Community mobilisation, volunteerism and the fight against HIV/AIDS in Zimbabwe

Edwin Kaseke and Jotham Dhemba[1]

Abstract

This article presents research findings from a study undertaken on civic service in Zimbabwe. The study revealed that civic service was seen as unrewarded effort whose objective it was to assist less fortunate members of society. The study revealed that the typical volunteers in Zimbabwe are poor and struggle to meet their basic needs. Volunteers are largely motivated by their religious faith. Furthermore, voluntarism is an embodiment of the African culture. Whilst organisations do not provide incentives to volunteers as a matter of principle, exceptions have been made in order to address the vulnerability of the volunteers. The article concludes by observing that volunteer programmes are helping to improve the quality of life of vulnerable groups.

Key words

Civic service; community empowerment; community mobilisation; HIV/AIDS; volunteerism, Zunde raMambo

Introduction

The terms "civic service" and "volunteering" are often used interchangeably, although the term "volunteering" is more common. In this paper, volunteering is viewed as giving one's time to provide a service for the benefit of others in a community or society with no expectation of financial gain. However, VOLSA (2004:7) points out that "a minimum stipend may be allowed to defray particular expenses". The mobilisation of communities for voluntary efforts has taken centre stage in Zimbabwe because of the HIV/AIDS pandemic. This is based on the realisation that the usual support structures are no longer able to cope with the upsurge in the number of orphans and those who are terminally ill. The article lists the objectives of the Zimbabwe country study on volunteering, discusses the methodology used in the study, reviews briefly the relevant literature, and discusses the findings. The paper ends by drawing conclusions from the findings of the study.

Objectives of the study

The study had three specific objectives:

- To identify civic service programmes in Zimbabwe
- To conduct country profile studies of civic service initiatives
- To determine the incentives that exist to promote civic service.

Methodology

The study took the form of a qualitative descriptive research design using a purposive sampling method. Service providers and key informants from government, participating non-governmental organisations (NGOs) and donor organisations constituted the study population. Purposive sampling was used to select organisations promoting the following civic service programmes:

- Community-based care for orphans
- Home-based care for the terminally ill
- *Zunde raMambo*
- Community empowerment programmes for women.

Organisations running the civic programmes were purposively selected and were as follows:

- AIDS Counselling Trust (ACT)
- Family Counselling Trust
- Rusape (FACT)
- Diocese of Mutare Child Care Programme (DOMCCP)
- Child Protection Society (CPS)
- Southern Africa Human Rights Trust (SAHRIT)
- Young Women's Christian Association (YWCA).

Two key informants from government were purposefully selected from the Ministry of Public Service, Labour and Social Welfare and the National AIDS Council, while the key informant representing donors came from the Catholic Relief Services. Six key informants were purposively selected from the participating non-governmental organisations. Thus, a total of nine key informants were selected. The criteria used to select key informants were that they had to be knowledgeable about civic service policies and programmes, and directly involved in facilitating or supporting civic service programmes.

Data from service providers were collected using focus group discussions. There were six focus group discussions in total, representing one focus group for each civic service programme. A total of 65 service providers participated in the focus group discussions with each focus group having between six and eighteen participants. Data from the nine key informants were collected through structured interviews.

The structured discussions guide and the structured interview guide were supplied by the senior research team. A limitation of the study was that the fuel crisis in the country impacted negatively on the timely collection of data.

The context

Zimbabwe has a population of about 11,6 million people, of which about 99 per cent are Africans. At independence in 1980 the country had abundant natural resources and a diversified economy with relatively viable commercial, industrial, mining and agricultural sectors, but its fortunes took a nosedive from the onset of the second decade of independence. Since 2000, Zimbabwe has been experiencing severe socio-economic and political problems that have impacted negatively on the quality of life of its people. Poverty in Zimbabwe has not only widened, but it has also deepened as more and more people join the ranks of the unemployed and low-income earners.

Zimbabwe's isolation has increased as a result of unresolved political problems and criticism of the manner in which land reform was implemented, among other factors. This has resulted in the shrinking of the formal sector and has led to shortages not only of much-needed foreign currency, but of basic goods and services as well. Incomes continue to be eroded by inflation which currently stands at just over 1000 per cent.

The middle class has disappeared in Zimbabwe and most people are now classified as poor and in need of government support to meet their basic needs and to enable them to access social services. Although social services including health, education and social welfare programmes are provided by government, local authorities, churches and voluntary organisations with varying degrees of involvement, the prevailing political, social and economic problems have worsened the problem of social exclusion. The exclusion also gets worse as one moves from urban to rural areas as there has been a gradual retreat of NGOs from these areas, owing to urban bias in the provision of services and, to a certain extent, inadequate funding and sometimes perceived interference from organs of the state. The state has also retreated from social provisioning because of resource constraints. The disputed parliamentary and presidential elections have created political polarisation in the country. Consequently, there is mistrust among the people, and mistrust between the government and non-governmental organisations as the government feels that NGOs are meddling in politics. This has created political instability.

The HIV/AIDS pandemic has also impacted negatively on the quality of life. Zimbabwe has an HIV prevalence rate of 18,1 per cent among those aged 19 to 45 years. Because of this pandemic, life expectancy is estimated to have dropped from 61 years in the early 1990s to 35 years by the end of 2004. Over 1,3 million children in Zimbabwe have also been orphaned by HIV/AIDS, resulting in the emergence of a new phenomenon of child-headed households. Responses to the HIV/AIDS menace have also been compromised by a lack of consistent support from the international community. The World Bank, quoted in Felsman (2006), reports that Zimbabwe receives the lowest level of donor support among the 15 countries in the world with the highest HIV/AIDS prevalence rates. This is due to international anti-Zimbabwe sentiments which have resulted in the country being isolated internationally. The fall-out has its roots in Zimbabwe's land reform programme which received worldwide condemnation.

Conceptualising civic service and volunteering

There is no universally accepted definition of civic service, as the meaning tends to vary from country to country. VOLSA (2004) observes that the way in which

one defines volunteering is influenced to a great extent by the history, politics, religion and the culture of a region. Notwithstanding the difficulty of defining civic service or volunteering, McBride et al. (2003:5) quote Sherraden (2001) who defines civic service "as an organised period of substantial engagement and contribution to the local, national or world community, recognised and valued by society with minimal monetary compensation to the participant". According to VOLSA (2004:6-7), the core characteristics of volunteering are that: "the activity is not undertaken primarily for financial gain or reward; the activity is undertaken at free will without coercion; and the activity is undertaken to benefit someone or the society at large rather than the volunteer her/himself".

Patel (2003:89) observes that "civic service is not a political neutral activity, but rather draws on wider ideological, social, economic and political ideas". In this vein, Patel identifies four theoretical perspectives to civic service, namely social philanthropy, institutional approaches, conservative approaches and social development. The social philanthropy perspective has its historical roots in almsgiving and social relief targeted at the poor in Europe. This was done largely out of religious considerations as the faithful were expected to render assistance to less fortunate members of society. This was perceived as a requirement for one to enter the kingdom of God. Social philanthropy continues to exist although this is now being carried out under the auspices of voluntary organisations that provide short-term social relief.

Institutional approaches are different from social philanthropy in that they:

> "... are of the view that government agencies are the best deliverers of social policies and that access to social provision and social rights should be institutionalised through legislation and comprehensive services which provide for universal coverage and access to services and benefits."
> (Patel, 2003:93).

Although there is co-existence between government agencies and voluntary organisations, government agencies play a more dominant role. The third perspective is provided by conservative approaches underpinned by neo-liberal values which call for a limited involvement of the government in social provision. Conservative approaches, therefore, support voluntary action by concerned citizens to meet the needs of their fellow citizens. It is assumed that this is a more effective and efficient means of responding to human needs at local level. Lastly, there is the social development approach which focuses on the socio-economic development of the entire society (and not just on pathological individuals) through the active intervention of the state. It adopts a pluralist approach as all groups in society have a role to play (Patel, 2003). The social development approach seeks to promote social inclusion and to improve the quality of life for all.

The *Strive Times* (2004) makes a distinction between volunteering in the West and volunteering in Africa. It notes that in Western societies where the economic status of most citizens is sound, volunteering is mainly done by the rich who have accumulated material wealth and can, therefore, afford to give up both time and resources for the benefit of the less privileged. The situation is, however, very different in the African context where volunteers tend to be poor and struggle to meet their basic needs. SAFAIDS (2004) notes that a typical volunteer in Zimbabwe is very vulnerable and would personally qualify to be a beneficiary of the programmes he/she serves. However, in spite of their situation, they are willing to dedicate time to serving other vulnerable people in the community.

Volunteers in Zimbabwe typically offer their services in orphan-care and home-based care programmes. The duties of volunteers include identifying beneficiaries in communities and providing them with limited development-oriented material support, carrying out home visits, and liaising with other community groups, leaders and organisations concerning the progress of the programmes in the community. The Population Council (2005) notes that for volunteers to be effective, there is a need for them to be provided with appropriate training, supervision and support not only by the community as a whole, but also by organisations that facilitate the programmes they work in.

Research findings

The findings of the Zimbabwe country study were as follows:

Meaning of service

In view of the fact that the definition of service varies from country to country, the study sought to understand the meaning of service in the Zimbabwean context. Respondents gave different meanings and interpretations of civic service and preferred to talk of volunteering rather than civic service. Respondents felt the term "service" had an element of state compulsion, whereas "volunteering" denoted giving up one's time for a cause. Respondents further noted that the effort one put into volunteering had no immediate monetary benefit. Thus, civic service or volunteering was understood to be unrewarded effort that was most often for the benefit of disadvantaged members of society. In a nutshell, respondents viewed volunteering as giving up one's time in the service of others without monetary gain. The meaning given to civic service in

Zimbabwe conforms to the definition of Sherraden (2001) as quoted by McBride et al. (2003:5) which was discussed earlier on.

When asked what had motivated them to become volunteers, the majority of the service providers indicated that they were driven by their religious faith which called for earthly deeds that resulted in heavenly reward. Volunteering was thus seen as putting one's faith into action. Others were motivated by the need to secure employment and thus viewed volunteering as a stepping stone towards becoming employed in the programmes that they served. It was also apparent that civic service had a traditional connotation, whereby it was seen as a duty enshrined in the culture and norms of the community. It was seen as an embodiment of "*hunhu*", meaning being a responsible human being. This traditional perspective is institutionalised in the community with the village head taking a leadership role. This was particularly true of the *Zunde raMambo* (Chief's Granary) which has always been seen as a manifestation of community responsibility. Participants involved in the *Zunde raMambo* did not consider themselves as volunteers, but rather as beneficiaries of the programme. Thus, they viewed it as a self-help initiative meant to benefit the community. Fulfilment comes from being able to solve community problems especially those of orphaned children, widows and the elderly, particularly with respect to food security. Local terms which mean volunteer include; *vabatsiri*, *vanozvipira* or *vanetsiyenyoro*. These terms are in line with the social philanthropy approach to volunteering as discussed by Patel (2003).

New values are emerging which are negating the concept of community responsibility. These new values have transformed many Africans into individualistic and inward-looking beings. Consequently, many no longer extend assistance beyond their nuclear families. This is also a function of the difficult economic environment which is preventing many people from offering assistance to their extended families as they are preoccupied with their own daily struggle to survive. There is thus increased vulnerability now, given the failure of the state to make adequate social provision.

Form, scope and age of service programmes

The study revealed that the volunteer programmes range from home-based care programmes to community-based care programmes for orphans and other vulnerable children, and empowerment programmes for women. The following table provides the profile of the participating organisations and their volunteer programmes.

Table 1: Profile of organisations and their volunteer programmes

Organisation	Programme	No. of years in operation	No. of servers	Age range of servers	Gender of servers
ACT	Home-based care for terminally ill	18 years	24	25-46	Predominantly female with only one male
CPS	Orphan-care programme	18 years	34	33-60	Female
DOMCCP	Child-care programme	6 years	67	29-55	Both female and male
FACT	Home-based care for the terminally ill	19 years	400	50-60	Both female and male
SAHRIT	Zunde raMambo	8 years	102	14-64	Both female and male
YWCA	Empowerment programme for women	49 years	Varies	27-72	Female

The table shows that the volunteer programmes have been operating for long periods and that both men and women participate as volunteers, although the majority of participants are females.

Time commitment and nature of service

The role of servers differed depending on the programme they were working in. However, it was interesting to note that the roles of volunteers working in orphan-care programmes and those involved in home-based care were similar. Their roles included participating in identifying orphans and other vulnerable children (OVCs) in consultation with the community, maintaining up-to-date registers of OVCs, and monitoring the programme to ensure that assistance goes to the intended beneficiaries. Other roles included maintaining links between beneficiaries and service providers, assisting in the distribution of handouts to beneficiaries, and suggesting alternative ways of providing support to the beneficiary population. The volunteers involved in home-based care also had additional roles such as assisting with the actual care of the sick, namely bathing and feeding; teaching primary caregivers how to care for the terminally ill, e.g. giving demonstrations on how to give bed baths; and giving talks to the community on home-based care. The roles of volunteers in the Zunde raMambo initiative involved performing agricultural tasks such as ploughing, planting, weeding and harvesting.

The time commitment of the volunteers varied from one organisation to another. The volunteers in the FACT home-based care programme worked for three hours a day and for two days a week. This was purely for supervision purposes only; in reality, circumstances in the community forced them to work more hours. The volunteers at times worked around the clock because community members are able to call upon them for help any time they need assistance. However, in the DOMCCP child-care programme, the situation was different in that no working hours were prescribed for the volunteers. It was up to the volunteers to decide when they wanted to work and for how long. In the orphan-care programme run by CPS, volunteers dedicated two hours a week towards meeting the project goals. It was up to them to choose which days they wanted to work. In the Zunde raMambo programme, the community was expected to turn up once a week on a Thursday. This day was chosen because individuals do not go to their own fields on that day, as per local tradition and taboos. Volunteers in home-based care for the terminally-ill run by the AIDS Counselling Trust were supposed to work once a week but, because of the need in the community, they ended up working almost on a daily basis. Finally, members of YWCA attended training meetings once a week on a day that was convenient to the whole group.

Servers, service areas and goals

Servers

Volunteers were found to be predominantly women ranging between the ages of 14 and 60 years. The over-representation of women among volunteers can be attributed to the fact that most of the volunteering is confined to caring for orphans and the terminally ill, a duty that traditionally has been performed by women. There is also a perception that women perform this function better than men. The age range suggests that volunteers have to be mature people who can relate well to the beneficiary populations. The profile of the volunteers shows that volunteers in urban areas are largely unemployed women with a low socio-economic status. Rural volunteers are also poor.

Service areas and goals

All the organisations running the volunteer programmes operate in specific districts, with the exception of the Young Women's Christian Association which has a national focus. Both rural and urban areas are covered. The goals of home-based care programmes are to strengthen the capacity of families and communities to

provide care and support to those infected and affected by HIV/AIDS, while orphan care programmes seek to meet the nutritional, food, educational and emotional needs of orphans and other vulnerable children. The Young Women's Christian Association seeks to develop the leadership and collective power of females with a view to achieving social and economic empowerment.

In terms of service goals, it was apparent that community-based interventions were preferred and that these served to strengthen the capacity of families and communities to care for orphans and persons infected and affected by HIV/AIDS. The assumption is that families and communities are willing to provide care and support but are constrained by lack of resources. It is for this reason that orphan-care programmes provide food packs to families and pay school fees for the children. This removes the burden from the families. Similarly, care programmes for the terminally ill focus on imparting knowledge on how to care for terminally ill people and providing caregivers with gloves and disinfectant. The community-based programmes help to locate problems in the community and to allow communities to find solutions to their problems with technical and material help from outside. This guarantees the relevance and immediacy of the intervention. Community-based programmes mirror elements of the conservative approach to volunteering which sees voluntary intervention as being more responsive to local needs (Patel, 2003). Furthermore, volunteerism promotes popular participation.

Institutional dimensions: Access, incentives, information and facilitation

Access

Participation in the programmes is voluntary although guidelines are set as to who may volunteer. In the programmes that are community-based, the community plays a leading role in the selection of the volunteers, sanctioning who can and cannot be a volunteer. Those interested take the initiative to be part of the programme. In determining who participates as a volunteer, organisations often look for mature, literate and morally upright persons. It was apparent that volunteering is more accessible to women because of the nature of the activities undertaken, which conform to traditional stereotypes about the role of women in society. There were also instances when people with specialised skills were invited to become volunteers. Alternatively, those with specialised skills applied for positions in the organisations.

Incentives

The issue of incentives was very sensitive and received mixed reactions from the participants. Some key informants were vehemently opposed to the use of incentives as this was believed to undermine the purpose of volunteerism. In order to ensure sustainability of activities, no incentives were given to volunteers in the CPS programme. However, the vulnerability of the volunteers forced the organisation to negotiate with one of their donors (who gives food packs to families in the community) to include all volunteers on the beneficiary list. The justification for this is that it is not logical to expect volunteers to take food packs to clients when they themselves are hungry and are in the same vulnerable position as the clients. The AIDS Counselling Trust has a similar policy of including the volunteers in the beneficiary list. However, the volunteers have been made aware that this arrangement will last only for the duration of the contract with the donor who is supplying the food. When the contract expires, the incentives that the volunteers were getting would also come to an end. The volunteers from the two organisations were satisfied with this arrangement and noted that it had come as a pleasant surprise because when they joined the programmes, they were not expecting to receive any incentives.

In the SAHRIT programme, the community members indicated that they did not receive any monetary incentives for dedicating their time to serve in the Zunde fields. They were motivated to work in the fields by their desire to make a difference in the lives of orphans, the sick and the elderly. They also developed a sense of security in knowing that if they themselves were to die, their children would be taken care of by the community. It is instructive to note that even those receiving food packs as incentives still saw themselves as volunteers. Thus, the incentives did not diminish or compromise their role as volunteers. VOLSA (2004) argues that monetary compensation is allowed provided it is kept to a minimum.

Information and facilitation

The study revealed that the organisations involved in volunteer programmes were facilitators of a process rather than direct implementers. The justification for this is that history has shown that programmes that are donor-driven die when donors pull out. In view of this, the volunteer programmes are largely community-driven. CPS provides technical support through training the volunteers in areas such as basic counselling, bereavement counselling, basic monitoring and evaluation, psychosocial support with special focus on memory books, and facilitating the establishment of support groups for children in the community. SAHRIT provides inputs and training and collaborates with the Department of Agricultural Research

and Extension (AREX) who conduct field days to educate the community on good farming practices. The AREX field days continue to provide the community with knowledge and skills that enable them to increase yields in the Zunde fields. Volunteers under ACT and FACT also receive intensive training covering basic nursing care, counselling and care of bed-ridden patients. Staff from the Ministry of Health are invited to facilitate the initial one-week training.

There was, however, a high turnover of volunteers under the ACT programme, which makes retraining difficult because of resource constraints. This high turnover of volunteers can be attributed to the fact that the volunteers use volunteering as a stepping stone towards securing remunerated work. They thus use the experience and skills acquired to secure paid employment and quit their positions as volunteers once they find employment.

Programme administration

The success of civic service and volunteering depends on good programme administration. The study revealed that in the FACT programme, monthly meetings are held with the volunteers where the volunteers meet and discuss the work they have done during the month. Training and refresher courses are organised at least quarterly to give the volunteers practical skills in carrying out their duties effectively. The volunteers conduct the meetings on their own and meet with the supervisors once a month. The supervisors then report directly to FACT. The success of the programme is dependent on the commitment of the volunteers as they have to operate with minimum supervision. It was apparent that allowing volunteers to take their own day-to-day decisions had contributed to the success of the programme. The supervisors also gave the volunteers the support they needed.

As far as the Zunde raMambo is concerned, the committee meets once a month to discuss what activities need to be undertaken. If it is during the planting season, they discuss what type of inputs are needed. At the end of the season, they hold a community meeting in which they give feedback on how they performed and what amount of harvest was realised. This meeting also serves to plan for the following season. There is a strong sense of community ownership of the programme, even though the programme is supported by SAHRIT. However, there is always the temptation for community members to concentrate on their own activities for personal gain at the expense of the community programme. In the end, the burden tends to fall on a few members of the community.

In the CPS programme, volunteers report directly to a community-based committee made up of representatives from the community. Volunteers are divided into five teams which operate in specific areas of the community. Each team selects

its leader who then reports to the committee. Communication from CPS to the volunteers takes place through the committee. A similar arrangement is in place at DOMCCP, where a community management board oversees the operations of the volunteers. A supervisor of the volunteers at village level reports to the board which then reports to DOMCCP. In the orphan-care programme of FACT and the child-care programme of DOMCCP, programme administration is decentralised so that day-to-day decisions are taken at the local level. This contributes to greater responsiveness to local problems and issues.

Factors promoting or hindering service and volunteering

A number of factors were identified as promoting service and volunteering. Chief among these was the issue of religion, which makes people more disposed to volunteer in order to fulfil Christian teachings. Also, any evidence that points to the fact that the programme is helping vulnerable groups or has potential to do so serves to encourage volunteering. Furthermore, there has to be a sense of community ownership of the programme. Community ownership is more likely if the community was adequately consulted at the programme inception stage. With respect to the Zunde raMambo, it was revealed that competition among villages for the best Zunde has the effect of providing the impetus to volunteers. Also, visits by outsiders to learn from volunteers (whatever the programme) gives volunteers a sense of pride.

The study also revealed that unity among community leaders, and harmonious relationships in the organisations running service programmes, make people more amenable to volunteering. Another motivating factor is the existence of capacity-building initiatives such as workshops. Volunteers are often excited to implement what they have learnt in workshops. Finally, regular meetings for volunteers provide a forum for them to share experiences and to draw strength from each other.

Factors that hinder volunteering were also identified. Firstly, some members of the community suggest that the volunteers are being exploited by donors and this discourages and upsets volunteers. Secondly, it is not always possible to meet the expectations of the intended beneficiaries due to limited resources. Thus not all identified cases in the community receive material assistance from the volunteers, and those that are left out often accuse volunteers of bias and corruption, which is demoralising. Thirdly, poverty makes it difficult for volunteers to continue working when they have to look for resources to fend for their families. Fourth is that political interference in the activities of volunteers is also a hindrance to volunteering. Respondents revealed that some volunteers have been accused of trying to mobilise support for the opposition, a situation which does not augur well

for volunteering. Fifthly, regular crop failure as a result of drought or too much rain makes volunteers unwilling to continue participating in the Zunde raMambo as their efforts are often in vain. Finally, the ever-increasing number of orphans was seen as a demotivating factor as it engenders a sense of helplessness among volunteers.

Conclusion

It is apparent from the study that volunteering is a response to unmet needs in the community and that religion is a major motivating factor for people to engage in volunteer work. The government has become so overwhelmed by the impact of the HIV/AIDS pandemic, which has seen a phenomenal increase in the number of orphans, that it cannot cope with the demand for its services. The usual government and community structures are not able to deal with this problem effectively. Because of the HIV/AIDS pandemic, hospitals have to discharge the terminally ill early in order to provide beds for other patients. The situation has been exacerbated by the economic and political problems bedevilling Zimbabwe today, which have forced the state to retreat from social service provisioning. The government cannot be expected to deal with these problems on its own, but should partner with other service providers to creating welfare pluralism.

It is apparent that volunteer programmes are helping to improve the quality of life. Orphans are given access to education and health services, and are having their basic needs such as food, clothing and shelter, met. The terminally ill are receiving proper care and support, enabling them to live their final days with dignity. The demand for volunteers will continue to grow until the government is able to re-establish its dominance in social provisioning. The sustainability of volunteer programmes in Zimbabwe depends on ensuring that there is community ownership of the programmes. Furthermore, volunteers should be allowed to make day-to-day decisions to reinforce community ownership of the programmes. In addition, collaboration with religious organisations will strengthen volunteering, given the fact that volunteers are largely motivated by religious considerations. Finally, the future of volunteering will depend on the government creating an enabling environment for non-governmental organisations so that they can operate with minimum constraints.

References

1. Felsman, K, 2006, "Orphans and other vulnerable children in Zimbabwe: A commentary" in *Journal of Social Development in Africa*, Vol. 21, No. 1, pp 6-11.

2. McBride, AM, Benítez, C & Sherraden, M, 2003, *The forms and nature of civic service: A global assessment research report*, St Louis, MO: Centre for Social Development, Washington University.

3. Patel, L, 2003, "Theoretical perspectives on the political economy of civic service," in Perold, H, Stroud, S & Sherraden, M (eds) *Service Enquiry: Service in the 21st Century*. Johannesburg: Global Service Institute and Volunteer and Service Enquiry Southern Africa.

4. Population Council, 2005, *Community-based AIDS prevention and care in Africa: Building local initiatives: Case studies from five African countries*. Viewed 5 July 2005. <www.popcouncil.org/ebert/wellbriefing.html>.

5. SAFAIDS, 2004, *Community interventions in Zambia: Faith-based responses to OVCs*. Harare: SAFAIDS.

6. Strive Times, 2004, Newssheet of the support to replicable innovative village/community level efforts, Project. No. 4, Harare.

7. VOLSA, 2004, *Building a strong, vibrant and dynamic sustainable volunteer movement in Africa*, Johannesburg: VOLSA.

Endnote

[1] Prof. Edwin Kaseke is Professor of Social Work and Director of the School of Social Work, University of Zimbabwe. Jotham Dhemba is Lecturer at the School of Social Work, University of Zimbabwe.