

**THE CONTRIBUTION OF NGOs ON FAMILY WELFARE:
CASE STUDY OF FRANCOIS XAVIER BAGNOUD
(FXB) NYARUGENGE DISTRICT
RWANDA**

By:

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DECLARATION

Mabete Niyonsaba Dieudonné hereby declare that this is my original work and has not been submitted for award of a degree in any other institution of higher learning or university.

Signature 

Mabete Niyonsaba Dieudonné

Date 17th OCTOBER 2008

APPROVAL

s dissertation has been done under my supervision as a university supervisor, and submitted
h my approval.

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Angelita P. Canene

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DEDICATION

I dedicate this work to the memory of my late Parents Munyankindi Antoine and Mukarugambwa Daphrose, my wife Mukanome Olive and our children Shema Olivier, Uwase Anne, Sheja Christian, Uwineza Rosine and Uwajeneza Gloria and to my sisters and brothers.

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LIST OF ACRONYMS

V/AIDS	: Human Immune Virus and Acquired Immune Deficiency Syndrome
ARV	: Antiretroviral
CBOs	: Community-Based Organizations
EDPRS	: Economic Development and Poverty Reduction Strategies
ESCR	: Economic Social and Cultural Rights
EU	: European Union
FXB	: François-Xavier Bagnoud
GATT	: General Agreement on Tariffs and Trade
MINNECOFIN	: Ministry of Economy and Finance
MYRC	: Myanmar Red Cross Society
OC	: Orphans and Vulnerable Children
PCR	: Political and civil rights
PEAP	: Poverty Eradication Action Plan
PLHIV	: People Living with HIV/AIDS
PMCT	: Prevention of Mother-to-child transmission HIV
PRSP	: Poverty Reduction Strategy Paper
RwF	: Rwandan Franc

ABSTRACT

This study determines “The contribution of NGOs on Family Welfare: A case study of François Bagnoud (FXB) Nyarugenge District-Rwanda”. The purpose of the study was to examine the contribution of FXB in family welfare in Nyarugenge District-Rwanda. This study employed a case study design to identify the contribution of FXB on beneficiaries’ welfare. Questionnaire and stratified method were used to obtain data. Frequency and percentages were the statistical treatment were utilized.

To achieve objectives of the study and answer research questions, a stratified method was used to sample the target population which consisted of FXB’s beneficiaries. Primary data was collected using a semi-structured questionnaire, and secondary data was gathered from books, written documentary and reports mainly from the internet. Data were analyzed using frequency and percentage.

The findings revealed that the main FXB’s beneficiaries consist mainly of adult women aged above 26 years. It was also observed that being HIV positive and poor were other criteria. It was concluded therefore that FXB plays an important role in ensuring family welfare. This is done by giving people money to start businesses, from which profits generated are used to for self-sustainability. The result of this study revealed that very few people attended vocational training provided by FXB. However, almost all respondents manage to attend seminars and workshops on health and nutrition issues, which really improved their living conditions.

The study concluded that strategies implemented by FXB in the field vary according to the social, cultural, economic and political scenarios present in different countries and particular locals where the programs are implemented. It was therefore recommended to respect gender balance by increasing the number of males among beneficiaries, to provide to them technical trainings to improve their skills and to be more adviser on health and nutritional issues. However, the findings are limited to the case under study, therefore future studies can be build on these results to complete this picture.

CHAPTER ONE

INTRODUCTION

Background of the study

The improvement of living conditions of local people depends on collaboration between main actors in local development: the public sector, the private sector and the third sector (community based organizations). Some countries go beyond these actors to include NGOs (Non governmental Organizations) because of their role in development of carrying out developmental projects and services in the field and they are seen as possible alternatives to government's overstretched effort in addressing the need of the population especially those excluded by official development programs (CCTS, 2006, p. 4).

Voluntary groups, or non-governmental organizations (NGOs), were seen as having greater diversity, credibility, and creativity than official agencies (the World Bank, United Nations, etc.) in producing a "just development" characterized by equity, democracy, and social justice as well as economic growth (Clark, 1991) as cited by Peet and Hartwick (1999, P.139).

Historically, the term NGO is said to have come into currency at the end of the Second World War as the United Nations sought to differentiate between inter-governmental specialized agencies and private organizations. But the movement's origins are much older. The first national NGO was probably the Anti-Slavery Society, formed in 1839. The anti-slavery movement, which reached its height at the end of the 18th century, was the catalyst for many organizations that followed. Other early NGOs grew out of wars, including the Red Cross in the 1860s after the Franco-Italian war; Save the Children after World War I; and Oxfam and Christian Aid after World War II (Hall-Jones 2006, p. 2).

Consistently, the lack of an integrated political voice may explain the dramatic growth of NGOs since the 1980s. As the World Bank and IMF forced cuts in public services, NGOs were encouraged to move in to fill the gaps. They were considered: "the preferred channel for service provision, in deliberate substitution for the state" (CCTS 2006, p. 5).

The World Bank not only encourages member governments to work with NGOs on development projects, but also directly funds the NGO projects.

Increasingly, NGOs are becoming tied to governments by way of funding arrangements and contracts for service. Now they are attempting to intervene to protect small farmers from eviction, indigenous people from losing traditional lands and fishing grounds, and segments of the population from discriminatory food supply schemes. They are developing the concept of nutritional rights, as opposed to the right to adequate food, to put pressure on governments to take responsibility for supplying funding for nutrition in national budgets. The rights-based approach also allows NGOs to pressure businesses and international organizations to help secure nutrition rights. International organizations want to work with NGOs because they want to work with local people or with the complex and socially diverse mass of a population and need a 'proxy client' which NGOs can provide (Donnison, 1993) as cited by Bailey (2007, p. 6).

The DFID increasingly recognizes the political role of NGOs in making the 'voice of the poor' heard as to hold governments to account and ensure better pro-poor policies (Anthony, Samuel and Diana 2008, P. 22).

Conceptually, working with NGOs is an alternative to setting up and running mass access structures. It is an alternative to creating a system of bureaucratic categories where diverse people can be identified as being entitled to support because they meet specific criteria (e.g. living below a pre-set poverty line measured by annual income). They appear to offer new structures, outside old and failed systems, an alternative channel for bypassing corrupt or entrenched interests in existing Government organizations. Funders may need NGOs as supposedly neutral bodies in politically sensitive times, though as it was noted, NGOs are as interested parties in a situation as any other group.

NGOs have developed structures that genuinely respond to grassroots demands. NGOs must leaders in cultivating a global moral order that finds poverty and violence unacceptable. They be exemplars of the societies they want to create, and work much harder to mainstream values into the arenas of economic, social and political power (David 2007, P.11).

the Committee for Conflict Transformation Support in their 15th newsletter argues that “NGOs were seen as catalysts for snowballing local development, particularly by avoiding bureaucracy and remaining flexible in their activities and relationships with local people. NGOs were seen as facilitators for local people, more able to listen and respond, more able to facilitate, enable and support than larger, unwieldy bureaucracies. They added that NGOs were supposed to be raising new money from the public that was untied to political aid agendas, and to be mobilizing a constituency in the country of origin to support policy lobbying and awareness of development issues (CCTS 2006, p. 6).

Africa and especially in the sub-Saharan Africa, development has been taking place at a slow pace. This has been basically because African nations are faced with a crucial problem of poverty. According to MINECOFIN (2002) Rwanda is one of the poorest countries not only in Africa but also in the whole world. It has an area of 26338km² with a population of 8.1 million, which increases at a rate of 2.9 annually. Today, 60% of its population is living below poverty line. This can be attributed to the legacy of its recent history, years of economic decline and bad governance. The level of poverty increased significantly in 1994 as the result of the genocide, it increased from 47.5% in 1990 to 77.8% in 1994.

Similarly related has been the new-found hegemony for ‘poverty reduction’ within international development. The (very considerable) resources flowing from bilateral and some multilateral agencies to NGOs are increasingly bundled with this poverty reduction agenda, placing increasing demands on these NGOs to deliver measurable achievements in poverty reduction (Thony, Samuel and Diana 2008, p.16).

Textually, Rwanda is among countries which recognize the role that NGOs play in socio-economic development. After 1994 Genocide, the country was totally destroyed so that the government could not rehabilitate the country alone, there was a need of help from private and community based organizations which were also demolished. Thus, both local and international NGOs sprang up to fill the gap by facing the challenge of fostering development in the country. The Government of Unity and Reconciliation launched various programs and policies to address the problem of poverty.

The conviction underlying the books is that NGOs are only NGOs in any politically meaningful use of the term if they are offering alternatives to dominant models, practices and ideas about development (Anthony, Samuel and Diana 2008, P.3).

This study is divided into five chapters. The first chapter is the introduction; the second is literature review, the third chapter is the methodology; the fourth is data presentation, analysis and interpretations and the last chapter consists of discussions of findings, conclusion and recommendations.

Statement of the Problem

The genocide of 1994 in Rwanda killed more than a million persons and three million run away from the country (MINALOC, 2003), which is the base of today's vulnerability of several families, there are many orphans, widowers/widows, street children among other; and supported the progress of HIV/AIDS due to rapes or other sexual abuses connected to the bad situations. Since that time, communities in Rwanda have been experiencing economic, social, political and cultural problems. To recover the situation, many local and international NGOs were mobilized to assist the vulnerable. Many of the NGOs established their offices in capital city Kigali, specifically in Nyarugenge District where you can read their signs at every few meters. FXB started its activities in Rwanda in 1995 in southern province, and extended its activities in Nyarugenge District during the year 2000 which consist mainly financing income-generating activities, basic medical care, schooling, professional training, nutritional support, AIDS prevention, psychosocial counseling, savings and micro-finance to vulnerable families.

Purpose of the study

The purpose of this study is to identify the contribution of FXB in improving family welfare in Nyarugenge District-Rwanda.

Objectives

This study was directed by the following specific objectives:

1. To identify the characteristics of families supported by FXB in Nyarugenge District.
2. To identify the Income Generating Activities financed by FXB for family welfare in Nyarugenge District.
3. To evaluate FXB's contribution on health and nutrition of its beneficiaries in Nyarugenge District.

Research questions

The following questions were answered at the end of the study:

1. What are the characteristics of families supported by FXB in Nyarugenge District?
2. What are the Income Generating Activities undertaken by FXBs' beneficiaries in Nyarugenge District?
3. What is the level of the contribution of FXB on health and nutrition of its beneficiaries in Nyarugenge District?

Scope of the study

The study was conducted in Nyarugenge District. Nyarugenge District is one of three districts of Kigali city which is the capital of Rwanda. It contains most of the city's businesses. The total population of Nyarugenge District is 243152 (Monograph of Nyarugenge District, 2006). The study was designed to identify the contribution of FXB on welfare of its beneficiaries in Nyarugenge District. The study looks at FXB's contribution in Income Generating Activities, in health, nutrition and saving culture.

Significance of the study

The study is fruitful to different parties such as the national NGOs and policy makers, local NGOs, vulnerable families, researcher and future researchers.

This study will come up with conclusion and recommendations, from which further researchers will be able to single out areas of interest,

- Many donors including international NGOs provide support to families without involving them in decisions concerning them, at the end of projects, these people fall short to endorse or sustain projects. The result of this study will give international NGOs a feedback of their proceedings thereby highlighting or suggesting possible actions to be undertaken to sustain socio-economic development of vulnerable families,
- People learn from others' mistakes. Ultimately, international NGOs will have to go back and their activities will be embarked on by local NGOs. Local NGOs will benefit from this study because it will draw attention to indispensable actions to carry out to guarantee sustainable socio-economic development of vulnerable families,
- Local and international NGOs can't achieve their missions without the support of both local and international NGOs and local government. The result of this study will stress out the kind of support that the Government must provide to those NGOs to assure sustainable socio-economic development of vulnerable families.

CHAPTER TWO

LITERATURE REVIEW

1. Overview

This chapter represents the review of related literature. It highlights different strategies undertaken by NGOs in order to guarantee family welfare.

2. Conceptual framework

Independent variables

STRATEGIES

- Financial and material support to individuals/groups
- Skills training

Dependent variables

FAMILY WELFARE/ SITUATION

- Health situation
- Nutrition
- Savings income

Intervening Variables

- Government Policy
- Culture and perception of community

Figure 2.1: Conceptual framework of the study

Figure 2.1 stands for the summary of conceptual framework of this study. It demonstrates the independent variables to be discussed in this chapter. There are two independent variables, three dependent variables and intervening variables. Improved living conditions of families depend on socio-economic activities performed by actors in development especially national and international NGOs.

socio-economic strategies or activities undertaken by NGOs in supporting families include financial and material support to individuals or groups and skills training from Government, NGOs, or others donors to support products. These strategies perk up the living conditions of vulnerable families by improving their health conditions, nutrition, and savings among others as was advanced by (Potter 2000).

Additionally, according to Chambers (2007, p. x), if development is good change, agency and power are the key to development. This applies to those with more power and wealth: they can choose the gains of living better by acting responsibly on our Earth and empowering those who are weaker and poorer. It applies too to those who are weaker and poorer: They combine collectively in old and new ways to resist and reverse bad trends and to struggle for a fairer, safer, more humane and more fulfilling world for themselves and for us all.

The concept of poverty

Poverty is among issues which affect many families in the world. In its report UNDP (1997), defines poverty as following:

1. Poverty means not having enough to eat, a high rate of infant mortality, a low life expectancy, a few educational opportunities, inadequate health care and lack of active participation in local decision-making process.
2. Poverty is not just a failure to meet minimum subsistence levels, but rather a failure to keep up with the standards prevalent in a given society.

Ver and Gang (1990, p.67) suggest that there must be some prior conception of welfare if one define poverty. Poverty may refer to lack of physical necessities such as food and clothing, shelter and income. It is perceived as a problem when levels of disposable incomes and resources are inadequate to support a minimum standard of living.

Additionally, Maxwell (1992, p.56) described poverty using these terms; Income or consumption poverty, human (under) development, social exclusion, ill-being, lack of capacity and increasing vulnerability, livelihood unsustainability, lack of basic needs and relative deprivation. / if one lacks the above mentioned he/she is in a situation of poverty.

The World Bank defines poverty as earning less than \$2 per day and extreme poverty as earning less than \$1. Using this definition, about half of the world's population are poor, almost 3 billion people. Close to half of poor – 1.4 billion people – live in extreme poverty (Gallagher 2005, 1).

In the researcher's view, poverty is the deprivation of person's basic needs, such as foods, clothes, shelter, bedding, basic health care and education. It is the deprivation of what person is needed for his existence. It is an insufficient of absolute minimum income to meet basic needs.

1 Situation of Poverty in Africa

According to Yunus (2007, p. 3), poverty is not distributed evenly around the world; specific regions suffer its worst effects. In sub-Saharan Africa, South Asia, and Latin America, hundreds of millions of poor people struggle for survival.

They are not located in sub-Saharan Africa as many think. According to Gallagher (2005, p.1) the world's poor are not always located where one would think. The economist William Cline has shown that "three-fourths of the world's poor live in countries that are considered too developed to qualify for any of the special regimes oriented toward benefiting countries in these regions". Cline shows that only one-quarter of the world's poor live in the least developed countries (LDCs), the heavily indebted poor countries, or sub-Saharan Africa. Since many countries fall in all three categories, the proportion may be even smaller due to double counting. Most of the poor live in China and India.

According to the World Bank Report (1995, p.45), people in Sub-Saharan Africa remain among the poorest in South Asia, among the poorest in the world. In 1992, between 45% and 50% of the approximately 525 million people in Sub-Saharan Africa were estimated to be living below the poverty line. Also the depth of poverty in Sub-Saharan Africa is typically higher than elsewhere in the world.

According to World Bank (1995, p.75), the causes of poverty in Sub-Saharan Africa are complex and so many of the consequences of poverty lead to further impoverishment. These causes of poverty are related to problems of access and endowment as follows;

- Inadequate access to employment opportunities for the poor caused by low rates of economic growth and a pattern of growth which does not generate large increase in employment for the poor.
- Inadequate assets such as land and capital for the poor caused often by the absence of land reform and minimal opportunities for small scale credit.
- Inadequate access to markets for the good and services that the poor can sell caused by remote geographical location or other factors.
- Inadequate access to education, health, sanitation and water services caused by inequitable social service delivery, resulting in inability of the poor to live a healthy and active life and take full advantage of employment opportunities.
- Destruction of natural resources empowerments which has reduced the productivity of agriculture, forestry and fisheries.
- Inadequate involvement of the poor in the design of development programs.
- Inadequate access to assistance by those who are the victims of transitory poverty such as draught, floods, pests by lack of well conceived strategies and resources.

ng on the above causes of poverty in Sub-Saharan Africa, one can say that the majority of le in this region are in agony of poverty due to inadequate participation of the local lation in matters of their concern like identification of projects that benefit them in terms of rty reduction. On this note therefore, sector programs can play a significant role in reducing gony which afflicts people not only in Africa but also in other developing countries of Asia .atin America.

Situation of Poverty in Rwanda

da is a poor rural country with about 90% of the population engaged in (mainly tence) agriculture. It is the most densely populated country in Africa and is landlocked ECOFIN, 2007).

ible below highlights the different criteria applied by the Ministry of Economic and e (MINECOFIN) of Rwanda to serve as poverty indicators.

Table 2.1: Social and Poverty Indicators of Rwanda

Basic data	Indicators
Area	26388km ²
Total estimated population in 1999 /2000	8.1 million
Population growth rate in 1999	2.9
GDP per capita income	237\$
Social and poverty indicators	
Life expectancy at birth in year	49
Gross primary enrolment	88%
Gross secondary enrolment	10%
Gross tertiary enrolment	1%
Access to safe water	44%
Access to health care	81%
Infant mortality rate per 1000live births	131‰

Source: MINECOFIN (2005, p.4)

In table 1 above, it is observed that poverty in Rwanda stills a big problem to be solved in many areas such as in health where infant mortality rate is 131‰, life expectancy at birth is 49% GDP per capita income is \$237in year which is very low.

because of low income to access to equilibrated diets for poor families is still a big problem. one of solution for that is to enable those families to satisfy basic needs by financing activities which generating income for them. This can be than either by loan, aid and skills training.

The table below shows the key indicators of poverty in 2000/01 and 2005/06. In 2000 and 2001, 60.4 % and in 2005/2006, 56.9% were poverty line when 41.3% in 2000/01 and 36.9% in 2005/06 were in extreme poverty. Respectively, the average income of poor in Rwandan's Franc was Rwf 146 in the period of 2000/01 and Rwf 150 in the period of 2005/06.

Table 2.2: Key Indicators of Poverty in Rwanda

Key poverty indicators	2000/01	2005/06
Poverty incidence	60.4%	56.9%
Extreme poverty incidence	41.3%	36.9%
Average income of poor (Rwf per person-a-day)	RwF 146	Rwf 150
Gini coefficient of inequality	0.473	0.508

Source: MINECOFIN (2007, P. 34).

People in Rwanda define poverty in terms of incomes, the problems they face and their ability to work for themselves.

3.3 Poverty Eradication

According to Gallagher (2005, p.1), in the face of increasing poverty, inequality, and environmental degradation across the developing world, the global community has reasserted the need for development through the Millennium Development Goals and the global commitment to sustainable development signed at the World Summit for Sustainable Development.

Poverty eradication is not only the goal of all developing countries, even only for the poor families, but of entire world. According to Yunus (2007, p.4), these global problems have not been unnoticed. At the outset of the new millennium, the entire world mobilized to address them. In 2000, world leaders gathered at the United Nations and pledged, among other goals, to reduce poverty by half by 2015. But after half the time has elapsed, the results are disappointing, and many observers think Millennium Goals will not be met.

mus (2007, 4) has a hope that his country will reduce considerably poverty and says: "My own country of Bangladesh, I'm happy to say, is an exception. It is moving steadily to meet the goals and is clearly on track to reduce poverty by half by 2015."

To eradicate extreme poverty and hunger is the first goal for the Millennium Development Goals. And according to UN Millennium Project, Task Force on Sciences, Technology, and Innovation (2005, p. xxii), two targets of the first goal are:

Target 1: Halve, between 1990 and 2015, the proportion of people whose income is less than \$1 a day.

Target 2: Halve, between 1990 and 2015, the proportion of people who suffer from hunger.

Polak argued that nation's ability to solve problems and initiate and sustain economic growth depends partly on its capabilities in sciences, technology, and innovation. Science and technology are linked to economic growth; scientific and technical capabilities determine the ability to provide clean water, good health care, adequate infrastructure, and safe food.

From the same view, Polak (2008, p. 172) argued that ending poverty is probably the most important first step to restore nature's balance on the planet.

Polak (2007, p. 223), is sure that poverty will be putting in museums and say that: "Once poverty is gone, we'll need to build museums to display its horrors to future generations. They'll wonder why poverty continued so long in human society-how a few people could live in luxury while billions dwelt in misery, deprivation, and despair."

Polak's nation will have to choose its own target date for building a national poverty museum. The initiative could come from government, foundations, NGOs, political parties, or any other part of society. Civil society groups and students may form a citizens' committee to build the national poverty museum by a specific future date. This date will express a desire and a commitment to eradicate poverty in the country within a specific period. Fixing a date can build national will and energize the nation to put plans into action to make it happen."

Sachs (2005, pp. 244, 245) argued, the key to ending extreme poverty is to enable the poorest of the poor to get their foot on the ladder of development. The development ladder hovers overhead, and the poorest of the poor are struck beneath it. They lack the minimum amount of capital necessary to get a foothold, and therefore need a boost up to the first rung. The extreme poor lack six major kinds of capital:

- Human capital: health, nutrition, and skills needed for each person to be economically productive
- Business capital: the machinery, facilities, motorized transport used in agriculture, industry, and services
- Infrastructure: roads, power, water, and sanitation, airports and seaports, and telecommunications systems, that are critical inputs into business productivity
- Natural capital: arable land, healthy soils, biodiversity, and well-functioning ecosystems that provide the environmental services needed by human society
- Public institutional capital: the commercial law, judicial systems, government services and policing that underpin the peaceful and prosperous division of labor
- Knowledge capital: the scientific and technological know-how that raises productivity in business output and the promotion of physical and natural capital.

poverty is an issue which is seen in different countries, in different families, and among people, to solve it varies according to each country, each family and each person.

According to that, each country has put on his strategy to fight against poverty and hunger. It is the same way that in Uganda you can find Poverty Eradication Action Plan (PEAP), in Tanzania, Poverty Eradication in Zanzibar, etc. In Rwanda they are in the second steps of poverty reduction. The first step was Poverty Reduction Strategy Paper (PRSP) and the current is Economic Development and Poverty Reduction Strategies (EDPRS). According to MINECOFIN Rwanda, Economic Development and Poverty Reduction Strategy (EDPRS) Is the second iteration of Poverty Reduction Strategy Paper (PRSP) with balance between productive and service sectors. Is a framework for the implementation of Millennium Development Goals (MDGs) and Rwanda Vision 2020 which covers the period from 2008 to 2012 (medium-term).

According to H.E President Paul Kagame, the President of Republic of Rwanda during the official launch of EDPRS, in the New Times of (9th Feb. 2006), argued that one of the ways to curb the soaring levels of poverty in the country is through the implementation of Economic Development and Poverty Reduction Strategy (EDPRS), which covers different macro and micro economic sectors. He added that, Rwandans need to be liberated from poverty and I wish it could be changed to poverty liberation instead of poverty reduction,” he noted, adding that the new strategy is more result-oriented and addresses the need for economic development as a strategy to reduce poverty. The President further said that the government is committed to this second stage of poverty reduction strategy because it is one of the most important tools for development planning that will give rise and prosperity as a conduit to achieving the goals of the Vision 2020.

The President however noted that poverty continues to be a big challenge in Rwanda since majority of the people depend on agriculture as the main source of income yet natural forces and hard work determine the output.

Kagame also called for strong partnership with the donor community in order to monitor and evaluate the progress, focusing on the results and targets set. “The war against poverty calls for a global coalition. Aid alone is not enough without participatory approaches,” he cautioned.

In combat against poverty according to Yunus (2007, p.196), the new information technology may provide the magic platform to create dramatic changes in any area of our interest: health, nutrition, education, skill development, childcare, marketing, financial transactions, sourcing, and the environment.

Others, Jalal and Boyd (2005, p. 51) argued that poverty must be reduced by meeting basic needs: food, education, shelter, productive employment, control over common property, and natural resource management. Similarly, to minimize the environmental and social consequences of development, a strategic assessment of policies and plans must be undertaken. Projects must be evaluated for their impact upon the environment and society. To successfully achieve sustainable development, the community of nations must also stop the unfavorable impacts of rural-urban migration in developing countries, consider renewable energy issues, and promote regional and

ternational cooperation.

However, according to UN Millennium Project (2005, p. 20), improving the welfare of developing countries is not only an end in itself, it is also intricately intertwined with the security of all countries, making development a truly global venture. Indeed, countries such as the United States have started to classify human development challenges that are prevalent in developing countries, such as HIV/AIDs, as national security issues. This is the beginning of a process that recognizes the emergence of a globalized world that requires collective action to deal with issues once considered strictly national.

Poverty eradication demands effective participation from all actors in development including governments, NGOs, populations and private sectors. This must also be guided by good policy accompanied by good governance and this in peaceful areas.

FXB, Characteristics of supported families and types of support

According to FXB (2007), the Association is named after François-Xavier Bagnoud, a young helicopter pilot committed to rescuing people, who died in 1986 at the age of 24 during a mission in Mali, West Africa. By the end of his secondary studies, he was already a licensed and experienced pilot. An aeronautics enthusiast, he entered the Faculty of Aerospace Studies of the University of Michigan at Ann Arbor in 1979. After excelling in his studies, he obtained his engineering degree and published a reference manual: *Theory of the Helicopter for Private Pilots*. His passion for flying was such that he became the youngest professional Instrument Rated (IFR) airplane and helicopter pilot in Europe at age 23. This same ardor, combined with an extreme generosity, led him to join his father's company, Air-Glacières, in Sion, Switzerland. Within three years he carried out some 300 rescue flights in the Alps and in the deserts of Africa.

In 1989, his mother, the Countess Albina du Boisrouvray, together with his father, Bruno Bagnoud, his stepfather, Georges Casati, his family and friends, established and financed the activities of the Association François-Xavier Bagnoud (FXB) to perpetuate the compassion and generosity that guided François' life. To rescue is the goal that defines the mission of FXB throughout the world.

For 18 years now, FXB has been developing programs to fight poverty and AIDS throughout the world (FXB brochure 2007).

By rebuilding, empowering and supporting communities devastated by poverty and HIV/AIDS, the FXB strategy ensures that long-term support for orphans and vulnerable children is both effective and sustainable. It is observed that strategies implemented by FXB in the field vary according to the social, cultural, economic and political scenarios present in different countries and particular locales where the programs are implemented (FXB Brochure 2007, p. 4).

The goal of FXB Rwanda and FXB Uganda (FXB, annual report, 2004) programs is to reinforce the capacities of the beneficiaries through the implementation of FXB modules. These modules were created to handle 80 to 100 families and caregivers, working with a concept that is based on more than ten years of field work. FXB modules are comprehensive, operational entities that promote sustainable community-based development.

The FXB modules are based on multiple components, such as Income-Generating Activities, basic medical care, schooling, professional training, nutritional support, AIDS prevention, psychosocial counseling, savings and micro-finance. They have a major impact on the living conditions of the beneficiaries. After three years, FXB noted that 85% of the beneficiaries managed to take care of themselves and develop their activities independently. FXB assists families during the period of three years. For IGA, each family receives \$135 during the first year and \$400 during the second year to the group of 6-8 persons among selected families in order to encourage them to work in cooperative. It is observed that in the context of health and human rights in developing countries, FXB is observed to have designed a low-cost, high-impact community-based program that has proved effective and sustainable in helping families and communities combat the effects of AIDS and regain greater stability and self-sufficiency. Each program provides beneficiary communities with a basic package of health, education, psychosocial and income-generating services (FXB 2004, p. 5).

re specifically, programs consist of:

- HIV/AIDS-focused interventions including prevention, voluntary counseling and testing, and comprehensive treatment and care;
- Sustainable community development activities;
- Re-integration of orphans into their communities and comprehensive support to their caregivers; and
- Education and vocational training of AIDS orphans so that they can contribute positively to their societies.

research has said, the genocide has left many children orphaned and displaced. The conflict also facilitated the epidemic spread of HIV, while drastically reducing the coping capacity of community.

FXB interventions, they have to produce same beneficiaries' testimony. Daphrose's story (imony) is an example of FXB families' testimony (FXB, 2007):

I am 35 years old, and live in the town of Gitarama in Rwanda. I married and had 4 children. My third and fourth children got sick and died horrible deaths. My husband and I suspected HIV, so we both got tested. We learned we were both HIV-positive. Since that day, my husband lost hope and the will to live: he passed away a year later. I became an HIV-positive widow with two children and no money or lodging. Even our best friends started to reject us. I did nothing about it and resigned myself to my fate. Other women in similar situations encouraged me to go to FXB. I went there with my children and was warmly welcomed. It was relievable, because I had been so stigmatized that I was left feeling that no one would have anything to do with me any more. I confided in the FXB nurse and saw her several times after. Once, after a home visit, the FXB staff told me that I could start an Income-generating Activity (IGA). They suggested selling pork. I was interested and FXB gave me the capital money to do so. This IGA has been very successful, and I earn around 5,000 Rwandan francs weekly. I have even been able to save 30,000 Rwandan francs. FXB gave me back my dignity. We now have medical care, a savings account and new friends from my group. FXB promises to supervise us and give us support. Sometimes I even forget that I am sick."

their view, Phumaphi and Zewdie (2007, p. 12) assert that as countries' experience with HIV/AIDS matures, national AIDS authorities and policymakers are increasingly pressed to show the results that national policies and programs are achieving. Governments and their partners are committed to ensuring that resources are used effectively to support national responses to the HIV epidemic. The effectiveness of national strategies will ultimately be judged by their impact and results – that is, by how well they contain the HIV epidemic through prevention, treatment and care, and improve the lives of people with HIV.

According to the UNAIDS as cited by Vogli & Gretchen (2005, p. 107), the majority of children with HIV/AIDS have been born to infected mothers. Most of these mothers contracted the virus through risky consensual sex, sexual abuse, and commercial sex and then infected their children through vertical transmission. Few of these women have access to information and services for prevention of mother-to-child HIV transmission, such as antiretroviral medications, during pregnancy (9 months).

Alternatively, direct beneficiaries for FXB's activities range from HIV-positive children who require pediatric AIDS regimens to HIV-negative; AIDS orphans and their immediate caregivers who nevertheless need comprehensive support, including psychosocial counseling, school fees and medical care. It distributes mosquito nets to families in order to combat against malaria which is another disease in Rwanda. In 2004, 87 FXB community-based programs directly benefited almost 300,000 people in 16 developing countries. In addition, their HIV/AIDS prevention, education, testing and treatment programs reached almost 1.4 million persons, including one million people in India alone.

From a comparable stand point, Oshovskyy (2006, p. 3) states that preventing an HIV epidemic requires the recognition of HIV/AIDS as a priority development issue; comprehensive scaling and scaling up of prevention activities across the country and increased access to necessary and ongoing antiretroviral therapies, care and support for those living with HIV/AIDS. It is in this sense that FXB helps children vulnerable to AIDS to build themselves a place within their society through community-based and sustainable development programs. These improve the living conditions of the communities which, little by little, attain social and economic autonomy, and enable them to take charge of their own lives and raise the orphans (FXB, Annual Report 2004).

is observed that FXB supports children in their own village by offering them schooling and providing them with nutritional, medical, and psychosocial support to the families that take care of them. This strategy is embedded into the logic of the kind of support and aid which is naturally individualized, adapted to the each community, and is sustainable.

Health care and role of NGOs

In his view Mehrotra and Jarrett (2002, p. 1) state that public social services, such as basic health care, represent the effective option for the poor, especially in the rural areas of low-income countries. The quality of such services is at present extremely deficient, largely due to resource constraints and lack of political will to make them function effectively. The state can no longer provide the comprehensive services it has in the past and which were highly successful in a number of high-achieving developing countries.

Nevertheless, Varley (2005, p.39) argued that the state must turn priority attention to providing public services for the poor, in order to close the widening gap between rich and poor. It needs to do this in partnership with the population it aims to reach, through effective linkage with grass-roots organizations and with the support of non-governmental organizations (NGOs). Giving voice and participation to the population can not only increase the resource base for public services, but can also significantly improve the accountability of providers and lead to a cost-effective option for the poor.

According to The United States President's Emergency Plan for AIDS Relief (2007), Rwanda is one of the most densely populated countries in sub-Saharan Africa. Twelve years after the genocide, which killed almost one million people, Rwanda faces multiple health and development challenges. An estimated 3.1% of the adult population is infected with HIV (3.6% of adult women and 2.3% of adult males); 160,000 Rwandan adults and 27,000 children are living with HIV in a total population of nine million people (UNAIDS). The repercussions of the epidemic, combined with the ongoing effects of the genocide, have resulted in more than 100,000 orphans and a continuing loss of approximately 21,000 persons to HIV-related illness each year.

For a person to be more productive, he/she must have a good health. In the researcher's view, the best thing to assist a person is to promote his/her quality of health.

to fight against HIV/AIDS, NGOs must focus on interventions, including prevention, voluntary counseling, testing and comprehensive treatment.

6 Strategies of NGOs to support families

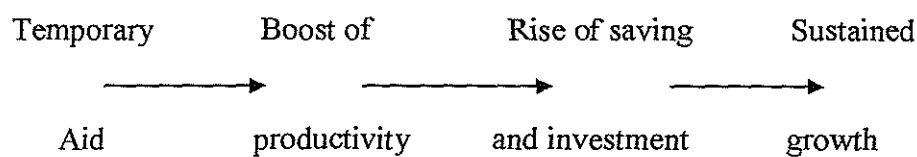
ettne (1995) as cited by Potter (2000, p. 345) defined development strategies as efforts to change existing economic and social structures and institutions in order to find enduring solutions to the problems facing decision maker. Different development programs reflect different goals and objective which at the end must guide the development of the strategy to use. The assessment of the strategies of NGOs in sustainable economic development of vulnerable families seems to be difficult because “many NGOs start as relief organizations and moved to development” Wallace (2002, p. 231). In some contexts their role has been to meet emergency needs for water, food and shelter (relief programs), in others they have worked as key service providers (development programs).

Some of the strategies to be discussed in this section include income generating activities, vocational skills training.

In this view, Wallace (2002, p. 2) income-Generating Activities (IGAs) are small-scale economic activities that generate income sufficient to meet the basic needs of the family and the orphans in their care. Relatively, Hope (2006, p. 5) states that IGAs are defined according to the desires, environment, capacity and the state of health of the beneficiaries. In rural areas, IGAs include the provision of cows, hens, pigs, beehives, farming equipment, and the cultivation of coffee, tea, vegetables, fruit, etc. In the cities, IGAs will support small businesses selling vegetables, fruit, candy, drinks and/or textiles.

According to Sachs (2008, p.229), the poor know what to do but are too poor to do it. Since they cannot meet their immediate needs (food, safe water, health care) they also can't afford to save and invest for the future. That is where foreign assistance comes in. A temporary boost of aid over a course of several years, if properly invested, can lead to a permanent rise in productivity. The boost, in turn, leads to self-sustaining growth.

the logical chain is the following:



However, Yunus (2007, p.9) argued that, many people who care about the problems of the world have started nonprofit organizations. Nonprofits may take various forms and go under many names: not-for-profits, nongovernmental organizations, charitable organizations, benevolent societies, philanthropic foundations, and so on.

Yunus (idem, p.10) said that nonprofit alone have proven to be an inadequate response to social problems. The persistence and even worsening of global poverty, endemic disease, homelessness, famine, and pollution are sufficient evidence that charity by itself cannot do the work. Charity too has a significant built-in weakness: It relies on a steady stream of donations by generous individuals, organizations, or government agencies. When of a nonprofit organization tell you, there is never enough money to take care of all the needs. Even if the economy is strong and people have full pursues, there is a limit to the portion of their income they will donate to charity. And in hard times, when the needs of the unfortunate are greatest, giving slows down. Charity is a form of trickle-down economics; if the trickle stops, so does help for the needy. And finally in his page 11, he is saying that all the good work that nonprofits, NGOs, and foundations do, they cannot be expected to solve the world's social ills. The very nature of these organizations as defined by society makes that virtually impossible.

Yunus (idem, p.28), suggested two kinds of social businesses which can help to reduce poverty: the first is companies that focus on providing a social benefit rather than on maximizing profit for the owners, and that are owned by investors who seek social benefits such as poverty reduction, health care for the poor, social justice, global sustainability, and so on, seeking intellectual, emotional, and spiritual satisfactions rather than financial reward.

The second operates in a rather different fashion: Profit-maximizing businesses (PMBs) that are owned by the poor or disadvantaged.

in this case, the social benefit is derived from the fact that the dividends and equity growth produced by the PMB will go to benefit the poor, thereby helping them to reduce their poverty or even escape it altogether.

In the researcher view, for NGOs to be successful, they have to take into consideration the culture and perception of the community (beneficiaries); they have to encourage its beneficiaries to participate actively. Beneficiaries must also act voluntarily and with conscience to all steps and activities concerning them in order to maximize their participation and explore their potentials thereby improving skills through training given to them. Government, NGOs, Private sectors and community must work hand by hand in order to avoid duplication of activities and to ensure a good coordination of aids. A temporary aid through the revolving credit to poor families identified by community with local authorities is necessary to poverty eradication.

Food Security and the Role of NGOs

Nutrition is central to the human challenge in Africa today. With the long struggle in many countries against poverty, and with declining incomes and declines in the public services, it is surprising, though it is still tragic, that we have seen evidence of deteriorating nutrition in many countries. Jolly (1996, p. 1) has argued that the reason for the deterioration of nutrition is associated with extreme poverty, severe drought, conflict and military spending. He added by saying that Africa is a continent where 179 soldiers exist on average for every 100 teachers or health workers. This view is shared by Tetebo (2006) who asserts that the underlying problems of chronic malnutrition are due to marginal access to food, seasonality problems, inadequate diet diversity, and the chronic lack of basic services, health, water and education.

In 1996, leaders came together at the World Food Summit in Rome to address the rising level of malnutrition throughout the world. They feared that if no action were taken, the amount of hungry people in the world in 2010 would reach 680 million, and set a commitment to halve the number of undernourished people by 2015 Bailey (2007, p. 1).

Recently, Hall-Jones (2006, p. 3) contends that NGOs and other activists seeking the access to face the surreal challenge that while there is a right to food contained in the International Covenant on Economic, Social, and Cultural (ESC) Rights, this right imposes a negative

obligation upon the state to respect the right to food, not a positive obligation to provide nutrition to its citizens. As a result, NGOs are increasingly focusing on ESC rights, in addition to traditional Political and Civil (PC) rights, and campaign for the right to nutrition. But to combat hunger, they must also confront neo-liberalism and the co-modification of food as just another market good.

Michael (2003) as cited by Parnwell (2000, p. 6) has examined food security as a matter of social reproduction in an age of neo-liberalism. Bailey (2007, p. 2) has argued that Food was exempt from the original GATT in 1947. After World War II, the United States and European countries developed policies to ensure food self-sufficiency by subsidizing agriculture and manipulating price floors. The United States opposed the formation of a world food body under the auspices of the UN (United Nations) and instead pursued bilateral aid projects giving surplus food to developing countries. The EU (European Union) countries developed the Common Agricultural Policy that furthered government subsidies in the 1960s. Overproduction in the United States and EU flooded the world market with surplus food, undercutting producers in developing countries.

World Bank report makes several important points: it argues that nutrition should be mainstreamed into country assistance strategies and that nutrition policies should be developed in all institutions, such as the ministries of finance; it makes the explicit link between malnutrition and lost productivity (e.g., a 1-per cent loss in adult height as a result of childhood malnutrition is associated with a 1.4-per cent loss in productivity); and it advocates for increased spending to be directed towards nutrition, (Sridhar, 2007).

According to Vandana (2000, p. 7), reforms in the early 1990s led to a WTO (World Trade Organization) agreement on agriculture that favored traders over producers, and the concept of food security was re-conceived as the right of countries to export food. Small and medium farmers were impacted in the developed countries from the removal of price floors and many went out of business or sold to the large agribusiness conglomerates.

From the same view, Polak (2008, p. 175) advanced that, poor families with new income routinely spend some of it to increase their food-production capacity and they buy food to eliminate the two-month period of hunger most of them experienced each year before they increased

their income. They also improve their year-round diets. Instead of a few morsels of meat or fish once a month if they are lucky, they regularly produce or buy meat and fish for their own consumption, augmented by milk from a goat or buffalo and eggs from a few chickens. Most poor families increase their income by growing vegetables, and they always eat the ones they can't sell, adding minerals and vitamins to their diet. Blindness in the children of poor families due to vitamin A deficiency disappears when the family starts consuming yellow or orange vegetables. Improved nutrition strengthens immune systems and lowers illness rates.

From a comparable stand point, Ghai (2000, p. 6) has observed that those agreements weakened the ability of developing country farmers to produce food because of competition from imported subsidized staples. Many instead began to produce tropical fruits for export to developed country markets. The developing world has also been confronted with the marketization of seeds. Many seed providers have developed transgenic seeds that require farmers to buy new seeds every year instead of being able to replant using the seeds produced by their produce. Seeds are covered under intellectual property agreements that aim to prevent biopiracy.

Poor farmers have been forced into poverty and unable to produce necessary food for themselves or their neighbors. This has sparked a rural-urban migration to cities, leading to the development of slums and escalating poverty and hunger. Many have also migrated abroad, often voluntarily, to Europe and North America where they form an underclass at the bottom of the economy. Ironically, many now work on the farms that produce the subsidized agriculture that is undermining the production of food in their home countries. NGOs have responded to food security issues by taking increasingly rights-based and participatory approaches.

The report of the Food First Information and Action Network as cited by Bailey (2007, p. 4) has described how his organization, other NGOs and community-based organizations (CBOs) are focusing on ESC rights. This focus developed after the 1996 World Food Summit. NGOs now attempt to intervene to protect small farmers from eviction, indigenous people from losing ancestral lands and fishing grounds, and segments of the population from discriminatory food security schemes.

they are developing the concept of nutritional rights, as opposed to the right to adequate food, to put pressure on governments to take responsibility for supplying funding for nutrition in national budgets.

In his view, Wallace (2002, p. 6) has argued that the rights-based approach also allows NGOs to pressure businesses and international organizations to help secure nutrition rights. Howell (1998) cited by Bailey (2007, p. 5) has focused on a participatory approach in an Ethiopian case study where one NGO, Action Aid, is promoting sustainable and community solutions to food production. In the town of Dalocha, the NGOs used local community groups to plan for famine relief. Fearful of people becoming dependent on handouts, particularly the poorest without livelihoods, the NGO instead organized loans to members of the community so they could obtain markets and grain. The poorest relied on other members of the community to assist them. In the worst case, the villagers were able to increase food production and 70% of the loans had been repaid to the NGO, with those unable to pay given extensions.

To ensure enough food of the quality and quantity for every member of the household to maintain a healthy and active life throughout, Oniang'o (2000) argues that in Kenya, the Kenyan government, in collaboration with NGOs and other agencies, addresses nutritional issues ranging from the rehabilitation of severely malnourished children, to broad policies and actions that have an indirect impact on nutritional status. Examples of country programs that address nutrition and household food security include the rehabilitation of severely malnourished children, feeding programs, and nutrition education and training. Through improved nutrition and emergency medical care provision, rehabilitation programs have been successful, but often fail to tackle the root causes of the problem. Feeding programs vary from feeding the malnourished to maintaining good health of those who are vulnerable or at risk. Nutrition education and training are often constrained by limited human and financial resources.

From a comparable stand point, Ndiaye (2000) states that the nutrition program in Niger is built on a 3A approach (Assessment, Analysis, Action), with emphasis placed on improving household food security, increasing self-empowerment of the villagers, and improving child care, feeding practices and access to health services. Ndiaye (2000) argues that to achieve sustainable results, an integrated approach to community-based programs has to be adopted.

The legitimate concern of individual programs is to be successful. This can lead to self-centered attitudes when resources are widely available, requiring integration when the situation becomes less enabling.

From the two case studies of Kenya and Niger, in the researcher's view, it can be said that the need for local capacity must be emphasized. Local capacity not only to implement programs but also to analyze them and look for innovative solutions. The local autonomy that we are looking for depends not only on the applied research and training, but also in building institutions.

Additionally, the commitment of governments is essential to see long term and sustained solutions. The way to obtain government commitment is related to the way governments work - a government's priority is not only to serve the country, but also to be re-elected.

Furthermore, the interface between the role of local institutions, governments and universities cannot be neglected. This view is shared by Bailey (2007, p.133) who says that if we over-emphasize NGOs, who may be very effective in implementing and managing programs, the governments may not take responsibility for the issue. The role of the NGOs and community based organizations should be to create linkages between governments and communities. The role of the international donors is justified only if there is no local institution, and their role, rather than to interact with government community is to support the local catalyst. No amount of international cooperation will do what the local communities and institutions need to do. Partnership means being able to work together, but the definition of what needs to be done should be defined by the local institutions. If international agencies take over this process then there is less likely to be local commitment. One of the ways this process can grow is by the international donors requiring that in any project there is a counterpart that is also investing and is building up the sustainability of the project. There should be a commitment from local governments - it is up to the local institutions, the NGOs and CBOs to be more demanding in this role and only in this way can there be success and a sustainable effect.

2.8 Challenges faced by NGOs

According to Kohlberg (1999, p. 12) NGOs face many challenges in the countries they operate in. Pingali, Alinovi, and Sutton (2005) as cited by Kohlberg (1999, p. 10) have examined food security in complex political emergencies.

NGOs confront sovereignty issues over intervention and supplying food. Often conflicts have not been resolved and current or former combatants may try and raid the food relief and refugees and internally displaced people may be far from home and in areas dominated by rival ethnic groups.

Additionally, Bailey (2007, p. 7) asserts that NGOs face the problem of short attention spans from supporting funders and governments and the lack of funding and structural support to develop long term solutions to ensure greater food access. Paarl berg (2002) writing for a Washington, DC K-Street policy institute, describes the governance issues that often inhibits NGOs.

Furthermore, NGOs face increasing barriers in confronting widespread inequality in the availability of food. DJ Shaw (1997) as cited by Bailey (2007, p. 8) notes that the question isn't whether it is possible to produce enough food to feed everyone in the world, but if the will to exist. The proponents of trade liberalization are correct to note that there are governance capacity issues in many developing countries. Yet the main obstacle, observed by McMichael (2000, 39) as noted by Hall-Jones (2006, p. 9), is the growing power of large agribusiness and the decline of small farm producers in the developed and developing worlds will be difficult to change without mass mobilization for nutritional rights for all and a human rights approach.

Wain and Shadle's (2006) account of a mock food insecurity exercise at a college conducted by Farm America can inform people about food insecurity and may encourage them to become involved. Yet 842 million people are currently hungry and the number will surely rise because of high birth rates in the developing world, rural to urban migration, and increasing conflict. It will take a great deal more than efforts by NGOs to solve this problem.

Equally, in the researcher's view, in African countries, governments are often dominated by urban elites that are disconnected from rural issues and promote food policies that benefit urban populations over the rest of the country. NGOs themselves in these countries may employ urban staff and have difficulty reaching rural areas where food production occurs. Ethnic divisions often impact the production and distribution of food. Many post-colonial countries have borders designed by the former colonizing power to divide ethnic groups and place rivals within the same state. And corruption often is the single largest governance issue that separates people from the food and solid policies they need to fully enjoy their basic human rights.

CHAPTER THREE

METHODOLOGY

1 Overview

The purpose of this study is to identify the appropriate methodology that was undertaken for this dissertation. The methodology demonstrates the entire research process of this study, as well as analysis of the various research methods employed during the conduct of the research. The research therefore states the implications of different types of research strategies and explains the analysis of data collected, and from where the data was obtained.

This chapter explains in details the methods that were used in this research. It comprises of the research design, the population, sampling techniques, sources of primary and secondary data, data collection instruments, the procedure followed in conducting the study, the way data collected were analyzed and presented. This in different ways enabled the researcher to achieve research objectives and answer research questions that were a guide to the researcher in the study.

Research Design

The design of this study was a case study, the researcher chose FXB-Nyarugenge District - Rwanda purposively on the contribution of NGOs on family welfare: A case study of FXB Nyarugenge District-Rwanda.

Research population, sample and Sampling procedure

The target population of this study consisted of beneficiaries of FXB's IGAs strategies in Nyarugenge District. Table 3.4 characterizes the target population of this study. The population was divided according to their sectors of activity. There are eight sectors, being arts and crafts; hairdressing; hair saloon; sales of charcoal; tailoring; sales of foodstuff; sales of alcoholic drinks; and crop farming. The first column stands for sectors in which vulnerable families operate from and the second stands for the total number of people and or families in each sector.

The total number of target population is seventy four. There are four families in the sector of arts and crafts; two families in farming sector; two families in the sector of cattle farming; six families in sales of charcoal; forty seven families or people in sales of foodstuff; six families in sales of alcoholic drinks; one person in hair saloon sector, and five in tailoring sector.

To maximize the response rate, to facilitate a better comparison and differentiate responses rate across the target population stratified method was used to sample the population of this study.

From the total population of seventy four people and or families, a sample was extracted using the formula advanced by (Korthari, 2004, p. 179) (Appendix D).

The sample consists of sixty people and or families. The sample size of each stratum was selected in proportion to the population of each stratum.

The same table 3.4 stands for the sample size of this study. There was three respondents in the stratum of arts and crafts; two in the stratum of farming; two respondents in the stratum of cattle farming; five respondents in the stratum of sales of charcoal, thirty eight respondents in the stratum of sales of foodstuff; five respondents in the stratum of sales of alcoholic drinks, one respondent in the stratum of hair saloon and four respondents in tailoring stratum. Respondents in each stratum were selected purposively.

Table 3.3: Target Population

Sector	Total Number	Sample
Arts and crafts	4	3
Farming	2	2
Cattle farming	2	2
Sales of charcoal	6	5
Sales of foodstuff	47	38
Sales of alcoholic drinks	6	5
Hair saloon	1	1
Tailoring	5	4
Total	74	60

Source: FXB annual report (2007)

4 Data Collection Instruments

To collect primary data the researcher used a semi-structured questionnaire which was in English and translated in Kinyarwanda, the local language of all respondents (Appendix C). To collect primary data, structured interview was used. To allow respondents to express themselves freely and for the researcher to get opinions from respondents, the questionnaire included open questions, specific or closed questions and probing questions where the researcher was requesting more explanation.

To collect secondary data and related literature review, the researcher used multiple-sources. Multiple sources include books, Government publications, and industry statistics and reports. Secondary data includes written materials such as organizations' databases, organizations' websites, journals and newspapers.

5 Procedure

The researcher requested an introduction letter from School of Post Graduate Studies at Kampala International University, to conduct research in FXB/RWANDA (Appendix A). A copy of this letter was presented to the FXB's representative in Nyarugenge District in order to get authorization to conduct the research in their organization. The contact with the organization has permitted the researcher to know FXB's beneficiaries in Nyarugenge District and allowed him to work with respondents (Appendix B).

The research was conducted after preliminary stages and visits to the place in order to establish contacts and schedule appointment with respondents. Data was collected according to schedule appointment with the respondents. To maximize the likely response rate; the researcher himself distributed questionnaire and collected them back. To ensure that questionnaires are replied by right people, and to maximize the likely response rate; the researcher used mainly structured interview questionnaires. In some cases self-administered questionnaires were used to those respondents who were not available by the time the researcher was administering questionnaires.

Once questionnaires were received back, they were scanned and cleaned to remove incomplete, incorrect, illogical and unrelated answers. Subsequently, the researcher coded responses (this was done after data collection to avoid confusion to respondents, moreover there were open-ended questions) to facilitate analysis by computer.

ata was analyzed, explored and presented using different diagrams and tables; then the searcher interpreted result, wrote the final report, and as a final point the dissertation was submitted to the School of Post Graduate Studies of Kampala International University.

6 Data analysis

ata were analyzed using frequency and percentage. In order to analyze quantitatively the searcher converted quantified qualitative data by giving them numerical codes for them to be analyzed statistically. Answers for closed questions were coded in ascending order. The first answer of every question was given code "1" the second answer was coded "2" and so on. As far as open-ended questions are concerned the researcher first edited all answers in order to identify similar answers and establish broad groupings. The researcher subdivided those broad groupings into specific subgroups then allocated codes to all categories.

Once data were coded, they were entered into the computer using frequency and percentage. Individual labels were given to each variable while ensuring that labels replicate that exact words used in the data collection thereby reducing the number of opportunities for misinterpretation when analyzing data. Subsequently, data were explored and presented using diagrams and tables respective to research questions. Finally, variables were described and compared using central tendency and dispersion thereby testing significant relationships and differences between variables.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND INTERPRETATIONS

4.1 Overview

This chapter consists of three major sections according to the three specific objectives and three research questions. Hence, the chapter presents and analyzes findings as collected using semi-structured questionnaire. With consideration to the scope and limitation of the study, the findings are expected to act as a basis to understand the contribution of FXB on family welfare in Nyarugenge District. Sixty questionnaires were distributed and all of them returned to the researcher.

4.2 Characteristics of families supported by FXB

4.2.1 Gender

As observed from table 4.4 that 83.3% of respondents were female and 16.7% were male. This shows that more female are assisted than men by FXB in Nyarugenge District.

Table 4. 4: Gender of Respondents

Gender	Frequency	Percentage (%)
Male	10	16.7
Female	50	83.3
Total	60	100

Source: Field data/2008

4.2.2 Age of respondents

As respondents were asked to give their age; more than a half (51.7%) of respondents range from 26 to 40 years old as it is observed from table 4.5. 40% are above 40 years old and only 10% of respondents are below 25 years old. It is indeed observed that respondents were mature to be responsible of families and were able to take care of all members' family after getting FXB support.

Table 4.5: Age of Respondents

Age	Frequency	Percentage (%)
Below 25 years old	5	8.3
26 to 40 years old	31	51.7
Above 40 years old	24	40.0
Total	60	100

Source: Field data/2008

2.3 Period of time they have been helped by FXB

From the table 4.6 it is observed that almost a quarter of respondents have been working with FXB for a period of time ranging from one to three years; 16.7% have been with FXB for a period of three to five years; 5% have been with FXB below one year and only 3.3% have been helped by FXB for five to ten years.

Table 4.6: Period of Time they have been helped by FXB

Period (year)	Frequency	Percentage (%)
0-1	3	5.0
1-3	45	75.0
3-5	10	16.7
5-10	2	3.3
Total	60	100

Source: Field data/2008

2.5 Reasons of being supported by FXB

Respondents were asked the reasons of being supported by FXB; the table 4.7 below elaborates how the respondents responded to the questionnaire. 36.7% of respondents were supported by FXB because they were HIV positive; 21.7% were supported because they were widower; 15% were widow (ers); 11.7% were HIV positive and widow (ers) and only 10% are HIV negative. These because FXB want empower them to access to basic needs. Among 60 questionnaires distributed, 3 people (4.9%) did not respond to this question that is why the total percentage was 95.1% instead of 100%.

Table 4. 7: Reasons of Being Supported by FXB

Reason	Frequency	Percentage (%)
HIV/AIDs positive	22	36.7
HIV/AIDs orphan	6	10.0
Widow (er)	9	15.0
Poor	13	21.7
HIV positive and widow (er)	7	11.7
Total	57	95.1

Source: Field data/2008

3 The role of FXB direct financial support to family welfare

3.1 Kind of support received from FXB

The study also sought information on the kind of support received from FXB this in order to evaluate the consistency of its aids in family development. It is observed from figure 4.2 that the most support got from FXB is financial though IGAs (Income Generating Activities) as said by 36.7%. 20% said that they got medical support, 20% received nutrition support; 19% got counseling on HIV/AIDS; 18% said they got education support and only 2% got basic needs from FXB.

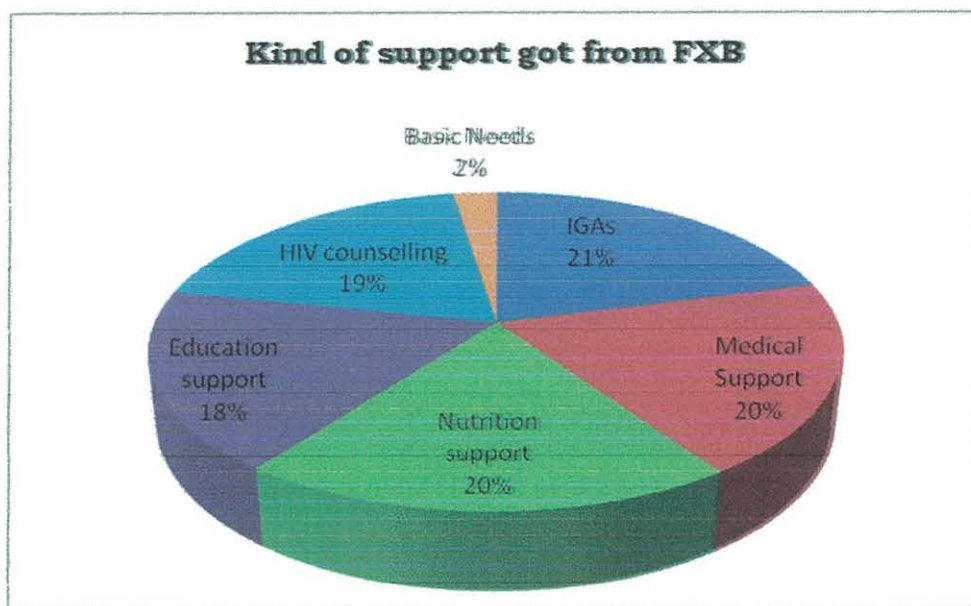


Figure 4. 2: The Kind of Support got From FXB

Source: Field data/2008

4.3.2 Types of businesses

Respondents mentioned a number of businesses implemented by FXB's financial beneficiaries in order to minimize poverty and to improve the family's income which will also give to them opportunity for saving incomes. It is observed from table 4.8 that 63.3% of respondents were involved in sales of food stuff; 8.3% were in sales of alcoholic drinks; 8.3% were in sales of charcoal; 6.7% were in tailoring; 5% were in arts and crafts businesses; 3.3% were in farming; 3.3% were involved in cattle farming and only 1.7% is involved in hair dressing (salon). Many respondents were involved in sales of food stuff because is among businesses which make good money in town where there are no lands for agriculture.

Table 4.8: Type of Business they are Involved

Type of businesses	Frequency	Percentage (%)
Arts and crafts	3	5.0
Farming	2	3.3
Cattle farming	2	3.3
Sales of charcoal	5	8.3
Sales of food stuff	38	63.3
Sales of alcoholic drink	5	8.3
Hair saloon	1	1.7
Tailoring	4	6.7
Total	60	100

Source: Field data/2008

3.3 Sufficiency of funds

In order to enable the families supported by FXB in Nyarugenge District to get their foot on the ladder of development, they were received funds from FXB. In sought of sufficiency of funds; it was observed from table 4.9 that 91.7% of informants that funds got from FXB is enough and 8.3% said that funds received from FXB is not sufficient enough to solve their problems. However all respondents agreed that the support got from FXB improved their living conditions.

Table 4. 9: The Sufficiency of Funds got from FXB

Sufficiency of funds	Frequency	Percentage (%)
Enough	55	91.7
Not enough	5	8.3
Total	60	100

Source: Field Data/2008

4 Status of support

Figure 4.10 shows the status of support received from FXB as advanced by respondents. More than a three quarter (80%) of respondents said that the support is increasing overtime and only 20% said that the support is decreasing overtime. This revealed the determination of FXB's beneficiaries to fight against poverty through profitable businesses.

Table 4. 10: Status of the Support Received from FXB

Status of the support	Frequency	Percentage (%)
Increasing overtime	48	80.0
Decreasing overtime	12	20.0
Total	60	100

Source: Field Data/2008

Respondents were asked if income generated from their businesses can help them paying tuition fees of their children and buy basic needs. More than a quarter (80%) of respondents agreed that from their businesses, they are able to pay tuition fees, buy basic needs and they manage to save some money.

In addition, 100% agreed that the support got from FXB improved their living conditions. Figure 4.10 shows some of reasons advanced by respondents on how the support of FXB has improved their living conditions. 25% said that it improved food security at home; 22% said that their earnings increased; 14% said that they managed to pay tuition fees of their children; 12% agreed that the support got from FXB improved their health; 11% said that their social relationship with neighbor was improved; 9% said that they gained management skills and 4% said that their living conditions improved because now they are taking a well balanced nutrition.

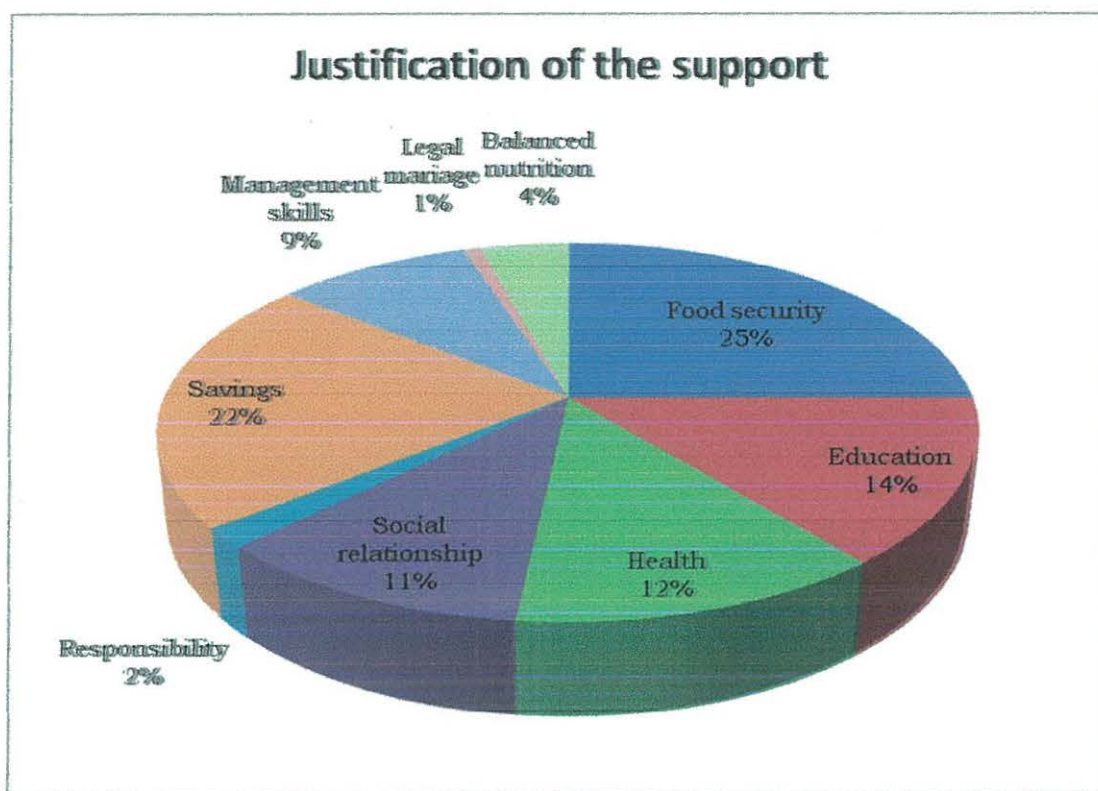


Figure 4. 3: Justification of the Support

Source: Field Data/2008

4.4 The effect of FXB vocational skills training on family situation

4.4.1 Technical trainings

Vocation technical trainings are among human capital which is needed for each person to be economically productive. It is observed from table 4.11 that only 30% of respondents received technical trainings from FXB, and 70% did not receive any vocational technical training from FXB.

Table 4.11: Technical Trainings Received

Technical training received	Frequency	Percentage (%)
Yes	18	30.0
No	42	70.0
Total	60	100

Source: Field Data/2008

2 Areas of trainings

Among those who received technical trainings, the study sought information on areas of trainings. 66.7% were trained in how to start and stay in business, 27.8% were trained in tailoring and 5.5% were trained in hair dressing as presented in the table 4.12.

Table 4.12: Areas of Training

Area	Frequency	Percentage (%)
Start and stay in business	12	66.7
Tailoring	5	27.8
Hair dressing	1	5.5
Total	18	100

Source: Field Data/2008

Health

Number of mosquito nets per family

Combat HIV/AIDS, malaria and other diseases is the sixth goal of Millennium Development Goals and especially to be aware of the number of mosquito nets FXB gave to each family in order to prevent malaria among beneficiaries, it is observed from table 4.13 that 83.3% of respondents have one to three mosquito nets, and 16.7% have four to six mosquito nets.

Table 4.13: Number of Mosquito Nets per Family

Number of mosquito nets	Frequency	Percentage (%)
One to three	50	83.3
Four to six	10	16.7
Total	60	100

Source: Field Data/2008

Respondents were asked where they got their mosquito nets. From the table 4.14, 73.3% said that they got them from FXB, 16.7% bought their mosquito nets and 10% said that they got their mosquito nets from health units. However it is observed that each family has mosquito net.

Table 4. 14: Where they Got Mosquito Net

Where they got mosquito net	Frequency	Percentage (%)
Health unit	6	10.0
Buy	10	16.7
FXB	44	73.3
Total	60	100

Source: Field Data/2008

4.5.2 People who advice them on health issues in community

Further still, the respondents were asked people who advice them on health issues in community. It is observed from figure 4.4 that FXB is their main adviser on health issues as advanced by 40% of respondents. 35% said that they get advice from radio; 22% said that they get advice from community health workers; 4% said that they get advice from family members and only 1% said that they get advices on health issues from ministry outreach.

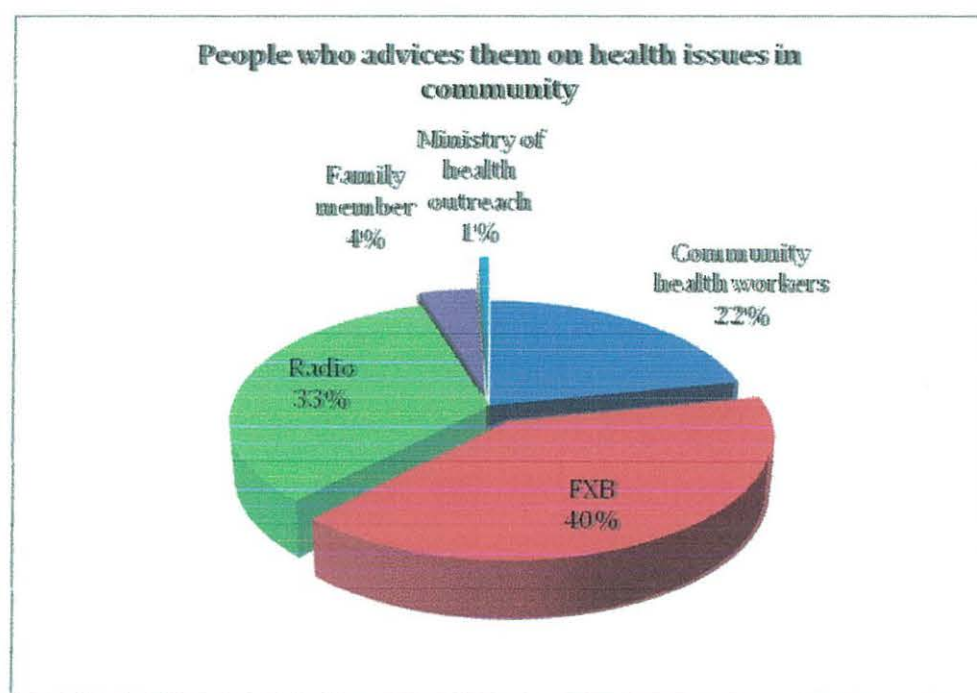


Figure 4. 4: People who Advice them on Health Issues in Community

Source: Field Data/2008

4.5.3 Health services received from FXB

From the Figure 4.5 it is seen that as far as HIV/AIDs is concerned, FXB offers services on HIV testing, counseling and prevention. 36% said that they got advice on how to prevent themselves from HIV/AIDS; 35% said they received HIV/AIDS counseling from FXB and 29% said that they had free and voluntary testing from FXB.

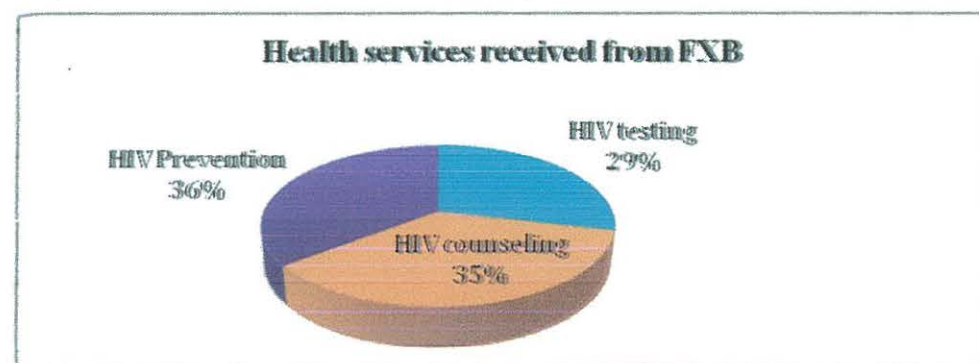


Figure 4. 5: Health Services Received from FXB

Source: Field Data/2008

4.6 Nutrition

4.6.1 Source of food for Families

The sixty respondents were asked the source of food for families; it is observed from table 4.15 that more than a three quarter (91.7%) of respondents get their food from market, 5.0% get their food from FXB and only 3.3% get their food from their gardens. This information confirms that Nyarugenge is located in town where agriculture is not practicable.

Table 4.15: The Main Source of Food for Families

Main source of food	Frequency	Percentage (%)
Own garden	2	3.3
Market	55	91.7
FXB	3	5.0
Total	60	100

Source: Field data/2008

4.2 Number of meals per day

The sixty respondents were asked the number of meals per day they were regularly taken; and their responses were as indicated in the table 4.16. More than a half (56.7%) of participants said that they are taking two meals per day (lunch and supper), 31.7% have full meals (breakfast, lunch and supper); 6.7% take only supper; 3.3% take breakfast and supper and only 1.7% take only lunch, this is presented on table 4.16.

Table 4. 16: Number of Meals they take per day

Number of meals per day	Frequency	Percentage (%)
Only lunch	1	1.7
Only supper	4	6.7
Breakfast, lunch and supper	19	31.7
Breakfast and supper	2	3.3
Lunch and supper	34	56.7
Total	60	100

Source: Field Data/2008

4.3 Time of which they had problems in satisfying food needs

Additionally the respondents were asked the time of which they had problems in satisfying food needs; it is observed from table 4.17 that three quarter of respondents said that they have never problem in satisfying food needs. 10% said that they rarely face this problem; 10% alleged they sometimes face this problem; 3.3% said that they often experience this problem and 1.7% always has this problem.

Table 4. 17: Number of Time they had Problems in Satisfying Food Needs

Number of time	Frequency	Percentage (%)
Never	45	75.0
Rarely	6	10.0
Sometimes	6	10.0
Often	2	3.3
Always	1	1.7
Total	60	100

Source: Field Data/2008

4.6.4 Causes of food shortage

Respondents who agreed that they have ever faced the problem of satisfying food needs in their households were asked reasons of food shortage. Figure 4.6 shows some of the causes of food shortage as advanced by respondents. 41% said food shortage was caused by lack of money; 29% said that they have many people in their families; 18% said that their crops failed, 6% lack energy to produce much and 6% lack storage facilities.

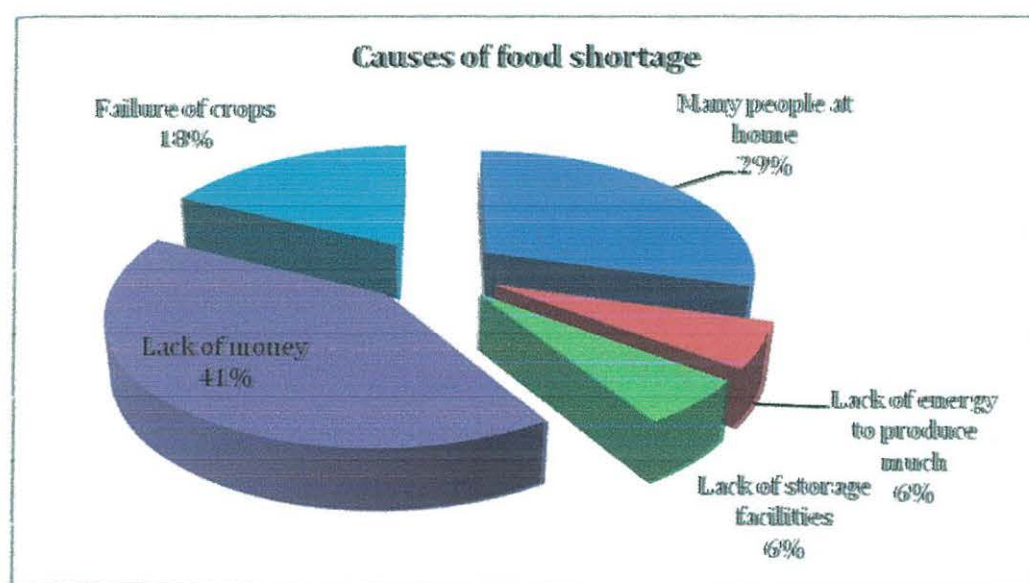


Figure 4. 6: The Major Cause of Food Shortage
Source: Field Data/2008

6.5 Strategies to overcome food shortage

Respondents who have a food shortage problem were asked the strategy they used to overcome food shortage. Some of them are summarized in table 4.18. 45.6% reduced the number of meals per day; 18.2% got help from relatives; 18.2% bought food from market; 9.0% got help from neighbors and 9.0% sent children to eat with neighbors.

Table 4.18: How they Manage Food Shortage

How they manage	Frequency	Percentage (%)
Got help from neighbors	1	9.0
Got help from relatives	2	18.2
Send children to eat with neighbors	1	9.0
Reduced number of meals	5	45.6
Bought from market	2	18.2
Total	11	100

Source: Field data/2008

CHAPTER FIVE

DISCUSSION OF FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

Overview

This chapter presents the discussion of findings and conclusions of the results presented in chapter four as related to the views of other scholars in the literature review as presented in chapter two and in the background of the study as presented in chapter one. The researcher also complements them with personal views. The conclusion was reached basing on discussion of findings of the study and the recommendations made arising from the conclusion reached. The areas of future research have been explored emanating from the questions raised by the entire study.

Discussion of findings

This section presents a discussion of the findings, relating it with the background and literature review. The researcher's personal views are also included.

1 Characteristics of families supported by FXB

According to FXB Brochure (2007) by rebuilding, empowering and supporting communities affected by poverty and HIV/AIDS, the FXB strategy ensures that long-term support for orphans and vulnerable children is both effective and sustainable. FXB annual report (2004), said strategies implemented by FXB in the field vary according to the social, cultural, economic and political scenarios present in different countries and particular locales where the programs are implemented.

For example, Jalal and Boyd (2005) argued that poverty must be reduced by meeting basic needs: food, education, shelter, productive employment, control over common property, and natural resource management. Similarly, to minimize the environmental and social consequences of development, a strategic assessment of policies and plans must be undertaken. This is the role of governments and NGOs.

Improvement of living conditions of local people depends on collaboration between main actors in local development: the public sector, the private sector and the third sector (community

sed organizations). The (very considerable) resources flowing from bilateral and some multilateral agencies to NGOs are increasingly bundled with this poverty reduction agenda, placing increasing demands on these NGOs to deliver measurable achievements in poverty reduction.

According to Yunus (2007) poverty is not distributed evenly around the world; specific regions suffer its worst effects. In sub-Saharan Africa, South Asia, and Latin America, hundreds of millions of poor people struggle for survival. Additionally MINALOC (2007), Rwanda is a poor rural country with about 90% of the population engaged in (mainly subsistence) agriculture. It is the most densely populated country in Africa and is landlocked where 56.9% of its people living in poverty and 36.9% living in extreme poverty.

According to Kagame's citation (New Times of 9th Feb. 2006), "The war against poverty calls for a strong global coalition. Aid alone is not enough without participatory approaches".

The findings from the study discovered that poverty is one of characteristics of families supported by FXB in Nyarugenge District (table 4.7).

The United States President's Emergency Plan for AIDS Relief (2007) argued, Rwanda is one of the most densely populated countries in sub-Saharan Africa. Twelve years after the genocide, which killed almost one million people, Rwanda faces multiple health and development challenges. An estimated 3.1% of the adult population is infected with HIV (3.6% of adult women and 2.3% of adult males); 160,000 Rwandan adults and 27,000 children are living with HIV in a total population of nine million people (UNAIDS). The repercussions of the HIV epidemic, combined with the ongoing effects of the genocide, have resulted in more than 100,000 orphans and a continuing loss of approximately 21,000 persons to HIV-related illness each year.

The findings from the study revealed that the characteristics of families supported by FXB in Nyarugenge District consist mainly with adult women aged above 26 years. Other characteristics of peoples supported by FXB include families affected or infected by HIV/AIDs. The study also discovered that there are a small number of HIV/AIDs orphans and widows (ers) who are supported by FXB (Table 4.7).

2.2 The role of FXB direct financial support to family welfare

Sachs (2005) said, the key to ending extreme poverty is to enable the poorest of the poor to put their foot on the ladder of development. This study confirmed that a temporary boost of aid can be the key to ending extreme poverty and to enable the poorest of the poor to access to socio-economic development. To assist them can be done either by Governments (powers) and agencies (NGOs, Private Sectors ...). In this study, Daphrose's story demonstrates the efficiency of FXB's strategies to fight against poverty and HIV/AIDS through income generating activities (IGA). Gitarama resident, 35 years old widow, mother of 2 children and HIV positive, Daphrose is a credible and stigmatized person. Daphrose received assistance from FXB and financial aid through IGA and was interesting for selling pork. IGA has been very successful to her and she gained 5,000 Rwandan francs weekly around \$9. She has even been able to save 30,000 Rwandan francs. After that she said: FXB gave back to me life and I have medical care, savings group and have new friends from my group. Because of FXB, Daphrose is not among poor in Gitarama where the average income of poor is 150Rwf per person-a-day and \$9 is probably 1500Rwf; divided by seven days it is 707Rwf which is her income per day. This is real contribution of FXB in family welfare.

Wang (2007) suggested two kinds of social businesses which can help to reduce poverty. The first is companies that focus on providing a social benefit and another which is profit-maximizing businesses (PMBs) that are owned by the poor or disadvantaged. This study shows the benefit gained from businesses helping the beneficiaries to reduce their poverty or even overcome it altogether.

This study discovered that FXB plays an important role in ensuring family welfare. This is done by giving people money to start businesses, from which profits generated from these businesses are used to for self sustainability. It is important to mention that people are given a chance to come up with an idea of what they want to do (the kind of business they want to get involved). More than three quarter of respondents said that from profits, they manage to pay tuition fees for children and access basic needs (Figure 4.3). It is observed that the main income generating activities (IGA) in which more families are involved in consist of sales of food stuff in Gitarama District situated in Kigali City, the Capital of Rwanda where businesses of food generate incomes. Other IGAs involved in by FXB's beneficiaries including arts and crafts,

ing, cattle farming, sales of charcoal, sales of alcoholic drinks and hair saloon (Table 4.8). It also discovered that FXB supports family by giving them money to start businesses of their choice; it means they are given a chance to come up with an idea of what they want to do. This is a good approach in development which promotes participation and self-determination.

3.3 The level of FXB's contribution on health and nutrition

Voluntary groups, or nongovernmental organizations (NGOs), were seen as having greater diversity, credibility, and creativity than official agencies (the World Bank, United Nations, etc.) in producing a "just development" characterized by equity, democracy, and social justice as well as by economic growth (Clark, 1991).

It was discovered that FXB is among the main adviser in health issues. This is by advising them through seminars or workshops. It gives them mosquito nets and some health services delivered including HIV counseling for those who are infected, HIV testing and HIV prevention of those who are not infected (Figure 4.4). And therefore, it is discovered that FXB offers services on HIV testing, counseling and prevention (Figure 4.5).

It was observed that most of FXB's beneficiaries get their food from market (Table 4.15), they agreed that FXB advises them on how to take a balanced diet, it is therefore observed that FXB plays an important role in ensuring the welfare of families by securing a well balanced diet, this is done through advices.

It was discovered that only 40% of beneficiaries have FXB as their main advisor on health issues. The study has to invest in human resources because the study revealed that very few (30%) beneficiaries attended vocational trainings. But, almost all respondents manage to attend seminars and workshops on health and nutrition issues, which really improved their living conditions.

However, as Yunus said (2007), charity is a form of trickle-down economics; if the trickle stops, it does not help for the needy. All the good work that nonprofits, NGOs, and foundations do, they cannot be expected to solve the world's social ills. The role of beneficiaries to solve their problems must be very remarkable.

Conclusions

Based on the discussion of findings of the study, the researcher wishes to draw the following conclusions as related to the original objectives and research questions set prior in the introduction of this study.

The characteristics of families supported by FXB in Nyarugenge District consist mainly with the following: most women aged above 26 years. Others characteristics of peoples supported by FXB including families affected and infected by HIV/AIDS.

Activities undertaken by people differ depending on their ideas, what they are able to do and the location in which they are located. More beneficiaries are involved in sales of food stuff. Others' beneficiaries are involved in arts and crafts; farming; cattle farming; sales of charcoal; sales of alcoholic drinks and hair saloon. FXB's contributions through Income Generating Activities (IGAs) permit to beneficiaries to access to basic need. Money generated from IGAs enable them to take children to school, to access to food and therefore managed to save the families.

FXB has contributed effectively in health and nutrition of its beneficiaries in Nyarugenge District by giving them advice in health issues. This was done through seminars and workshops. FXB provide to them not only mosquito nets but also health services delivered including HIV counseling for those who are infected, HIV testing and HIV prevention of those who are not infected.

Most of FXB's beneficiaries get their food from the market. However, they were agreed that FXB advises them on how to take a balanced diet.

Recommendations

In view of the conclusions reached, it is observed that there are various factors which can contribute to improve family welfare in Nyarugenge District. These actions are linked to the input of various stakeholders in positive changes on families so that effective and efficient implementation of FXB's contribution and dealing with challenges that it faces can be achieved.

Non-governmental organizations (NGOs) play an important role in community development. They can bridge the gap between the government and the community. Non-governmental organizations are essential in organizing the poor. NGOs can identify emerging issues, and through consultation and participatory approaches can identify beneficiaries and express views that might not otherwise be heard. However, the partnership between all stakeholders on family welfare including the government, NGOs and the community is necessary for sustainable development. That is why the researcher for this study recommends to Nyarugenge District, FXB and Nyarugenge community to work closely in identifying families who need assistance and to consider gender equality in the identification in order to avoid jealousy among people.

NGOs can respond quickly to new circumstances and can experiment with innovative approaches. And actually participate actively in reducing poverty and in solving other world's problems including HIV / AIDS. However, in this study the researcher recommends to the NGOs and especially FXB to promote the strategy of loan by giving money which will be repaid to community account without interest or with a smaller interest in order to promote self-dependent approach in the community and to cover a big number of vulnerable families.

Non-governmental organizations (NGOs) participate actively in peoples' health promotion by providing medicine, food and trainings. They can improve the peoples' living conditions by providing advice on health issues. However, it is recommended to FXB regarding to this study to multiply the efforts and becoming regularly advisor on health issues and to cover a big number of beneficiaries.

Regarding to the nutrition, the researcher recommends to community of Nyarugenge District to be organized and to develop the approach of self-help among Nyarugenge communities which promote sustainable solutions to food production by using local community group to plan for famine relief. Therefore, the poorest should be assisted by other members of community instead of waiting aids from international NGOs.

Areas for further research

The findings of this study brought about the need to conduct further studies related to the contribution of development actors on family welfare in Nyarugenge District.

- i. The role of Nyarugenge people's in identification of vulnerable families who need help from FFB.
- ii. The contribution of profits generated from income-generating activities (IGAs) on family welfare in Nyarugenge District.
- iii. The implication of local authorities in promoting primary health care in Nyarugenge District.

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APPENDICES

pendix A: Introduction for Mr. Mabete N. Dieudonné



KAMPALA
INTERNATIONAL UNIVERSITY

P.O.BOX 20000
KAMPALA- UGANDA.
TEL:-041-266813

OFFICE OF THE DIRECTOR SCHOOL OF POST-GRADUATE STUDIES AND RESEARCH

30th May, 2008

To:
The Coordinator of,
XB Nyarugenge,
Kigali/Rwanda

Dear Sir/Madam,

RE: INTRODUCTION FOR MR. Mabete N.Dieudonne'

The above named is our registered student in the School of Post Graduate Studies and Research, pursuing a Master of Arts in Development Studies. With Registration number MDS/1735/71/DF.

He wishes to carry out a research on **"NGOs' Income Generating Activities Strategy and Household Welfare, A Case Study of FXB Nyarugenge District-Rwanda"**

Any assistance accorded to him regarding research will be highly appreciated.

Yours faithfully



Prof. Samuel O. Owolabi

DIRECTOR, SCHOOL OF POSTGRADUATE STUDIES

pendix B: Response from FXB



Rwanda
88 KIGALI
8 81 92
da@fxb.org
fxb.org

June 05, 2008.

Sir,

whom it may concern

to introduce Mr **Mabete Niyonsaba Dieudonné** from the School of Post Graduate
at Kampala International University.

bete is pursuing a Masters Degree in Development Studies and he is carrying out a
h **"NGOs' Income Generating Activities Strategy and Household Welfare: A case
of FXB Nyarugenge District – Rwanda"**.

the International Non Governmental Organisation he is using for the case study above
ned.

munication is therefore to kindly request you to assist him with any information he
equire. Any help provided to him will highly be appreciated.

Damascene NDAYISABA
Country Director

FXB International
François-Xavier Bagnoud
Country Coordination/Rwanda

Appendix C: Semi-structured questionnaire

MABETE NIYONSABA Dieudonné

Kampala International University

PO BOX: 20 000

KAMPALA UGANDA

11th May 2008

Dear Respondents,

This questionnaire is part of my research project in partial fulfillment of the requirements for the award of a Degree of Masters of Arts in Development Studies (MADS) of Kampala International University. It is intended to investigate **“The contribution of NGOs on family welfare: A Case study of FXB Nyarugenge District- Rwanda”**

Answering all questions truthfully will be your important contribution to my research and to the selection of activities of International NGOs in improving living conditions of vulnerable families.

This questionnaire should take you about five minutes. Please read instructions carefully, and answer all questions in the space provided. If you wish to add further comments feel free to do so. The information you will provide will be strictly confidential and used only for academic research purposes.

I hope you will find completing the questionnaire enjoyable, and thank you for taking the time to do so. If you have any queries or would like further information about this project, please feel free to contact me on +250 0862 7522

Thank you for your assistance.

MABETE NIYONSABA Dieudonné

MABETE NIYONSABA Dieudonné

Kampala International University

PO BOX: 20 000

KAMPALA UGANDA

11 Gicurasi 2008

Nyakubahwa,

woherereje kumugereka w'iyi baruwa ibibazo bimfasha mu bushakashatsi “k’Uruhare Imiryango Itegamiye kuri Leta mw’Iterambere ry’Ingo zitifashije, urugero rwa FXB mu tere ka Nyarugenge,- Rwanda”.Ibi bizamfasha kubona impamyabushobozi y’ikiciro cya tatu cya Kaminuza mw’Iterambere ku ishuri rikuru mpuzamahanga rya Kampala.

anga yanyu mu gusubizanya ukuri ibibazo byose irakenewe mu guteza imbere imibereho go zitifashije.

BETE NIYONSABA Dieudonné

SECTION A: CHARACTERISTICS OF HOUSEHOLDS

(Ishami rya A: Imyirondoro ya Nyir'urugo)

Instructions: Cross (x) the answer of your choice among the alternatives provided. Where there is a space, feel free to give your opinion

mabwiriza: *Shyiraho (x) ku gisubizo kikunogeye. Ahari uturongo uhuzuze wisanzuye*

1. Gender (*Igitsina*)

☐ Male (*Gabo*)

☐ Female (*Gore*)

2. Age

☐ Below 25 years old (*Munsi y'imyaka 25*)

☐ 26 to 40 years old (*Kuva ku myaka 26 kugeza kuri 40 y'amavuko*)

☐ Above 40 years old (*Hejuru y'imyaka 40 y'amavuko*)

3. Educational level (*Amashuri wize*)

☐ Illiterate (*Utazi gusoma no kwandika*)

☐ Primary education (*Amashuri mato*)

☐ Secondary education (*Amashuri yisumbuye*)

☐ Bachelor degree (*Amashuri makuru*)

☐ Others(Specify)*Ibindi(bivuge)*

4. How long have you been helped by FXB? (*Watangiye gufashwa na FXB kuva ryari?*)

☐ Below one year(*hasi y'umwaka umwe*)

☐ One to three years (*Hagati y'umwaka umwe n'itatu*)

☐ Three to five years (*Hagati y'imyaka itatu n'itanu*)

☐ Five to ten years (*Hagati y'imyaka itanu n'icumi*)

☐ More than ten years (*Hejuru y'imyaka icumi*)

5. You are supported by FXB because you are (*Ufashwa na FXB kubera impanvu zikurikira*):

☐ HIV/AIDS positive (*Uri umwe mubanduye agakoko ka virusi itera Sida*)

☐ HIV/AIDS Orphan (*Uri imfubyi ya sida*)

☐ Widow(er) (*Uri umupfakazi*)

6. What kind of assistance did you get from FXB? (*Ni iyihe nkunga wahawe na FXB?*)

☐ Basic needs such as food and shelter (*Ibyangomwa shingiro nk'ibyo kurya n'imiturire*)

☐ Medical support (*Ubufasha bw'ubuvuzi*)

☐ Income generating activities (*Ibikorwa by'imishinga ibyara inyungu*)

☐ House construction and rehabilitation (*Kubaka inzu no kuyisana*)

☐ Nutrition support (*Inkunga ku mirire*)

☐ HIV/AIDS counselling and training (*Inama n'amahugurwa kuri SIDA*)

☐ Education support (*Ubufasha k'uburezi*)

☐ Others (Specify) *Ibindi(Bivuge*

SECTION B: INCOME GENERATING ACTIVITIES

(Ishami rya B: Ibikorwa by'imishinga ibyar'inyungu)

7. What type of business are you involved in? (Ni ubuhe bucuruzi ukora?)

- ☐ Arts and crafts (Ubukorikori n'indi mirimo y'amaboko)
- ☐ Farming (Ubuhinzi)
- ☐ Cattle farming (Ubworozi)
- ☐ Sales of charcoal (Ubucuruzi bw'amakara)
- ☐ Sales of foodstuff (Ubucuruzi bw'ibikomoka k'ibiribwa)
- ☐ Sales of alcoholic drinks (Ubucuruzi bw'ibinyobwa)
- ☐ Hair saloon (Gutunganya imisatsi)
- ☐ Tailoring (Ubudozi)
- ☐ Other (Specify) (Ibindi(bivunge)
-

Was the funds got from FXB to start your business enough to sustain it?

(Mbese inkunga wahawe na FXB yari ihangije utangira ubucuruzi bwawe no kugira ngo busugire busangambe?)

- ☐ Yes (Yego)
- ☐ No (Oya)

The support you get from FXB is (Inkunga mwaterwa na FXB ir')

- ☐ Increasing overtime (iriyongera)
- ☐ Decreasing overtime (irahomba)
- ☐ Other (Specify) (ibindi (bivuge)
-

10. From profits of your business, you can pay tuition fees for your children and buy your self basic needs?

(Mu nyungu mubona, mushobora kwishurira abana amafaranga y'ishuri nokwigurira ibindi bikenerwa by'ibanze?)

☐ Yes (Yego)

☐ No (Oya)

11. Do you think the support got from FXB changed or improved your living conditions?

(Urabona inkunga wahawe na FXB hari icyo yahinduye kumibereho yawe?)

☐ Yes (Yego)

☐ No (Oya)

If yes How? Give your reasons below *(Niba aribyo sobanura impanvu hasi aho)*

12. Have you ever received a vocational training from FXB?

(Hari umwunga wigishijwe na FXB?)

☐ Yes (Yego)

☐ No (Oya)

If yes, in which area? *(Niba aribyo, nimubiki?)*

☐ Start and management of business *(Gutangiza no gucunga neza ubucuruzi)*

☐ Tailoring *(Ubudozi)*

☐ Hair dressing *(Gutunganya imisatsi)*

☐ Catering *(Resitora)*

☐ Others (Specify) *(Ibindi (Bivuge*

SECTION C: HEALTH AND NUTRITION

ISHYAMI C: UBUZIMA N'IMIRIRE

13. How many mosquito nets does your household have? (*Ufite inzitiramibu ingahe murugo rwawe?*)

14. Where did you get those mosquito nets? (*Izo nzitiramibu wazikuyehe?*)

☐ Health unit (*Kubashyinzwe ubuzima*)

☐ Bought (*Nizo naguze*)

☐ FXB (*FXB*)

Others (Specify) (*Ahandi (Havuge)*)

15. Who advises you on health issues in the community? (*Ninde ubangira inama muby'Ubuzima iwanyu?*)

☐ Ministry of Health outreach (*Abakozi Minisiteri y'ubuzima*)

☐ Community Health Worker (*Abatorewe ubuzima*)

☐ FXB (*FXB*)

☐ Family member (*Abagize umuryango*)

☐ Radio (*Radio*)

Other (specify) (*Abandi (Bavuge)*)

16. Have you ever received the following services from FXB? (*Mbese waba warabonye serevisi zikurikira ubikesha FXB?*)

☐ HIV/AIDS voluntary testing (*Kwipimisha kubushake agakoko gatera SIDA*)

☐ HIV/AIDS counselling (*Inama ku gakoko gatera Sida*)

☐ Advice on HIV prevention (*Inama koburyo bwo kwirinda Sida*)

17. What is the main source of food for this household? (*Ibiribwa mubikurehe?*)

☐ Own garden (*mubyo mwiyezereza*)

☐ Market (*ku isoko*)

☐ Relatives/Neighbors (*K'ubavandimwe/ Kubaturanyi*)

☐ FXB (FXB)

☐ Others (Specify) (*Ahandi (Havuge)*)

18. How many meals do you have per day on average in the last seven days? (*Urya inshuro zingahe k'umunsi?*)

☐ Only Breakfast (*Mu gitondo gusa*)

☐ Only Lunch (*Saa sita gusa*)

☐ Only Supper (*Nimugoroba gusa*)

☐ Breakfast, Lunch and Supper (*Mugitondo, saa sita na nimugoroba*)

☐ Other (Specify)

19. How often did you have problems in satisfying food needs of the household in last year?

Ni kangahe mwagize ikibazo cyo kubona ibiryo bihagije mu mwaka ushize?

☐ Never (*Nta na rimwe*)

☐ Rarely (*Inshuro nke*)

☐ Sometimes (*Rimwe na rimwe*)

☐ Often (*Inshuro nyinshi*)

☐ Always (*Buri gihe*)

20. What was the major cause of food shortage? *Ni iki cyateye ibura ryibiryo?*

☐ More people at home (*Abantu benshi mu rugo*)

☐ Crop failed (*Imyaka yanze kwera*)

☐ Sell of food stuffs (*Kugurisha imyaka*)

☐ Stolen (*Imyaka yaribwe*)

☐ Lack of energy to produce much (*Kubura imbaraga zo guhinga imyaka itubutse*)

☐ Lack of storage facilities (*Kubur uburyo bwo guhunika*)

☐ Lack of money (*Ibura ry'amafaranga*)

☐ Others (Specify) *Ibindi bivuge*

21. How do you manage food shortage? Ni gute mwakemuye ikibazo k'ibura ry'ibiryo?

- ☐ Help from neighbours (*Wafashijwe n'abaturanyi*)
- ☐ Helped by relatives (*Wafashijwe n'abavandimwe*)
- ☐ Casual labour (*Wifashishije abakozi*)
- ☐ Sent children to eat with neighbours (*Wohereje abanakurya mu baturanyi*)
- ☐ Sent children to relatives (*wohereje abana mu bavandimwe*)
- ☐ Reduced number of meals (*Wagabanyije inshuro zo kurya kumunsi*)
- ☐ Bought from shops (*Waguze ku isoko*)
- ☐ Others (Specify) (*Ibindi bivuge*)

22. How does FXB help you to overcome this problem?

(*Niba ari oya FXB ibafasha iki ngo mwikure muri icyo kibazo?*)

Thanks for your cooperation! (*Murakoze k'ubufatanye bwiza!*)

Appendix D: Calculations

$$\frac{z^2 \cdot p \cdot q \cdot N}{e^2 \cdot (N - 1) + z^2 \cdot p \cdot q} \quad (\text{Korthari, 2004, p. 179})$$

N: size of population

n: Size of sample

z: Standard variate for given confidence level (as per normal curve area table)

p: Probability of success

q: Probability of failure

e: Acceptance error

Study has a population N: 74

p: 0.7

q: 0.3

Standard variety at 95% confidence interval (1.96)

Error margin 5% (0.05)

$$\frac{1.96^2 \cdot (0.7) \cdot (0.3) \cdot 74}{0.05^2 (74 - 1) + 1.96^2 \cdot (0.7) \cdot (0.3)}$$

$$\frac{3.8416 \times 15.54}{0.0025 + 0.806736}$$

$$3.3 \cong 60$$