacities</td>
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<td>• Inform</td>
<td>• Connect</td>
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<td>• Emphasis reason and rationality</td>
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<th><strong>Services</strong></th>
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<td>• Paternalistic</td>
<td>• Supportive</td>
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<td>• Provide funding for despondency</td>
<td>• Provide funding for proactivity</td>
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<tr>
<td>• Provide fragmented services</td>
<td>• Establish a cycle of enablement</td>
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<td>• Discipline-specific approach</td>
<td>• Encourage collaboration</td>
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<td></td>
<td>• Functional approach</td>
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<td>• Experts</td>
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<td>• Denial and ignorance</td>
<td>• Essential viewpoint</td>
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<tr>
<td>• Have limited power</td>
<td>• Have optimal power</td>
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The practical aspects of an Asset-Based Community Development (ABCD) approach

The ABCD approach is based on two very important aspects, namely the rediscovery of certain resources within the community and the mobilization of those gifts (Kretzmann & McKnight, 2005). The beginning of this process is always focused on the gifts and skills of the community members and the assets to be found in the physical community (Kretzmann & McKnight, 2005). Although the starting point of the ABCD approach is the discovery and documentation of individual skills and gifts, it would be pointless if connections between individuals are not established (Kretzmann & McKnight, 2005). Challenging the isolation of individuals by connecting them builds important and long-lasting relationships (Kretzmann & McKnight, 2005). Thus, the ABCD approach focuses on the community itself and it is relationship-driven. This means that the emphasis is on “voluntary associations, achieved through building relationships” (Kretzmann & McKnight, 2005). It is thus seen as wise to form alliances with resources outside the respective community (Kretzmann & McKnight, 2005). This may include institutions, government, associations and other local economy contributors (Kretzmann & McKnight, 2005).

The next step would thus be to identify institutions and organizations in the community which can support the individuals and which can be actively involved in community-building (Kretzmann & McKnight, 2005). Organizations and institutions that can play an important role include; schools, libraries, and churches (Kretzmann & McKnight, 2005, p.3). These contributions include a place to develop leadership (Kretzmann & McKnight, 2005). It is important to include networks of small and large businesses, groups, clubs, and voluntary initiatives within the community. Their resources, which include man power, knowledge, financial input, equipment, and space, could make a project more successful (Kretzmann & McKnight, 2005).

The physical environment, for example the streets, parks and sports fields, are also seen as assets and can be utilized for community development. Physical space in particular is important for meetings and gatherings and it is thus essential to utilize the available space in the community itself. Most communities would have space available including, parks,
playgrounds, gardens, streets and parking areas (Kretzmann & McKnight, 2005). The ABCD approach is thus based on the assumption that the community strength is dependent on the amount of assets identified and mobilized (Kretzmann & McKnight, 2005).

Given the magnitude of problems faced by various communities and the limited resources available to them, a paradigm shift of community development was needed. The best efforts of people from the “outside” would never be enough to fulfill all the needs. However, moving towards a more empowering model enables people to become actively involved in dealing with the problems that they face (Ebersöhn & Eloff, 2006). As a result of people taking ownership and responsibility, the sustainability of the intervention is strengthened (Ebersöhn & Eloff, 2006). The ABCD model brings hope to numerous people and it has the ability to unearth previously “hidden treasures” (Kretzmann & McKnight, 2005). However, every new or unfamiliar venture faces some resistance; therefore obstacles need to be carefully negotiated.

The role of a catalyst in Asset-Based Community Development

Residency is often the qualifier that distinguishes a person as an insider or as an outsider in a community (Bergdall, 2003). However, most communities also have associations, businesses, and institutions that are based in and form part of a community and its unique identity. Economic and social progress can take place if the strengths and assets of all the role-players in that particular community are combined (Bergdall, 2003).

The obvious ideal would be for this process to take place naturally without external interference. However, mobilizing the skills and resources of the residents and the organizations based in a community generally needs the assistance of an external catalyst (Bergdall, 2003). The external stimulus could be limited to the minimum but still result in significant changes (Bergdall, 2003). Ife and Tesoriero (2006) suggest that the mere presence of a community worker who is not part of that community can act as a catalyst. The role of the catalyst is thus not to do things for people that they could do for themselves, but rather allow communities to take the lead while the catalyst facilitates the process (Bergdall, 2003).
The Asset-Based Community Development model emphasizes the role of the catalyst (Community psychologist and researcher) as a support and not as a leader. Swanepoel and De Beer (2004) suggest that the community developer can never assume the role of a leader as this could lead to interdependence. The project should always be owned by the community (Swanepoel & De Beer, 2004). Skill-sharing forms part of the empowerment process and the community psychologist in turn could learn some of the skills that the people in the community themselves have developed (Ife & Tesoriero, 2006).

When residents map their local community’s strengths and resources, the catalysts should be careful not to do the mapping for the community (Bergdall, 2003). The process ought to be inclusive and the catalyst should steer away from only focusing on a select few people who are considered “leaders” (Bergdall, 2003). The catalyst plays an important role in facilitating practical strategies which would allow the residents from a particular community to mobilize their resources and achieve specific goals (Bergdall, 2003). Bergdall (2003) emphasizes the difficulty which is faced by the catalyst in steering a community’s focus away from their needs and passively receiving rather than becoming actively involved in their own development. If external help and resources are needed, the community should be empowered to search for external resources themselves (Bergdall, 2003). Bergdall (2003) feels strongly that the focus on external resources should be delayed as long as possible due to the general insistence of people in communities to focus on their problems and needs. This deeply entrenched disempowering behavior allows residents to turn their focus away from their own abilities to find solutions to most of their problems and makes them reliant on the generosity of organizations outside of the community (Bergdall, 2003).

Another problem that is faced by the catalyst is that the preparation and gathering of information could take up valuable time. However Bergdall (2003, p. 4) suggests that “people learn best by doing and then reflecting upon the experience”. It is thus important that objectives are implemented as soon as possible without unnecessary delays (Bergdall, 2003). Catalysts should always remember that they are “outsiders” and they are accountable to the communities that they work in. Their purpose and motivation for
working in the community should be clearly stated so as to build the necessary trust (Bergdall, 2003).

Although the role of the catalyst in Asset-Based Community Development is not a leading role, it is still very purposeful and is focused on building momentum in achieving aims (Bergdall, 2003). Nelson and Prilleltensky (2005) also suggest that community psychologists should avoid the expert role. However, as catalysts they have specific abilities and competencies that are beneficial to the community and as such they should remain politely firm when specific strategies are discussed (Bergdall, 2003).

It is clear that the scope of practice and the identity of the community psychologist are broader than just being health providers and they may include an advocacy role, the role of an activist, and researcher (Nelson & Prilleltensky, 2005, p. 219). Nelson and Prilleltensky (2005, p.219) further argue that all areas and disciplines should be accessible to the community psychologist.

2.2 Theoretical Frameworks
Mathie and Cunningham (2002) suggested that the theoretical frameworks underpinning the Asset-Based Community Development model should be presented in the following logical order:

- Asset-Based Community Development’s (ABCD) main focus is on the assets, skills, and talents that exist in the respective community and the starting point of the ABCD initiative is an appreciative inquiry of the successes and strengths in the community. This awareness that the community has assets creates a confidence in the community members that change is possible and this inspires them to take the initiative in community development projects.
- ABCD emphasizes the importance of social relationships which create valuable associations and networks within the community as well as with external resources. Relationships are thus seen as an asset and “ABCD is a practical application of the concept of social capital” (Mathie & Cunningham 2002, p. 7).
- **Participatory approaches to development** are central in the ABCD model. Community members’ active participation and empowerment are key principles of the development process.

- The strengthening and utilization of the community’s resources make for a more sustainable economic development and the ABCD model draws strongly on the *community economic development* theory where collaboration within the community is seen as key in order to reinforce the economy.

- The ABCD model moves away from the passive acceptance of well meaning interventions from people and organizations outside of the community towards the strengthening of *civil society*. Members of the community become producers instead of consumers and they actively engage with public and private sectors on a macro level.

### 2.2.1 Appreciative Inquiry

Communities often internalize a negative identity when they have been defined by problems such as poverty, malnutrition, lack of education, and corruption (Mathie & Cunningham, 2002). This problem-orientated focus could result in feelings of paralysis and stands in the way of positive transformation (Mathie & Cunningham, 2002). In an effort to address problems, intervention campaigns try to create an awareness of people’s negative contributions. However this methodology frequently results in a defensive attitude (Barrett & Cooperrider, 2002). A change in focus is thus essential in communities where the attention is mostly on needs and inadequacies. Focusing on a community’s strengths could ensure a more sustainable development initiative (International Institute for Sustainable Development [IISD], 2000).

Cooperrider (1990) suggested in his “heliotropic hypothesis” that all groups, organizations, communities or societies have a propensity to develop towards the positive. In order to ignite positive development, groups need to be re-affirmed (Cooperrider, 1990). Appreciative Inquiry (AI) as a method of changing social systems had its birth in the organizational field. However, it soon became clear that its benefits are far reaching and could be utilized in the domain of community development (Whitney & Trosten-Bloom, 2003). AI does not only have the potential to change people’s
perception but also signifies a new way of living and behaving (Lord, 2005). The focus is on past successes and the current potential that exists in and around groups of people (Bushe, 1995). This positive focus has the ability to light the flame of shared imagination and a community can dream and work towards a better future (Lord, 2005). Focusing on existing strengths and successes in the community motivates community members to take action in community development initiatives (Mathie & Cunningham, 2002). Appreciative Inquiry also has the potential to lift people from their position of paralysis and could provide the necessary initiative for action (Mathie & Cunningham, 2002). Elliott (1999) goes so far as to suggest that appreciative inquiry provides the energy and power that is necessary for transformation (Mathie & Cunningham, 2002). Erich Jantsch’s words describe this process even better: “The appreciated world came into being with the development of man's capability for self-reflection, a faculty encompassing much more than just thinking. It holds the world—the physical, social, and spiritual aspects of man's world—as we view it not just through the understanding that our mind composes it but through all forms of experience. It embraces our appreciation of what this world can do to and for us, and what we can do to and for it...Thus, the appreciated world becomes the motor for change induced by human action” (IISD, 2000, p.1).

However, Bushe (2007) warns against the simplification of Appreciative Inquiry by only focusing on the positive. Gergen’s (1978) “Towards Generative Theory” played a significant role in the establishment of AI. This theory emphasizes the importance of changing existing perceptions regarding social structures and the importance of actively brainstorming new ways of taking action (Gergen, 1978). Bushe (2007) supports the significance of this theory. An active mental process of searching for new ideas that could alter the way people perceive their world and ultimately lead to a new way of doing is proposed (Bushe & Kassam, 2005). The importance of Appreciative Inquiry being an active process is such that Bushe (2007) suggests changing Appreciative Inquiry’s name to “Generative Inquiry”.

There are three parts of the Appreciative Inquiry process (Bushe, 1995). The first part is the discovery of the past and present successes within the social entity. This process is followed by understanding the elements that contributed to the successes and the last
phase is the *amplification* and reinforcement of the successes through the inquiry process itself. However, it is also understood that Appreciative Inquiry is a continual cycle and not a linear process. The one phase leads naturally into another and when the last phase is reached the process starts all over again which gives it a sustainable quality (IISD, 2000).

The International Institute for Sustainable Development (2000) suggests the following diagram as a means of explanation:

![The Appreciative Cycle Diagram](image)

The most important task in the *discovery phase* is to focus on the current successes of the community. It is also important to search for the reasons why those successes were achieved (IISD, 2000). The focus stays purposely on the positive aspects and ignores failures. These successes give the direction for future development (IISD, 2000). The *dream phase* where people start to envision a better future for themselves is a natural progression. The focus is on possibilities and an understanding that if success was possible before, it could also happen in the future (IISD, 2000). In the *design phase* new ways of doing things is brainstormed and the old strategies that were successful are incorporated in the new vision. A plan is put together to guide the initiative (IISD, 2000). All these phases give birth to a new perception of the future and the social entity shares a
new destiny. Behavior is changed to coincide with the new vision and in turn provides the action necessary to set the process in motion (IISD, 2000).

The following principles underlie Appreciative Inquiry’s success (International Institute for Sustainable Development [IISD], 2000).

The constructionist principle is based on the understanding that social knowledge and community destiny are inseparable. Development initiatives should see communities as living entities constructed by people to ensure success. Tapping into the social knowledge forms a basis from which a new future could be constructed (IISD, 2000).

The principle of simultaneity suggests that change already commences during the inquiry phase and that it runs parallel to each other. Focusing on the positive during the enquiry process sets the stage for a positive outcome in the future (IISD, 2000).

The poetic principle asserts that any social entity including organizations and communities collectively construct their reality. This reality contains both positive and negative aspects which could be tapped into at any given time. However, Appreciative Inquiry is mostly concern with the positive (IISD, 2000).

The anticipatory principle is based on the understanding that current behavior is influenced by people’s expectation for the future. If people expect a positive outcome it could set positive action in motion that in turn will fulfill the expectation of the future (IISD, 2000).

The positive principle maintains that a positive attitude and strong group cohesion could be the driving force behind change. It further suggests that the inquiry process itself will set the tone for future development. Positive inquiry will have a better chance of inspiring positive change than a focus on inadequacies and shortcomings (IISD, 2000).

Although the original goal behind the development of Appreciative Inquiry was to enhance organizational efficiency, it soon became clear that its benefits were widespread and could benefit many other social bodies (Whitney & Trosten-Bloom, 2003). AI’s uniqueness and success do not only lie within its positive focus but also in its focus on action (Bushe, 2007). AI further helps to generate a collective agreement on the methodology best suited to address problems experienced by the social entity (Bushe, 2007). Importantly, AI has a potential to produce the framework and energy necessary for
the successful implementation of social action (Bushe, 2007) such as Asset-Based Community Development initiatives.

### 2.2.2 Social Capital

Social relationships are at the heart of Asset-Based Community Development (ABCD) (Mathie & Cunningham, 2002). Not only are relationships seen as assets, but they also have the power to mobilize other assets that exist in the community (Mathie & Cunningham, 2002). ABCD is thus “a practical application of the concept of social capital” (Mathie & Cunningham 2002, p. 7).

Despite the diversity in definition, Social Capital’s combination of sociology and economics in one theory has ensured its extensive use (Claridge, 2004). Not only is it a popular theory but its benefits are widespread and noticeable both in the economic and the sociological fields (Claridge, 2004). In The World Bank’s view “Social capital refers to the institutions, relationships, and norms that shape the quality and quantity of a society's social interactions... Social capital is not just the sum of the institutions which underpin a society – it is the glue that holds them together” (The World Bank, 1999). This definition captures the essence of social capital; however the definition of choice would mostly depend on the field of study (Claridge, 2004).

Relationships are seen as important and form the foundation of the social capital concept (Field, 2003). Relationships draw people together and they form strong social bonds that are based on trust and respect (Field, 2003). Trust has a ripple effect and it spreads from known people to strangers (Smith, 2000-2009). The benefits of such relationships are obvious; however the reverse is also true where lack of interaction and communication could lead to distrust and eventually serious social problems (Smith, 2000-2009). Communities who have an abundance of social capital seem to prosper in various areas such as health, education, and the economy (Halpern, 2009).

Trust in and a focus on what is considered to be in the best interest of the citizen forms the cornerstone of social capital (Nelson & Prilleltensky, 2005). Social capital further comprises of valuable resources such as networks of association, norms that ensure mutual benefits and active participation of community members (Nelson & Prilleltensky,
In the development arena, Social Capital emphasizes the participation of all role players in particular the empowerment of the previously disadvantaged groups to ensure sustainable initiatives (Woolcott & Narayan, 2000).

Petty and Ward (2001) suggest that Social Capital forms an important link between the level where policies are developed and the community where they eventually come to life. The mutual trust between partners and shared activities to achieve common goals build important support structures and a bond necessary to ensure a good outcome in areas such as health care, welfare, education and other social needs (Nelson & Prilleltensky, 2005). Social Capital’s ability to strengthen ties between members is very important and its ability to form links between different networks is seen as essential (Nelson & Prilleltensky, 2005). A careful balance between the two is necessary to avoid a preoccupation of a group with its own problems on the one hand, and isolation and discrimination on the other hand (Nelson & Prilleltensky, 2005). A further concern is that due to social capital’s success, some governments may see it as an opportunity to evade their responsibilities and promote social capital as the only tool to address social deficits (Nelson & Prilleltensky, 2005). However, although not without criticism, the theory and application of social capital has too many benefits to ignore (Smith, 2000-2009).

**2.2.3 Participatory Approaches**

Participatory development approaches do not deny the importance of government-led interventions in areas that are desperate for economic growth and stability, but rather stimulate local society’s active participation in economic stability (Davids, Theron & Maphunye, 2005; Japan International Cooperation Agency [JICA], n.d). The participatory development approach is thus a bottom-up endeavor that focuses on sustainability, self-reliance and social justice. This approach enhances local society’s role as agents and beneficiaries of development (Davids, Theron & Maphunye, 2005).

South Africa, with its history of segregation, needs a new way of development (Davids, Theron & Maphunye, 2005). An integrated, people-centered development approach where the focus is on the participation of people irrespective of their age, race, or gender was suggested as the development process of choice (Davids, Theron & Maphunye, 2005, p. 108).
Participation in relief and development programmes challenge past and present injustices and promotes equity (Peirson, 2005). It is thus difficult or even impossible for programmes to be politically neutral (Jennings, 2000). The social and political context of a community should be examined and would often shed light on the contributing factors and core reasons for the existing problems that are experienced by the community (Peirson, 2005). Even the best of programmes with good intentions could do more harm than good if the political and social context is not taken into consideration (Jennings, 2000). Humanitarian interventions also take place in a political arena and therefore should be carefully negotiated. Well-meaningful interventions such as food parcels could reconstruct the psychology of expectations (Jennings, 2000). If the social and political background was not properly researched it could result in unwarranted interference and undermining of a community’s potential for self-development (Jennings, 2000). Peirson (2005) suggests that to ensure movement from powerlessness to empowerment the core values of participation, self-determination and social justice should be highlighted. Self-determination of communities and democracy on the local level are no less important than on the national level and are central to development efforts (Jennings, 2000).

Participation is often described in terms of organizational efforts to correct power imbalance (Davids, Theron & Maphunye, 2005). All role-players’ views are important when they make decisions (Jennings, 2000). However, participation is far reaching in nature and includes empowering processes that involve previously disadvantaged people and communities (Davids, Theron & Maphunye, 2005).

Local knowledge and contribution in the design of programmes are essential to ensure context-specific interventions (Davids, Theron & Maphunye, 2005). However, the mere consultation and participation of the community in the design of a program are not enough and are not empowering in nature (Davids, Theron & Maphunye, 2005). The community members’ involvement implies more than mere token inclusions (Peirson, 2005). Communities should stay actively involved in the creation and execution of programmes or policies that are supposed to change their lives (Castelloe, Watson, & White, 2002). Most importantly, participatory approaches are based on the conviction
that community members are able to design their own future and other role players’ contributions are more supportive and facilitating in nature (Davids, Theron & Maphunye, 2005). A community’s ability to make their own decisions and to draw on competencies available to them should give direction and structure to any intervention initiatives (Peirson, 2005). The point of focus should be determined by the community and not be enforced from outside of the community (Jennings, 2000). This will ensure timely execution of program goals and will improve sustainability (Jennings, 2000). The foundation of participatory development is ultimately based on the trust that community members are able to shape their own future (Castelloe, Watson, & White, 2002).

Participatory approaches have the ability to enhance and extend local development efforts and resources with vital national and international capital injections (Jennings, 2000). Local people have privileged information regarding the community’s needs and could guide the assistance efforts of outside organizations to target the areas with the least resources (Castelloe, Watson & White, 2002). Duplication and over investment is minimized and the development and intervention efforts are more cost effective as a result (Jennings, 2000). Because participation of all groups and people are valued, participatory approaches have a potential to improve the status of previously marginalized people such as women and children (Castelloe, Watson, & White, 2002).

The following guiding principles to govern participatory approaches were identified by the Food and Agriculture Organization of the United Nations (2000). Various methodologies are used by participatory approaches and methodologies used are well defined and systematic in nature. Systemic learning is further emphasized and all the relationships between the different elements in the system must be holistic (The Food and Agriculture Organization of the United Nations, 2000). Participatory approaches value diversity and try to accommodate multiple perspectives. Group learning takes place through the interaction between group members with different power dynamics. This result in members agreeing to the methodologies and action needed to achieve the goals set by the community. People who are involved in community development initiatives and are not community members should take on a facilitating and catalytic role rather than a formal descriptive role. Although participatory approaches respect local
knowledge and skills, the focus is on facilitating the changes the community identifies as necessary (The Food and Agriculture Organization of the United Nations, 2000).

There are various ways in which to approach development initiative and participatory approaches as these have the ability to change disadvantaged communities from mere receivers of goodwill to empowered communities which are able to determine their own future (Peirson, 2005).

### 2.2.4 Community Economic Development

Houghton (1999) sees community economic development as the cornerstone to any holistic development process that involves the economy, environment and the society in general, for example Asset-Based Community Development. A holistic approach has the ability to focus on strengths and possibilities and avoid the negative and deficit-orientation (Peirson, 2005)

In order to ensure a sustainable solution to economic problems that are faced in rural and urban sectors, the social knowledge, the lessons learned and the resources that are available should be taken into account when planning a development initiative (Houghton, 1999). He further argues that valuable resources invested in projects without a community based focus will surely fail. However, the importance of networking with state organizations, and private businesses based outside of the community is critical. This infusion has benefits for both the community and the organizations that formed partnerships (Houghton, 1999). Partnerships could be formed on a long term basis or for a shorter span of time; however at the core of a partnership is the understanding that it should be beneficial for both, which in essence implies equity (Gridley & Turner, 2005). If the power dynamics are unequal between partners, it is important to respect and give the partner with lesser powers the right to self determination, autonomy, and integrity (Gridley & Turner, 2005).

Initially, the role that communities could play in economic development was underplayed and even ignored. The focus was more on wealth creation whereas poverty alleviation projects were seen as separate from economic development in general (Houghton, 1999). However, a repositioning had to take place when it became evident that the isolated anti-
poverty initiatives were unable to address the lack of financial security successfully (Houghton, 1999). Successful community economic development should also not be seen as a reason to withdraw any financial investments intended by government. Interaction and infusion should be encouraged on all levels (Houghton, 1999).

The focus should not only be on strengthening the country’s position in world markets but should also be on developing policies that will address the individual’s needs. However, numerous job and wealth creating programmes fail because they ignore the reality that many people in the population are unable to access the formal labour market due to illness, age or many other reasons (Houghton, 1999). In this regard Community Economic Development (CED) is distinguishable from general economy in that it is more holistic in nature and tries to incorporate the economic, social, and environmental needs. CED often utilizes a broader range of development strategies that include people who are unable to access the labour market (Houghton, 1999). To ensure sustainability, local capacity-building is the focus of economic and other development initiatives such as Asset-Based Community Development. The development process focuses on the identification and utilization of local assets and social capital (Houghton, 1999). The strengthening of the relationships that exist between the different role players is important and gets special attention. In order to ensure a healthy CED, an active effort to remove obstacles in the way of business investment is also initiated (Houghton, 1999).

CED functions on three levels and include the subsistence level, local-market economy and world economy (Houghton, 1999). On the subsistence level, the focus is on the individual’s basic needs, and includes informal economic activities such as planting crops and vegetables to sustain the family (Houghton, 1999). The local-market economy is more formal in nature and involves enterprises such as self-employment, and small businesses (Houghton, 1999). In strengthening the local market, most of the needs of the local people are met and it prevents vital financial resources flowing out of the community. On the world economy level, CED plays a vital role in providing valuable work experience to people who want to enter the formal sector outside of the community. An active local economy further lures government agencies and external businesses to invest valuable resources directly into the community (Houghton, 1999).
CED presents a new way of economic development. The involvement of community members as active contributors to economic growth is central to the CED paradigm (Houghton, 1999). A sense of empowerment is achieved as community members become more active and take ownership of development initiatives. The community’s assets and talents are identified and utilized and valuable partnerships are built between role players in all sectors (Houghton, 1999). All the members of the community are encouraged to participate in efforts to stimulate economic growth so that economic growth no longer resides with a select few. Even the previously marginalized people, such as HIV and AIDS survivors, the elderly and young people are included. This leads to more representative and sustainable economy (Houghton, 1999).

2.2.5 Civil Society

Civil society was a very prominent concept in the 18th and 19th centuries (The Centre for Civil Society, 2004). However, in more modern times it has been replaced by the belief that markets or the economy and the state or government are the most important sectors (The Centre for Civil Society, 2004). For many years these two sectors have received a dedicated attention. As a result, the concept of society became more abstract and instead of getting the attention it deserved it was marginalized and only featured in sociological theories and social philosophy (The Centre for Civil Society, 2004). Because some organizations such as charities, nonprofit organizations, foundations and non-governmental organizations did not fit the definition of either the state or market sector, it was purposefully ignored (The Centre for Civil Society, 2004). The concept of a possible third sector that features between the market and the state sector was just unconceivable. This left a huge gap in the understanding of the interaction between society and economy (The Centre for Civil Society, 2004). However, it took the fall of communism in Central and Eastern Europe to open the eyes of the world to the importance of civil society (The Centre for Civil Society, 2004).

The Centre for Civil Society, (2004) defined Civil Society thus: “Civil society refers to the arena of uncoerced collective action around shared interests, purposes and values”. In comparison to state, family, and market, Civil Society seems theoretically different.
However, closer investigation indicates less rigid boundaries than anticipated and these boundaries are often negotiated (The Centre for Civil Society, 2004). Civil Society encourages diversity and supports the participation of role-players from different economic backgrounds and power dynamics (De Sauza Soares, 2009).

A variety of organizations, groups, and unions facilitate their activities, interventions, and development programmes from Civil Society (De Sauza Soares, 2009). Organizations that are seen as kind and noble also form part of civil society for example churches that run various community programmes, neighborhood crime watch groups, book clubs, veteran groups, Little Leagues, etc. (Dionne, 1998). Democracy is highly valued and various bodies are available to the community members to voice their views (De Sauza Soares, 2009). To further illustrate the power of these seemingly harmless organizations Dionne (1998) referred to Eastern Europe’s struggle to maintain their independent social life during the communist reign under dictatorship. Organizations and social structures such as churches, cafes, workplaces and families which are part of civil society were used by the Eastern European rebels to nurture the concept of free society. Not even effective police could wipe out the flame of democracy that was lit and through the determination and the tenacity of civil society the yoke of oppression was lifted (Dionne, 1998 p.1).

The obvious emphasis on participation has the potential to challenge serious issues such as racism and the negative impact of globalization (De Sauza Soares, 2009). In South Africa trade unions have become one of the strongest representations of civil (Davids, Theron & Maphunye, 2005). The unions have voiced the shared values and goals of many communities. One of the trade unions’ most significant contributions was their share in the downfall of apartheid (Davids, Theron & Maphunye, 2005). Thus, under-representation of minority groups is often linked to an inadequate Civil Society (De Sauza Soares, 2009). Referred to as the “school of democracy”, Civil Society has the potential to educate people about their rights and responsibilities as civilians and provide them with an opportunity to experience democracy first hand (De Sauza Soares, 2009, p. 2). Civil Society does not only provide a forum for under-represented groups, but it also provides the forum to discuss issues not receiving the necessary attention from government (De Sauza Soares, 2009). The important role NGOs play is often not given
the necessary appreciation especially their ability to serve as a trigger for people-centered social and economic change. But their role should be given the necessary support and deference (Davids, Theron & Maphunye, 2005). Working in the communities, Civil Society Organizations such as Non-Governmental Organizations (NGOs) often have expert knowledge that they could share with government to guide their interventions (De Sauza Soares, 2009). Well resourced Civil Society Organizations also have the ability to intervene directly in communities, thus addressing some pertinent issues causing frustration (De Sauza Soares, 2009). Davids, Theron and Maphunye (2005) feel it is vital for government to involve civil society on all levels of social development. They further argue that this can only be achieved if the necessary respect is given to citizens as partners in organizational and social development initiatives. Women and youth should be involved in the decision-making process as well (Davids, Theron & Maphunye, 2005). Any practices that are not in the best interest of civil society and its citizens should be challenged and eliminated and replaced by sustainable development initiatives that have, as their goal, the betterment of society as a whole (Davids, Theron & Maphunye, 2005).
Chapter Three
Research Methodology

3.1 Introduction
Research allows us to formally inquire and gather information in such a way that the solution of particular problems and concerns are possible (Murry Thomas, 2003). The current study seeks to explore Asset-Based Community Development as an alternative community development strategy to empower people and communities that are faced with the scourge of HIV and AIDS. However, development programmes and research projects in South Africa with its history of segregation need special consideration (Davids, Theron & Maphunye, 2005). Davids, Theron and Maphunye (2005) suggest a development and research approach that is integrated, people-centered and where the focus is on the participation of people irrespective of their age, race, or gender. Not only should the research design be sensitive to the social and political context (Jennings, 2000), but it should also promote equity (Peirson, 2005).

The current research included a preliminary study, a community development initiative, and an evaluation of the development process. This chapter provides an overview of the research design and the methods used in the Asset-Based Community Development initiative for HIV and AIDS survivors.

3.2 Research Design
The use of Community-Based Participatory Research (CBPR) was considered to be the appropriate method to use for this study. Community-Based Participatory Research does not see the community that is the focus of the research as a mere location, but defines a community as a social entity with a unique sense of identity and a shared fate (Viswanathan et al., 2004).

Community-Based Participatory Research has the ability to facilitate understanding of the specific context in which the community members find themselves and the problems which they face as HIV and AIDS survivors (Zukoski & Luluquisen, 2002). It further endeavours to strengthen a community’s ability to solve its own problems by encouraging the collective participation of its members in the research process (Viswanathan, et al.,
The development and research process itself is thus empowering in nature and forms an integral part of facilitating change and learning through the creation of a greater consciousness and understanding (Katsui, 2007). Community-Based Participatory Research encourages the researcher and the community to engage as equal partners in the research process. This interactive cyclical process that includes research, action and reflection uses a combination of inquiry and community capacity-building to improve people’s lives within a community context (Viswanathan et al., 2004).

Focus group discussions as a qualitative research method were used to gather the necessary data for the current study. Qualitative research is interested in people’s lived experience regarding the research topic or problem (Murry Thomas, 2003). It provides valuable information regarding people’s beliefs and opinions and it is effective in studying issues such as social norms, socioeconomic status, gender roles and other issues that affect the research topic and the context of a particular population (Viswanathan et al., 2004). The flexibility of qualitative research further allows for rich descriptive data to be collected (Murry Thomas, 2003). Using focus group discussions as a qualitative research method has particular benefits. The research questions are asked in a group setting that is interactive in nature and the participants are encouraged to interact with the researcher as well as the other group members (Nachmais & Nachmais, 2008). Interaction in a group setting produces information and insights that would be difficult to access in an individual interview. Listening to other group members often motivates them to formulate an opinion of their own (Lindlof & Taylor, 2002). It further stimulates memories and experiences that the group members are able to share with each other (Nachmais & Nachmais, 2008). These are all qualities that were seen as essential in the current research and informed the research design.

The current research and Asset-Based Community development initiative could be broadly divided in three different Phases and will be discussed accordingly:

3.3 Phase one - Voluntary care workers’ initial perceptions of a community development initiative for people living with HIV and AIDS were explored (See Appendix D)
As a first step, to the Asset-Based Community Development Initiative, voluntary care workers’ perceptions of community intervention and development were evaluated. Nine Sinosizo (Non Government Organization) care workers, who were serving in the Sundwini Community, participated in this research. A qualitative research methodology, namely focus group discussion, was utilized. The taped focus group discussion was transcribed and analyzed by means of thematic analysis. Themes and sample statements within themes were identified (e.g., concepts were grouped into broader categories in which properties and dimensions were identified to inform a better understanding). Reliability of the data was found in the repetition of the themes and issues that emerged from the collected data. The researcher also summarized the comments and confirmed with the participants that it reflected their views.

The findings, which were consistent with existing literature, pointed towards the continual top down implementation of community development projects. Assets, skills and opportunities, which had initially not been considered by the voluntary care workers, became apparent during the focus group.

The main aim of this research was to explore voluntary care workers’ perceptions and experiences of community intervention and development. The first objective was to establish a knowledge baseline prior to the Asset-Based Community Development initiative. The second objective was to understand care workers’ awareness of skills, gifts and assets in the community, which could potentially contribute towards community development. The third objective was to create greater consciousness and understanding of what it means to be involved in an Asset-Based Community Development project.

Conclusions drawn from the initial study include the following: Community intervention and development projects provide valuable support to devastated communities. One of the biggest problems is that the sustainability of these interventions is questionable and often fragmented (Brankin et al., 2003). These interventions are consistently implemented in a top down manner with limited community participation. It has been suggested that community development can only do well if people in a community invest their skills and are willing to play an active role in such projects (Kretzmann &
McKnight, 1996). Although the NGO Sinosizo provides the Sundwini community with indispensable support, the results indicated that they are similar to other projects because many of their initiatives are undertaken using a top down approach. It was strongly felt that community members should be more actively involved in community initiatives in order to ensure success. Various gifts, skills, and opportunities were identified within the community; however it was clear that assets were often not recognized. Identification and utilization of these assets has the potential to fill many needs in the community that would have stayed unfulfilled due to the lack of external resources. The Asset-Based Community Development Model is sustainable and has the ability to mobilize skills and resources and is owned by the community (Brankin et al., 2003). The Asset-Based Community Development Model should be explored as part of a new community development paradigm where the focus is on abilities, skills and opportunities that can be utilized to strengthen and improve people’s lives in their respective communities (Ebersöhn & Eloff, 2006). This does not mean that needs are denied but merely that needs can be effectively addressed by concentrating on available resources (Ebersöhn & Eloff, 2006).

This study was a first step in exploring Asset-Based Community Development as a community development method. As an exploratory study, the results were seen as a guideline rather than confirmative. However, as a baseline study it provided guidance for the Asset-Based Community Development Initiative that followed the initial study.

3.4 Phase two – The implementation of an Asset-Based Community Development Initiative
The aim of this phase was to initiate an Asset-Based Community Development (ABCD) model in a specific community with HIV and AIDS survivors and to evaluate the outcome of the development. A non-governmental organization, which was willing to work in collaboration, was identified to provide support to HIV and AIDS survivors. The care workers who formed part of the NGO’s HIV and AIDS outreach programme were viewed as people who would be able to serve as community mobilizers. Many of the care workers lived in the community that they serve. They are an important link within the community as well as the HIV and AIDS survivors who lived in the community and who
are recipients of the NGO’S HIV and AIDS support programme. They were actively involved in establishing direction, goals, and outcomes for the ABCD initiative. They were also involved in the mapping process and mobilization of the assets and in addition gave feedback on the process in a focus group discussion.

Before the introduction of the Asset-Based Community Development initiative was made to the community mobilizers, a meeting was held with the Non Governmental Organizations’ (NGOs) managers who were heading the HIV and AIDS home based care and Orphans and Vulnerable Children (OVC) programme. The purpose of the meeting was to establish the extent of the NGOs’ intended involvement in the proposed development initiative, an overview of the care workers’ duties, and the amount of patients and OVCs involved in the NGO’s care programme. A venue was also chosen in which the ABCD initiative was to be launched. Important considerations that guided the selection of venue were; it had to be easily accessible to the care workers and community members. It is an unofficial community centre that is currently used in all the feeding schemes and OVC programmes initiated by Sinosizo. It is a well known venue to all community members. It also formed a central meeting place from where programmes are run and training is received.

One of the social workers who forms part of the NGO’s multidisciplinary team was appointed as a link between the NGO and the Asset-Based Community Development initiative. She further served as an interpreter and was the central person who conveyed information and messages between the researcher and the community mobilizers between meetings.

The voluntary care workers who were involved in the NGO’s HIV and AIDS programme were informed about the new approach that was to be launched and that it was endorsed by the NGO. A time was set for weekly meetings. However, participation was seen as voluntary and although it was in line with the Asset-Based Community Development sentiments, it slowed the process significantly. The researcher had to rely on the commitment of the community members and mobilizers to continue the process.
The researcher was also informed by the NGO that very influential leaders emerged in the HIV and AIDS programmes and care should be taken to prevent them from overshadowing the process. However, due to the voluntary nature of the ABCD approach, what was found was that the proposed leaders did not maintain their leadership roles. The process required commitment and a self driven focus from the participants and as a result new leaders came forward. Although initially shy and hesitant their new found success saw them through as leading participants in the process.

The stages proposed by Ebersön and Eloff (2006, p. 40) were adapted and used as broad guidelines during the Asset-Based Community Development process. However, the Asset-Based Community Development is a flexible process and all the stages are in reality inter-reliant and linked with each other (Ebersön & Eloff, 2006). Although it is described in a linear manner, the unique context of the current research required flexibility and some of the stages had to be revisited during the ABCD process the researcher was involved in the ABCD process for approximately seven months. Weekly meetings were scheduled to ensure momentum, however some meetings had to be postponed and re-scheduled due to unforeseen circumstances.

3.4.1 Gaining awareness of the asset-based approach

Ebersön and Eloff (2006) emphasize the importance of gaining awareness of the asset-based approach since this stage requires not only insight into a new approach but it also challenges people’s perceptions and beliefs.

Two sessions were allocated to this particular stage. In the first session the concept of Asset-Based Community Development was introduced to the facilitators and community mobilizers (See Appendix H). The Terminologies and constructs that were often used when referring to the ABCD approach were explained. The group members were also encouraged to brainstorm examples for each of the concepts. Time was set aside for questions in order to clarify any misunderstandings relating to the concepts and terminologies that would be used.
In the second session, group members had the opportunity to open a discussion relating to the new concepts that they had been introduced to. An overview of the terminologies and concepts were given again. Although two sessions were allocated to this stage, overlapping with other stages took place due to some participants’ misunderstanding of the concepts or when new participants joined and had missed the original introduction.

3.4.2 Learning to focus on assets and capacities
In the third session each participant was given a small booklet that had the different stages printed on the front and a list of the terminology and concepts used in the ABCD process to guide them. The booklets were small enough to be carried around and the participants were encouraged to note any assets they identify in the community while they went about their day to day tasks.

It was not only the obvious and noticeable assets that needed to be the point of focus but the participants were encouraged to also look at things that are not obviously seen as assets or that are hidden. They also had to think beyond their immediate environment and community.

3.4.3 Identification and compiling a map of key assets (See Appendix H – Picture 6 & 7)
Ebersön and Eloff (2006) see this stage as a practical representation of the first two stages. This physical representation of the assets on a map allows participants to view the process in an objective light.

In the current study, this stage runs parallel to the pervious stage and they overlap at times. The assets and the necessary contact number or address to access the particular asset were brought to the next sessions where they were given to the group and written down on a big A1 paper. The participants and community mobilizers were also given capacity inventories (See Appendix G) to take to their patients to list any gifts, skills and assets that HIV and AIDS survivors were willing to map on the resource list. The assets were categorized under the following headings: Physical, associations, institutions, individual, and local economy. This process continued for several weeks until the
participants felt they had enough assets that they could map on a mural on one of the community centre walls. Although there are many ways to map assets the group wanted the map to be accessible to them and the community members. They also wanted a map that was visible to people who visit the centre, that was easily understandable, and that could serve as an inspiration to continue with the project. They decided to adapt the asset map suggested by Kretzmann and McKnight (2005). A meeting was booked to paint the map on the wall (See Appendix H – Picture 3). The map had a significant impact on the participants and the community. Community members who were not part of the process started to show interest in the process and the members who were part of the process reported feeling proud of their accomplishments and even more inspired to continue.

3.4.4 Mapping access to assets, mapping relationships and mapping power relations (See Appendix H - Picture 8)

During this stage the participants were encouraged to look at possible relationships between and within the different segments of the asset map. A session was set aside to brainstorm the possibility of relationships between the different assets. This was not done in a visual form but took the form of a discussion.

3.4.5 Mobilizing assets, using the information from the asset map to build strong mutually beneficial partnerships in the systems

This stage naturally progressed from the previous stage and the participants started to use and mobilize the assets on the map for different needs. The researcher was also supplied with a list of the community needs previously identified by the NGO. These needs guided the NGO’s intervention programmes and the distribution of resources. The list was then placed next to the asset map and a session was used where the needs were linked with the resources available to the community on the asset map. Almost all of the needs identified could be fully or partially fulfilled by the assets documented on the asset map.

3.4.6 Sustaining mobilization: continuing to work collaboratively to support individual empowerment and collective action.

The last session was used as a debriefing session and future expectations of the researcher and community members were clarified. The fact that the community “owns” the process
was discussed again. The participants confirmed their intention to continue with the ABCD process. When the community centre was visited at a later stage, it was noticeable that new assets were added to the asset map, indicating continued participation.

3.4.7 Reflecting on the process (See Appendix H – Photo 10)
Participatory evaluation in the form of a focus group discussion was used as a formal reflection on the ABCD process. The research design will be discussed in more detail below.

3.5 Phase three- Participatory evaluation of the ABCD process (See Appendix H – picture 10)
A participatory paradigm was used to ensure research participants’ continued control of the process (Patton, 2002). The exploration of local knowledge and perceptions are seen as important strengths supported by the participatory evaluation process (Zukosi & Luluquisen, 2002), however it is especially the reflective, flexible and interactive nature of the participatory methodology that was considered appropriate for this study (Patton, 2002). This is a continuation of the elements that were also supported in the ABCD initiative.

The use of a focus group discussion as a qualitative research method was used to gain information from the community mobilizers and care workers regarding the ABCD process. It is a popular and cost effective method and is an effective way of doing qualitative research in social sciences (Steward & Shamdasani, 1990). Focus group discussion was thus used as a way to formally reflect on the ABCD process. Although the process took the form of a discussion, the focus group format allowed the researcher to facilitate the process and to focus on specific research questions. The focus group format further allowed the researcher to verify statements and clarify opinions (Morgan, 1993). It also provided the opportunity to the participants to express their feelings and opinions in their own words. The fact that the group members could build on ideas or topics mentioned by other group members allows for relevant data and ideas to emerge that would not have been discussed or mentioned in an individual interview (Steward &
This methodology also allows the researcher to tap into deeper levels of meaning (Steward & Shamdasani, 1990).

3.5.1 Sampling
All the previously identified leaders, care givers, and community mobilizers involved in the ABCD initiative were invited to take part in the focus group discussions. Ten people chose to participate in the focus group discussion. All of the focus group participants were also involved in the NGO’s HIV and AIDS care programme. All participants were members of the community where the ABCD initiative was initiated.

3.5.2 Instrument development and data collection
The focus group discussion was held at the community centre that served as the base for the ABCD initiative. The location was easily accessible and familiar to the participants. The focus group was scheduled for a time that was mutually convenient and minimum noise and possible interference were expected. The focus group discussion was conducted in English, however the social worker involved in the ABCD initiative was able to translate discussions in isiZulu when necessary. The participants were informed of the objectives of the focus group discussion and encouraged to share their perceptions. Key issues were formulated in an interview guideline in the form of open ended questions that gave focus to the discussion. The use of a tape recorder allowed an accurate recall of the details mentioned in the focused group discussions. The focus group discussion was facilitated by the researcher.

3.5.3 Analysis
The taped focus group discussion was carefully transcribed in order to maintain the meanings that emerged from the discussion. Although some editing was necessary to improve readability it was kept to the minimum to ensure the authenticity of the data. A qualitative, thematic analysis of the transcript was used. This process enables the researcher to build a valid argument (Aronson, 1994). Literature that is relevant to the study was then used to support the validity and reliability of the findings that were obtained through the thematic analysis (Aronson, 1994).
A cost-effective cut-and paste technique as described by Steward and Shamdasani (1990, p.104) was used for the thematic analysis of the focus group transcript. As a first step, the transcript was read thoroughly in order to identify the sections that were relevant to the aim and objectives of the study. The initial reading was followed by the development of a classification system for the major topics and issues. The content of the transcript was carefully sorted in the categories identified. This process was further simplified by using a colour coded system to identify the different themes within the text. The coded material included sentences, phrases, or long exchanges between participants. Greater insight was gained into the content of the focus group transcript as the process continued. The coded material was then cut apart and pasted according to the particular themes and sub-themes identified. The concepts were grouped into broad categories in which properties and dimensions were identified to inform understanding of the content. The sorted material was used to inform a short summary report. The various pieces of transcribed material were further drawn on as supporting material and incorporated into an interpretative analysis and an introduction was developed for each topic.

3.5.4 Ethical considerations

Community psychology research is a social science, and is mostly focused on the collection of data from people within a specific context (Oliver, 2003). It is important to remember that a person who is involved in social research is faced not only with the methodological criteria of their research but also with special norms that are demanded and which regulate human relations (Bulmer, 1982). The question of how people who participate in the research should be treated often opens a debate that is ethical in nature (Oliver, 2003). Ethics is seen by Sieber (1992, p. 3) as “the systematic study of value concepts – good, bad, right, wrong – and the general principles that justify applying these concepts.

More ethical sophistication is demanded from the research community when planning and implementing research (Oliver, 2003). When expanding knowledge, the core principle of “Do not harm the subject” should be adhered to (Schuler, 1982). Thus, the preservation of norms, morality and decency should be the foundation when planning research involving humans (Schuler, 1982). However, methodological demands and
ethics are often in conflict (Schuler, 1982). The complexity of human behavior and the context, especially the sociopolitical context, intensifies the conflict (Schuler, 1982). The key is to deal with these conflicts in a professional, accountable way (Nagy, 2000). Because the current research included a preliminary study, a community development initiative, and an evaluation of the process, special emphasis was given to the ethical considerations.

Ethical clearance was obtained according to University regulations for conducting research. In addition, the board members of the NGO were approached for consent. All participants were further informed of the following important information: The nature of the research project, the procedures of the study and the assurance that participation is voluntary (Hulley et al. 2001). Written informed consent was obtained from every participant. This consent was reaffirmed verbally before the onset of the discussions. To maintain confidentiality identifiers were changed. The transparency of the research process was promoted and the participants were encouraged to ask for clarity or more details on anything that seemed unclear to them during the research and development process.
CHAPTER FOUR

Results

4.1 Introduction
Chapter four illustrates the findings of the collected data. In order to support the qualitative paradigm, ‘thick descriptive’ data is used. The data is presented in terms of the themes that emerged from the care workers’ and mobilizing agents’ reflection on whether the Asset-Based Community Development initiative changed their perception regarding community development and whether it provided the community and individuals with development opportunities. Following this, the mobilizing agents’ and care workers’ perceived solutions for the existing barriers will be explored.

4.2 Themes and sub-themes that emerged from the collected data

4.2.1 Theme: Broadening of perceptions
Significant perception changes took place during the Asset-Based Community Development process.

Before the Asset-Based Community Development was introduced, the community members had an expectation that the government will see to their needs.

 Participant: “We thought Government will come and help us all…”

This expectation that help will come from the outside soon shifted to the researcher. The community members thought the researcher would supply them with much needed resources such as water and clinics.

 Participant: “…I was asking myself “which help is the researcher bringing to the community…”

And

 Participant: “We thought that the researcher was coming to give us something in our community, like water. We thought the researcher was bringing us clinics.”
It was originally difficult and confusing for the participants to shift from their expectation that someone from outside the community will bring the help that they need to an understanding that many of the community’s needs could be fulfilled by the assets, skills and resources already existing in the community

Participant: “I was confused...but, as time went on I realized it is not the outside help, but the help is existing in the community.”

The development process seemed to have had the impetus to change the participants’ perception to a realization that the help was not going to come from the researcher or from outside of the community, but that there were different types of important assets available in the community that could assist the community with many of their needs.

Participant: “I was also confused. I didn’t know what project the researcher was coming with...but I realized we have the skills and the talents with us. It is not the outside help but the help in the community that is important”

This change of perception stood in sharp contrast to the participant’s original perception that the community was very poor with limited resources as explained by the following participant:

Participant: “We thought we had nothing...now we think we have a lot.”

In addition, the participants also changed their perception regarding HIV and AIDS survivors in the community. At first they perceived them to be helpless and hopeless and dependent on the community. However, the ABCD development process made them realize that HIV and AIDS survivors could be more self-supportive.

Participant: “The patients can now help themselves. We thought they were helpless and hopeless but they are able to help themselves.”
The care workers further felt that now that they know patients can also contribute positively, they would like to give HIV and AIDS survivors an opportunity to think beyond their own helplessness and hopelessness.

*Participant:* “The change for me was going directly to the patients and pushing them to think what they can do for themselves.”

The change in perception regarding HIV and AIDS survivors’ ability to become more self-reliant eventually filtered through to the patients themselves.

*Participant:* “When the researcher first came, we didn’t realize people in the community can help themselves, but when we learned the skills the patients and the volunteers know they don’t have to rely on someone else for help but they can be self-sufficient.”

The participants also benefited emotionally from their perception change in that they reported feeling happy about the realization that the community has assets and that there were people in the community with skills.

*Participant:* “I was happy to realize we have skills and talents in the community”

In addition, the participants believed that the perception change could lead to positive action where community members could change from recipients to active contributors.

*Researcher:* “Do you think there is value in changing your views and approach?”
*Participant:* “Yes.”
*Researcher:* “Why?”
*Participant:* “Because now we could do things for ourselves.”

### 4.2.2 Theme: The roles of the key role players in the Asset-Based Community Development process

Although the participants initially thought that help would come from outside of the community, they had very specific expectations from the different role players in the
development process itself. They made it very clear that the community members are the ones who decide which needs should be focused on and not the organization or institution that provide the help.

*Participant: “We identified the needs the NGO is trying to fulfill in the community.”*

Even in the continuation of the Asset-Based Community Development process they felt that it is important to focus on their community’s needs first before any efforts are made to help other communities. The focus again should be determined by the larger group and does not rely on one person’s opinion or need.

*Participant: “Before we can go out and teach other people in other communities it is better if we practice what we learned...otherwise the concepts will just fade.”*  
*Interviewer: “How can we practice this?”*  
*Participant: “We have learned a lot of things but we must rather focus on one thing that we know we will do, rather than focus on many things and it doesn’t materialize. So it is better to choose one and practice. But it depends on the larger group on what aspects are chosen”.*

Where the community members originally thought the researcher will have a helping and providing role it changed to an understanding that the focus is on the community members’ and not the researcher.

*Participant: “We thought the researcher came to help us with things...But now we realize there are so many people in the community who have skills and talents...who can do things to develop us. We didn’t know we could do those things ourselves”*
The participants further felt that the responsibility resides with the community members to take control of the future of the Asset-Based Community Development process and that it will ultimately be them who will reach out to other community members in future.

Participant: “We (the community and community mobilizers) are going to reach out and help others in the community.”

4.2.3 Theme: Benefits of the Asset-Based Community Development
The participants’ perceived Asset-Based community development to be very beneficial in several aspects. These benefits could be broadly divided into benefits derived through the processes that form part of Asset-Based community development and the eventual outcome of the process.

4.2.3.1 Sub-theme: Increased Self Sufficiency
From the findings it became clear that the process of Asset-Based Community Development has increased the community’s capacity to become more self sufficient. The needs that were previously fulfilled by the Non Governmental Organization (NGO) can now be fully or partially fulfilled by the community members themselves.

Participant: “We sometimes have support groups that do sewing together. It is a talent and a skill and they can sell the product... the example of the food parcel and producing food for themselves can be used...there are people who can do the gardening...to produce food, people who can produce their own food are less dependent...instead of waiting for food parcels.”

4.2.3.2 Sub-theme: Increase in awareness and lateral thinking
Apart from the obvious benefits Asset-Based Community Development has for the community in general; the process appeared to have the added benefit of helping people involved in the process to become more aware of their environment. They were able to recognize existing assets and they were able to identify other uses for that particular asset that are beyond the obvious.
Participant: “But it was when I started identifying the assets and mapping them that I realized there are things around...for example an empty church can be used for many different things, but before I just used to look at the building and see no reason for it’s existence.”

4.2.3.3 Sub-theme: Empowerment

The realization that the community has members who have skills was experienced by the participants as very empowering. Rather than being dependent on the support and services of people outside of the community, participants felt that they could approach people in the community directly for the necessary help.

Interviewer: “Do you feel that this process was empowering in any way?”
Participant: “Yes, because now we know there are people in the community who have skills. If you need any help you can go to those people in the community.”

They further felt empowered by the fact that the community which they previously thought had no assets or resources turned out to be a community with many assets that were previously hidden and underutilized.

Participant: “...we realized that there are so many people who are so powerful...who can do so many things. We also found out that there are so many assets in the community. This process helped us a lot.”

Another participant explained that empowerment to her is when a process gives you the “willpower to do something”. She used her role as a community mobilizer to explain how being an important link between the community and the researcher made her feel empowered.

Participant: “It will make me feel empowered... being the person in the middle will make me feel empowered.”

And
Participant: “I will be happy to be empowered, being the person who is the link will also be empowering in some way...I will be happy to assist someone.”

4.2.3.4 Sub-theme: New knowledge and learning
Although the concepts that define Asset-based Community Development were new and unfamiliar to the participants, the process allowed them to gain new knowledge and to learn new skills.

Participant: “When the researcher first came, we didn’t realize people in the community can help themselves, but when we learned the skills the patients and the volunteers know they don’t have to rely on someone else for help but they can be self sufficient.”

And

Respondent: “When the researcher first came with the concepts I was confused. I was just blank. I didn’t know what the researcher was talking about. Then the researcher explained the concepts and gradually I started to understand.”

The possibility of learning from the process was not only limited to the people who participated in the Asset-Based Community Development initiative, but other communities could benefit from the newly gained knowledge by closely observing the process in the community where the ABCD initiative was initiated.

Participant: “Yes, people can learn from what already exist in our community. People could share with other people and the concept will go from one person to another person.”

4.2.3.5 Sub-theme: Flexibility of the process
The participants acknowledged the uniqueness of different communities. They believed that every community has a unique character that is especially noticeable in the community members’ attitude and behaviour. They consider this uniqueness to be especially informed by the different talents, needs and culture that exist in the community.
Participant: “We are all different...some people are lazy and some people are willing to learn. It depends on the community. Some people just want to receive...it depends...communities are all different.”

Interviewer: ‘Do you think different communities would like to focus on different things?’

Participant: “Yes.”

Interviewer: “Why?”

Respondent: “Different communities would choose different things...people’s needs are different, their talents and culture are different.”

However, in terms of the flexibility of Asset-Based Community Development, the participants felt that it is flexible enough to implement in other communities despite each community’s unique context.

Interviewer: “Do you think the process is flexible? Can we adapt this process to work in a different community?”

Participant: “If we could learn as a community...because when the concepts came we were confused at first...other communities could also benefit and learn the skills and talents that exist. We could share our own stories and tell them what we discovered about our own community. It would be doable in other communities as well. If we share our stories, other communities will also be able to adapt.”

4.2.3.6 Sub-theme: Partnerships and shared benefits

The participants realized that Asset-Based Community Development encouraged partnerships and as a result shared benefits are possible. The process enables people from the community who have different skills and assets to be linked and as a result both can benefit from the alliance. HIV and AIDS survivors in particular are also included as community members who can benefit from this process.
Participant: “For example, if a person wants to do the laundry...maybe a patient that is working well...the voluntary care worker can be a contact person to ask the patient to do the washing and help the person. The patient could be paid some money. Whilst the person doesn’t have time to do washing the patient could be helping that person and be paid.”

And

Participant: “Somebody who wants to build a house, he could go to someone who has building blocks...he can be paid cash.”

Communication and sharing information is also seen as mutually beneficial. Not only between members of a specific community but also between different communities. This will ensure the development of important relationships which in turn will encourage the continuation of the Asset-Based Community Development process and learning of new information.

Participant: “Yes, people can learn from what already exist in our community. People could share with other people and the concept will go from one person to another person...We will also benefit because we would have shared information, we create a relationship between communities.”

4.2.3.7 Sub-theme: More effective distribution of resources

Although members of the community believed that Asset-Based Community Development could help them to fulfill many of the community’s needs, they acknowledged that for some needs they will still have to rely on resources outside of the community. However, the majority of their needs can be addressed by means of the assets within the community and the ones not fulfilled, will be specific and identifiable in nature.

Interviewer: “So, the people don’t need any help from outside of the community they could do it themselves?”

Participant: “They may need help for equipment but the assets mapped include many types of equipment that they could use.”
A further benefit of mapping the resources is that the resources could be utilized in the areas most needed. Resources from other organizations and government could be channeled in the right direction instead of random use. This way duplication is minimized and the resources are used in needy areas.

Participant: “We now specifically know, we have this talent...we have this skill and this is what we want to do...so this is how we are going to use the money for this particular project...since we now know what talents and gifts exist in the community...with the very money that comes from the government we can target some of the things we want to do with the money instead of wanting to fulfill everything without knowing where the money will go.”

4.2.3.8 Sub-theme: Quick access to help

The representation of the assets in an accessible and visual way in the form of an “asset map” also had benefits. The map was painted in an area that was accessible and visited by the community members on a regular basis. The participants felt that they could look at the map and use it as a resource index. They could visit the map at their own convenience.

Participant: “We can look at the map and find the help...”

The asset map further gave the participants a piece of mind that if they are faced with a particular difficult situation, for example if a person is ill, the map will enable them to access help without unnecessary delays.

Participant: “In terms of caring, I know exactly where to go...especially those people who are sick. I know where to go or who to contact.”
4.2.4 Theme: Barriers Identified
There were several barriers identified that could stand in the way of the successful implementation of an Asset-Based Community Development initiative.

4.2.4.1 Sub-theme: Lack of financial resources
The lack of financial resources was put forward as a possible barrier. Although the participants became aware of the benefits of the numerous assets, skills and resources identified in their community, they felt that the lack of money could still pose a problem. Certain skills may exist in the community but due to the lack of financial resources those skills may not be developed, for example beadwork.

Participant: “One of the things that could hinder the process is money. Maybe if you want to start bead work you may have a problem of where would you get the beads...maybe they would like to sell the beads but the material to start is missing.”

4.2.4.2 Sub-theme: Poor Cooperation
Asset-Based Community Development is recognized as a process that encourages participation of all community members regardless of their status. However, it also requires people to work together as a team and focus on the same objective. The participants felt that some community members may not want to cooperate as part of a team. Their tendency to move in a different direction could stand in the way of progress.

Participant: “Cooperation maybe can stand in the way. People may not want to cooperate in a team. The team want to go the other side and the people want to go the other side...not making it possible to go forward.”

4.2.4.3 Sub-theme: Poor Strength of Character
Despite the knowledge some community members may have regarding the benefits of a community development initiative, the participants felt they may not have the strength of character to continue with the process.
Participant: “People are different and people may not ehh...ehh...they may not have the strength to carry on even though they know that there are benefits, but they will just let the process slide.”

The participants further felt that it would be difficult for other members of the community to change these people’s minds. The participants felt strongly that the change in attitude should come from these people themselves, especially if they know that they will benefit from the community development process.

Participant: “We cannot change the people…it is the people themselves who need to be committed. If they are not committed enough we can’t change them. They need to want to do it themselves if they know they benefit.”

4.5.4.4 Sub-theme: Confusion and negative perception about the development process
Some participants had a pre-conceived perception that the process of Asset-Based Community Development will be difficult and as a result they were very apprehensive about the process.

Participant: “In the beginning it was difficult because I didn’t know in the beginning what the researcher are going to teach us. I thought it was a difficult thing.”

Conversely, other participants started off by being enthusiastic and positive about Asset-Based Community Development, but when some of the concepts were introduced the participants didn’t understand them and became confused as a result. They started to lose confidence in their own abilities to be part of the process. They eventually decided to withdraw and stayed away for a while.

Participant: “At first I was enthusiastic. I wanted to know what was happening...the concept was introduced then I got confused. When the subject of
assets was mentioned I got even more confused. I thought I will not be able to do it. So, I stayed away a few sessions.”

For other members the confusion only came later when they were already participating in the process. One participant in particular made a concerted effort to get more clarity about a particular part in the Asset-Based Community Development process. She approached other members of the community in order to help her understand, but when they were unable to make things clear to her she became despondent and thought the process wasn’t for her.

Participant: “Another member tried to explain the process to me. I did try...I did go to the people to ask for help, but the confusion was that I thought that if I got the person’s contact details for example a singer, I would be asked “how is this person going to help the community?” I knew some people with talents but I thought they will ask me how these people can help the community. That is the reason I thought it is not for me.”

4.5.5. Theme: Suggested solutions to deal with the barriers

The participants saw the process of development as a process that needs to be focused on collectively. The solution to many needs to be tackled in a teamwork format.

Participant: “As I brought more assets it became clearer that if one person brings the assets to be mapped we as a group can discuss how this person is going to help.”

They further felt that working together will enable people with less knowledge to draw on the knowledge of people who know and understand the process. This will streamline the process and prevent any unnecessary delays.

Participant: “If we work together and there are things they don’t understand they can ask the people who know better so that the process goes on. Instead of sitting with a misunderstanding, they must go out and seek help.”
Asset-Based Community Development is seen by some participants as self-explanatory and the most important way of clearing misunderstanding and confusion is to stay involved in the process. Instead of giving up or seeking help the process itself will make things clearer.

Participant: “At first I was also confused, but I stayed in the process...So, I kept on bringing more assets to be mapped and it became clearer and clearer.”

And

Participant: “In the beginning I thought it was difficult, but as we started to identify assets and identifying skills and doing things ourselves, we realized it was easy.”

One participant who initially felt the process was difficult was motivated to come back and participate when she noticed the other community members continued their participation despite difficulties and that they were very successful in their efforts. She felt that if other people could stay part of the process and be successful, so could she.

Participant: “... I stayed away a few sessions but when I realized what the others in the community were bringing and how they were doing... I saw there were some assets that I could have brought if I knew how. I thought it is a difficult process. I realized I could have brought some more people that live in the community who could be mapped. Now I saw it is something that is doable and it is something I can do as well. I can participate...”

Other members felt that a more formal forum needs to be developed where their concerns could be raised and problems could be discussed.

Interviewer: “Do you think special provision must be made for people where they can raise concerns?”

Participants: “Yes.”
Good communication is also seen as an important element to ensure the success of the Asset-Based Community Development initiative. The participants felt that good listening and talking skills will lead to a better understanding; especially the communication between community members and the researcher is seen as essential due to the researcher’s knowledge about the Asset-Based Community Development Process and their ability to make certain concepts clearer if initially misunderstood by the community members.

Participant: “when the researcher first came with the concept I was confused. I was just blank. I didn’t know what the researcher was talking about. Then the researcher explained the concepts and gradually I started to understand.”

And

Participant: “...there was communication between me and the researcher.”

Interviewer: “Do you find communication important in this process?”

Participant: “Yes. The parts that played an important role were listening to the researcher, talking and then understanding.”
CHAPTER FIVE

Discussion

This chapter presents a discussion of the main themes that emerged during the analysis of the research data. During the reflection process in a focus group discussion, insight was gained into the significant perception changes that took place during the Asset-Based Community Development (ABCD) initiative and the development opportunities that emerged during the ABCD process. The perceived barriers that could stand in the way of the successful implementation of an ABCD initiative and the possible solutions to those barriers are discussed. The researcher’s reflection and experience of the ABCD process is also included in this chapter.

Significant perception changes took place during the implementation of the Asset-Based Community Development Initiative. These changes were especially noticeable in the expectation of who should be responsible for community development and who should be mainly responsible for fulfilling the community’s needs. Further change in perception was noticeable relating to the HIV and AIDS survivors expected role in a community development initiative. In addition, the Asset-Based Development Initiative had a direct positive impact in creating development opportunities. However, the participants also recognized certain barriers that could stand in the way of the successful implementation of an Asset-based community development (ABCD) process and suggested solutions to deal with some of the barriers.

5.1 Broadening of perceptions

The ABCD process allowed the participants to critically reflect on several aspects of community development in general and Asset-Based Community Development (ABCD) in particular. As a result significant perception changes took place during the process. These perception changes are supported by Jack Mezirow’s theory of “Transformatory Learning” as described in Dover (n.d.). This theory implies that a person could change through the process of critical reflection. Paulo Freire’s theory of “Critical Consciousness” forms the basis of Transformatory Learning (Dover, n.d.) which explains a person’s potential to deepen their awareness of their own reality. This reality is
informed by a person’s context and is socially and culturally based (Dover, n.d.). The Asset-based community development process presented the participants with an opportunity to challenge their perceptions on several aspects and allowed for transformatory learning to take place.

The participants’ original perception that the government is responsible for the fulfillment of all their needs in the community or that help must come from outside of the community is consistent with Kretzmann and McKnight’s (2005) notion that, if people in communities continuously receive indiscriminate help from outside of the community, it could result in them becoming dependant on the well-meaning efforts from the government and organizations outside of the community. They also warn that it could seriously affect the community members’ own creativity in looking for or creating solutions for their own problems (Kretzmann & McKnight, 2005). The participant’s original perception that their community is exceptionally poor with no resources is also reflective of other lower income communities that think their problems are the most severe and unique in nature and can only be managed by knowledgeable people outside of the community (Kretzmann & McKnight, 1996).

Bartle (2007) refers to this phenomenon as the “Dependency Syndrome”. This relates to a belief that certain groups and communities are generally dependent on other people to solve their problems and it is often exacerbated by charity (Bartle, 2007). He feels strongly that when a community is given everything without an expectation to contribute, it would lead to dependency which in turn will lead to poverty and deprivation (Bartle, 2007). Where it was previously seen as a good norm to have self-determination in a community, it has now become essential.

Poverty and the lack of financial resources has become such a widespread experience, especially in communities with a high HIV and AIDS prevalence, that there is just not enough resources to fulfill all the needs in a particular community (UNAIDS, 2009). Even previously considered ‘rich’ entities such as the United Nation, World Bank, and international NGOs are straining under financial demands and are unable to help all the needy (Bartle, 2007).
The participants’ perception change from their original expectation that the government or even the researcher must provide for their needs to their understanding that they themselves should take the lead, is in keeping with the Asset-Based Community Development paradigm (Ebersöhn & Eloff, 2006). Thus, a movement away from dependency is seen as non negotiable in any development project and if ignored would result in the failure of the development process (Bartle, 2007).

Another significant perception change took place with regard to the participants’ perception of HIV positive members of the community’s ability to make effective contribution during the ABCD process. The fact that they originally perceive the HIV and AIDS survivors to be helpless and hopeless could possible stem from an empathic understanding of the numerous difficulties faced by HIV and AIDS survivors (UNAIDS, 2009). On the other hand it could be due to the stigma surrounding HIV and AIDS survivors and their lack of power as a result. The physical, social, and psychological difficulties faced by HIV and AIDS survivors are undeniable. Worse, psychological difficulties often go unnoticed (AIDS Foundation South Africa, 2008). It is also well recognized that people infected and affected with HIV and AIDS often lose their power and standing in society, while the power is transferred to the people who stigmatize them (Beacon, Stephney & Prosalendis, 2005). However, Roos and Temane (2007) feel that all community members could contribute successfully to a community development process despite their age, health, or social standing. The understanding that all community members are imported underpins the community competence concept (Roos & Temane, 2007). Instead of using people’s inadequacies as a starting point in community development it is better to draw on the strengths of the community to challenge difficulties (Diale & Fritz, 2007). O’Connell (1988) further feels that by marginalizing people, the community lose out on those people’s unique potential and the community becomes impoverished. The participant’s changed perception about HIV and AIDS survivors could contribute to community development initiatives, is in keeping with other ABCD initiatives that successfully focused on the elderly, children, mentally challenged, and immigrants’ productive contributions to community development (Kretzmann & McKnight, 2005).
5.2 Expected roles of the key role players in the Asset-based community development process

Although originally dependent on interventions from outside of the community, the participants were very clear in their new awareness that community members are the ones who should decide which needs should take priority. They further felt that the NGO should consult them when they plan interventions in the community. Such a notion is supported by an understanding that local knowledge should be valued and is seen as imported in community development initiatives (Ife & Tesoriero, 2006).

The participants’ initial thought that the researcher is just another person who will bring resources to the community changed to an understanding that there are many competent people within the community that could take a leading role. It can be argued that people working in communities as catalysts have specialized knowledge, for example the community psychologist. However the community members have lived experience regarding the unique characteristics of a specific community as well as an in depth experience of the community’s strengths, weaknesses, and needs (Ife & Tesoriero, 2006). Whilst respecting local knowledge, the expertise of professional people in the community cannot be denied. However, every person’s value must be acknowledged. (Ife & Tesoriero, 2006). What is thus proposed is the sharing of knowledge and wisdom and an understanding that every body in the community development process is a student and should learn from each other (Ife & Tesoriero, 2006).

From the findings it also became clear that the community members felt they should be in the lead of community development projects involving their community. In many development projects the local people are merely drawn into the development process as a token, instead of participating as the main role players at the control (Swanepoel & De Beer, 2007). Despite the understanding that community members’ involvement should be more than symbolic, there are very few development initiatives that involve local people in the planning and decision-making process (Swanepoel & De Beer, 2007). Community members must have the power to make decisions (Swanepoel & De Beer, 2007). People, who are marginalized, including HIV and AIDS survivors, often lack the experience of being in control (Nelson & Prilleltensky, 2005). Early literature stated that mere
participation without the necessary power becomes an empty and frustrating process to the people without any power (Arnstein, 1969). It is further argued, that the extent of the community members’ involvement should be more than managerial in nature. They should also play a leading role in the evaluation of the project and decide on the adaptations necessary to ensure continued success (Swanepoel & De Beer, 2007).

The community members’ perception that it would be their responsibility to continue with the development process to ensure sustainability is in keeping with the notion that development initiatives should keep the sustainability of a project in mind (Ife & Tesoriero, 2006). Including members of the community in community development initiatives as full partners, it could give them a sense of responsibility when it comes to issues such as HIV and AIDS (Nelson & Prilleltensky, 2005). In taking ownership and responsibility the sustainability of the intervention is strengthened (Ebersohn & Eloff, 2006).

5.3 Benefits of the Asset-based community development initiative

Not only did the participant’s perceptions change during the ABCD process, but the process also provided the community with some benefits and practical solutions to deal with the problems faced by the community.

5.3.1 Self sufficiency

The participants felt that they benefited from the ABCD initiative in many ways. The community in general became more self-sufficient. It came to light that many needs that were previously fulfilled by the NGO could be fulfilled by some of the assets that already exist in the community. ABCD is well known for its ability to respond to local opportunities by tapping into often unrecognized or under-utilized assets (Near East Foundation, 2005). This is by no means a denial of the importance of the NGOs contributions. But one of the Asset-Based Community Development model’s benefits is, by focusing on the community’s strength and participation it allows outside resources to be used effectively, ultimately leading to sustainability (Brankin et al., 2003).
5.3.2 Empowerment

The realization that community members have skills, assets, and gifts is empowering. Brankin et al. (2003) agree that waiting patiently for other people to solve your problems could be a very disempowering process. Rather than being dependent on help from outside of the community the participants realized that people from their own community could be approached for help.

Moving towards a more empowering model enables people to become actively involved in dealing with the problems they face (Ebersöhn & Eloff, 2006). A powerful community is seen by O’Connell (1990) as a community which creates opportunities and security for its people and which takes care of its own while drawing on its collective wisdom. Community development interventions such as ABCD initiatives that involve the people living in the communities have a better chance of being experienced as empowering (Kretzmann & McKnight, 2005).

Another participant experienced empowerment as a process where the willpower to be involved and to do something was created through the ABCD process. This experience is in keeping with the understanding that empowerment does not only involve the obtaining and enabling of power, but it also includes the production of power where it did not exist before (Nelson & Prilleltensky, 2005). Empowerment is thus a subjective experience which is objectively observable (Van Vlaenderen & Neves, 2004).

5.3.3 Flexible Process

The participant’s perception that each community has a unique character which reflects in community members’ attitude and behaviour is similar to Davids, Theron, and Maphunye’s (2005) belief that cultural norms and values differ from community to community. These norms and values include traditional leaders, the place and role of women, and norms and beliefs (Davids, Theron, & Maphunye, 2005). These contextual elements are important when working in a specific community (Davids, Theron, & Maphunye, 2005). Not only should a community development initiative keep this in mind when planning a development initiative but the process itself should be flexible enough to
adapt to a unique context (Swanepoel & De Beer, 2006). A research methodology that is not flexible enough is inappropriate (Swanepoel & De Beer, 2006).

From the data it appears that the participants experienced the ABCD initiative as a flexible process which should succeed in many different communities. The ABCD model is a flexible process that could be adapted to almost any context (Kretzmann & McKnight, 2005). However, its reputation as a successful community development methodology is especially noticeable when implemented in communities that are poor (Carnegie UK Trust, 2005).

5.3.4 New knowledge and learning
Community intervention that purely focuses on the alleviation of poverty and other difficulties experienced in a particular community is often criticized (Nelson & Prilleltensky, 2005). A deeper transformation process is necessary which includes the process of learning and gaining new knowledge (Nelson & Prilleltensky, 2005). Transformatory learning is thus referred to as a learning process that creates social awareness and the enhancement of personal efficacy (Duncan, Bowman, Naidoo, Pillay & Roos, 2007).

Asset-based community development has been described as not a mere intervention process but a process that requires a paradigm shift and a change in attitude and perception (Kretzmann & McKnight, 2005). The Asset-Based Community Development approach even developed terminologies and constructs unique to its character. This includes the development of new concepts and redefining of existing terminologies (Ebersön and Eloff, 2006). Although it is often the researcher who gains knowledge during a research project (Swanepoel & De Beer, 2006), the participants in the current research felt that they acquired new knowledge. They felt that the knowledge they gained could be shared with other communities as well.

5.3.5 Partnerships and shared benefits
In order to form a bond with someone or before trust is possible, people develop relationships with each. Respect is a very important component of a relationship (Field,
2003). On the other hand, trust and respect have the tendency to spread from the people we know to strangers and as a result new relationships are formed (Smith, 2000-2009). The elements that strengthen the quality and quantity of interaction are referred to as social capital (The World Bank, 1999). Relationship is one of the key elements in the Asset-based community development concept (Mathie & Cunningham, 2002). Apart from relationships being important to mobilize the assets in a community, they are seen as assets (Kretzmann & McKnight, 2005). Relationships are important to strengthen the core of a community (Nelson & Prilleltensky, 2005). The results of the study indicated that the participants were able to recognize existing relationships in the community as well as the possibility of more relationships forming. The participants were further able to recognize the HIV positive members of the community as an important part of the community. The possibility of strong bonds between community members that could be beneficial for all was also established. What can be concluded is that strengthening these relationships inevitably strengthens the community as a whole. The participants further shared Smith’s (2000-2009) notion that relationships could have a ripple affect. Therefore, they felt by sharing information with neighboring communities strong partnerships between the communities would be possible.

5.3.6 More effective distribution of resources

Needs are often seen in terms of social justice, where people have certain basic human rights and in terms of community development, where community members are seen as the experts when their needs are defined (Ife & Tesoriero, 2006). However, defining a community’s needs is frequently left to either professionals or researchers from outside of the community with very little contextual knowledge of the community and its members (Ife & Tesoriero, 2006). As a consequence the professionals and researchers are the ones deciding which needs take precedence (Ife & Tesoriero, 2006). Professionals are thus seen as the ‘experts’ and the community members become powerless in acting on their own behalf (Ife & Tesoriero, 2006).

Without insight into the unique context of the community’s needs, needs are met according to general assumptions or what is assumed to be critical issues for example HIV and AIDS (Ife & Tesoriero, 2006). However, such assumptions lead to the
duplication of intervention efforts targeting the same issue repeatedly with valuable resources being wasted (Ife & Tesoriero, 2006). The research data of the current study indicated that mapping the assets available in the community enable the community members to observe the assets that are available to address the needs identified. Mapping assets in a visual representation of what is available prevents the unnecessary duplication of programmes and relief activities. Further benefits of the asset map as identified by the participants are that it serves as a resource reference that could be used by the whole community. Resources could then be used in the areas that need the resources the most. It empowers the community members to utilize the assets on needs they think are most important. Telephone numbers and addresses of the resources on the map make for speedy access especially if needed for an emergency situation.

5.4 Barriers Identified

It is important to understand that there are often barriers that exist which have the potential to stand in the way of community development (Brankin, Chapman, Diacan, Dickman, Dunn & Evans, 2003). In order to challenge and remove these barriers a careful identification and acknowledgement of them is necessary (Brankin et al., 2003). The participants identified several barriers that they believe could stand in the way of the successful implementation of an Asset-based community development initiative.

5.4.1 Lack of financial resources

One of the most important premises of the ABCD model is the belief that all people and all communities have assets even the poorest (Kretzmann & McKnight, 2005). These are often in the form of skills, talents, gifts, resources, capacities and strengths (Ebersön & Eloff, 2006). However, with poverty rates estimated at seventy one percent in South Africa’s rural areas, it is devastating effects are undeniable (Mayekiso, & Tshemese, 2007). Furthermore the bi-causal relationship between poverty and HIV and AIDS (Cohen, 1997) and the fact that South Africa is one of the countries with the highest prevalence of HIV positive people in the world also contribute to a distressing picture in relation to financial resources (UNAIDS, 2009). The extent of poverty faced by many people is overwhelming. Thus the participants’ perception that poverty could be seen as a stumbling block for community development is not unreasonable. The ABCD model
does not naively deny the devastating effects of poverty or its wide spread distribution. However, the paralyzing effect of focusing on problems and deficiencies necessitated a paradigm shift (Ebersön & Eloff, 2006).

The Asset-based community development model represents that paradigm shift needed to bring a new focus (Ebersön & Eloff, 2006). People have strengths and abilities and communities’ often have histories of past successes that could be used to inspire them to take action and to built capacity (Ebersön & Eloff, 2006). In order to ensure a sustainable solution to economic problems faced in rural and urban sectors Houghton (1999), suggests that social knowledge, lessons learned and resources available should be taken into account.

Initially communities were ignored as partners in economic development; however a change was needed when it became evident that the isolated anti-poverty initiatives were unable to successfully address the lack of financial security in communities successfully (Houghton, 1999). To ensure sustainability, local capacity-building is the focus of economic and other development initiatives such as Asset-Based Community Development. The development process focuses on the identification and utilization of local assets and social capital (Houghton, 1999). This new focus is in harmony with a global movement away from wealth creation and poverty alleviation as the only sectors in the economy to a more integrated economy where communities become partners in economic development (Houghton, 1999). Thus including community economic development as part of the general economy is not a denial of poverty and its ramifications, but is seen as a more sustainable way of growing the economy (Houghton, 1999). Yet, financial stability is important and it is also seen as a resource that enables a community to voice their opinions and form part of the Asset-Based Community Development concept (Brankin, et al. 2003). This includes the encouragement of entrepreneurship and the development of business opportunities within the community as well as land ownership and access to credit (Brankin, et al. 2003).
5.4.2 Poor strength of character

What clearly emerged in the data is the participants’ perception that regardless of the benefits; the Asset-Based Community Development has some challenges, especially from within the community. For instance, some members of the community may not want to participate in the efforts of ABCD or they do not have the “strength of character” to continue with the process. They further felt it would be difficult to change their minds even if they are educated on the benefits. Collins (2004) suggests that people are expected to act and think differently. Different discourses exist within groups and people often contradict and compete with each other (Collins, 2004). It is argued that what the participants perceived to be a weakness of character when the community members do not want to participate in developing their community, despite the benefits, could possibly be a discourse in itself. The fact that community development holds benefits for the community and the fact that the participants are given adequate information on the benefits will not necessarily result in attitude or behavioral change. It can be compared to the fact that despite intensive education campaigns regarding the transformation and consequences of AIDS, people do not automatically change their behavior to avoid infection (Collins, 2004). It became important to investigate the reasons for the failure of AIDS education programmes to achieve their objectives (Collins, 2004). Collins (2004) goes further to say that the focus should move away from behaviour towards understanding people’s experiences regarding certain issues. This will shed light on the psychological and social aspects affecting the person’s attitude and behaviour (Collins, 2004). The critical role of language is an important tool that should be used to tap into a person’s experiences (Collins, 2004). It is similarly believed that discourse analysis as a research methodology should be used to shed more light on the community members’ unwillingness to participate in the ABCD initiative rather than just accepting it as a weakness of character. However, apart from using talking and listening to create better understanding on the researcher’s part, it could also be the key to engage unwilling community members in the Asset-based community development process (Asset-Based Community Development Institute [ABCS Institute], 2005).
5.4.3 Confusion and negative perceptions about the development process

Some of the participants had a pre-conceived perception that ABCD would be a difficult process, while others became confused and despondent during the process. It has to be acknowledged that Asset-Based Community Development is more than just a methodology; it represents a paradigm shift, because it challenges people’s perceptions and behaviour (Kretzmann & McKnight, 2005). It also developed terminologies and constructs unique to its character (Ebersöhn & Eloff, 2006). It is thus understandable that some community members would take time to get used to the new ways of doing things and of understanding. This notion is in accordance with other ABCD initiative feedbacks. Dee Spiech from the Metropolitan Family Services in Blue Island reported spending more than ten months promoting understanding of the ABCD concepts before initiating their ABCD initiative (ABCD Institute, 2005). Her argument in this regard is that building mutual trust and changing perceptions take time (ABCD Institute, 2005). A further argument in this regard is that an ABCD initiative does not present a quick fix but a long term sustainable development process for a community (ABCD Institute, 2005). This does not mean delay in the process is predicted or even condoned, but rather an emphatic understanding that some community members will take longer to grasp the concepts or get stuck with certain aspects of the process (ABCD Institute, 2005).

5.5 Suggested solutions to deal with the barriers

The participants’ participation was seen as essential for the success of community development. They feel that community members could face problems as a united front thereby raising the possibility of a better outcome. This notion is supported by the ABCD Institute’s (2005, p. 40) view that being part of a group allows people to become part of a “rich web of associational life”. Unity allows for stronger bonds to develop between group members and they can stand together when they are faced with a challenge (ABCD Institute, 2005). Similarly Mcdermontt (1999 p.2) suggest that working closely together as a team establishes a “rhythm, rapport and common identity” which allow the members to built on each other’s ideas and which leads to better problem solving. The trusting relationship that develops between members also creates a fertile environment for learning (Mcdermontt, 1999). Members of a team often reflect on their ideas and share their thoughts. This allows for the development of deeper insight and mutual
development (Mcdermontt, 1999). This notion is in accordance with the results that suggested members were motivated to continue with the process by observing other group members’ successes.

Other group members felt that a formal discussion forum needs to be established where group members could discuss their concerns. Discussing problems as a group is seen by the participants as an effective way of dealing with community member’s concerns as well as a good forum to brainstorm solutions. Team members are often empowered in the team contexts than they would be as an individual (Norman, 1996). This is evident in that teams are encouraged to give their opinion on matters, assess work done and seek solutions for problems that were encountered (Norman, 1996). The fact that the team works together makes decision making faster and problems can be immediately addressed as they immerge (Norman, 1996).

Working together as a team builds important team spirit which creates a feeling of togetherness and support. This opens up communication lines that are more effective (Khurana, n.d.). Communication is the centerpiece of relationships (Adey & Andrew, 1993). It is further seen by Collins (2004) as a tool that could be used to tap into people’s experiences and perceptions. Effective Communication is also seen by the participants as essential for successful community development. They felt it could make concepts clearer, minimize the possibility of misunderstanding and enable them to translate their feelings.

5.6 A comparison between the baseline study and Asset-Based Community Development initiative
The following table provides a consolidated summary of changes that took place in the community between the baseline study and Asset-Based Development initiative.
<table>
<thead>
<tr>
<th>The Baseline Study</th>
<th>Asset-Based Community Development Initiative</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The community members presented with limited consciousness or understanding of</td>
<td>• The ABCD process encouraged critical reflection on community development and as a result</td>
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<tr>
<td>community development in general and Asset-Based Community Development in</td>
<td>significant perception changes took place during the process</td>
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<td>particular</td>
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<td>• The community members expected that community development will take place from</td>
<td>• The community members saw themselves as the main role players who are willing to work in</td>
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<tr>
<td>“outside” of the community with the government and outside organizations as the</td>
<td>collaboration with outside companies, organizations, and government during development initiatives</td>
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<td>main role players</td>
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<td>• The researcher was seen as another person from outside of the community who</td>
<td>• The researcher was seen as a catalyst and a mediator of the community development process</td>
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<td>would bring resources to the community</td>
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<tr>
<td>• Government or donor organizations identified the needs in the community that</td>
<td>• Community development drew on the strengths of the community to challenge difficulties instead of</td>
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<td>form the focus for the community development initiatives. This resulted in efforts</td>
<td>using people’s inadequacies. The community members identified the areas where interventions were</td>
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<tr>
<td>targeting the same issues repeatedly with valuable resources being wasted</td>
<td>critical and mapping the resources prevented unnecessary duplication or relief activities</td>
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<tr>
<td>• Although the community members enjoyed the involvement of organizations outside</td>
<td>• Active involvement of community members in the community development process was found to be very</td>
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<tr>
<td>of the community, they sometimes experienced the intervention and development</td>
<td>empowering, especially when community members realized that people from their own community could</td>
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<td>process as disempowering</td>
<td>be approached for help</td>
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<tr>
<td>• The community members felt that they could not complete with the specialist</td>
<td>• The community members were very surprised when they realized that many skilled and professional</td>
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<tr>
<td>knowledge that came from outside of the community</td>
<td>people were living amongst them in their community. Teachers, builders, electricians, and</td>
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<tr>
<td></td>
<td>carpenters to only name a few</td>
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</table>
The community members experienced their community as one of the poorest with almost no resources. The community members acknowledged the existence of numerous skills, assets, gifts, and resources in their community that went unseen and unutilized.

HIV and AIDS survivors were seen as helpless and hopeless and consistently in need of community members’ help. HIV and AIDS survivors were seen as productive members of the community that could contribute to community development.

5.7 The researcher’s reflection on the ABCD process

The community psychologist and researcher could be powerful change agents and with the right attitude their work can be of immense value. However, this can only be achieved through honest self-reflection, a willingness to learn from the people they want to teach and a deep seated respect for diversity and people’s right to autonomy (Nelson & Prilleltensky, 2005). The discussion of the results of the current study is thus not seen as complete without adding the experiences and the reflection of the researcher involved in the ABCD process.

The researcher was a central part of the research, Asset-Based Community Development process, and the evaluation process. However in keeping with the ABCD paradigm the involvement was never in an ‘Expert’ capacity but rather in a facilitating capacity. This included helping the community members understand the concept of ABCD, assisting them in planning and initiating the process, supporting them in finding the obvious and sometimes the not so obvious assets that exits in the community and the facilitation of the focus group discussion as a formal reflection on the ABCD process.

Although a humbling and enriching process for the researcher, the ABCD development and research initiative were not without obstacles. The following barriers to successful development were identified by the researcher. Other than providing the social worker and allowing the voluntary care workers to be part of the process, the NGO withdrew from the process. This limited the possibility of a strong partnership with the NGO as suggested by the ABCD Institute (2005). Although specific meeting times were set, initially that did not clash with the NGO’s programme but overlapping still took place. This forced the voluntary care workers to choose their attendance. Some voluntary care
workers continued with their NGO duties during the time allocated for the ABCD initiative. This often happened due to severely ill HIV and AIDS positive community members who needed immediate support and care. Group members attended the meetings on irregular basis by choice, leaving gaps in their understanding of the process. Parts of the ABCD model already discussed had to be re-visited on a regular basis to familiarize the members with the next stage. Meetings scheduled with the NGO’s management were rescheduled by the NGO on recurring basis and some meetings were cancelled by the NGO without prior notice, causing a delay in the process and an unnecessary waste of resources.

Other unavoidable delays were also noted. The community members and community mobilizers had to walk to the meeting place; sometimes weather conditions delayed the start of the sessions for hours. Similar to the experience of other research projects, limiting research funds presents its own challenges. The ABCD initiative was not funded and as a result it was dependent on very limited funds from the researcher and the resources available in the community. The initiative was run on a limited budget. This was in keeping with the ABCD model’s suggestion that the resources in the community should be used before resources outside of the community are sourced (Kretzmann & McKnight, 2005).

In keeping with the notion that community researcher should also consider themselves students (Swanepoel & De Beer, 2006) the following lessons learned by the researcher are discussed. Although literature often refers to certain community members and community leaders as ‘gate keepers’ when they control access to a community (Swanepoel & De Beer, 2006), it was the experience of the researcher that the NGO also served in the capacity of a gate keeper. Without the consent of the NGO it would have been very difficult to access the community and especially the HIV and AIDS survivors that are also community members. It is thus seen as important to keep good relations with the gate keepers as failure to do so could compromise a project.

Kretzmann and McKnight (2005) suggest that an Asset-based community development initiative should be implemented without unnecessary delay and the researcher’s
involvement should also be as short as possible. The reasons for this is two fold, on the one hand the sooner the process starts the sooner positive results are possible and on the other hand prolonged involvement of the researcher could result in dependency on the researcher (Kretzmann & McKnight, 2005). The researcher’s experience in this regard was that numerous obstacles stood in the way of the speedy implementation and completion of the ABCD initiative. However, while trying to resolve each obstacle, the process started to lose momentum and the community members’ interest started to subside. An important lesson in this regard was that the process should continue despite the obstacles and the realization that any project or initiative will face unexpected obstacles despite good planning. ABCD is a continuous process where learning is seen as essential. Perfection is, therefore, not a requirement; requirements are evaluation of the process and corrective measures. This experience of the researcher is supported by Swanepoel and De Beer (2006) notion that operational strategies should form a guideline in community development but should be flexible enough to consider a community’s unique context and should be adapted if necessary.

5.8 Conclusion
The current research was an attempt to establish whether an Asset-Based Community Development Initiative is able to provide a community identified as having limited resources and with HIV positive members with development opportunities. The results indicated that the community and its members did indeed benefit from the Asset-based community development process.

The ABCD process allowed the participants to critically reflect on several aspects of community development in general and Asset-based community development in particular. As a result, significant perception changes took place during the process. The participants’ original perception that the government is responsible for the fulfillment of all the needs in the community or that help must come from outside of the community changed to one of feeling empowered through the understanding that there are many assets in the community that are unutilized and unrecognized. They also came to realize that not only do all members in the community (including the HIV and AIDS survivors) have skills, talents and gifts but also that the community members are the main role
players who could make a difference in the community. The Asset-based community development initiative also provided the participants with skills and knowledge needed to actively and competently participate as partners in a community development process. Thus the Asset-based community development initiative moved the community members towards empowering perceptions and behaviours which enabled them to become actively involved in dealing with the problems they faced.

Apart from recognizing the assets, the community was also able to utilize the assets, making the community more self-sufficient. Many of the needs that were previously fulfilled by the NGO could essentially be fulfilled by some of the assets that already exist in the community.

Despite several barriers presenting itself during the process, the Asset-based community development process has shown itself as a flexible process and took into consideration the unique character of the community. The participants were also able to identify possible solutions to the barriers they identified.

A powerful community is seen by O’Connell (1990) as a community who create opportunities and security for its people and which takes care of its own while drawing on its collective wisdom. Community development interventions such as the Asset-Based Community Development empower communities (Kretzmann & McKnight, 2005). What can thus be concluded from the current study is that Asset-based community development has the potential to present a community with limited resources and HIV positive community members with development opportunities and a capacity to grow.

From the results of this study and the lessons learned through the process, the following recommendations are suggested.

5.9 Recommendations

- For future ABCD research it is recommended to include a baseline study. It not only provided a valuable knowledge baseline prior to the Asset-Based Community Development initiative but also created a greater awareness and
consciousness of the community development process. Furthermore, it enables the researcher to draw important comparisons between the initial baseline study and the Asset-Based Community Development process

- Understand the important role NGOs and other community based organizations play in the community, not only because they have valuable resources that could benefit communities but also because they often have special relations with communities and their members and therefore could ease access into the communities. It is thus seen as important to keep good relations with the different role players and organizations to ensure continued success of community development initiatives.

- Dependency on the part of community members are often well entrenched and it is often aggravated by the well meaning efforts of donors. Educate the community members on the negative aspects of remaining dependent and discuss the benefits of gaining back their power. It is also important to educate donors on the negative aspects of keeping community members dependent.

- Different discourses exist within groups and people and often contradict and compete with each other (Collins, 2004). In order to understand some people’s reluctance to participate in community development initiatives despite the obvious benefits, Discourse Analysis could be utilized to gain greater insight into this phenomenon.

- Because Asset-based community development represents a new paradigm of developing communities and it requires perceptions as well as behaviour changes some people in the community could lag behind during the process. It is thus seen as important to monitor individual community member’s progress in relation to the bigger group’s progress to ensure members do not feel left out or become dejected.

- Address barriers as soon as they appear. Allowing the development process to slow down unnecessarily could lead to the loss of momentum which in turn could lead to despondency in the community members.

- The development of a formal forum where community members could raise their concerns will encourage community members to give their opinion on matters, assess work done and the seeking of solutions for problems they encountered.
• Asset-based community development is a process and continued evaluation is necessary to monitor the process. It will also allow for the identification of barriers that were obscured before.

• Expect the unexpected: Asset-based community development initiatives are sometimes initiated in rural areas. This has unexpected challenges, for example; bad weather can prevent community members without transport from attending group activities. However, the process should be flexible and be able to adapt to the community’s needs.

5.10 Limitations of the Study

This study has some limitations. Asset-based community development is considered a relatively new and innovative community development paradigm especially in South Africa. The data collected is representative of only one community: The community which is poor and has HIV and AIDS survivors. Due to each community’s unique context it is important to include more communities in future samples to ensure representative data.

Even though the findings of the present study cannot be generalized, the benefits experienced by the community members and participants through the Asset-based community development process were significant enough to consider Asset-based community development for future community development projects.


**References**


APPENDIX A

Consent to Conduct Research with Sinosizo

18 June 2009

Mrs Cathrin Venter
91 Margaret Maytom
Durban North

PO Box 510
Hyper By The Sea
4053

Dear Cathrin Venter,

Re: Consent to conduct Research with Sinosizo

Thank you for applying to Sinosizo to participate in your research project on Asset Based Mapping. Our Management Committee has agreed to grant consent to you to work with Sinosizo for this purpose and has selected the community of Sundwini (also called Izimangweni) as the target community for this research project.

Your contact people at Sinosizo office in Amanzimtoti will be Mrs Sandy Naidoo (OVC Manager) and Mrs Busi Magwaza (HBC Manager). Kindly liaise directly with them.

We look forward to working with you on this project, and to receiving your report at the completion of the project.

Yours sincerely,

Mr Zibu Mngadi
Chairperson:
SINOSIZO Management Committee
APPENDIX B

Consent form

University of Zululand
Private Bag x1001
KwaDalangezwa 3880

PHD COMMUNITY PSYCHOLOGY: PRELIMINARY STUDY-VOLUNTARY CAREWORKERS’ PERCEPTION REGARDING COMMUNITY INTERVENTION/DEVELOPMENT

CONSENT TO PARTICIPATE IN RESEARCH

Dear participant, we are asking you to participate in this research, in order for us to gain insight into your perception regarding community intervention and development.

This research will be conducted by the Cathrin Venter and supervised by Prof. H.S.B Ngcobo. The preliminary study would involve participating in a Focus Group discussion for approximately 60-80 minutes.

As a participant you:

❖ Have the right to refuse participation in this study (Participation is voluntary) and have a right to withdraw at any stage without any negative consequences
❖ Can be assured that all information shared between the researcher and the group will remain anonymous
❖ Agree to keep the information discussed in the group confidential
❖ May require the results of the study
❖ Agree that anonymous quotations may be published
❖ Agree that a tape recorder could be used to tape the focus group discussion.

You may ask any questions about the study. The PhD student Cathrin Venter can be contacted on 0828094348.

Signing your name means that you agree to participate in this study and understand the conditions mentioned above.

Name of Participant                                                Name of Researcher
………………………                                                ……………………

Signature                                                                 Signature
………………………                                                ……………………

113
APPENDIX C

Interview Schedule
(Base Line Study)

Interview schedule for the focus group discussion to explore voluntary careworker’s perceptions regarding community intervention

Community interventions

1. What does community intervention/Development mean to you
2. Is community intervention and development the same thing—if not how do you see the difference
3. Who do you think should be involved in community development/intervention
4. What is the best way to intervene in the community in your view
5. What is the best way to develop the community in your view
6. Is there anything that someone can do to make community development and intervention more effective

Empowerment

1. Do you think the people in the community could contribute in anyway to lighten the needs in the community
2. Do you think people in the community could contribute in anyway to lighten their own needs
3. Do you think people infected and affected by HIV and AIDS could contribute in anyway to lighten their own needs or that of the community
4. Do you think people in the community have skills, gifts or assets that could be useful in developing their community
5. Do you think people affected and infected by HIV and Aids have skills, gifts or assets that could be useful in developing their community and helping themselves
6. Do you think you have skills, gifts or assets that could be used in community development
7. What type of skills, gifts or assets do you think could prove useful
8. How could these skill, gifts or assets be used towards community development
9. Are those skills, gifts or assets currently used
10. Do You think there are other assets in the community that could be used, if any name them

The role of the voluntary care worker

1. Why did you become a voluntary care worker
2. What did you expect to do as a voluntary care worker
3. Did your perception change in any way
APPENDIX D
Preliminary and Baseline Study

Voluntary care workers’ initial perceptions of a community development initiative for people living with HIV and AIDS

ABSTRACT

As a first step, in this Asset-Based Community Development Initiative, voluntary care workers’ perceptions of community intervention and development were evaluated. A qualitative research methodology, namely focus group discussion, was utilized. Elicited qualitative data was analyzed using thematic analysis. The findings, which were consistent with existing literature, pointed towards the continual top down implementation of community development projects. Assets, skills and opportunities, which had not previously been initially considered by the voluntary care workers, became apparent during the focus group.

Keywords: Asset-Based Community Development Model; Non-Governmental Organization; voluntary care workers; HIV and AIDS

INTRODUCTION

For many years destitute and marginalized communities have relied upon the relief activities of well-intentioned organizations (Brankin, Chapman, Diacan, Dickman, Dunn, Evans, et al., 2003). Non-government organizations (NGOs) have taken the lead in relief activities using a community development model (Jackson, Kerkhoven, Lindsey, Mutangadura, & Nhara, 1999). Challenges faced in South African communities, have included limited job opportunities, lack of financial recourses, illiteracy as well as HIV and AIDS (Ebersöhn & Eloff, 2006). HIV and AIDS have, in particular, had a severe impact on Southern Africa. It is estimated that 64% (24, 5 million) of all people living with HIV and AIDS reside in sub-Saharan Africa (UNAIDS, 2006).
The original community development paradigm began with a need analysis, which brought forth a list of seemingly unlimited needs and inadequacies within communities (Kretzmann & McKnight, 1996). Interventions were then implemented to address these community needs, problems or deficiencies, using a top down approach (Kretzmann & McKnight, 2005). This methodology, unfortunately, created a perception that community members themselves were unable to contribute and intervene (Brankin et al., 2003). One of the biggest problems encountered, was that the sustainability of such interventions was questionable and often fragmented (Brankin et al., 2003). It resulted in community members losing their own creativity or incentive to become producers or suppliers, with focus shifted towards dependence on the well meaning efforts of service providers (Kretzmann & McKnight, 1996). It has been suggested, by Kretzmann and McKnight (1996), that community development can only be successful and sustainable if community members invest their skills into and are willing to participate in community projects.

A new paradigm of community intervention has been developed. There has been a shift in emphasis towards community empowerment (O’Connell, 1990). The Asset-Based Community Development (ABCD) approach emphasizes the importance of starting a community intervention with “discovering and mobilizing the gifts, strengths, abilities, resources, or assets to be found in even the most challenged communities” (Kretzmann & McKnight, 2005, p. 31). The Asset-Based Community Development Model has shown itself to be sustainable and can be implemented in a relatively short period of time (Brankin et al., 2003). Although the project should always be owned by the community, community members may need the assistance of an external catalyst such as Non Government Organizations (NGOs) who can play a valuable role in assisting with mobilization of skills and resources (Bergdall, 2003; Swanepoel & De Beer, 2004).

Sinosizo Home Based Care (HBC) is an NGO, which was established in 1995 by the Catholic Archdiocese of Durban Aids Care Commission (CADACC) due to the growing need for care for families of people living with HIV and AIDS. Sinosizo recruits, trains, supports and monitors community care givers who teach families affected by HIV and AIDS how to care for their family members and simultaneously provides emotional,
social and spiritual support to patients, orphans and vulnerable children. Sinosizo seeks to raise awareness about HIV and AIDS, as well as promote behavior change aimed at the prevention of HIV and AIDS and reduction of stigma. The Sundwini Community in the Amanzimtoti area has the least amount of resources of the communities assisted by Sinosizo. It was therefore identified as an NGO that would be suitable for the present study.

AIM

The main aim of this research was to explore voluntary care workers’ perceptions and experiences of community intervention and development.

OBJECTIVES

The first objective was to establish a knowledge baseline prior to the Asset-Based Community Development initiative. The second was to understand care worker’s awareness of skills, gifts and assets in the community, which could potentially contribute towards community development. The third objective was to create greater consciousness and understanding of what it means to be involved in an Asset-Based Community Development project.

RESEARCH METHODOLOGY

Research design

A qualitative research design was utilized. Thematic analysis was used to analyze the qualitative data gathered from focus group discussions.

Sample

Nine Sinosizo (Non Government Organization) care workers, who were serving in the Sundwini Community, participated in this research.
Data collection method

A focus group discussion format was used. A specific appointment date for this focus group was made with the participants. Times, dates and venues were agreed upon in advance. The participants participating in the group discussion were provided with an introduction, which included the reason for the research and how the results would be utilized. The use of a tape recorder allowed for accurate recall of qualitative information. The length of the focus group discussion was approximately 80 minutes and was facilitated by the researcher.

A broad set of concepts (topics) important for this research were identified. The general concepts were used to formulate open ended questions that served as guidelines in the focus group discussion. The focus group provided the researcher with an opportunity to facilitate and develop the discussion, particularly when a specific point was missed or when the discussion deviated from the topic. It also allowed the facilitator to ask more in-depth questions and permitted the participants to elaborate on their answers.

Ethical considerations

Necessary ethical procedures applied in the research were as follows. The proposal was submitted for approval to the executive board of Sinosizo. Permission was granted to interact with participants working in the Sundwini Community. All participants were informed of the following important information as outlined by Hulley et al. (2001): the nature of the research project, the procedures of the study and the assurance that participation was voluntary. Written informed consent was obtained from each participant. This consent was also reaffirmed verbally prior to the onset of the group discussion. Consent was given to use a tape recorder during the group discussion.

Analysis

The taped focus group discussion was transcribed and analyzed by means of thematic analysis. Themes and sample statements within themes were identified (e.g. concepts
were grouped into broader categories in which properties and dimensions were identified to inform better understanding). Reliability of the data was found in the repetition of the themes and issues that emerged from the collected data. The researcher also summarized the comments and confirmed with the participants that it reflected their views.

RESULTS

The qualitative data is presented below in the recorded themes.

Theme 1: The perception of voluntary care workers regarding community intervention and development.

The findings of this study suggest that the voluntary care workers had different perceptions regarding community intervention and community development. Some felt that community intervention and development was the same concept, while other participants expressed that there was a clear distinction between community intervention and community development.

The majority of the participants felt there was a difference between community development as something that comes from “outside” of the community and does not involve the community members as appose to something that comes from within the community, for example the responsibility of the government to provide communities with clinics and water.

Some participants felt that development needs to be more holistic in nature and should address the person’s physical, emotional and spiritual needs, especially in youth. This includes the provision of skills and training to develop young minds. Being disadvantaged was seen as having a negative effect on brain functioning, and developing skills through teaching and training would help community members to regain their sense of self and enable them to do things for themselves.
Participant: “Development is to develop them, because if you are so disadvantaged, your brain is not functioning normally. And you need somebody to help you...to develop you. You need to teach and train them in order for them to know that they can be somebody...”

Community intervention was seen as something that the community members should be involved in themselves. The participants felt that very limited involvement from the community was evident. Different reasons were put forward to try and explain this phenomenon.

The participants felt that if given a choice people would always choose community development as opposed to community intervention because they knew that the government or businesses would bring community development initiatives from outside of the community with no pressure on them to participate.

Participant: “…development they know must come from government or other businesses...they usually have their mind that they must always get something from other people. Not that they must work themselves in order to get something…”

Participants felt that despite the fact that community members reportedly enjoyed the involvement of outside organization they sometimes experienced the intervention and development process as confusing and disempowering. The participants mentioned that each new project tried to convince the community that that project was better than any other project, not only discarding the previous efforts but also making the community members believe they could never compete against the specialist knowledge that came from outside of the community.

Participant: “…on, on their mind they are having that, that something that is coming from outside is better than what they’ve got. That is why they are hesitant to do things for themselves.”
Another reason for community member’s reluctance to initiate development and intervention strategies was placed at the door of the new generation that forgot the skills that were utilized by the older generation, for example ploughing lands and planting crops. The younger generation had turned into consumers rather than producers, resulting in underutilized resources.

Participant: “...most of them tell me they used to plough lands...used to plant their own things, but this generation came with the thing that you have to buy some things so to get some thing, they tell you to forget the land that they are having...”

The majority of the participants felt that the community’s mindset needed to change from being dependent on outside intervention to focusing on the resources available to them, such as land. However it was also felt that some help from outside of the community would sometimes be necessary because very few communities would have all the resources they needed.

Participant: “...I can have a piece of land, but don’t have seeds to plant. I need somebody else to help...”

Theme 2: Who should be involved in community intervention and development?

The majority of the care workers felt that the community should start the development process. This was seen as important because the community was privileged to information that was not visible to the “outside world”.

Participant: “The members of the community... they should start the development...they know what is going on...”

Although outside help was also perceived to be important, it was felt that the community should take the initiative to get external support.

Participant: “…they (community) can go outside and seek for help from other people”
It was especially the resources that could be provided by external people that were seen as important, for example seeds, computers and skills development.

**Theme 3: The best way to develop a community?**

It was felt by some participants that communities did not always know where to start an intervention or development process and that a catalyst was necessary to start this process. It was felt that special people with a “heart” for the community were necessary in order to recognize potential. They viewed themselves as an example of people who had a “heart” for the community.

*Participant: “…look for the person who's got the heart to do this. To look at the people like these ones…like us now… the volunteers working in the community”*

One participant felt that the success of community development relies on outside help but that the community members must identify their needs that are being fulfilled by the people from outside the community. However the majority of participants felt that to make community development more effective all role players should have a very well defined role and should work together to achieve a common goal.

**Theme 4: Reasons for programme failure**

One of the major reasons put forward for programme failure was the fact that similar projects are implemented in the same community, for example HIV and AIDS awareness campaigns and disease prevention initiatives. The care workers felt that the same message was sent over and over by different companies and those needs that might be more pertinent in a specific community are ignored.

*Participant: “…nobody is coming with a new thing. If we can come with new things that will help everybody”*
Communication was seen as important when an initiative was planned to prevent the unnecessary repetition of programmes. This eventually created disappointment and lack of enthusiasm, especially when new initiatives were introduced.

**Theme 5: The identification of skills, assets and gifts in the community**

The care workers felt that every person in the community had something to contribute to community development, however they identified different reasons why those talents, skills and assets were not used. It was felt that some people were just lazy and didn’t want to use their skills; however some participants mentioned that people were sometimes involved in activities that did not suit their natural abilities and talents and therefore caused them to become despondent. It was felt that they should rather be involved in areas where they could do things that they enjoyed.

*Participant: “...yes, people are lazy, but I think each and every person has got a talent. I can say somebody must go to the garden, but she is somebody to build a house...that is why I said...if you can find out what that person is having in mind or what is the talent. Empower that person according to what he has got...”*

Other participants felt that there were many talents that were unidentified and hidden in the community and because these were unknown, they were unused. Being a HIV and AIDS survivor was not seen as a reason why people couldn’t contribute to community development and why they couldn’t use their talents and skills. The care workers felt that if the community members were too ill to contribute, their families could get involved in community development and their talents and skills could benefit their family as well as the community in general.

*Participant: “Yes, we are dealing with infected and affected people. So, they are capable to do anything. Maybe my patient is very ill and can’t do anything but the family can do something.”*
Theme 6: The different skills, assets and gifts identified

The care workers mentioned several skills and gifts, for example gardening, painting, and cooking. However, they felt that people would sometimes not mention their skills and talents as they were not prompted. They also felt that although people may have wonderful skills, they did not recognize their abilities as skills.

Participant: “…they’ve got the ideas but they are sitting there not knowing where to go. But as soon as somebody comes, we’ve got some campaign in the area… everybody will come. We will find we have carpenters, people who can fly helicopters…we’ve got so much skills…the stuff that we need.”

The community workers themselves felt that there were skills, assets and gifts that were not currently being utilized that could not only benefit the community and its members.

Participant: “I am multi talented, I can bake and I can cook. I can paint, fix electric stuff. I can do ironing and I can do household detergents like sunlight liquid. I can sew, I can do gardening. I can do computers, I love computers. I can take photos, I love photos… I’ve got everything”

DISCUSSION

South Africa faces numerous challenges including HIV and AIDS. Many Non-Government Organizations projects have focused on community members using a top down approach with limited involvement from the community (Jackson, Kerkhoven, Lindsey, Mutangadura & Nhara, 1999; Kretzmann & McKnight, 2005). The results of the present study confirm this notion that community development often comes from “outside” of the community and does not involve community members. Community members passively wait for government or businesses to bring community development initiatives. This is in keeping with literature by Bergdall (2003) who suggests that this deeply entrenched disempowering behavior allows people to turn their focus away from
their own ability to find solutions and makes them reliant on the generosity of organizations outside of their community.

The voluntary care workers felt strongly that community members themselves should not only initiate community development but should also take the initiative, when necessary, to get help and resources from outside of the community. However, their perception was that the resources available in the community should be utilized first before outside help was sourced. This is in keeping with Bergdall’s (2003) suggestion that the focus on external resources should be delayed as long as possible due to the general insistence of people in communities to focus on their problems and needs, instead of their abilities.

Despite the fact that the Sundwini Community in the Amanzimtoti area was initially put forward as the community serviced by Sinosizo with the least resources, the voluntary care workers view changed and were more aware that every person in the community had something to contribute to community development. This is in line with the ideology of Asset-Based Community Development (ABCD) that is based on the understanding that all people living in different communities have abilities, skills and opportunities that can be utilized to strengthen and improve themselves, their families and the wider community (Ebersöhn & Eloff, 2006). The results further indicated that a diagnosis of HIV and AIDS was not seen as a reason to not contribute to community development. This is confirmed by Kretzmann and McKnight’s (2005) notion that even the most unlikely people, for example elders, young children, disabled people and people that are generally marginalized, could make a significant contribution.

However, despite the acknowledgement of the voluntary care workers, that there are numerous skills, assets and resources available in the community, they felt that these assets were not always visible. Many people have wonderful skills that are not mentioned and as a result such skills are often not utilized (Kretzmann & McKnight, 2005).
CONCLUSION

Community intervention and development projects provide valuable support to devastated communities. One of the biggest problems is that the sustainability of these interventions is questionable and often fragmented (Brankin et al., 2003). These are frequently implemented in a top down manner with limited community participation. It has been suggested that community development can only do well if people living in the respective community invest their skills and are willing to play an active role in such projects (Kretzmann & McKnight, 1996). Although the NGO Sinisizo provides the Sindwini community with indispensable support, the results indicated that similar to other projects many of their initiatives are undertaken using a top down approach. It was strongly felt by the participants that community members should be more actively involved in community initiatives in order to ensure success. Various gifts, skills, and opportunities were identified within the community; however it was clear that these assets are often not recognized. Identification and utilization of these assets has the potential to fill many needs in the community that would have stayed unfulfilled due to the lack of external resources. The Asset-Based Community Development Model has shown itself to be sustainable, has the ability to mobilize skills and resources and is owned by the community (Brankin et al., 2003). The Asset-Based Community Development Model should be explored as part of a new community development paradigm where the focus is on abilities, skills and opportunities that can be utilized to strengthen and improve people’s lives in their respective communities (Ebersöhn & Eloff, 2006). This does not mean that needs are denied but merely the assumption that needs can be affectively addressed by concentrating on available resources (Ebersöhn & Eloff, 2006).

This study was a first step in exploring Asset-Based Community Development as a community development method. As an exploratory study, the results should be seen as a guideline rather than confirmative. However, as a baseline study it could provide guidance for future Asset-Based Community Development research.
REFERENCES


APPENDIX E

Consent Form

University of Zululand
Private Bag x1001
KwaDalangezwa 3880

PHD COMMUNITY PSYCHOLOGY: VOLUNTARY CAREWORKERS’
PERCEPTION REGARDING THE IMPLEMENTATION OF A ASSET-BASED
COMMUNITY DEVELOPMENT MODEL INITIATIVE

CONSENT TO PARTICIPATE IN RESEARCH

Dear participant, we are asking you to participate in this research, in order for us to gain
insight into your perception regarding the Asset-Based Community Development and
intervention initiative.

This research will be conducted by the Cathrin Venter and supervised by Prof. H.S.B
Ngcobo. The study would involve participating in a Focus Group discussion for
approximately 60-80 minutes.

As a participant you:

- Have the right to refuse participation in this study (Participation is voluntary) and
  have a right to withdraw at any stage without any negative consequences
- Can be assured that all information shared between the researcher and the group
  will remain anonymous
- Agree to keep the information discussed in the group confidential
- May require the results of the study
- Agree that anonymous quotations may be published
- Agree that a tape recorder could be used to tape the focus group discussion.

You may ask any questions about the study. The PhD student Cathrin Venter can be
contacted on 0828094348.

**Signing your name means that you agree to participate in this study and understand
the conditions mentioned above.**

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APPENDIX F

Interview Schedule
(Main Study)

Interview schedule for the focus group discussion to explore voluntary careworker’s perceptions regarding the implementation of the Asset-Based Community Development initiative

- What were your thoughts when the Asset-Based Community Development initiative was introduced to you
- What was your initial perception regarding it’s ability to work in your community
- Are there any differences between the community initiatives that were previously introduced in your community and the ABCD model
- Was there shared responsibility between the community and other role players for example the NGO
- How did you experience the ABCD process
- Do you think that the community was able to take ownership of the process
- What is your perception regarding the ABCD initiative’s ability to bring forth any relevant and practical solutions to some of the problems experienced by the community
- What is your perception regarding the ABCD initiative’s ability to provide for mutual support and it’s ability to create a caring environment
- What is your view on the flexibility of the ABCD process? Did it allow for the community’s unique context
- Could the development process start without unnecessary delays, and what is your opinion on this point
- Did the ABCD process allow for participation and collaboration between the different role-players
- What is your opinion regarding the establishment of any partnerships during the process
- Did any of your perceptions change during the ABCD development process – please elaborate
- Please identify any possible barriers or difficulties that complicated the development process
- What would you recommendations be to challenge those barriers you experienced during the process
We believe that everyone has gifts, skills, assets and talents that can be used to benefit the community. I would like to take a few minutes to talk to you about your gifts and talents. These skills and assets could be shared with the community and they in turn could share their skills and assets with you.

Gifts -we are born with certain abilities that we can develop and share with other people what are your gifts

Gifts of the head (I have certain knowledge about things that I can talk about or teach other people)……………………………………………………………………
……………………………………………………………………………………

Gifts of the hands (for example any thing you could do with your hands, baking, gardening, painting, sports etc.)…………………………………………………………
……………………………………………………………………………………

Gifts of the heart (Things I care about for example to look after children, the environment, helping the poor, helping the elderly or sick people etc.)………………………………………………………………………………
……………………………………………………………………………………

Do you have or know of anybody who have any machine or tools or equipment at home in workable condition that you are willing to share with the community, for example cement mixer, stove, machine to make clothes with etc…………………………………………………………………
……………………………………………………………………………………

Do you have or know anybody who have any hardware for example bricks, cement, wood, corrugated iron, wire, paint, brushes etc. that you are willing to share with the community……………………………………………………………………
……………………………………………………………………………………

Do you have any space for example a room, outbuilding, cottage etc. that you are willing to share or rent out to someone……………………………………………………………………
……………………………………………………………………………………

Do you have or know of any available land that could be used for planting vegetables………………………………………………………………………………
……………………………………………………………………………………
Do you know anybody or do you have a car, or bakkie, truck or trailer that people in the community can use or rent. 

Do you know of anybody who needs someone to work for them. 

Do you know anybody who have certain skills that they will be willing to share with the community for free or for a small fee. 

Do you know of your family members or neighbors that have any of the above that they will be willing to give, share or rent out to the community. 

Thinking of your skills, what three things do you think you do best? 
1) 
2) 
3) 

Which of all your skills are good enough that other people would hire you to do them? 
1) 
2) 
3) 

Are there any skills you would like to teach? 
1) 
2) 
3) 

Organizations (Clinics, Library, Police, NGO’s, churches etc.) 
1) 
2) 
3) 

Institutions (Schools, Hospitals, Universities, Colleges, banks etc.) 
1) 
2) 
3) 

Businesses (Tuck shops, hairdressers, car washers, etc.) 
1) 
2) 
3)
What businesses do you think are needed in this community?
1) 
2) 
3) 

What other things do you think are needed in this community?
1) 
2)
APPENDIX H
Pictures of the Asset-Based Community Development Initiative

Picture 1: Some of the community workers that formed part of Sinosizo’s outreach programme.

Picture 2: The Asset-Based Community Development concepts are introduced to members of the community and the voluntary careworkers.
Picture 3: Asset map painted on the community center’s wall – It’s central placement made for easy accessibility.

Picture 4: The different colours on the asset map represent the different types of assets in the community for example: Physical space, associations, local economy, institutions, and individual gifts and assets.
Picture 5: Members of the community volunteered their skills to the betterment of the Community.

Picture 6: Mapping the different assets available in the community on the asset map.
Picture 7: Adding assets to the map is a continuous process.

Picture 8: Mobilizing the assets, using the information from the asset map to build strong mutually beneficial partnerships in the systems.
Picture 9: Continued support and collective action.

Picture 10: Reflecting on the Asset-Based Community Development process.