



What works? What fails?



FINDINGS FROM THE NAVRONGO COMMUNITY HEALTH AND FAMILY PLANNING PROJECT

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Navrongo Health Research Centre

PUTTING TRADITION TO WORK

In closely-knit societies such as those that exist in Africa, practices abound that provide the framework for understanding and defining relationships, attitudes, actions, and general behavioral patterns. Often, adherence to these cultural values is identified as a constraint on the implementation of development projects aimed at promoting the wellbeing of both the individual and the community. The potential for mobilising these cultural resources for social change has never been seriously considered.



Traditional leaders make it to the durbar grounds in resplendent regalia

Today, an experiment in a remote and rural setting in northern Ghana has dissipated the negative perception that culture is potentially inimical to progress. Contrary to conventional wisdom, the Community Health and Family Planning Project in the Kassena-Nankana district of the Upper East region has successfully demonstrated that cultural institutions can be deployed as powerful resources for promoting health and family planning in an environment where the demand and utilization of such services has been consistently low. The invaluable cultural resource in question is called a durbar or the Village Parliament. A durbar is a traditional gathering convened by Chiefs, elders, and opinion leaders of a community or village. More often than not, it is associated with festive occasions like traditional festivals or the enskinment of a new traditional ruler. Durbars are often organized to build community commitment for a new idea, course of action or to implement a new decision. Politicians

at the local, national and international level use durbars as a resource for party organization and political campaigning. During election time politicians organize durbars to inform and convince the electorate to subscribe to an agenda for bringing positive influence to the country or the local electoral area.

In the search for an appropriate approach to mobilize local communities for collective action, the Navrongo Health Research Centre (NHRC) has identified the durbar as a valuable cultural tool for health communication.

A durbar typically begins amid considerable formality, pomp and pageantry, drumming, dancing, and singing. Ultimately the gathering becomes an open public forum of dialogue, public speech, debate, and discussion of pertinent social issues. Through the village crier or some such other local level communication channel, a message, either from or certified by the Chief, is passed from house to house. Usually a person climbs upstairs and calls out to another in the nearest compound and passes on the message. That person also passes the message on to the next compound until all compounds are covered. The purpose of the gathering and the venue, which is usually at the market place, is communicated. The possibility of anyone missing the message is virtually nonexistent. On the day of the durbar, which may be a market day, everything starts slowly like a serious joke. Drummers and artists from the various sections of the community are notified. They are usually among the first to move towards the durbar grounds as a signal that the time for the Village Parliamentary session is well nigh. People put on their best attire, usually a carefully handwoven smock that attests to



Warming up onto the durbar grounds

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the sophisticated craftsmanship of its weaver, and begin to ooze out, nonchalantly, onto the durbar grounds. The Chief is usually the last to arrive but it is not unusual for the Chief to be among the first.

At about the appointed time sufficient numbers would have gathered for the ceremony to begin. It is normal for a ceremony to begin several minutes earlier or later since time is not measured by chronometer but by the length of shadows. The durbar itself can be a short or protracted ceremony. People usually sit in a circle so that as many people as possible have a good view of what is happening. While drumming goes on in the background, visitors go to shake hands first, and then the community leadership officially welcomes them with another round of handshakes. The chief or community leader, in this case the 'Speaker' of the Assembly, gives the welcome address before inviting the visitors to speak. The Guests state their mission. In the case of the CHFP, the District Health Management Team and the Navrongo Health Research Centre launch discussions on the health problems in the community and provoke a brainstorming session (a parliamentary debate) on how to tackle them. Decorum is strictly observed and the Speaker or his designated assistant gives 'Parliamentarians' permission to speak one after the other. Queries are raised, questions asked, and clarifications sought. Words are carefully chosen and every effort is made not to offend the sensibilities of others. In any case, there is always the 'Chief Whip' to bring errant Parliamentarians back to order. As it were, no Parliamentarian speaks to say nothing. Quite unlike in modern parliamentary sessions, there are no jeers and boos, and there are no majority and minority sides and leaders.



Keeping a watchful eye on every event

The durbar initiative provides the channel for communicating with the various villages. It provided the platform for discussing, explaining, and introducing the CHFP project. After a series of durbars the system of Village Health Volunteer and Village Health Committee was developed for health service delivery in the district.



Children enjoying the deep fries at a durbar -- outside the epicenter of vigorous activity

By using durbars as a communication tool, health development programmes that would have otherwise cause confusion in the communities are legitimized. Using durbars as a cultural resource has made it possible for health personnel to mobilise the community, disseminate health information, plan health activities, and implement them. The durbar initiative adopted by the Navrongo Experiment offers an opportunity to bring the health hierarchy and traditional authorities together to discuss health problems and find lasting solutions. By using the method, the top-down approach of the conventional health care system is gradually being replaced by the bottom-up planning of health care; one of the hallmarks of health service decentralization. Durbars also provide a great opportunity for informing the District political leadership of health problems in the community. The presence of local government officials at durbars gives health programmes political support and legitimacy. Durbars have created the grounds for mobilising all sociocultural resources and institutions like peer groups, women's

groups, opinion leaders, elders, family heads, landlords, village committees, and soothsayers in the Kassena-Nankana district to implement a community-based health and family planning programme.

Send questions or comments to: What works? What fails?

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This series has been launched to share experiences with people in Ghana and elsewhere around the world about what has worked and what has failed in an experiment to make primary health care widely accessible to rural people. The Kassena-Nankana community, whose active participation made *The Navrongo Experiment* possible, are hereby duly acknowledged. This publication was made possible through support provided by the Office of Population, Bureau for Global Programs, Field Support & Research, U.S. Agency for International Development, under the terms of Award No. HRN-A-00-99-00010. The opinions expressed herein are those of the authors and do not necessarily reflect the views of the U.S. Agency for International Development. Additional support was provided by a grant to the Population Council from the Bill and Melinda Gates Foundation. The Community Health Compound component of the CHFP has been supported, in part, by a grant from the Vanderbilt Family to the Population Council.