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Reality Checks: first reflections

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In this article, Dee Jupp and colleagues describe how the Sida (Swedish International Development Cooperation Agency) team in Bangladesh is carrying out a 5-year study to track the progress of two Sida-supported programmes in primary healthcare and primary education. Their 'Reality Checks' combine immersions and conventional participatory approaches, and involve visiting the same host families and communities each year, at the same time of year, to see first hand how policies are playing out at local level. Although in its early stages, the approach is already providing many new insights with important policy implications.

Introduction

Sweden's current Policy for Global Development (2003) emphasises two key perspectives:

- poor people's perspectives on development; and
- the rights perspective.¹

Sida has published a Working Paper (2006) which sets

out specific measures to ensure that these perspectives, as well as its principles of participation, non-discrimination, transparency, and accountability, influence both processes and results in all its work.

The paper states that:

The approach makes people living in poverty into important and active participants in developing their society and utilises their voice, abilities, and knowledge at all levels... the dynamic direction is from the bottom up. This is also the level where we can clearly understand how poor people's living conditions are affected by participation or exclusion and the extent to which they are able to, or allowed to, benefit from the gains of processes of change (p13).

It concludes that:

Sida has a unique role to play in the international arena by showing the importance of the two perspectives in achieving our shared international commitments against poverty and for more effective development cooperation (p18).

Sida has thus been actively encouraging all its depart-

¹ 'Shared Responsibility: Sweden's Policy for Global Development', Government Bill 2002/03:122.

ments to 'clearly indicate (in their work plans) how they intend to work with a sharpened poverty focus, including the promotion of the two perspectives' (Appendix 1) and how, within the new aid architecture which emphasises more budget and sector support, it will make poor people's perspectives visible. It suggests that innovative actions are required and 'Sida must have its own expertise and capacity to perform and implement these analyses' (p14). The Swedish Embassy and Sida in Bangladesh have pioneered the Reality Check as a key element in their efforts to ensure dialogue from below in their new Country Strategy.

How do the Reality Checks work?

The Reality Check is a means of listening to the voices of people living in poverty and understanding people's perspectives on primary healthcare and primary education, both of which are supported by Sida in Bangladesh through two large sector programmes. The Reality Check combines immersions with more conventional participatory approaches to create the best possible environment for open communication. Study team members each live with different poor households for a minimum of 3 nights and interact with all the members of their household as well as neighbours, other members of the community, and service providers. As far as possible they attempt to integrate in the household and make great efforts not to be treated as guests. They accompany household members to school, health facilities, work places, and social interactions, or mimic these actions on their own to experience exactly what is meant by 'long walks', 'long waits', 'lack of facilities', 'poor roads', 'high cost' etc.

The Reality Check is a longitudinal study over 5 years, involving the same communities, living with the same households, at the same time of the year in order to track changes over time. A pilot was carried out in May 2007 to test out and refine the approach and the first of a series of annual Reality Checks was conducted in October/November 2007. Three teams worked in three distinct districts. In each district three communities were selected:

- one urban (slum);
- one peri-urban; and
- one rural.

This makes a total of nine communities covered by the entire team.

All three of these locations were selected on the basis of information from local key informants suggesting that these were poorer communities which all related to the same municipal town (e.g. for administrative issues, referral to

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municipal hospitals etc).

The published brief on the Reality Check (2007) states that the

... study will provide new information on poor people's perceptions and experiences of health and education services. In addition to shedding light on progress with formal services, information on less visible but highly important issues (particularly to the poor) such as informal services and reasons for non-use of services will be gathered. It is anticipated that information emerging from the Reality Check should be used to influence and shape both policy and programme implementation within SWAps towards better outcomes for people living in poverty.²

The team of nine comprises international and Bangladeshi experts who all have considerable experience of using participatory approaches in Bangladesh. Despite this, every member concurs that use of the immersion process has revealed new insights and created new platforms for dialogue and openness with people living in poverty, which both complement and extend more traditional forms of participatory enquiry.

Immersion observation

Immersion adds value to the study in a number of ways. The importance of this is best illustrated by a few examples.

The number of meals taken by households in a day is an accepted indicator of poverty in Bangladesh. There are many studies which document how this number has increased so that most households apparently now take three meals. However, experiencing these meals by eating with the family for 4 days provided a new insight into the reality of these statistics. One of the Reality Check team members described his experience as follows:

² The sector-wide approach (SWAp) for lending pools resources from different organisations and tackles several projects within a sector, instead of providing lending to individual projects.

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Each meal consists of rice cooked in a full pot of water with some arum leaves. This turns into a rice soup and only this way extends to six members of the family. This is not a meal.... recording the number of meals like this taken in a day does not make sense.

House construction is another traditional indicator used as a basis for determining levels of poverty by many programmes in Bangladesh. However, Reality Check team members noted:

Poor people have had access to housing loans and some have built brick houses. At first we thought they were not poor but living with them we realised that in order to pay the instalments on their loans, they have cut their consumption.

One team member recorded:

My host family's neighbour made me a meal one day. She is a trained birth attendant and lives in what appears to be a good brick house. She gave me boiled rice with leaves plucked from the roadside and flavoured with a little chilli. This was what she ate every day. This shook me. This woman was really struggling. How would I ever have understood that if I had not taken food with her?

Much has been made of the ‘total sanitation’ initiatives in Bangladesh, and our host families mostly had some form of latrine (with some exceptions among the urban hosts). However one team member noted:

I shared a bed with the grandma for 4 nights. Every night she got up twice to relieve herself. The latrine was located a long way from the house and she never took a light with her. It was clear from the short time she was away that she squatted outside the hut.

And another:

My host did not want us to accompany her to fetch firewood. This puzzled us. Later, on trying to use her latrine we realised it was for show only. It comprised the top slab and nothing else. She never used it but rather went into the nearby scrub land to defecate.

And another:

I asked to use the toilet in the market but nobody knew who had the key.

Immersion enables the sharing and building of knowledge

The fact that the immersion involves staying for a period of time helps in the process of gradually building knowledge and trust. Again, extracts from field notebooks help to illustrate this.

One team reported:

During the days spent in the community we travelled to health complexes by rickshaw, rickshaw van, boat, and by walking, in order to see what people meant by saying ‘it is too far’, or ‘the road is bad’, or ‘the hospital is crowded’ or ‘dirty’. We took the road they would take, saw what they would see in terms of facilities offered (or not offered), and came back with knowledge and experience that we could share with them. Having done this we felt our credibility (as wanting to understand their reality) was reinforced. We had a different platform, a shared experience that we could start to talk about. This made it easier to grasp what constitutes their perceptions, and differences in what people emphasise as problems: a twenty-minute journey can be far for some, but not a problem for others; a dirty ward can put some off, while having a bed all by yourself (in the very same ward) was much appreciated by others.

Another team member had visited the local school. Two temporary teachers were struggling in the absence of the head teacher (called away to a training programme) to manage three overcrowded classes. The classes included infants as young as three who were being baby-sat by their older school age siblings. A couple of days later, the team member was sitting in the local tea shop when one of the beleaguered teachers popped in. Knowing that she had witnessed the chaos at the school, he opened up about his frustrations over cups of tea. The head was called away too much for training and administrative duties; he had to travel by bicycle 25 miles to and from school; children

skipped afternoon classes after Tiffin time to watch TV programmes; school shifts should be earlier; teachers were never consulted.³ This kind of interaction rarely happens in conventional evaluations.

And another team member reported:

During our first discussion, Fahima, a mother of three, emphasised how important it is to provide your children with education. Only one of her children lives with her and has been selected as a 'sponsored child' by an international organisation. We felt sceptical about her views and thought that she was probably used to expressing this vision regarding them perhaps as something outsiders would appreciate. But over the next four days we had many conversations. It became clear that these views on education had real impact on the plans and actions of her daily life. For example, she would not touch her savings in a crisis but rather borrow from friends and neighbours. Her savings were uncompromisingly earmarked for her children's education. Another conversation about her ill-health and the cost of treatment led to her telling us that she did not touch her savings to pay for this either. Instead she and her husband decided to sell some of their rice and borrow from neighbours. From listening to Fahima and trying to understand her daily life we began to understand that the views she expressed during our initial discussion do have real implications for her life and her daily activities.

Immersion helps to 'see' the perspective of others

Although the immersion is short and it is never possible to step into others' shoes, some important reflections were nevertheless made, as these extracts from field notes illustrate.

A long-time proponent of formal maternity care, one team member found that through living in a household in a community her views have been challenged. She is now in no doubt that she would use a traditional birth attendant if she was living in that situation:

The traditional birth attendants are neighbours and family. They have brought everyone I met into the world. They are kind and gentle and would know all about me. They are 'on call' whenever I might need them. They have helped throughout the course of the pregnancy. They are not doing this for money, they are doing it out of love. So they are not going to make money from commissions for referral for un-

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necessary tests. In fact, doctors in the hospital told me that the most unhygienic and most hostile place to have a baby is the hospital. 'Why traumatise a young mother by bringing her to the hospital where she knows no one and gets little attention... better she gives birth amongst those who love her and with germs she already has an immunity to!', one doctor told me.

Without meeting the traditional birth attendants, spending time with those who had recently had babies, and seeing the preparations made for home delivery myself, without making journeys on rickshaws, buses, and boats to reach the Maternity Hospital and seeing the labour wards and interacting with the staff myself, I would have never ever believed that I would come to this conclusion.

Similarly, studies tend to denigrate traditional and alternative medicine. The language used to describe them emphasises this: they are 'quacks', 'village doctors', or 'fakirs'. A team member wrote of her experience in the slum as if she was a resident of the slum:

I visited the homeopath at the entrance to the slum to have my sore throat checked. The homeopath is situated a minute's walk away from my 'home'. He is open at times when I am not working. I lost no earning time going to see him. I walked straight into the office and sat down. The doctor is from the locality and is pleasant, calls me by my name and gave me time. He has certificates displayed in his office which gives me confidence. He examined my throat and took time to explain what was wrong and what he would prescribe. He gave me medicines immediately and would have only charged for the medicine not the consultation if I had little money. The cost was only a few taka, unlike the cost of medicines prescribed by doctors in the hospital. He was prepared to let me pay later. There were lots of tablets in the phial he gave me, which would last for

³ The term 'Tiffin' is generally used to mean a snack between meals.

many days so I feel I got good value for money. He encouraged me to come back if the problem persisted. He knows me, and I know him so I trust him – his business depends on people believing in the efficacy of his treatment.

Policy implications

The examples given above are just a very small part of the range of experiences uncovered during the first round of the Reality Check. Sida intends to bring these perspectives to policy discussions:

- in joint Ministry-donor consortium meetings on the SWAPs;
- by official inclusion of the reports within the reporting framework for the SWAPs;
- by presenting the Reality Check study in different forums;
- by hosting exhibitions of the photos and life stories from the Reality Check; and
- by publishing user-friendly extracts from the study reports.

Again, we present a couple of examples of how the Reality Check has provided new insights with important policy implications:

Bangladesh operates a primary school stipend programme to encourage poor children to attend primary school. While other studies have exposed some of the corruption surrounding the awarding of these stipends, some new issues have been uncovered in this Reality Check study as a result of living with or interacting with families.

- Urban children are sent to live in rural areas so that they can get the stipend, which is not available in urban areas.
- Siblings are sent to different schools so that they can get the full stipend. If two siblings go to the same school the second one only gets 25% of the stipend.
- Despite the directive that stipends should be paid out by bank officials, in many areas head teachers are administering the stipend programme.

Every year, primary schools are expected to prepare a social map indicating, among other things, 'out of school children' and 'children with disabilities'. None of the maps observed related to our experience. Numbers out of school were often zero or very few, and yet families we interacted with either had or knew of drop-outs or children who had never been to school.

In one area, school teachers confronted with this observation said: 'Ah, but we only record the households which are willing to send their children to school' – thus defeating the object of the survey. Reaching Out-of-School Children (ROSC) is a new programme for drop-out children, but if the data at school level is so poor then how will this programme plan its resources? In one area where a social map had been attempted with a little more rigour, the numbers out of school are twice those to be catered for in the proposed ROSC programme for the area.⁴ Numbers of children with disabilities recorded on the maps were in single units, yet during the course of the Reality Check many children were interacted with or observed who had disabilities which prevented them from attending school.

The report of the first round of the Reality Check will be published in early 2008. It has already attracted a lot of interest and expectation. Immersions are quite demanding of the research team (physically and emotionally). The reality hit our research teams very hard this month when the news came that one of our host households had been widowed and two of our host households had lost their houses as a result of Cyclone Simr. However, without a doubt this approach adds considerably to the understanding of how central policies play out in reality and can make an important contribution to improving and shaping future policy.

⁴ Interestingly by a NGO registered school

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NOTES

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REFERENCES

Sida Bangladesh (2007) 'Brief on the Reality Check.'
Sida (2006) 'Current Thinking on the Two Perspectives of the PGD (Policy for Global Development).' Department for Policy and Methodology Working Paper 2006:4