APPROVAL FORM

The undersigned certify that they have read and recommended to the Midlands State University or acceptance of dissertation entitled, “2015 MDG deadline: A time to reflect on Zimbabwe’s rural Local Governance: Case of Bulilima RDC” submitted by Leopatra Ncube in partial fulfillment of the requirements for the Bachelor of Social Science Honours Degree in Local Governance Studies.

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SUPERVISOR DATE

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CHAIRPERSON DATE

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EXTERNAL EXAMINER DATE
DEDICATION

This piece of work is dedicated to my father and mother Mr and Mrs Ncube, my brother Percy Ncube and my young sister Lisa Ncube.
ABSTRACT

The 2015 MDG deadline draws nigh and the need to assess the progress that has been made towards their achievement has never been greater. So great is the need, it calls for robust strategies to accelerate the achievement of the MDGs. On the other end, the Zimbabwean populace still suffers extreme poverty. Unemployment is on the upsurge and the gap between the rich and the poor is widening. The consequences of the catastrophe are even more severe in the rural populace. Although there are trivial developments in gender equality and the reduction of HIV/AIDS, this has not translated to the betterment of the country’s position towards the meeting of the 2015 MDG deadline. Local Authorities on the other hand are failing to deliver services efficiently and effectively. Rural Local Authorities are not spared from the challenges of delivering services to the attainment of the MDGs. It is in this light perhaps that this study sought to measure the extent to which Local Authorities will manage to meet the 2015 MDG deadline.

The research begins with a synopsis of why the research was carried out. This includes the background of the study, statement of the problem, research objectives, research questions, delimitation and limitations of the study. The research identifies the problem as failure by Local Authorities to deliver services that are essential to the achievement of the MDGs yet there is very little time left for their achievement. The research goes further to review available literature on the subject of MDG and local governance, first highlighting the nexus between local governance and the achievement of the MDG. The historical development of the MDGs is given after which an outline of all the MDGs will be given. The research also highlights the role of Local Authorities in the achievement of the MDGs, strategies employed and the challenges faced in their achievement. Quantitative and qualitative technics were used and the researcher targeted Bulilima RDC employees and residents as the research population. The research sample was selected using random sampling. Findings of the research revealed that there is progress towards the achievement of MDGs 3 and 6 though this cannot entail the meeting of the deadline. The research results revealed that B RDC is quite off track in terms of eradicating extreme poverty and hunger. The research also revealed that residents lack knowledge on the subject of the MDGs. Finally the research gives recommendations to rural local authorities for the achievement
of the MDGs which are ensuring public awareness, integrated results based MDG programme, established of Public-Private Partnership and exchange visit programs among other recommendations.
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LIST OF ACRONYMS

MDGs Millennium Development Goals
AIDS Acquired Immuno Deficiency Syndrome
ART Anti-Retroviral Treatment
BRDC Bulilima Rural District Council
DAC District AIDS Council
FSP Fertilizer Subsidy Programme
SARDS Sustainable Agriculture and Rural Development Strategy
HDR Human Development Report
HIV Human Immune Virus
NERP National Economic Revival Strategy
PPPs Public Private Partnerships
RBM Results Based Management
RDC Rural District Council
SAPS Structural Adjustment Programs
TCPL Total Consumption Poverty Line
UN United Nations
UNDP United Nations Development Program
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CHAPTER I
INTRODUCTION

1.0 INTRODUCTION

After the New York Summit held in the year 2000, the United Nations in collaboration with NGOs, and the Civil Society adopted the Millennium Development goals to be implemented by the world countries by the year 2015. Zimbabwe is one of the signatories to the MDGs and it prioritized MDGs 1, 3 and 6. However this does not mean that the country has turned a blind eye on other goals. To this end, the MDG program places heavy emphasis on the nexus between the governance capacities of developing countries and the achievement of MDGs. It is crystal clear that the local government units have an obligation to contribute towards the achievement of the MDGs as they are a level of government with direct contact with the grassroots. Local government units are mandated with a service delivery obligation through pieces of legislation in the form of Parliamentary Acts. Local Authorities contribute to the achievement of MDGs in light of better service provision like water, schools and clinics, poverty reduction and promoting gender equality inter alia. As the 2015 MDG deadline draws nigh, the million dollar question is, will Local Authorities manage to meet the deadline and achieve the MDGs? In light of this question, the research to be carried out shall therefore attempt to evaluate the ability of Local governments in Zimbabwe to catch up with the 2015 MDG deadline. The research shall shift its focus to rural local authorities, whose local citizenry is hard hit by the poverty plague and bedeviled by services delivery challenges. Much emphasis will be on MDGs 1, 3 and 6 since they are the ones prioritized by the country. The research will also highlight the challenges faced by local authorities in trying to achieve the MDGs and ultimately meet the deadline and there after suggest possible strategies to be employed in trying to accelerate the achievement of the MDGs. The manner in which this research will be conducted will be revealed as the proposal unfolds.

1.1 BACKGROUND OF THE STUDY
After the end of World War II in 1946, former President of the United States of America, Harry S urged for American and European countries to assist in the accelerated development of the third world countries, Muchada and Gwede (2000). This marked idea of global development which was then harmonized by the United Nations. The United Nations adopted the MDGs during the Millennium Summit held in New York in the year 2000. It adopted the millennium declaration which united world leaders into militating against poverty. To this end, eight MDGs to be met by world governments by the year 2015 were adopted and they are as follows: 1, Eradicate extreme poverty and hunger, 2, Achieve universal primary education, 3, Promote gender equality and empower women, 4, reduce child mortality, 5, improve maternal health, 6, Combat HIV, AIDS, Malaria and other diseases, 7, environmental sustainability and 8, create global partnership. According to the MDG Progress Report (2004) 6.7 million people in 1991 were in need of food aid. By the year 2002, the report revealed that the number had shot up to 7.2 million. Malnutrition on the other hand rose by 20% in 2002, from 13% during the year 1999. The trends in poverty were showing that the country was a bit off track in terms of meeting the 2015 MDG deadline. The MDG progress report (2004) also revealed that by the year 2002, 69% of the population was living in poverty, rising from 57% in 1999. The poverty rate was very high in both urban and rural areas. The MDG progress report (2012) states that the rural populace suffered most as compared to their urban counterparts. Despite positive economic growth since the year 2009, there hasn’t been positive growth in employment and poverty reduction. According to the MDG Progress Report (2012), in the year 2001, 72.3% of the populace was said to be poor while 62.2% of the households were judged poor. Formal employment deteriorated as many workers had poor paying jobs leading to an increase of poverty and hunger. Notwithstanding progressive growth in the economy between 2010 and 2012, the 2012 MGD Progress Report reveals that tendencies in proper employment and agriculture had been dwindling. Contrary to the target of attaining full and industrious employment and descent work for all, including women and young people, the capacity of the country to meet the 2015 deadline still remains questionable.

Advancement in the reduction of extreme poverty and hunger relies heavily on the agricultural performance of the country. However, with the ever changing climate and poor rainfall, there is very little hope that the deadline will be met. Bulilima district lies within natural farming region
5 where annual precipitation is very low hence its capacity to successfully meet this goal threatened.

According to the MDGs Progress Report (2012), the country is heading in the right direction in terms of achieving MDG 3. According to the MDG Progress Report (2012) the country has attained gender equivalence at primary and secondary schools in regard to enrolment, completion and literacy. There is however gender disparities at tertiary level. The country has been doing great in terms of promoting gender, but at a macro level. However at domestic level, especially in rural local authorities, gender disparities can still be witnessed. In most rural local authorities statistics reveal in most parts of the world women are the least represented in local governance structures. According to the MDG Progress Report (2002), the status of women in Zimbabwe was low during the year under review and female representation fell by 11% by the year 2002 yet the target is to reach 50% by 2015. Dube (2013) states that the current levels for women representation in parliament remains below the world average of 19%. One of the targets of MDG 3 is to increase the number of seats held by women in parliament, UNDP (2010). Dube (2013) further states that the levels of women involvement in governance and decision making positions remains a major concern in Zimbabwe and the world over. Nzomo (1994:p204) argues that while women constitute a larger fraction of the electorate, they are still not elected for political office and very few are put up as candidates. Although there has been progress recorded in women participation, it is clear that the progress is not occurring at the desired rate, Dube (2013). If the situation continues this way, it would be quite impossible for the 2015 MDG deadline. Again it is against this background that the research to be carried out will attempt to measure the capacity of rural local authorities to meet the 2015 MDG deadline.

One of the goals prioritized by the country is MDG number six, combating HIV/AIDS, Malaria and other diseases. Local government have a social role to play in trying to achieve this goal. Bulilima RDC has HIV/AIDS enshrined in its social services policy. The HIV pandemic has affected a larger fraction of the country’s population and the rural community suffers most. The target of this goal is have halted by 2015 and began to reverse the spread of HIV/AIDS. While local authorities are working hard to provide health facilities and infrastructure such as clinics, their financial capacity is weak there by threatening their potential to achieve MDG 6 by 2015. According to the MDG progress report (2002), by the end of 2002, UNIAIDS estimated that 2.3
4 million people had fallen prey to HIV and the adult prevalence rate was 34%. In 2002, Zimbabwe was the highest prevalence after Botswana at 36%. The Ministry of Health Aids Programme estimated 600,000 people being infected by 2003. However, according to ZDHS 2010/11, 15% of adults were positive, recording a 3% drop from the 2005 -06 figures. Counter to the national target to cut HIV prevalence to 10% by 2015, the HIV rate seemed to be escalating, leaving doubts as to whether or not the 2015 deadline will be met. It is against this background the research wants to measure the extent to which local authorities will manage to meet the 2015 MDG deadline. The study shall therefore be carried out in Bulilima District and the Local Authority whose offices are located in Plumtree Town.

1.2. STATEMENT OF THE PROBLEM

Local Authorities are facing service delivery challenges which directly affects the achievement of the MDGs. Failure to deliver services such as water, health and education has made it almost impossible for the Local Authorities to record progress towards the eradication of poverty and to combat HIV/AIDS, Malaria and other diseases. Children still walk as far as 5 -10 km to and fro the nearest school in search for education services in Bulilima District. The poor climatic conditions and poor economic performance of the country has turned into a twin catastrophe, hindering both agricultural and economic activity to flourish living the vast majority of the population in the district living under the poverty datum line and also food insecure. Gender equality and women participation on the other hand is still at its perpetual infancy as there is only one female councilor and no female MP at all in the district. While all this is happening, the MDGs are only left with less than a year to be achieved. It is in this light that the research seeks to measure the extent to which Rural Local Authorities will manage to meet the 2015 MDG deadline

1.3. RESEARCH OBJECTIVES

1. To understand what the MDGs are
2. To understand the role of Local Authorities in the achievement of the MDGs
3. To assess the progress made by Bulilima RDC towards the achievement of the MDGs hitherto
4. To measure the extent to which Bulilima RDC will meet the 2015 MDG deadline
5. To suggest strategies for rural local authorities to accelerate the achievement of the MDGs

1.4. RESEARCH QUESTIONS

1. What are the MDGs?
2. What is the role of Bulilima RDC in the achievement of the MDGs?
3. Are rural local authorities in the right track in terms of meeting the prioritized MDGs?
4. With rate at which progress is taking place, will rural local authorities manage to meet the 2015 MDG deadline in respect of MDGs 1, 3 and 6?
5. What are the best possible strategies that can be used to try and meet the 2015 MDG deadline?

1.5. JUSTIFICATION OF THE STUDY

The 2015 MDG deadline draws nigh and the need to assess the progress towards the achievement of has never been greater. The purpose of this study is therefore to access the extent to which rural local authorities will manage to meet the 2015 MDG deadline in respect of MDGs 1, 3 and 6. It is also the purpose of this study to assess whether or not rural local authorities are in the right track in towards meeting the MDGs. This study will also suggest the strategies that rural local authorities can employ in to try and accelerate then achievement of the MGDs.

1.6 SIGNIFICANCE OF THE STUDY

5
The study shall be conducted in partial fulfillment of the BSC Local Governance Studies Honors degree at the Midlands State University. The study will be of great benefit to the University as it will add on to the existing literature on the subject of the MDGs. The study shall also be a blessing to the university as it shall attempt to fill in the existing gaps in literature. The study will also serve as an analytical framework for future research. Depending on the outcomes of the study, the study may also be beneficial to Bulilima RDC in which the study will be conducted and other Rural Local Authorities as it shall suggest strategies to be employed in order to accelerate the achievement of the MDGs

1.7. DELIMITATION

Bulilima Rural District Council is one of the ten Local Authorities in Matebeleland South Province. The RDC was initially proclaimed in 2002 after the split of the Bulilima-Mangwe Rural District Council. The former was split into three administrative authorities, namely Bulilima R.D.C, Mangwe R.D.C and Plumtree Town. The district shares its boundaries with Tsholotsho to the North, Matobo and Umguza to the East, Hwange National Park and an international boundary with Botswana to the West lastly with Mangwe to the South. The Council offices are located at the corner of Main Street and Station Road in Plumtree Town. There are 22 wards in the district and all have elected councilors. The district is a climatic marginalized region and spans an area of 553636, 85 hectares and is divided into two communal lands Mpimbila and Natane communal lands. It has a population of 145 917 people. It lies in agro- ecological region 4 and 5 which experiences fairly low total annual rainfall of 450 -650mm. It is subject to periodic seasonal droughts and severe dry spells during the summer season and is uncertain for cash cropping. The farming system therefore in accordance with natural factors, is biased to livestock production. Although livestock farming is the main economic driver for communities in this district, the district is prone to frequent droughts and this impact negatively on livestock farming. Maximum river flows in the district are in summer and most dams are currently silted. In some parts of the district such as Luvuluma in Masendu ward, livestock and people rely on a few boreholes as source of water. As a means to supplement low crop agriculture, there are irrigation schemes like Moza, Somnene and Tshankwa. The district’s key economic drivers include livestock rearing, irrigation, hunting and to an extent remittances from the diaspora.
1.8. LIMITATIONS

Time factor. The research is to be carried out within a short period of time. However the researcher shall try to manage time and make use of the semester break to do data collection.

It would be difficult for the researcher to strike a balance between lectures and field research as there will be a lot of travelling to and fro the research field which is about 300km away from the university where the researcher is based. The researcher shall however try and compress all the activities to be done on the field during the one week semester break.

It would also be a challenge to meet up with various departmental heads whose ministries are key players in the prioritized MDGs as they might be having their own commitments. To this end the researcher shall try and make appointments well in advance so as to counteract this challenge.

1.9 SUMMARY

Trends show that progress in trying to meet the prioritized MDGs has been taking place a very slow pace. Poverty has always been on the rise while the country has been facing economic hardships. Even current trends reveal that the country is not at the right track in terms of achieving MDG 1. Notwithstanding the progress that has been recorded in promoting gender, the capacity of rural local authorities to meet the desired target by 2015 still remains questionable. The country has always worked hard and came up with a robust HIV policy aimed at achieving a zero HIV infection rate. However, there are still many cases of HIV infections in rural areas. Rural authorities are faced with service delivery challenges as they fail to deliver such services as water, clinic, health and let alone promote gender. Their capacity to meet the 2015 MDG deadline is therefore threatened. The next chapter shall now focus on reviewing available literature on the subject.
2.0. INTRODUCTION

The subject of the Millennium Development Goals is one that has attracted various scholars across the globe. Many have written on this subject and hence it the business of this chapter to review the available literature on Millennium Development Goals. It is in this chapter that literature on the role of Local Authorities in the achievement of MDGs inter alia will be explored. Much emphasis shall be on literature pertaining to goal number 1, 3 and 6 as there are the national priorities. Literature review is the process of finding about the previous work from a range of sources, Melville and Soddard (1996:18). According to Bless and Smith (1995) literature review refers to the analysis of what others have said concerning a particular topic. This chapter will therefore compare different views from different sources in order to comprehend the subject of millennium development goals and rural governance and ultimately the role played by rural local authorities in the achievement of the MDGs.

2.1. LOCAL GOVERNANCE

In this research the term local governance and local government will be used interchangeably as one cannot talk about local governance without the mention of local government. For one to fully comprehend the term local governance it is therefore imperative to begin by demystifying the term local government. Kauzya (undated) defines local governance as a “multifaceted compound of multifaceted compound situation of institutions, systems, structures, processes, procedures, practices, relationships, and leadership behavior in the exercise of social, political, economic, and managerial administrative authority in the running of public or private affairs”. He further states that local governance is therefore the exercise of authority at a local level. The Government of Zimbabwe (2004) defined local government as “the creation of participatory and democratically elected structures that can identify with the needs of the people at grassroots level and ensure the translation of those needs into actual service provision and maintenance of
essential services and infrastructure on a sustainable basis”. Teaford (1997) defined local governments as bodies empowered to exercise authority over a subnational territorially defined area. According to the Ministry of Local Government and National Housing (1999) local governments are semi-autonomous elected authorities which are responsible for the planning and implementing specific functions. Chakaipa et al (2010) is of the view that local government is the creation of a lower sphere of governance for the purpose of executing functions that central government is far too removed to carryout effectively. He further states that because of its proximity to the people, local government can respond to the local needs. Volsoo, Katzed and Jeppe in Chakaipa et al (2010) are of the view that local government is a “decentralized representative institution with general specific powers devolved upon it and delegated to it by central government in respect of a restricted geographical area within a nation or state in the exercise of which it is locally responsible and may carryout degree act autonomously”. Meyer (1999) on the other hand is of the view that local governments are self-governing entities within an elected system which are subsidiary members of the government bestowed with powers and sources of revenue to render specific services and to regulate the geographic, social and economic development of defined areas.

According to a speech by Minister Chombo in DeVisser (2010) key among local authorities are Rural District Councils charged with the mandate to deliver services as well as stimulate general development in their local areas. Chakaipa et al (2010) state that “the raison d’etre for the establishment of Local Governments by many governments is the provision of services at affordable costs to the local communities in a more responsive and effective manner”. In Zimbabwe the existence of Local Government is enshrined in constitution and acts of parliament. Sections 274 and 275 of the constitution provides for the establishment of urban and rural local authorities respectively. Section 275 subsection 1 of the constitution states that “there are rural local authorities… to represent and manage the affairs of the people in rural areas.” Section 8 of the Rural District Councils Act chapter 29:13 provides for the establishment of Rural District Councils. Section 74 of the Rural District Councils Act provides for the development functions of Rural District Councils one of which is to promote the development of the council area inter alia.
Machacha (2011) concluded that local authorities have a very significant role in the implementation of programs like the MDGs because of its proximity to the grassroots. He further stated that Local Authorities are closer to the people and they respond to the people’s needs hence they can easily implement and monitor development projects in their localities. The nexus between rural local governance and the achievement of the millennium development goals is therefore imbedded in the developmental role of local authorities enshrined in the legal framework within which local government operates.

2.2 HISTORICAL BACKGROUND OF THE MDGs.

The historical genesis of the MDGs can be traced back from as early as the 1950s. The period 1950 – 1980 witnessed positive progress in the economy across the developing world [ibid]. Differing from what was obviously expected, this growth did not however promote good living for most people, [ibid]. [ibid] states that economic growth became slower for most developing countries during the period 1980 – 2000 as compared to the preceding three decades. Poverty became dominant in most of these countries as a result of poor economic performance. According to Eberiei (2000), this resulted in the introduction of the structural adjustment programs (SAPS) and structural market reforms such as privatization were introduced as a way to counter the slow economic growth. Gsanger (1996) assumed that poverty reduction had to be attributed to higher economic growth but however Deker (2003) argued it was during this period that poverty was at its peak in developing countries because of these (SAPS). This reveals that poor economic growth was by no means the sole cause for poverty in the developing world. According to Masry (2003:472), the first Human Development Report (HDR) released by the UNDP in 1990 urged that economic growth by no means ensured social development. Despite the growth in the economy, poverty still manifested in most countries showing a disconnection between economic performance and poverty.

The escalating rate of poverty among other imbalances in development in the 1980s saw a series of international conferences in the UN aimed at dealing with various aspects of social and ecological development, Bhoroma Musahiba and Nhekai (2007). These conferences include: The World Summit for Children (1990), The Rio Summit (1992), The International Conference on
Population and Development, Cairo (1994), The World Summit for Social Development. Copenhagen (1995), World food Summit (1996), Habitat II (1997), Population Conference (1999) Beijing +5 (2000), Machacha (2011) This decade was labeled as “the decade of world conferences”. The Copenhagen World Summit for Social Development adopted a 10-point Declaration on Social Development that later shaped the foundation of the MDGs, [ibid]. At the end of the “decade of world conferences” there was harmony on many development linked matters paving way for the adoption of the Millennium Declaration, [ibid]. Machacha (2011) states that the Millennium Declaration was adopted at the Millennium Summit held in New York in September 2000. According to Lancent etal, (2004), the Millennium Declaration was signed by 181 countries and it translated into eight Millennium development goals for development and poverty eradication. This was the largest gathering ever of heads of state and governments. The UNDP (2004:5) Status report pointed out that it was during this summit that countries, rich and poor vowed to do all they could to wipe out poverty, promote human dignity, equality and achieve peace, democracy and environmental sustainability leading to the birth of the MDGs.

2.3 OUTLINE OF THE MILLENNIUM DEVELOPMENT GOALS.

The first goal seeks to do away with extreme poverty and hunger, Government of Zimbabwe (2012). The goal targets to halve between 2002 and 2015 the proportion of people whose income is less than the Total consumption Poverty Line (TCPL), Government of Zimbabwe (2012). According to Magondo (2011) the TPCL is the level of income at which people can meet their basic food and non-food needs. Walls (2010) states that goal number also pursues to cut up the fraction of people who suffer from hunger and whose income is bellow a dollar a day by the year 2015. Generally goal number 1 targets to halve between the years 2000 to 2015 the proportion of people suffering from poverty. According to Bonfigliiali (2003), human poverty is the deprivation of vital abilities like lengthy and healthy life, information, financial resources and community participation. The Organization for Economic Cooperation and Development (OECD) in Hendley, Higgings and Sharma (2004) defines poverty as intertwined forms of denial in financial, human political, socio-cultural and defensive spheres. Poverty can however be defined as the inability to access basic needs such as water, food and shelter among other things.
Low human development is often connected to poor health and lack of any sort of education as well as liberty and political voice to choose what is best to improve their wellbeing, Sen (1999).

Another target of MDG number one is to achieve full and productive employment and descent work for all including women and young people, Government of Zimbabwe (2012). The goal also aims to lessen by two thirds between 2002 and 2015 the fraction of underweight children under 5, UNDP (2004). The Government of Zimbabwe (2004) states that Zimbabwe’s target is to lessen the under 5 undernourishment by two thirds to 7% by the year 2015.

Goal number 2 pursues to attain universal primary education, Magondo (2011). This goal targets to guarantee that by 2015, children everywhere, boys and girls alike will be able to complete a full course of primary schooling, Magondo (2013). According to the World Bank (2003), the indicator to the achievement of goal number 2 are primary school completion rate, net enrolment ratio in primary schools and teacher pupil ratio. The Government of Zimbabwe (2012) points out that the literacy rate of 15-24 year olds, male and female, is another indicator to the achievement of MDG 2. Zimbabwe’s target is to ensure that boys and girls alike will be able to complete a full programme of primary education.

Gender equality and women empowerment is the third of all eight MDGs, Kabeer (2005). Kabeer (2005) also goes further to define women empowerment as giving women the ability to make choices. This goal has two targets. Target 3A is to remove gender inequality in primary and secondary education by the year 2015. The second Target, 3B, is to increase the participation of women in decision making at all levels and all sectors to a 50:50 balance by 2015, Government of Zimbabwe (2012). According to the Government of Zimbabwe (2012) attaining equivalence in gender and empowering women and girls both encourages equitable economic development and long term stability as well as enabling the realization of other MDG targets such as improving maternal health, reducing child mortality a and reducing poverty and hunger. MDG 3 can therefore be said to be the window which the achievement of all other MDGs can be seen.
The fourth aims at reducing by two thirds, by 2015, the under 5 mortality rate, Government of Zimbabwe (2012). The pointers to this goal are under 5 mortality rate, infant mortality rate and percentage of one year olds given a vaccination against against measles, Government of Zimbabwe (2012).

Goal number 5 is geared towards the improvement maternal health. According to Magondo (2011) goal five aims to lessen by 75% maternal mortality by 2015. Another target of this goal is to achieve by 2015 universal access to reproductive health, Government of Zimbabwe (2012). It further defines maternal health as the loss of women while expecting, within 42 days of termination of pregnancy notwithstanding the duration and site of the pregnancy, from any reason connected to as aggravated by the pregnancy or its management, but not from accidental or incidental cases. According to Moon (2010), Africa bedeviled by stern challenges in affecting the realization of the MDGs and progress has been even lower in achieving maternal mortality. According to Sachiti (2011), Zimbabwe is unlikely to achieve the maternal mortality rate target by 2015 as the capacity of health care systems has deteriorated.

It is the business of the sixth goal to combat HIV/AIDS, malaria and other diseases. The aim is to have stopped by 2015 and begun to counteract the spread of HIV/AIDS, Government of Zimbabwe (2012). Other targets include to achieve worldwide access to treatment for HIV/AIDS for all those who need it and to stop and reduce the prevalence of malaria and other major diseases, Government of Zimbabwe (2012). Treatment must therefore be affordable or provided free of charge to people and pro-poor to cater for those who cannot afford it. This goal has a zero tolerance on HIV/AIDS as it seeks to reverse its spread and militate against the spread of malaria and other diseases. According to Bicego, Boerma and Rosmans (2002), most of the Sub-Saharan Africa countries women of child bearing age are the most affected by the HIV/AIDS pandemic although HIV/AIDS, affects everyone including their male counterparts and has far reaching implications, socially and economically. According to the government of Zimbabwe (2012), 15% of the adults aged between 15 and 49 live with HIV and the levels have been rising. The Government of Zimbabwe (2012) acknowledges that women have a higher prevalence than men. This shows that vulnerable groups are more affected by the HIV/AIDS pandemic. The Government of Zimbabwe (2004) also emphasizes that the prevalence of diseases such as
HIV/AIDS and malaria has a direct impact on the economy by lowering the production and earnings. MDG 6 therefore seeks to combat HIV/AIDS malaria and other diseases.

Goal number 7 seeks to safeguard environmental sustainability. According to the UN (2012) one of the targets of this goal is to “integrate sustainable development principles to reverse the loss of environmental resources”. This goal also targets to make sure that there is access to safe drinking water and basic sanitation among other targets, Magondo (2011). According to the Government of Zimbabwe (2012) this goal includes the proportion of land covered by forest, CO2 emission, total per capita and GDP inter alia.

The last goal seeks to develop a global partnership, Magondo (2011). According to Well et al (2010) the goal seeks to develop free interchange and fiscal system that is rule based, foreseeable and non-discriminating, includes a commitment to good governance and poverty reduction nationally and internationally. This goal seeks to cut across geographical boundaries and create boundaries based on similar interests rather than geographical location. According to Magondo (2011), this goal aims to address the least development countries’ special needs and this includes tariff and quota free access for their exports. According to the MDG Report (2012), the goal targets to create an open trading financial system, address special needs of land locked developing countries and deal broadly with the debt problem, provide access to essential drugs in developing countries and to avail the benefits of technologies especially information and communication.

Progress in achieving the Millennium Development Goals is still remains irregular as outlined in the 2010 MDG report. Most Sub-Saharan Africa countries and other parts of South and South-East Asia are off track with regard to achieving the MDGs, Magondo (2011). According to the Government of Zimbabwe (2012), it is doubtful that some of the targets will be achieved by 2015, only a few have the potential to be achieved. Judging from the status and trends, the likelihood of the MDGs to be achieved by the year 2015 is very low.
2.4. THE ROLE OF LOCAL AUTHORITIES IN ACHIEVING THE MDGS

Local Authorities are charged with a service delivery mandate which if well implemented would contribute significantly to the achievement of the MDGs. According to Hill (1995), it is through decentralization that Local Authorities provide services to the public. Chakaipa et al (2010) postulates that the main reason for the existence of local governments is the provision of services. Beall (2005) states that it is the purpose of local governments to improve service delivery through democratic representation. This ensures participation as people are directly involved in the provision of services.

Segalo (1997) further states that participation ensures that citizens have a say in what directly affect their lives. Oyebanji (2009) notes that “it is important to realize that even though MDGs are global, they can most effectively be through action at local level as it is the level that safe drinking water, health and education are provided”. However the interference of central government in local government service provision affects the duty of local authorities to provide services effectively and as result affects their capacity to achieve the MDGs. It is in this light that this investigation seeks to assess the role of Local Authorities in the achievement of the MDGs.

According to Magaondo (2011), local authorities are responsible to raising funds for the implementation of MDGs programs in their areas of jurisdiction. The achievement of the MDGs depends on the availability of financial resources and it is in these local bodies that funds are collected and used for the implementation if the MDGs. Magondo (2011) emphasizes that Local Authorities have the duty of mobilizing financial resources for the development of their local areas. According to Coutinho et al (2010), Local Governments are authorized by legislation through parliamentary acts to fund-raise through various service charges. This enables councils to have the financial resources for the implementation of the MDGs at their disposal. According to Bonfigliiali (2003), Local Authorities also receive grants from central government and have the power to collect taxes and fees. Section 301 of the constitution of Zimbabwe entitles local governments to not less than five percent of the national income. Local Authorities are therefore the revenue collecting authority in their local areas. Funds mobilized by Local Authorities can
therefore be used in the implementation of the MDGs and simultaneously fulfilling their service provision mandate.

Citizen participation also marks a central element in the role of Local Authorities in the achievement of the MDGs. MDG number 3 seeks to achieve gender equality and women empowerment, Government of Zimbabwe (2012). Target 3B of the goal is to increase the participation of women in decision making in all sectors and at all levels. On the other hand lack of participation would affect the achievement of MDG number 1 (eradication of extreme poverty and hunger). Green (2013) defines poverty as the exclusion from decision making. Citizen participation and the eradication of poverty can therefore never be separated. Magondo (2011) argues that citizens are involved in governance at local levels and their contributions are part of the Local Authority’s vision and mission. Local Authorities therefore provide a platform for citizen participation directly fulfilling MDGs 1 and 3. According to Kauzya [ibid] local governance is indorsed in most African countries as it is believed to provide an essential arrangement through which communities can be involved in the fight against poverty at a close range. According to Gaventa and Valderrama (1999) local governance provides citizen participation, political participation and social participation. It is through citizen and social participation that local authorities achieve MDG 1 which is the eradication of extreme poverty and hunger. Through political participation, MDG 3 is achieved as women will also participate in politics.

Through participation, citizens can be made aware of the MDGs and therefore participate and in their implementation and achievement. The Urban Councils Act Chapter 29:15 and the Rural District Councils Act Chapter 29:13 gives residents the right to attend full council meetings and contribute to matters that will be discussed. However it is important to strengthen the capacities of both the local authority and the citizenry in order for them to engage in meaningful participation in local governance. Kauzya [ibid]

Local Authorities are endowed with the power to craft by law to govern their areas of jurisdiction. The New Oxford Dictionary defines by-laws as “something not different to any other law of the land and can be enforced with penalties, challenged in court and must comply
with other laws of the land such as country’s constitution”. Section 22 of the Urban Councils Act chapter 29:15 gives Urban Councils the power to make by-laws. In the rural district councils act the power to make by-laws is enshrined in section 288. Local Authorities can therefore make by-laws which protect the environment thereby facilitating the achievement of MDG number 7 which seeks to achieve environmental sustainability. Local Authorities therefore play a pivotal role in the achievement of the MDGs.

2.5 STRATEGIES EMPLOYED IN THE ACHIEVEMENT OF MDGS

*Goal 1 Eradication of extreme poverty*

Of the eight millennium development goals, Zimbabwe prioritized three on which the eradication of extreme poverty and hunger is one of them. Various countries have adopted different strategies in the fight against extreme poverty. The Sustainable Agriculture and Rural Development strategy (SARDS) is one of the strategies commonly used in a bid to achieve MDG 1, Machacha (2011). He adds that the strategy includes governments providing inputs for agriculture con to farmers which includes the Subsidy Programme and the Responsible Fertilizers Use Strategy. The Government of Ethiopia (2007) used this strategy as specifically Agriculture-Based Development Strategy which promoted the supply of various inputs. This strategy seemed effective as it realized a 90% increase in food stability between 1993 and 2005 Machacha (2011). Malawi on the other hand employed the Fertilizer Subsidy Program and this program saw the country yielding over 3.2 million tons of maize in 2007, UNDP Global MDG report (2010:13). One can therefore say that this strategy is effective as it yielded good results in improving food security in some African countries. Ghana also employed the same strategy in its Fertilizer Subsidy Programme (FSP). Tanzania engaged in the Agricultural Development Strategy (ASDS) commonly known as the “Kalomo Kwenza” (agriculture first) and Bangladesh on the other hand used the Imputs Assistance Cards as a way of achieving MDG 1, Machacha (2011).

Serbia revealed used the Employment Intensive Growth Strategy as a way of alleviating poverty, Machacha (2011). He further states that it is because of this strategy that Serbia’s unemployment rate fell from 62% in 1993 to 45% by mid-2009. This strategy was geared at
making available full employment and descent work for all so as to reduce economic poverty thereby achieving MDG 1. Machcha (2001) states that the country dealt with barriers to unemployment paying particular attention to issues adequate transportation preventing disadvantages like gender discrimination and educational disadvantages inter alia. The Egypt MDG Report (2010) revealed that Egypt also used the employment growth strategy and it is this strategy which accounted for a decrease in the unemployment rate in the country to 9.4% by the end of (2009).

Ferreira and Signoux (2008) pointed out that China adopted the Reducing Inequalities Strategy as a way of eradication poverty. According to Macahcha (2011) this strategy revolves around embracing pro-poor growth strategy which prioritizes the poor the in economic growth. He goes on to state that the number of poor people has fallen to less than one quarter of the actual value. The UNDP Global MDG Report (2010) revealed that USA also employed the same strategy of equitable distribution of resources and this led to significant reduction of extreme poverty and hunger.

Equitable distribution of resources is one of the strategies that has been adopted by some countries in the eradication of extreme poverty and hunger. Seers (1969) defines development in terms of reduction of inequality, which is the gap between the rich and the poor. Inequality is therefore an indication of underdevelopment. The UNDNP Nepal Report (2010) observed that food distribution in this country is influenced by social and cultural norms which are strongly biases against women. Machacha (2011) felt that this affected the distribution of resources in Nepal because of its strong bias towards men. If poverty is to be alleviated, resources must be distributed equitably, targeting the disadvantaged groups such as women, the poor, and the disabled and try to bridge the gap between the rich and poor in a bid to reduce inequality. The UNDP MDGs Breakthrough Strategy Internal Document (2010) pointed out that USA managed to use Equitable Distribution of Income Strategy which resulted in poverty falling from 50% to 25% between 1990 and 2000. The Equitable Distribution of Income Strategy can therefore be practiced in developing countries in bid to achieve MDG 1.
Chambers (1998) states that development must be pro-poor. Costa et al (2009) noted that crafting pro-poor macroeconomic framework and creation of an enabling environment are critical to the eradication of poverty in many countries which successfully implement these strategies. Local Authorities are the bodies responsible for the creation of an enabling environment for businesses to flourish. The strategy emphasizes that macro-economic stability is essential because stability is associated with high rates of deflation, Machacha (2011). He further states that the strategy also involves coordinating of appropriate monetary and fiscal policies with relevant rates. Conccico, Kim and Zhang (2009) pointed out that Brazil’s MDG breakthrough strategy focused on a fiscal policy strategy which sealed up public investments to crowd-in the private sector, which increased productive capacity through stimulating food production in Brazil.

In an effort to eradicate extreme poverty and hunger, Zimbabwe employed a number of strategies. Zimbabwe chose to use the number of people below the TPL and percentage of the population below the Total Poverty Consumption Poverty Line as indicators of the eradication of poverty and hunger, Machacha (2011). He adds that one of the strategies employed by Zimbabwe was the implementation of the Land Reform Programme which aimed at providing the majority the people with land to support their agriculture production capacity. According to Moyo (1995) land underpins the economic, social and political lives of the majority of the people in Zimbabwe. Gadzunwa (1995) echoed Moyo as he stated that land is one of the major economic emancipation tools which the country can use in order to empower its people. However land on its own is not enough to enhance economic growth through agriculture but it also needs agricultural imputs such as machinery, fertilizer and even human capital. Though Sachikonye and Makube had different perspectives in the subject, they noted that the allocation of land without access to means of production is meaningless.

Another strategy that was used by the Government of Zimbabwe is the National Economic Revival Programme (NERP). According to Masuku (2003) the NERP sought to put in place measures to enhance the country’s capacity to generate foreign exchange so as to facilitate economic recovery. Social economic performance is a necessary tool and must be the ultimate goal to increase the GDP and GNP growth of the country hence the achievement of MDG 1. Mhono (1993) pointed out that structural adjustment programs made a serious blow to the
economic performance of the country. Magando (2011) argued that the country has to come up with an economic turnaround strategy if the MDGs are to be achieved. Mhone (1993) concluded that these strategies will be able to offer solutions to the current challenges to some extent.

The National Food and Nutrition Policy was also ratified by the government of Zimbabwe as a way of eradicating extreme poverty and hunger. The strategy also addressed the issue of malnutrition in bid to achieve MDG 1. One of the indicators to achieving MDG 1 is the proportion of the under-fives that are malnourished. To this end, the country put in place a National Food and Nutrition Policy framework to guide the nutrition investments. To complement this policy a Food and Nutrition was council established under the auspices of the President’s Office and cabinet to oversee and guide national response to food and nutrition challenges facing Zimbabwe. UNDP Part 3 (1996). Machacha (2011) points out that there are a number of nutrition programs in place, among them are Child Supplementary Feeding Programme which was supported by the government and other multi-international partners.

**Goal number 3: promoting gender equality and women empowerment.**

Gender equality and women empowerment is the third of the eight MDGs Kabeer (2005). This goal seeks to give women the ability to make choices. It targets to increase women participation and increase women participation in politics and eliminate gender disparity in primary and secondary education. The UNDP global report (2010) revealed that investing in opportunity for girls and women has strong multiple effects across all millennium targets. In Nepal, they adopted the Targeted Scholarship Scheme for Girls as a strategy to eliminate gender disparities in primary and secondary education, (Nepal MDGs Report 2010). Machacha (2011) states that the scholarship targeted girls and disabled children and this maintained high enrolment rates in Nepal.

The Legal and Constitutional Reforms Strategy help to increase women’s economic and social empowerment, Machacha (2011). The UNDP Global MDGs report pointed out that in Cambodia and Kyrgyz Republic, women are more likely to be in landless or have significantly smaller
pieces of land than that of their male counterparts. Legal reforms can therefore be aimed at gender affirmative action and to give women access and control resources which can therefore be employed in such countries. The government of Uganda established the Uganda Export Promotion Board (UEPB) which carried out gender sensitive value chain analysis in such sectors as coffee dairy and tourism. (UNDP 2010). The board provides technical support for women, Machacha (2011). The establishment of such boards can help women be involved in flourishing economic activities thereby economically empowering them, hence the achievement of MDG 3. The UNDP report (2010) noted that although there are 17 pieces of legislation that have been put in place to enhance women in all sectors of the economy, Zimbabwe chose to look at the number of women in government decision making bodies in the private sector as indicators for the school targets. According to Zimbabwe HDR (2000:121), women rights gained recognition in Zimbabwe in 1980 when the country gained independence.

*Goal 6: combating HIV/AIDS malaria and other diseases.*

The main target of this goal is to halt and begin to reduce the spread of HIV. One of the indicators to this goal is the prevalence between males and female aged between 15-24 years. According to UNDP (2004) the other monitoring tool was to analyze the condom use on the last high risk sex as well as proportion of 15-24 years with comprehensive knowledge of HIV/AIDS. The Global MDGs Report (2010) states that universal access to anti-retroviral therapy (ART), condom use and knowledge of HIV transmission contributes significantly to the achievement of the goal. Embodias indicated that condoms use has more than doubled after the introduction of the 100% Condom Use Programme which lead to the decline of HIV prevalence from 1.2% to 0.7% in 2003 to 2008, which is well beyond the 2015 target of less than 0.9%, Machacha (2011). The condom use strategy therefore proves to be an effective strategy in the reduction of HIV/AIDS. Using this strategy, the UNDP (2010) revealed that Ethiopia reduced the transmission of HIV from 7.3% in 2000 to 2.1% in 2010. This further proves the effectiveness of condom use in reducing HIV/AIDS prevalence. Countries should therefore engage in massive distribution of condoms, both male and female so as to achieve MDG 6. However the distribution of condoms alone without capacitating the community on how to effectively use
them is meaningless. If MDG 6 is to be met by 2015, countries should not only distribute condoms but must also sensitize the communities on how to properly use them.

Nunn et al (2009) highlights that Brazil employed what they called the National STD and AIDS programme. Machacha (2011) states that this is one good example on an integrated approach in tackling the spread of HIV. Though the strategy proves effective in some countries, some still face challenges for example in Egypt, knowledge is poor among the 15-24 year age group and only 11.2% of young people are aware of abstinence and condom use, UNDP MDGs Egypt Report (2010).

Loewenson (2000) pointed out that it would be difficult to for Zimbabwe to meet this goal by 2015 because of both direct and indirect reasons which he defines as basally political. Keane (2002) however argued otherwise as she pointed that it is all about government commitment towards achieving the set goals and she strongly emphasizes that politics have a strong impact. Despite the politics involved MDG 6 can still be met if only knowledge is spread and proper prevention methods are employed.

The WHO Report (2000) pointed out that National Coordination and partnerships are key to detecting treatment of TB. The UNDP MDG Global Report (2010) revealed that new cases of TB increased to 9.3 million in 2007 from 8.3 million in 2000. Berkma et al (2005) added that Asia had the highest incidence of 55% while sub-Saharan Africa had 31%. Lastly Uruguay, through the National TB Control Programme has significantly managed to reduce risks of morbidity and mortality.

2.6 CHALLENGES FACED IN THE ACHIEVEMENT OF THE MDGs.

One of the major challenges bedeviling the achievement of MDGs is lack of finance to fund them. Meorsom Matenga and Satchikonye (2003) echoed that the lack of finance for the implementation of the MDGs is a major challenge hindering their achievement. The Zimbabwe
Human Development report (2009) observed that the national budget statements since 2002 do not contain a single word on the millennium development goals. This shows lack of commitment of the country to the achievement of MDGs. If MDGs are to be met, there is need for prioritization of their targets and giving them a share of the national cake. According to Machacha (2001), failure by the central government to finance the MDGs has serious reparations on their achievement. On the contrary, Speth 2007 argues that there is no need to finance the MDGs specifically as financing of service delivery contributes to the attainment of MDGs. Hence lack of financing cannot be the basis for the non-achievement of the MDSs.

The achievement of MDGs is affected by lack of public awareness. Collier and Hoeffter (2004) argues that the Millenium Development Goals campaign lacks public awareness in most developing countries due to lack of resources. Vigorous efforts in community sensitization on MDGs must be made in order to achieve MDGs. The UNDP (2004) observed that of different sectors in Zimbabwe, civil society is the most informed about the MDGs. Chen and Ravallian (2010) observed that in most governments and local authorities the tendency is that only departments involved in social development know about the MDGs. In addition Bigg and Sattethwaite (2005) maintained that in most cases, the local authority or government and other public sector departments which are not linked to the MDGs will most be aware of the MDGs. Machachacha (2011) adds that the average citizen has not heard of the MDGs although he or she knows about poverty and deprivation from personal experience. However Monograph and Chisvo (2004) argued otherwise as they highlighted that it is commitment which lacks and not awareness.

Magondo (2013) states that debt is one of the key challenges faced in the achievement of the MDGs. According to Oyebanji (2007), debt also acts as a major obstacle that prevents most governments from delivering to poor communities. Debt therefore negatively impact on service delivery and the poor are the hardest hit by the effects making it very difficult to achieve the MDGS. According to www.newzimbabwe.com, Zimbabwe’s debt currently stands at US$9.9 billion and the debt is seen as blocking new funding for its stuttering economy. The debt problem translate to lack of funding for the MDGs, marking a challenge for countries to achieve them by the year 2015. Goal 8 calls on industrial countries to relieve debt, increase aid and give poor
countries fair access to their markets and technology, wall (2009). According to Musakanda (2011), the national debt is a major challenge to sustainable economic development. Sibanda [ibid] notes that debt is also weighing down potential for new investment which is essential the achievement of the MDGs. Zimbabwe is also bedeviled by the lack of employment. The Government of Zimbabwe (2012) states that the size of the informal sector is a major challenge to the economy of the country and this is characterized by high descent work deficit, low productivity and exclusion from social protection.

Policy issues also come to play in the challenges faced in the achievement of the MDGs. Magondo (2011) states that policies within countries can be a challenge in the achievement of the MDGs. He goes further to give the example of the Zimbabwean Land reform policy which crippled the agricultural production of the country. Food security was also threatened and hence the potential to achieve MDG 1. Another example is the indigenization policy which scared away foreign investors thereby crippling the economy of the country. According to Sachiti (2011), the land reform issue needs to be addressed so as to revitalize the large number of who are economically dependent on agriculture. Magondo (2011) notes that favorable investment policies are also essential to the achievement of the MDGs as conducive investment policies will attract investment hence economic development. Magondo (2011) concludes that poor enactment of policies is a constraint to the attainment of the MDGs by 2015.

Weak financial and human resources also negatively impact on the achievement of the MDGs by 2015. According to Sen (1999), weak financial and human resources of local government may hamper on their ability to achieve local development and the expectations for immediate change will often not be met. Dabengwa notes that it is an unfortunate state of affairs that underdevelopment in Africa is attributed to the lack of material resources such as material and technology.

Sachiti (2011) notes that low productivity in agriculture is one of the barriers to achieving the MDGs. Matt (2004) notes that to understand why Sub-Saharan Africa is the continent with the greatest MDG needs, there are structural reasons that have made it the most vulnerable region in the world to a persistent poverty trap. [ibid] notes that most African countries are in sub humid or
arid tropic with few rivers to provide irrigation. African agriculture suffers from erratic rainfall, is vulnerable to high seasonal and inter annual fluctuations and subject to high temperatures, Matt (2004). According to Magondo (2011), the result is poor agricultural production and hence poverty in African countries. Poor agricultural production also results in poor food security. The achievement of the MDGs in most African countries is therefore threatened. The Government of Zimbabwe (2012) revealed that Zimbabwe has also been affected as its irrigation infrastructure is nonfunctional and needs rehabilitation to reduce the reliance on rain-fed agriculture. The lack of adequate irrigation infrastructure therefore impacts negatively on the achievement of the MDGs.

Africa is bedeviled by a high prevalence of diseases. This is a major challenge to the achievement of the MDGs. [ibid] notes that in recent years, the most prominent disease is HIV/AIDS. UNAIDS (2004) notes that Africa is also home to endemic tropical diseases especially water borne diseases. According to Magondo (2011), the combination of a high year round temperatures, adequate precipitation for mosquito breed and human biting mosquitoes have made Africa a global epicenter of malaria. Matt (2004) adds that diseases reduce productivity rate and frustrates foreign investment helping to keep Africa poor hence impeding the achievement of the MDGs. According to the UNDP global report on MDGs (2010), the HIV/AIDS pandemic has aggravated the weak economic growth in many counties due to depleted human Capital which is the foundation to social development. High prevalence of diseases is one of the major challenges affecting the achievement of MDGs in most countries.

Failure by central governments to provide grants has been a major challenge in the achievement of the MDGs. According to Mandaza (2000) the non-disbursement of health grants to local authorities has affected their cash flow as funds meant for other services are directed to finance health services. This directly affects the implementation of the achievement of MDGs as there will be no equitable distribution of resources to cater for other targets as health demands quite more than the other targets. Sibanda (2003) points out that for as long as these problems are not solved the attainment of MDGs will remain a dream for most local authorities in resettlement areas. Machacha (2011) adds that Zimbabwe needs to partner with other stakeholders and private actors in order to achieve the MDGs targets. When it comes to health, Local authorities can
partner with NGOs top fill in the gap left by central government in the provision of grants for health services.

Most governments are affected by a lack of capacity and qualified personnel to the reach the MDGs targets. The economic Commission of Africa (2005) identified lack of capacity by African governments as one of the challenges disturbing the achievement of MDGs. The commission added that capacity is the key to effective and sustainable pro poor targeting. UNDP global report (2010) maintains that although governance is improving in most African countries, a lot still needs to be done to ensure accountability, rule of law and conducive business environment amongst other reforms. Governments, including local authorities should therefore strongly uphold the principles of good governance if the millennium targets are to be achieved by 2015.

Lack of civil participation also affects the achievement of MDGs. Participation is the involvement of citizens in governance and taking their views in policy reforms. According to Saventa and Valderrama (1999), the concept of participation has been widely used in the discourse for social development. Machacha (2011) notes that public participation ensures stakeholders’ buy in development projects of the local authorities. According to Mashambo, Bhosem and Nhekciro (2007), stakeholders dedicate their resources in programs and projects in which they are involved. If public participation is therefore fostered in the MDGs, their implementation and achievement will be made easy.

2.6 SUMMARY.

This chapter focused on reviewing literature available on the subject of the Millennium Development goal. The chapter gave a historical background to the birth of the MDGs and the factors that led to their existence. It is in this chapter that the concept of Local Governance was explained, drawing a nexus between Local Governance and the Millennium Development Goals. A brief outline of all the eight MDGS was given after which the role of local authorities in the achievement of the MDGs was discussed. Strategies employed by various countries to achieve these MDGs were discussed, making a comparative analysis with Zimbabwe in regard to the
three nationally prioritized goals. Finally the chapter highlighted challenges faced by Local Authorities in the achievement of the MDGs. The next chapter shall therefore look at the research methodology, highlighting the manner in which the study shall be conducted and also the research instruments.
CHAPTER III

RESEARCH METHODOLOGY

2.0 INTRODUCTION

Chapter three will focus on the research methodology presenting the manner in which the research will be conducted. The research design together with the study population will be highlighted in this chapter. This chapter will also reveal the data collection instruments to be used in the research. It is in this chapter that the data collection methods shall also be outlined. This chapter will attempt to find a systematic way to address the problem of meeting the 2015 MDG deadline in Zimbabwean rural Local Authorities.

3.1 RESEARCH METHODOLOGY

The research shall make use of both the qualitative and quantitative approach. Creswell (2002) states the in quantitative research, the researcher can be active or passive in carrying out the research. According to Creswell (2002) quantitative research involves the use of figures in presenting the data collected in the research and presenting it through data presentation tools such as tables, graphs and pie charts. According to Rajasekar et al (2013) researchers can simultaneously use both approaches in conducting their research this research shall therefore use both the quantitative and the qualitative approach as they will complement each other and the weaknesses of one can be covered by the strengths of the other for best results. Qualitative research shall therefore be used to try and explain what the MDGs really are. Quantitative inquiry shall also attempt to explain the role of rural Local Authorities in the achievement of the MDGs. The quantitative approach in this research shall be employed to measure the extent to which the MDGs have been achieved vis-à-vis the set targets.
3.2 RESEARCH DESIGN

According to Singleton and Straits (1999) define the research design as a research plan which plans of collecting, processing and interpreting the observations aims at providing some solutions to the problem. In this research, the researcher shall a case study approach so as to have an appreciation of the factors relating to the achievement of the MDGs in rural Local Authorities. The researcher shall use the case of Bulilima Rural District Council to try and measure the extent to which Zimbabwean Rural Local Authorities will achieve the 2015 MDG deadline.

3.3. TARGET POPULATION

The research will target Bulilima RDC employees and Bulilima residents who suffer the effects of underdevelopment and the challenges of achieving the MDGs. The study is also targeted at the Rural District council itself as it is not is pared from the administrative and financial difficulties of chasing after the 2015 MDG deadline given a very short period of time left. Other organisations that have a direct bearing on the achievement of the prioritized MDGs such as DAC and the DSS cannot be overlooked in the study.

3.4. SAMPLE SIZE

Kumar (2011) states that sampling involves selecting a selected number to represent the entire populace upon which the study will be carried out. Erikson (2008) defines a sample size as a proportion or fraction of the population that will be used to respond to the research questions. This study shall therefore use Bulilima district residents of Dombodema Ward to represent the whole district. The study will also make use of council employees, Non-Governmental organizations, the District Aids Council (DAC) and the ministry of Gender and Women affairs. 10 officials and 30 20 residents will be used in the collection of sample data.
3.4.0 SAMPLING METHODS USED IN THE RESEARCH

Two types of sampling will be used in this research. Stratified random sampling and purposive sampling will be used.

3.4.1 STRATIFIED RANDOM SAMPLING

Stratified random sampling divides the population into groups known as the strata then randomly select from these groups, Frink (1995). This research will select the respondents to the questionnaires randomly, giving them an equal chance to be selected.

3.4.2 PURPOSIVE SAMPLING

Purposive sampling will also be employed in collecting data from the sample population. Purposive sampling call for the research to select the respondents according to how much he knows the population basing on the nature of the research. Babbie (1990). Kumar (2011), states that this method is appropriate for situations where the researcher needs to reach a target sample quickly. This sampling technique will therefore be used in this research in the selection of council officials and other government department officials whose departments have something to do with the prioritized MDGs so that the researcher get relevant information to address the problem. This method will also be used even in the selection of Bulilima residents whereby the Dombodema villagers will be used. Purposive sampling will be used to limit the researcher to Dombodema Village as the it is among one of the villages whose populace is hit by the poverty pandemic and would give a clear picture in the on the status of the achievement of MDG 1 in Bulilima District.
3.5 SOURCES OF DATA

Two key sources of data will be used in this research. This study shall make use of primary and secondary data. This will help the researcher obtain the objective and useable data on the achievement of the MDGs in rural Local Authorities. Singleton and Straits (1999) states that primary data involves eyewitnesses or seeing the occurrence of events. Primary data also involves the use of questionnaires and interviews. Secondary data involves indirect evidence attained from primary sources through earlier researches conducted which can be in reports or textbooks.

3.6 RESEARCH INSTRUMENTS

The cogency and dependability of a research project relies heavily on the suitability of instruments. Annum (2014). Annum states that research instruments are data gathering tools which include questionnaires, interviews, observation and reading. According to Gilbert (2002) research instruments are tools used to gather data in research. This research will therefore use instruments like questionnaires, interviews and observations. Interviews give the respondents an opportunity to explain their views and feelings on the subject of reaching the 2015 MDG deadline. Questionnaires and interviews will be used as primary tools of gathering data.

3.6.1 QUESTIONNAIRES

A questionnaire is a research instrument that consist of questions used to gather data from the study population. Gilbert (2002). The information collected will therefore be used to address the imperial of the research. This research will use a both open and closed ended questions. Open ended questions are questions which are constructed to give choices to the respondent in saying anything within the context of the question, whereas closed ended questions have possible answers given which limit the respondent choices in providing his or her response. Questionnaires will be answered by the residents of Bulilima District.
3.6.1.1 MERITS OF QUESTIONNAIRES

- They allow the collection of data in large quantities over a short space of time.
- They use many people who provide a lot of information.
- They are faster and cheaper hence time saving.
- They were used in the absence of the author.

3.6.1.2 DEMERITS OF QUESTIONNAIRES

- Some officials might refuse to give information
- Information may be distorted
- Some respondents may not be literate

3.6.2 INTERVIEWS

According to Kuman and Aaaker (1999) interviews involve direct interaction between the researcher and the respondent in a suitable environment. While interviews are closely related to questionnaires they are entirely independent. However interviews give more information as the interviewer has the opportunity to ask the respondent to explain where they did not understand. Interviews however bring an element of sensitivity as emotions may arise. To counteract this, the researcher will make use of semi-structured interviews in order to obtain data from the research population. The researcher shall interview the CEO of Bulilima RDC, EO Gender and women affairs, the EO DAC and the officer responsible for MDGs in Bulilima, SNV.

3.6.2.1 MERITS OF INTERVIEWS

- Interviews are faster and flexible in collecting information as they probe for more specific answers and repeated questions if the respondent proves that they misunderstood.
- Interviews leave room for explanation to be given to clarify on the responses given.
- The researcher can be able to observe non-verbal responses during the interview.
3.6.2.2 DEMERITS OF INTERVIEWS

- They are time consuming in conducting and travelling.
- They can be affected by the influence of officials who can give biased information.
- They provide information in designated place rather than the natural field setting.
- Some respondents may not be good in articulating facts.

3.6.3 FIELD OBSERVATIONS

Another type of investigation technique that shall be used in this research is field research. Field research involves the researcher physically going to the research field so as to acquire first-hand information pertaining to the area under study. According to Singleton and Straits (1999) field research is useful when dealing with abrupt changing scenarios and is dependent on other instruments to complement the data obtained. Observations will be done by the researcher in Domabodema Ward was done by the researcher in Bulilima District.

3.6.3.1 MERITS OF OBSERVATIONS

- The researcher is an eyewitness of what was taking place.
- Observations are not expensive.
- Observations are used to validate data obtained from interviews and questionnaires.

3.6.3.2 DEMERITS OF OBSERVATIONS

The demerits are:

- Information can be biases as observations can be interpreted in bad light
- Observations use other methods such as questionnaires to confirm the data hence cannot be exclusively relied on.
- Observations are time consuming as the researcher will travel long distance in observing the area under study.

### 3.7 ETHICAL CONSIDERATIONS

As a measure to act within the realms of research ethics, the researcher shall first seek permission to conduct his research from the responsible authorities. The researcher will then introduce himself to the respondents and state his purpose and the purpose of the study the searcher will therefore assure the respondent of confidentiality as it is ethical to respect the confidentiality of the respondents when conducting a research.

### 3.8 DATA COLLECTION PROCEDURES

The researcher will first collect data from the Local Authority which is Bulilima RDC and the mentioned government departments and NGOs before proceeding to Dombodema ward where the researcher shall spend four days with the community gathering data, making interviews and observations. The researcher will make appointments and schedule the data collection proceedings such that it is done in a systematic manner. The researcher shall also try to be time conscious to avoid frustrating the interviewees.

### 3.9 SUMMARY

This chapter delineated the approach that will the study will take in trying to carry out the investigation. This chapter also outlined the population, data collection, presentation and techniques to be employed in this research. The research will use both quantitative and qualitative methods in trying to ascertain whether or not the 2015 MDG deadline will be met in rural local authorities. The research will make use of field observation, questionnaires and interviews as methods of collecting data. The next chapter will then focus on data presentation and analysis.
CHAPTER IV

DATA PRESENTATION AND ANALYSIS

4.0 INTRODUCTION
In this research, data was analyzed both quantitatively and qualitatively. In the qualitative approach, data was described narratively, in word form and in the quantitative approach, data was analyzed in quantity form which is mostly done by figures. The words presented the feelings, opinions and characteristics of the respondents. It is this chapter that the findings of the study will be presented. Data will be presented using graphs, tables, pie charts and doughnuts will be used to present comprehensive outcomes of the study. Data was obtained from Bulilima Rural District Council officials, Bulilima residents and other selected government departments who have a bearing in the achievement of the MDGs.

4.1 RESPONSE RATE
Table 2. Questionnaires

<table>
<thead>
<tr>
<th>Stratum</th>
<th>Total questionnaires</th>
<th>Those who responded</th>
<th>Those who did not respond</th>
<th>% response rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Council employees</td>
<td>10</td>
<td>6</td>
<td>4</td>
<td>60%</td>
</tr>
<tr>
<td>Residents</td>
<td>40</td>
<td>40</td>
<td>0</td>
<td>100%</td>
</tr>
<tr>
<td>Total</td>
<td>50</td>
<td>46</td>
<td>4</td>
<td>92%</td>
</tr>
</tbody>
</table>

Source: Raw data

Table 2 shows the response rate for questionnaires by council officials in BRDC and residents in Bulilima. The overall response rate was 92 %, a very high response rate attributed to the data collection methods employed by the researcher which was direct distribution of the questionnaires. The researcher went to the field and waited for the questionnaires while the respondents answered. 8% of the total questionnaires were not answered and a major
contribution was from council employees attributed to the fact that the questionnaires were distributed at a time when council employees were busy with other commitments.

**Figure 2 shows a graph showing the response of the respondents.**

![Response Rate Graph](image)

Source: Raw data

Fig 2 shows a graph showing the response rate of the respondents and their respective rates. The graph shows that council employees had a 60% response rate. 40% of the questionnaires were not returned. The response rate was just above average and this is due to the fact that some of the council employees committed and never had time to fill the questionnaires. The graph shows that the residents had a 100% response rate marking a 40% difference from that of the council employees. The 100% response rate is attributed to the fact that the researcher waited for the questionnaires as the residents responded.

**Table 3. Interviews**

<table>
<thead>
<tr>
<th>Stratum</th>
<th>Total No. of interviewees</th>
<th>Those who were interviewed</th>
<th>Those who were not interviewed</th>
<th>% response rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government departments</td>
<td>5</td>
<td>3</td>
<td>2</td>
<td>60%</td>
</tr>
</tbody>
</table>

Source: Raw data
Table 3 shows the results of the interviews conducted to selected governments departments. The total percentage response rate was 60%. 40% of the interviews were not conducted due to tall bureaucratic processes of government departments as some departments could not avail information without an approval letter from the headquarters.

4.2 BRDC EMPLOYEES RESPONSE

Figure 3 below shows a pie chart showing council employees’ knowledge about the MDGs.

Figure 3.

A total of 10 questionnaires were distributed to council employees according to departments, making sure that all departments are represented. The total response rate was 60%, meaning that not all questionnaires were answered by the respondents. Of these respondents, 67% proved to have knowledge on what the MDGs are while 33% pointed out that they have no knowledge at all on what MDGs are. Council employees however agreed that the Local Authority has a very
significant role to play in the achievement of the MDGs and displayed an understanding of the role played by the Local Authority in the MDGs.

4.3. THE ROLE OF BRDC IN ACHIEVEMENT OF THE MDGS.

Council employees pointed out that council has a resource mobilization role. They pointed out that council is responsible for liaison with NGOs to supply communities with food and other resources to the achievement of the MDGs council employees also displayed and understanding of the nexus between council’s service provision mandate and the achievement of the MDGs.

They pointed out that council is responsible for the construction of clinics where HIV/AIDS, malarial and other diseases are treated, contributing to the achievement of MDG 6. They pointed out that council is involved in the construction of schools in order to accelerate the achievement of the MDGs 2 and 3. Other employees noted that council also tries to achieve MDGs number through the drilling of boreholes in a bid to provide clean and safe water for domestic use. The research also revealed that through the provision of water, council also achieves MDG 6 and other MDGs that are related to health. Although some of the council staff claimed to be aware that the Local Authority has a role to play in the achievement of the MDGs, they displayed not to have an idea whatsoever on what the role of the local authority is in the achievement of the MDGs.

4.3.1 ERADICATION OF EXTREME POVERTY AND HUNGER

The research revealed that council seemed to be engaged in some projects in trying to achieve MDG1. Although data from council employees revealed that there are several projects geared towards the eradication of extreme poverty and hunger, data from the residents proved otherwise. The data from council employees revealed that BRDC is engaged in the rehabilitation of dams to sustain irrigation schemes as a way of militating against poverty and ultimately achieving MDG 1. The research also revealed that council also tries to attract investors in trying to boost the economic activity within the district so as to fight against poverty. The strengthening of Public Private Partnerships is one of the strategies that was commonly cited by the respondents as a way to reduce poverty as private companies are engaged and work hand in hand with council in trying
to provide some services and ultimately reduce poverty. Here council partners with donors such as SNV and the business community to provide aid to the residents. Other respondents noted that council is engaged in projects that create employment opportunities within the district. The creation of employment provides the resident with a sustainable source of income thereby reducing poverty. The construction of schools and clinics in a bid to provide basic needs like health and education was cited as one of the strategies employed by council in trying to eradicate extreme poverty and hunger. Other respondents argued that council is encouraging self-help projects as a strategy to achieve MDG 1.

4.2.3 GENDER EQUALITY AND WOMEN EMPOWERMENT

Towards the achievement of MDG 3, most respondents stated that council is actively involved in encouraging women participation in all sectors. Participation of both men and women including youth in council projects is also encouraged. Some of the respondents revealed that BRDC has an effective gender policy put in place geared towards the reduction of gender parities and the achievement of gender equality and women empowerment. However, most of the respondents among council employees stated that there is no funding for the MDGs which is a major challenge in the meeting of the MDG especially now that 2015 is just around the corner.

4.3.4 COMBATING HIV/AIDS, MALARIA AND OTHER DISEASES

Respondents among BRDC employees showed positive progress towards the reduction of HIV/AIDS, malaria and other diseases. The responses from council employees revealed that BRDC is engaged in a number of projects geared towards the eradication of HIV/AIDS malaria and other diseases, chief among them being the construction of health centers where residents can receive treatment. This shows that there is a lot of progress toward the achievement of MDG 6 as one of its targets is to increase the access to treatment for HIV/AIDS for all those who need it. The construction of clinics therefore increases the number of health centers form which residents of Bulilima can get treatment from HIV/AIDS, malaria and other diseases. BRDC employees also stated that council is improving access to rural health centers through the construction of clinics and the provision of mobile clinics. The results show that the activities of
council towards achieving MDG 6 are in line with the targets, leaving council in a better position to achieve the 2015 MDG deadline in as far as MDG 6 is concerned.

Some of the respondents stated that council is engaged in HIV campaigns and education about HIV in trying to reduce the spread of HIV around the district. Some of the respondents stated that BRDC is engaged in educating the community on how to prevent the spread of HIV through the use of condoms. HIV campaigns raise awareness on HIV and it is during such workshops that people are educated on the methods prevent the spread of HIV such as the use of condoms.

One of the indicators to achieving this goal are condom usage at last high risk sex and proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS. Again this proves BRDC is in the right track in the achievement of MDG 6 and leaves the local authority at a high chance of meeting the 2015 MDG deadline.

The research results also revealed that council is also assisting in ART treatment within the district. The decentralization of OI clinics ‘was also stated as by some respondents as a measure of reducing the spread of HIV and increase access to treatment for other diseases thereby achieving MDG 6. However some of the respondents noted that the achievement of MDG 6 can be affected by lack of funding while some feel there is adequate funding for the MDGs. Figure 4 bellow shows a doughnut showing the proportion of the respondent who felt there is no funding for the MDGs vis-à-vis those who thought there is funding for the MDGs.

**Figure 4.**

Source: Raw Data
Figure 4 above shows BRDC stance on the funding of the MDGs. The doughnut shows that number of employees who feel there is adequate funding for the MDGs is proportional to that who feel that the MDGs are not adequately funded. 50% of the respondents felt that the MDGs are adequately funded while the other 50% felt that the MDGs are not well funded. These results proved that council employees had mixed feelings about the achievement of the MDGs though there are hopes in the achievement of MDG 6 by 2015. Council employees also displayed mix feelings towards the achievement of the 2015 MDG deadline. Figure 5 below shows a pie chart representing the respondents’ views in whether or not council will meet the 2015 MDG deadline.

**Figure 5.**

![Pie Chart](image)

The respondents cited out that lack of adequate funding is the major challenge bedeviling the Local Authority in trying to achieve the MDGs and ultimately meeting the 2015 deadline. The
achievement of the MDGs requires a commitment of a lot of resources including financial resources. However the Local Authority lacks adequate funding hence its capacity to meet the 2015 deadline is threatened. Other respondents outlined that the construction of schools and clinics requires a lot of funding hence lack of it would make it difficult for the Local Authority to meet MDGs1 and 6.

Some respondents pointed out that the Local Authority as faced with brain drain as another challenge hindering the achievement of the MDGs. In order for the MDGs to be achieved there is need for qualified personnel who have some expertise in providing services. However with most of the population migrating to neighboring districts and urban areas and even across the border to Botswana upon completion of their studies, the district is starved of qualified personnel as a result making it difficult for the Local Authority to effectively and efficiently provide services. Consequently the capacity of the district to meet the 2015 deadline is threatened

Council employees also cited the challenge of cultural beliefs as one of the major hindrances in the achievement of the MDGs. Cultural beliefs affect gender equality as there may be patriarchy in the in the society. Males are treated as superior to women and women on the other hand also accept subordination to their male counterparts. As a result, very few women take senior leadership and political posts. This is evidenced by the fact that there is only one female councilor f all the 22 wards in the district. It therefore becomes very difficult to achieve gender equality and women empowerment in the district. Consequently the capacity of the district to meet MDG 3 is threatened and even worse given the limited time left to achieve the MDG deadline

Other respondents cited the freezing of all senior posts as another challenge affecting the achievement of the MDGs in the district. Currently all senior posts are frozen. This implies that even of women are to be empowered, they cannot get senior leadership positions as the posts are frozen. This then becomes a hindrance to the achievement of MDG number 6. The freezing of posts equally affects the achievement of MDG 1. One of the targets of MDG 1 is to achieve full productive employment and decent work for all, including women and young people, government of Zimbabwe (2012). The provision of employment to people would reduce poverty as people would have a sustainable source of income hence reduce the number of people living below the TPCL, ultimately reducing poverty. However with the freezing of posts, it is difficult
for all groups in the society to get employment and hence the achievement of MDG on becomes difficult.

4.4 STRATEGIES THAT BRDC CAN EMPLOY TO MEET THE 2015 MDG DEADLINE.

Respondents were asked on what strategies BRDC can employ in order to meet the 2015 MDG deadline. Only 67% of the respondents responded to that question. 33% of the respondents did not respond to that question, either because they did not know or otherwise. If their reason for not responding to the question is because they did not know the strategies that BRDC can employ, then one would wonder if the Local Authority would really meet the 2015 MDG deadline. Of the 67% that responded to the question, some respondent stated that the Local Authority should find adequate staff for the MDG programme so as to fully meet the MDGs in question and ultimately meet the 2015 deadline. However, given the limited time left, and limited resources, it would be almost impossible for the local authority to recruit employees who would work in a way that would enable the meeting of the deadline no matter how qualified the personnel is.

Some of the strategies that were suggested include the engagement of donors and well-wishers to spearhead the meeting of the MDG deadline. This can be a viable strategy as donors and NGOs have the capacity to fund the projects as it had been highlighted prior that lack of adequate funding is a major challenge in the meeting of the MDG deadline. NGOs also have the necessary human resources to spearhead the achievement of the MDGs. However NGOs and donors have always been involved in the MDG programme but still, the ground that has been covered is still not convincing enough to say that the 2015 MDG deadline will be met.

4.5 BRDC RESIDENTS’ RESPONSE.
4.4.0 AGE OF THE RESPONDENTS

Figure 6 shows a graph showing the age group that the respondents fall under. This information proved relevant to the research so as to identify whether the population under study fall under economically active group.

Figure 6

![Age groups of the respondents](image)

Source: Raw data

Figure 6 above that 37% of the respondents fall below the age of 30. 28% of the respondent fall between the ranges of 30-40 years while 35% of the respondents are above 40. The most of the respondents fell in the economically active age meaning that they have a potential to work and reduce poverty in the district.

Figure 7 below shows pie chart showing the gender representation of the respondents.
Figure 7 above shows a pie chart showing the gender of the employees. The pie chart shows that 37.5% of the respondents were female and 62.5% were male. The questionnaires were distributed such both sexes were represented. This data proved relevant to address issues to do with the achievement of MDG 3 which talks of gender equality and women empowerment.

Figure 8 below shows a graph representing the employment rate of the respondents.
Figure 8

![Bar chart showing employment rates: 43% Employed, 45% Unemployed, 12.5% Self-Employed.](chart.png)

Source: Raw data

Figure 8 above shows the employment rate of the respondents. The graph shows that 42.5% of the population is employed. The graph presents a slight rise when it comes to those who are unemployed and are represented at 45%. Finally the graph falls significantly as it represent the self-employed population at 12.5%. This data show that a larger fraction of the population is unemployed in the district hence they do not have a sustainable source of income. This raises the levels of poverty in the district. The graph also shows that the percentage of the unemployed population is the highest at 45% meaning that most people in the district are unemployed and suffer from poverty. There is a very low percentage of people who are self-employed that is 12.5% meaning that people in the district are not engaged in income generating projects hence there is no employment creation. Target B of MDG 1 is to achieve full and productive employment and decent work for all. However the data presented in the graph above shows that it would be close to impossible for the Local Authority to achieve MDG 1 by 2015.
The respondents were also asked if they understood what the MDGs are. Various responses were given as presented in the pie chart below.

**Figure 9.**

![Knowledge on the MDGs](image)

Figure 9 above shows the responses of the residents to the question “Do you understand what the millennium development goals are?” The pie chart shows that 55% of the residents understood what the MDGs are while 40% did not know. 5% of the respondent claimed that they were not sure if they understood what the MDGs are and hence for the benefit of this research they will be categorized under those who did not understand what the MDGs are. The data above proves that almost half of the population still do not understand what the MDGs are yet they are meant to be achieved by 2015. The first step towards the achievement of the MDGs would have been perhaps to try and educate the community on what the MDGs are but then the data proves otherwise. Considering that we are now in 2014, it would therefore be difficult for the Local Authority to meet the 2015 deadline since almost half of the population still do not understand what MDGs are. However the graph shows that the Local Authority tried to educate the community on the MDGs as 55% of the population claimed that they understood what the MDGs are.
Residents were also asked if they know of any council projects geared towards the eradication of poverty. The responses of the residents are presented in the pie chart below.

**Figure 10.**

![Pie chart showing residents' views on council projects aimed at reducing poverty](image)

Source: Raw data

Figure 10 above shows a pie chart showing the responses of the residents to the question “Are there any council projects geared towards the reduction of poverty in the district?” The pie chart shows that 70% of the residents answered NO to this question while 30% of the residents answered YES to this question. This shows that if there are any council projects geared towards the reduction of poverty in the district, they are not as effective since they are not even visible to the residents which they serve. This shows that poverty reduction strategies in the district are not being efficiently and effectively implemented. As a result poverty in the district will continue to
rise thereby leaving BRDC at a disadvantage in terms of meeting MDG 1 and making it quite impossible to meet the 2015 MDG deadline.

The residents were also asked if council was involved in the eradication of HIV/AIDS, malaria and other diseases in a bid to measure the extent to which the Local Authority will manage to meet MDG 6. The responses of the residents are presented in the doughnut below.

**Figure 11.**

![Doughnut Chart](image)

Source: Raw data

Figure 11 above shows the responses of the residents to the question “is council involved in the eradication of HIV/AIDS, malaria and other diseases?” The doughnut shows that 72% of the respondents feel that council is really involved in the eradication of HIV/AIDS, malaria and other diseases. This data shows that council is making visible efforts in militating against HIV/AIDS, malaria and other diseases. This shows that BRDC is in a better position to achieve MDG number 6 and if it continues to work hard, might meet the 2015 deadline in as far as MDG 6 is concerned.
The residents were asked to rate women participation in decision making in the district at a scale of excellent, good, fair and poor. The responses of the residents are presented in the graph below.

Figure 12.

Figure 11 above shows women participation rating in decision making in Bulilima district. The graph shows that none of the residents rated women participation in the district excellent. However 37.5% of the population rated women’s participation in decision making good. The greatest percentage was those which rated women’s participation fair while only 4% of the population rated women’s participation in the district poor. The data above shows that women’s participation in decision making is fairly good. The district seems to be showing positive progress in the achievement of MDG 3. The district is likely to meet the 2015 deadline in this area as there is visible progress in term of gender equality and women participation in decision making. At grassroots level one can say that women’s participation is fairly good.
The residents were also asked how they would overall rate BRDC in terms of the progress towards the achievement of the MDGs in general. In rating the Local Authority, residents were asked to use a scale of poor, fair, good and excellent. The graph below shows BRDC’s rating in the progress towards the achievement of the MDGs.

**Figure 13.**

![BRDC rating in the achievement of the MDGs](image)

Figure 12 above shows a graph showing how Bulilima residents rated BRDC in the progress towards the achievement of the MDGs. The graph shows that 50% of the residents rated BRDC poor in the progress towards the achievement of the MDGs. 30% of the residents rated BRDC fair in the progress towards the achievement of the MDG. The graph further declines as it records 20% of the residents rating BRDC good in the progress towards the achievement of the MDGs. None of the residents rated BRDC excellent in the progress towards the achievement of the
MDGs. The data above shows that although there has been progress in some areas like gender equality and women participation, the achievement of the MDGs in the district shall remain a pipeline dream. This is evidence by the greater proportion of the population rating the MDG progress poor in the district. The data shows that it would be very difficult for BRDC to meet the 2015 MDG deadline.

Residents were also asked their view towards the meeting of the 2015 MDG deadline given the limited time left and the progress that has been made so far. Figure 14 below shows a pie chart showing the views of the residents concerning the meeting of the 2015 MDG deadline.

**Figure 14.**

![Pie chart showing residents' views on meeting the 2015 MDG deadline.](image)

Figure 14 above shows a pie chart showing the views of the residents on whether or not BRDC will meet the 2015 MDGs deadline. The pie chart shows that 62.5% of the residents stated that BRDC will not meet the deadline, 10% of the residents stated that BRDC will meet the deadline while 27.5% think that BRDC might meet the 2015 MDG deadline. The result presented above revealed that Bulilima RDC will not meet the 2015 MDG deadline even though some of the
residents still have hope that if the Local Authority works hard, it might meet the 2015 MDG deadline.

Strategies to accelerate the achievement of the MDGs.

The residents were finally asked on the strategies they thought should be employed in order to accelerate the achievement of the MDGs. Some of the residents stated that there should be funding of the MDG programme from the Central Government. Financial aid kept being the main strategy being suggested by the residents. Some residents suggested the council should get increase the number of project aimed at achieving the MDGs and make them visible to the residents. Other residents suggested the residents themselves should organize themselves into groups and start some gardening project and other income generating projects geared towards the eradication of extreme poverty and hunger. Gardening projects and other income generating projects prove to be a viable strategy in the achievement of the MDGs as they give residents a sustainable source of income, create employment and increase food security. This on its own will necessitate the achievement of MDG number 1. Some of the respondents suggested that there should be togetherness in fighting against greed as some of the obstacles are because of greed. Corruption sets development back as some funds ment for the MDG programme may be embezzled or used for personal gain. As a result the programme lacks funding hence it becomes impossible to meet the desired targets in the MDGs. Capacity building programs were also suggested as a measure to achieve the MDGs as it is important for people to know much about the programme so that they work towards the achievement of the MDGs. If people are unaware of the programs ment for them, it becomes difficult to coordinate the programs and mainstream the community in to the programs hence there is need for capacity building in the community if MDGs are to be met.

4.5 INTERVIEWS

Interviews were held with different government departments that have a bearing in the achievement of the MDGs. The ministry of Women Affairs sighted that it is working closely with the Local Authority in the training of women so that they can participate in decision making. The interviewee stated that the ministry has a capacity building role in terms of women participation in decision making positions. When women are informed of their right to participate in decision making, meaningful participation can therefore be achieved leading to the
achievement of MDG 3. Target 3D of MDG 3 is to increase the participation of women in decision making in all sectors and at all levels. With the capacity building program, Bulilima District is at a better position to achieve MDG 3 and ultimately meet the 2015 MDG deadline.

The interviews also proved that at ground level, Bulilima has already achieved goal number 3 since women actively participate in the VIDCOs, WARDCOs, WPCs and Community Bases Project Committees and some of these committees are chaired by women. The interviewee stated that the Ministry of Women Affairs has implemented a number of programs aimed at achieving gender equality, focusing at ownership and control of assets. The ministry is also involved in affirmative action since most programs in the district are targeting 60%-80% women to men.

However, at higher levels, women participation in decision making is very poor. This is evidenced by the fact that there is only one female councilor in the district and no female MP at all. Some of the indicators to achieving MDG number 3 are increasing the percentage share of women in local government decision making bodies and to increase the proportion of seats held by women in parliament. However since there is only one female councilor and no female MP in the district, much is still to be done at top level in terms of achieving MDG 3. The interviewee stated that there are challenges of breaking the patriarchy that exists in the community and also women don’t support each other.

Other interviews proved that the district is still far from achieving the MDGs as there is poverty in the district. The economic situation of the country was said to be making it very difficult for the district to eradicate extreme poverty and hunger. The levels of employment in the district still remain low making the achievement of MDG 1 and impossibility. In term of MDG 6, the interviews proved that the local authority is showing progress but at a very slow rate. However with joint effort from the local authority and other ministries such as the Ministry of Health, MDG can be achieved but not in 2015. The Local Authority is involved in the construction of clinics where patients can get treatment from HIV/AIDS, malaria and other diseases.

4.6 SUMMARY

The business of this chapter was to present the findings of the research and analyze the data obtained from the research. The data was presented using both qualitative and quantitative
approaches. In this chapter, data was presented in tables, graphs, pie charts and doughnuts. The data presented in this chapter proved that there is progress being made in the achievement of MDG number 3 and 6. MDG 1 still lags behind and there is still a lot that needs to be done. The data also proved that rural local authorities are unlikely to meet the 2015 MDG deadline in general. The findings of this research revealed that BRDC is in the right track in terms of MDG 3 and 6. However lack of funding among other challenges will be a major setback to the meeting of the 2015 MDG deadline. The next chapter shall therefore focus in the summary, conclusion and recommendations of the study.
CHAPTER V
SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.0 INTRODUCTION

This chapter seeks to summarize the previous chapters and will give conclusions drawn from the research findings. Recommendations on the strategies that Local Authorities can employ in order to accelerate the achievement of the MDGs will also be drawn in this chapter. The research focused on the achievement of the 2015 MDG deadline in Rural Local Authorities in respect to the three nationally prioritized MDGs, using BRDC as a case study.

5.1 SUMMARY

The research was conducted in such a way that tried to measure the extent to which Rural Local Authorities will manage to achieve the 2105 MDG deadline. Basically the research was aimed at establishing whether the rate at which Local Authorities are working will facilitate the achievement of the MDGs by the year 2015.

Chapter one of the study introduced the study, giving the background information, objectives, research questions, justification of the research, delimitation and limitations to the study being outlined. The chapter made it clear that the study was prompted by poor service delivery in Rural Local Authorities which is contrary to the millennium targets which are left with less than a year to be achieved. This chapter also clearly outlined that the research information sought to establish the nexus between Rural Local Governance and the achievement of the MDGs.

Chapter two of the study focused on explaining what existing literature has to say about the MDGs. Several scholarly views were scrutinized in line with the subject of the achievement of the MDGs in Local Authorities. Literature however revealed that the achievement of the MDGs will still remain a pipeline dream. It also revealed that there are several impediments to the achievement of the MDGs.
The third chapter of this research focused on the research methodology to be employed by the researcher in undertaking the study. The study adopted both the qualitative and quantitative approach. The researcher used questionnaires, interviews, and secondary and data sources to research on the achievement of the MDGs in Local Authorities. It was however challenging as the researcher could not get hold of some interviewees and some questionnaires were not answered. In addition, some respondents were not available due to work pressure and other commitments. Notwithstanding the constraints, interesting findings and observations were made and translating to the following recommendations.

The fourth chapter outlined the research findings. The research found out that BRDC was in the right track in terms of achieving gender equality and women empowerment. However this is only at the grassroots level. There is not much progress in terms of women participation at top levels. In terms of achieving MDG 6, the residents seemed satisfied and the Local Authority seemed to be in the right track as well. However the research revealed that BRDC is quite off track in terms of the eradication of extreme poverty and hunger. Despite all the positives, the research revealed that there is no way BDRC can meet the 2015 MDG deadline given the limited time left.

In chapter five of the dissertation, a summary of the whole study is given. Recommendations, conclusions of the study are outlined in this chapter.

**5.2 CONCLUSIONS**

The research proved to be a success as it clearly uncovered the problem as outlined by the conclusions below.

The research revealed that quite a larger fraction of the residents were not aware of what the MDGs are. Council employees and a few individuals however showed a profound understanding of the MDGs. This is detrimental to the achievement of the MDGs as only a few are informed and are involved in their implementation and maintenance. Universal awareness of the MDGs is essential as people will appreciate and support their achievement.

The investigation also showed that although some council employees know that council has a role to play in the achievement of the MDGs, some of the council employees displayed lack of
knowledge of what the role of the local authority really is in the achievement of the MDGs. Again, this negatively impacts on the achievement of the MDGs as council employees are supposed to be the ones implementing the MDGs and advocating for their achievement. Capacity building is therefore necessary among council employees as they have major role to implement them if there are to be achieved by 2015.

The research also revealed that there is very little council is doing to eradicate extreme poverty and hunger. On the other hand, council claims to be engaged in a number of projects geared towards the eradication of extreme poverty and hunger. However responses from residents claimed otherwise. If council is to implement poverty eradication programs for the people, then such programs should be visible to the people as such programs are meant for them. This should develop a sense of ownership to the people and this will enable the achievement of the MDGs.

The study revealed that BRDC is in the right track in terms of achieving women participation and gender equality. The findings of the research revealed that women actively participate in matters that affect them. However, the research revealed that women participation is only at grassroots level but very poor at the higher levels. This is evidenced by the fact that there is only one female councilor in the district and no female MP at all. This is detrimental to the achievement of gender equality and women empowerment as matters that affect women may not reach the national and local authority levels. If gender equality and women empowerment is to be achieved, women should be represented at both micro and macro levels.

Then research also uncovered that the local authority, in partnership with other stakeholders is involved in the fight against HIV/AIDS, malaria and other diseases. This is evidenced by the fact that most of the residents feel satisfied with the quality of health services provided by the Local Authority. There is therefore need for council to continue working in partnership with NGOs and other government departments in the fight against HIV/AIDS, malaria and other diseases if the MDGs are to be met by 2015.

5.3 RECOMMENDATIONS

Having had come up with research findings in the study, some issues that might help rural local authorities achieve the MDGs and ultimately meet the 2015 deadline are recommended below.
5.3.1 Ensuring public awareness of the MDGs
The Local Authority should ensure public awareness of the MDGs. Campaigns should be done to inform residents and employees on MDGs as most of them seem not to have knowledge about the subject. As a way of accelerating the achievement of the MDGs, local authorities should therefore increase public awareness on the MDGs.

5.3.2 Integrated MDG planning
Local Authorities are not the only authorities concerned on the achievement of the MDGs, rather the subject of MDGs attracts a lot of authorities including government departments and NGOs. Local Authorities should therefore engage in what the researcher might want to call “Integrated Millennium Development Goal Planning” (IMDGP). This can be achieved through underpinning all MDG plans of all concerned departments and NGOs within the district to one unified universal plan. MDG plans of all actors within the district can be combined to one comprehensive plan that is implementable and achievable. This would avoid duplication of efforts and programs and ultimately avoid wastage of resources. This will mean that MDGs will have adequate funding and the major resource challenge will be overcome as a result the MDGs will be achieved and the deadline met.

5.3.3 Synchronization of Local Development Plans with MDG targets
Local development plans of the RDC should focus on the achievement of the Millennium targets. The local authority should see to it that all development plans embrace millennium targets. This is meant to increase effort in the implementation of the MDGs and ensure that their implementation remains a priority.

5.3.4 Results based MDG programme
The researcher recommends what can be termed “Results Based Millennium Development Goals Programme” (RBMDGP). The implementation of MDGs programs should now take a turn and focus on the achievement results. Implementers of the MDG should now be accountable for the achievement of results in the implementation of the MDGs. Actors should justify the achievement or failure to achieve results. MDGs should become the key business drivers in local authorities and their targets be the key results areas to increase commitment to the achievement of MDGs.
5.3.5 Establishment of public private partnerships.
The researcher would also recommend that Local Authorities establish Public-Private partnerships. This can be done through engaging private companies and other stakeholders for the provisions of some services that the local authorities cannot provide. For example local authorities can engage private companies in the construction of clinics and the provision of water. This will enable the accelerated achievement of the MDGs.

5.3.6 Exchange visits programme
The researcher also recommends that Rural Local Authorities engage in exchange visits programme. While Local Authorities are different, they face more or less similar challenges in the achievement of the MDGs. Exchange visits would therefore allow Local Authorities to visit each other and share their experiences and strategies to achieving the MDGs because the ultimate goal is to achieve the MDGs as a nation. This will also facilitate the accelerated achievement of the MDGs.

5.3.7 Investing in income generating projects.
The researcher also recommends that BRDC invests in income generating projects to overcome the financial constraints incurred in an attempt to achieve the MDGs. Generally Local Authorities’ revenue base has become narrower and ratepayers no longer remit religiously. This has led to councils failing to have enough funds for the implementation of the MDGs. Council can therefore engage in income generation projects such as irrigation and cattle ranching at its farm so as to generate revenue to be used in the implementation of the MDGs.

5.3.8 Local Economic Development
The Local Authority should engage in Local Economic Development to increase economic activity around the district. Local Economic Development would make use of natural resources around the district to generate revenue for example create a turnery industry since the district has a vast species of wild animals ranging from kudus, Impalas, elephants among other wild animals. Local Economic Development would therefore open industries and attract investment in the district and create employment leading to the eradication of poverty. Ratepayers will also
manage to remit levies due to council, leading to the widening of the council’s revenue base. Such funds can therefore be used for the implementation of MDG projects.

5.3.9. Irrigation schemes.

The local authority can also promote irrigate schemes around the district. Council can drill boreholes for the residents or construct dams for irrigation activities such as the Moza irrigation scheme in the district. Irrigation schemes will promote small scale farming in the district and therefore result in increased food security in the district thereby achieving MDG number 1. Produce from the irrigation schemes can also be sold for profit making so as for the residents to get a sustainable source income. This will also accelerate the achievement of MDG number 1.

5.4 SUGGESTIONS FOR FUTURE RESEARCH

Other scholars interested in the subject of MDGs in local governance can assess the overall programme post its completion in 2015 and how it has been a blessing or a curse to local authorities. Local Authorities have been involved in the MDG programme since its inception and the researcher feels there is great need for the assessment of its impact on service delivery in Local Authorities.
QUESTIONNAIRE FOR COUNCIL EMPLOYEES

My name is Leopatra Ncube. I am a 4th year student at the Midlands State University studying a BSC Local Governance Studies Honors Degree. I am carrying out a research on the topic “2015 Millennium Development Goals deadline: A time to reflect on Zimbabwe’s Rural Local Governance: A case of Bulilima RDC. The study is being conducted in partial fulfillment of the programme and I therefore ask that you assist by responding to the questions by ticking on the boxes and filling in the blank spaces.

Information will be used for academic purposes only and no information will be divulged to third parties without your consent.

Your assistance will be greatly appreciated.

Regards.

Leopatra Ncube
SEX: Male ☐ Female ☐

Department ..................................................................................................................

1. What do you understand by the term Millennium Development Goals?
   ........................................................................................................................................
   ........................................................................................................................................
   ........................................................................................................................................
   ........................................................................................................................................

2. Are you aware that Local Authorities have a role to play in the achievement of the Millennium Development Goals?
   Yes ☐ No ☐

   If yes, can you briefly explain the role of Bulilima RDC in the achievement of the Millennium Development Goals.
   ........................................................................................................................................
   ........................................................................................................................................
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   ........................................................................................................................................

3. What is Bulilima RDC doing in trying to reduce poverty in the district?
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   ........................................................................................................................................
   ........................................................................................................................................

4. What is Bulilima RDC doing to ensure there is gender equality in the district?
5. Is there any funding for the MDGs?
   Yes [ ] No [ ]

6. What is Bulilima RDC doing to reduce the prevalence of HIV/AIDS and other diseases in the district?
   …………………………………………………………………………………………………
   …………………………………………………………………………………………………
   …………………………………………………………………………………………………

7. Do you think Bulilima RDC will manage to meet the 2015 MDG deadline in regard to MDG 1, 3 and 6?
   Yes [ ] No [ ]

8. What strategies can Bulilima RDC employ in order to meet the 2015 MDG deadline?
   …………………………………………………………………………………………………
   …………………………………………………………………………………………………
   …………………………………………………………………………………………………
QUESTIONNAIRE FOR RESIDENTS

My name is Leopatra Ncube. I am a 4th year student at the Midlands State University studying a BSC Local Governance Studies Honors Degree. I am carrying out a research on the topic “2015 Millennium Development Goals deadline: A time to reflect on Zimbabwe’s Rural Local Governance: A case of Bulilima RDC. The study is being conducted in partial fulfillment of the programme and I therefore ask that you assist by responding to the questions by ticking on the boxes and filling in the blank spaces.

Information will be used for academic purposes only and no information will be divulged to third parties without your consent.

Your assistance will be greatly appreciated.

Regards.

Leopatra Ncube
Section A

Demographic data

1. Age
   - Below 30  
   - 30-40  
   - above 40  

2. Sex
   - Male  
   - Female  

3. Employment
   - Unemployed  
   - Employed  
   - Self employed  

4. Marital status
   - Single  
   - Married  
   - Divorced/Separated  
   - Married Widowed  

Section B

Research Data

1. Do you understand what Millennium Development Goals are?
   - Yes  
   - No  
   - Not sure  

2. Are there any council projects in the district geared towards the eradication of poverty in the ward?
   - Yes  
   - No  

3. Is council involved in the eradication of HIV/AIDS malaria and other diseases?
   - Yes  
   - No  

4. How would you rate women participation in decision making in the district?
   - Fair  
   - Good  
   - Excellent  
   - Poor  

5. How would you rate Bulilima RDC in the progress towards the achievement of the MDGs?
   - Fair  
   - Good  
   - Excellent  
   - Poor  

6. What do you think should be done so that the MDGs can be met by 2015?
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