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The Mothers' Clubs of the Togolese Red Cross, a Model for Women's Resilience

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Resumen: Desde 1959, la Cruz Roja del Togo trabaja para el empoderamiento financiero y la inclusión en la gestión comunitaria de las poblaciones vulnerables del Togo. Los Clubes de Madres (MCs) han sido una de sus herramientas principales. Capacitados en salud materno-infantil, determinación y gestión de actividades generadoras de ingresos, higiene y saneamiento, así como resiliencia y alfabetización, los 2.486 MCs activos en Togo cuentan más de 50.000 mujeres. Gracias a los MCs la salud de las comunidades ha mejorado, las mujeres participan más en actividades de desarrollo comunitario y tienen acceso a recursos financieros y el número de niñas en la escuela ha aumentado.

Palabras clave: Resiliencia; Empoderamiento; Solidaridad; Salud; Clubes de Madres

Abstract: Since 1959, the Togolese Red Cross works for the financial empowerment and inclusion in community management of vulnerable populations in Togo. The Mothers' Clubs (MCs) has been one of its main tools. Trained in maternal and child health, the identification and management of income-generating activities, hygiene and sanitation, as well as resilience and literacy, the 2,486 MCs active throughout Togo involve more than 50,000 women. As a result of MCs-led activities, community health has generally improved, women participate more in community development activities and have access to financial resources, and the number of girls attending school has increased.

Key words: Resilience; Empowerment; Solidarity; Health; Mothers' Clubs



1. Research Question and Literature Review

The launch of the 17 Sustainable Development Goals (SDG) by the world's political leaders in September 2015 marked the transition from the Millennium Development Goals, which were set to be attained by the same year. The new ambitious programme committed the world's leader to achieve the new goals by 2030.

Within the framework of the SDGs, and in particular SDG 3 "Ensure healthy lives and promote wellbeing for all at all ages", the current review of the Togolese Red Cross (TRC) Mothers' Clubs (MCs) aims at valuing the contribution of its volunteer members to the improvement of public health and, as well, at presenting it as a model of activity that, through increasing women's resilience, betters the health of communities.

The reference documents reviewed in this publication highlight the value of community volunteers' activities from a human resources and organizational perspective. The article also presents the impact of volunteers-targeted capacity building activities and the MCs system's overall contribution to the general improvement in public health in Togo, within and beyond the communities where it is established.

For a long time, human's concerns within an organization have focused on its profitability, identifying the organization as the rational coordination of activities carried out by a given number of people in order to achieve common goals. This approach is also shared by the Scientific management theory, which is also focused on the improvement of management, the increase in productivity, the management of the company, organization rationalization, and organizational effectiveness.

To this respect, Ford (1918) already viewed organizations as homogenous ensembles where the use of rules led to performance irrespective of location. He believed that performance is the result of four actions: workers' specialization, the payment of high salaries, the establishment of a short hierarchical structure, and the simplification of the administration.

For Taylor (1971), three fundamental elements were to be established to ensure optimal performance: the rationalization of workers' work, the use of salary as an incentive, and the organization of the command chain. Reducing unnecessary activities or actions, motivating employees who are completing the work, and reducing the burden related to leadership would increase the organization's productivity.

Fayol (1979), on the other hand, agreed with the elements presented by Taylorism in contrast to having unique leadership.

It should be noted that the concept of performance has been later discussed by a variety of authors. Some of them pointed out that the new managerial practices of Human Resources are related to forecasting in personnel management, recruitment and definition of job descriptions, the regulation of behavior at work, total payroll management, professional relations, training, negotiation, and the social audit. Others, though, believe that the management of Human Resources calls upon the management of individual and collective working relationships (Bietry, 2000, Jues 2002, Calisti and Karolewicz 2005).

Taking into consideration all performance factors, Galambert (2007) went further by recommending not to limit the evaluation of Human Resources' performance to the reduction of structural costs, but instead identifying the contribution of Human Resources' investments to the company's value creation. For this purpose he suggested operational solutions relating to following a process approach, the right analysis grid to decide on the creation of a shared services center, the key success factors of a Human Resources' information system, and Human Resources levers for value creation.

Lambert (2005), instead, has been interested in behavior management as a major challenge in organizations' success and performance. Based on everyday life, lessons drawn from field experiences and from several schools of thoughts, the author showed how to address the concept of behavior – within cognitive psychology, sport, clinical psychology, and social sciences. He also defines a reference framework that allows to select, among 54 behaviors, those considered indispensable and specific to each key role on the management paths.



Meanwhile, Dolan et al. (2001) and Armstrong (2006) have undertaken a study to enable practitioners in the field of human resources management to better understand the new challenges of the millennium.

Indeed, as highlighted by the Group T rence (1993), recent discoveries of the so-called "chaos theory" have weakened traditional scientific beliefs. It is therefore necessary for every individual having a managerial role in human resources develops « intelligent actions » to cope with the complex systems of nature and our society. Thereby, it appears more appropriate to depart from (still too often practiced) intellectual Taylorism.

With respect to organizational rules, the principal figurehead of the Human Relations school Mayo (1933) developed new human-centered approaches aimed at identifying the form of motivation of human forces

leading to increased production and, therefore, revenues. It must also be noted that this author never opted for workers' repression. Rather, he demonstrated that between the external conditions influencing the work, for example light, noise, etc., and the improvement of the groups' structures, meaning the social environment, the latter has more influence on productivity compared to the other factors.

The same concerns are found in Foucher (2005). Based on a survey, he notes that short-term financial policies are not enough. Improving the image and results of a company must incorporate the positioning of people at the center of the system. To this end he emphasizes that it's not a question of moral responsibility but rather a factor for success.

Taking into account the inadequacies of approaches founded on human relations, the systems theory stresses the importance of organizations' structural contingency, resolution, and sociological approaches.

Structural contingency refers to the interdependence between the structure and the way it functions. The proponents of Structural Contingency Theory, such as Joan Woodward, Henry Mintzberg, Paul Lawrence, and William Lorch, aim at responding to the following issues:

- Why if two organizations carry on the same activities, one succeeds and the other one doesn't?
- Why if two firms in very different sectors have the same structure, they both succeed?
- Why two firms in the same sector have different results when they have the same organizational structure?

The authors of the Structural Contingency Theory have sought to show that one structure is only effective in one specific situation which depends on characteristics unique to the organization and its environment.

In their books Igalens (2000) and McConnell (2000) recommend the "audit of human resources" as an appraisal of the quality of an organization's human resources and a tool for measuring and developing potential. The authors think it necessary to carry out:

- the audit of the social environment, as a method for directing and monitoring the efficacy of social policies that enables the understanding of expectations, and of satisfaction and dissatisfaction factors;
- the audit of individual performances, also offering quality criteria for management tools such as the annual interview;
- the audit of the potentials, to be developed alongside skills management practices.

In opposition to the classical school, which states that an ideal structure exists, regardless of the context, in the Structural Contingency Theory the structure is linked to factors, which are said to be contingent.

Aware of the difficulties tied to the management of volunteers in humanitarian organizations, in his PhD thesis Valeau (2002) reports on three cases of this type of management. The first one analyses volunteers management within the *Association Fran aise des Volontaires du Progr s*, which concentrates on development, and has a particular focus on volunteers' formative experience. The second one refers to the national Development Cooperation Service, which focuses on the promotion of cultural encounters, religious engagement, and provides volunteers to support development projects. The third one refers to Doctors Without Borders (MSF), which exclusively initiates emergency action to aid populations in crisis.



Despite conventional ideas about the individual as “the wealth of a business”, human resource managers wonder about such individuals’ professionalism. They think that management expertise might be lacking. For this reason, Galambaud (2002) proposes a possible theory that attempts at structuring and giving a practical meaning to human resource management. The author points out that nowadays there are numerous opportunities for human resource management to truly become a managerial function and participate in shaping the performance of an organization. For this purpose, human resources management must acquire real managerial knowledge and put an end to the conceptual deficiency that distinguishes it.

Inspired by French- and Anglo-Saxon research, and drawing on case studies on human resource management, Pichault and Nizet (2000) go beyond normative discussions by proposing original management approaches.

Specifically concerning volunteering within the International Committee of the Red Cross (ICRC), Moore and Dominique (1999) note that, if war is unavoidable, efforts should be made to make it less barbaric, both through the definition of combat rules and through relief actions, such as those performed by the volunteers.

Within this context, Lelarge (2003) described the current methods of human resource management, and the advocated taking a step back to allow everyone to exercise their critical thinking.

Similarly, Kalika (2002) highlighted the benefits of information and communication technologies in human resource management. However, he underlines that these new technologies cannot replace the accumulated experience coming from companies’ managerial practices.

2. The Mother’s Club: Definition, Mission, Establishment and Operational Management

2.1 Definition and Mission

Created in Ghana in the 1970s under the name “Mothers’ Club”, this activity first developed in Togo in 1996. Supported by the Swiss Red Cross, the Togolese Red Cross (TRC) began a Mothers’ Clubs (MCs) trial run in the Bassar area, central Togo, with Ghanaian refugees that had settled there. The first women in the MCs benefited from health education, community-based first aid, and credits for income-generating activities, as part of their social reinsertion.

The MCs are volunteer associations of women from the same community, centered on a shared ideal of promoting the health of their families and their socio-economic development. The members of the Mothers’ Club get trained and lead activities in the specific fields of maternal and infant health, nutrition, promotion of reproductive health, promotion of human rights, and Income-Generating Activities (IGAs). By promoting health through awareness raising and socio-economic development, the living conditions of the MCs members, their families and their communities also improve. The members of the Mothers’ Club may or may not be active or supporting members of the local TRC branch, but they adhere to the principles and overall ideals of the Red Cross, as the other volunteer categories of the TRC.

This approach, along with its characterizing decentralization process, quickly became a model for development and has since been subsequently introduced, by means of various projects with a variety of partners, to the Central Region (1998), the Plateaux Region (2000), the Maritime Region and Lomé commune (2002), the Savannah Region (2003), and the Kara Region (2007).



2.2 Setting up a Mothers' Club

The establishment of a Mothers' Club is spontaneous and follows a process that allows the women to quickly take over its management. Although the first MCs were established as part of a project, later clubs have been set up in response to community demand.

In general, the steps to creating an MC are as follows: village assembly (following a request from the community), constituent assembly by an ad hoc committee, mobilization and membership system, basic training of members, general assembly of the members with the adoption of internal regulations, and the election of the executive office.

The village assembly, organized at the request of the community, is chaired by the village chief. During the assembly, discussions regarding general community concerns take place, including, in particular, those concerning health. Throughout the conversation, potential solutions are identified as well as recommendations for actions to be taken. At the end of the debate, the representatives of the TRC, which were silently observing, present to the community the MCs methodology that allows to consider community health concerns while placing women at the heart of community development. Should the women present at the assembly be interested in the method, they have a chance voice it and the village chief can publicly commit to sponsoring the future women's group supported by the TRC, thereafter named "Mothers' Club".

The constituent assembly results from the work and preparation of the ad hoc committee established during the village assembly, and is held during the first training sessions granted to the MC's members.

Every MC established and recognized as such receives three days of basic training led by TRC's instructors. The three main themes addressed during training are as follows: the life within an association, maternal and child, hygiene and sanitation.

As the women are often illiterate, a participative community-based communication for behaviour change approach is used. Various communications methods and tools are applied, such as: visual tools (image boxes, boards), songs related to traditional themes which include key messages, and exposes/presentations that the participants have to turn into skits and sketches.

At the end of the first training session, a constituent assembly is held to formalize the club's existence and enable the officers' elections. It is during this assembly that members pay their enrolment fee and adopt the statutes and internal regulations. Additionally, the members' list is established, the meeting frequency is determined and the executive office (EO) is set up.

The EO is responsible for the administrative management and the implementation of the activities run by the MC. Usually, the EO team comprises the following roles: one President, one Secretary, one Treasurer, one Organizer, and one person in charge of the Health Solidarity Fund. All positions are covered by women and both the Secretary or the Organizer might be identified as MC leaders. The MC may designate advisors to support EO, but they are not official members of the EO.

Local authorities and MC members' husbands are invited to attend the constituent assembly, during which the Club is endorsed by an official statement that represents its attestation of birth.

It should be noted that MC's assemblies and training sessions are often broadcasted (via local radio), enabling the wide dissemination of contents and the promotion of the approach within the community and beyond. Such dissemination produced a "snowball effect", with several MCs getting constituted following the footsteps of the first communities, as soon as they were echoed in the neighboring villages.

After the basic training, Mothers' Clubs can request additional sessions based on their needs or on the theme of the TRC project/program that is requesting their support within the community. Other training modules include: literacy, health modules, administrative management, human rights and leadership.



Image 1: MC Membership card
(Source: Togolese Red Cross)

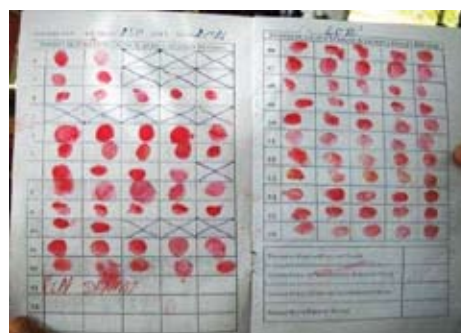


Image 2: MC Tontine register
(Source: Togolese Red Cross)



Image 3: MC Members during a meeting
(Source: Togolese Red Cross)



Image 4: MC Members during a meeting
(Source: Togolese Red Cross)

2.3 Organizing and Operating a Mothers' Club

Members voluntarily join the club and act together to improve the health outcomes of their community. The membership fee generally varies between 500 to 2,000 CFA and is set by the club's internal regulations. The membership entitles the member to participate in club activities, to be eligible to run for office, and to vote.

A MC holds at least one regular meeting and one educational group discussion per month. A regular MC meeting is a session that brings members together to discuss issues related to the associative life of the club. It is led by the president and is organized weekly, monthly or bimonthly according to each club's internal rules. Educational conversation sessions are open to the participation of other non-member women's groups and/or the entire community.

The general assembly is the highest decision-making body of the club and brings together all its members. On one hand, it is mandated to elect the executive board in charge of the club's management for a term of two to three years and, on the other hand, it adopts the club's activity programs, examines and approves activity and financial reports, as well as adopts the texts governing the club (the statute, the internal rules, etc.). There are three types of general assembly: constitutive, ordinary, and extraordinary.

MCs work with various categories of TRC volunteers such as peer educator facilitators, peer educators, visiting advisors, listening and counseling center facilitators, first-aid personnel, members of TRC local branches and TRC members.



3. Organization of Voluntary Networks within a Community

Where there is an agreement and a local branch, the different types of volunteers in the same community work under the guardianship of the TRC. The local coach, in charge of the coordination of all volunteering activities for the area, acts as a spokesperson for the different groups. These volunteers work in synergy with the community, the traditional and religious authorities, the caregivers of the Peripheral Care Unit (PCU), the Village Development Committee (VCD), other groups, associations, influential people, opinion leaders, NGOs and others. Local coaches and active volunteers are supervised by the prefectural coaches, the Community Mobilization Officers (CMO), the Health Training Managers (HTM) and local health authorities, the Regional Coordinations and TRC's department heads.

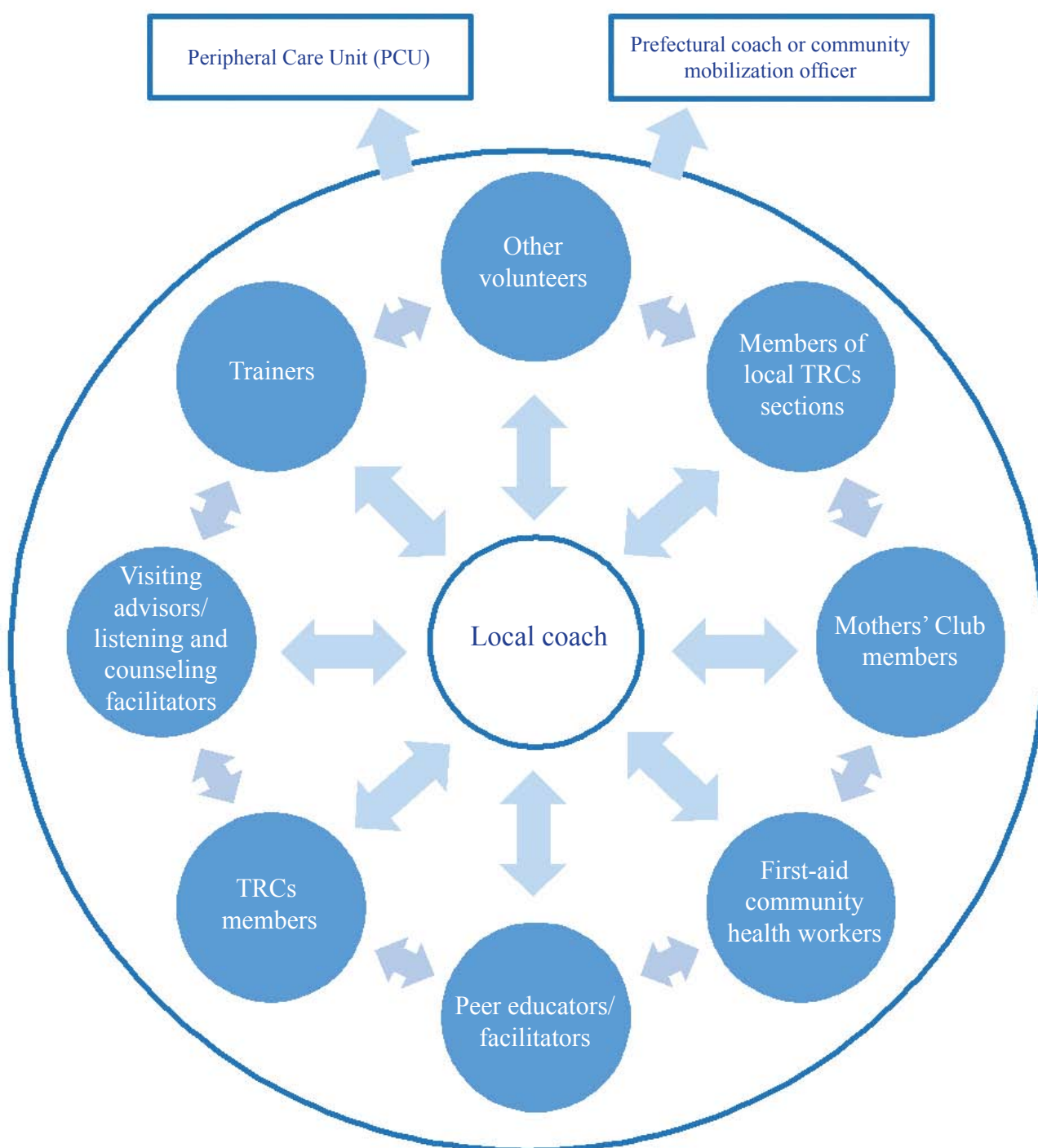


Figure 1: Organization of Red Cross volunteer networks in each area



4. Evolution of Mother's Clubs and other Volunteers Categories between 2014 and 2018

The data shown by Table 1 present the number of volunteers currently engaged by the TRC, noting that a volunteer can belong to more than one category. This means that an MC member can also be, at the same time, a first-aid community health worker and a peer educator facilitator. For the time being, the available data does not allow to distinguish and separate among the total number of volunteers in the TRC. However, the number of MCs volunteers, presented in Table 2, is accurate.

Types of volunteers	2014	2015	2016	2017	2018
Broadcasters	72	74	73	80	96
Trainers in community-based first aid	127	98	93	131	135
Multi-purpose trainers	79	106	120	118	124
First-aid personnel	7,893	6,436	5,722	7,215	7,833
First-aid community health workers	3,296	3,296	2,461	1,619	1,914
CMs members	49,503	49,583	49,974	48,506	55,315
Peer educators facilitators	2,370	2,370	2,084	750	2,405
PC Team	674	584	864	1,463	1,415
TOTAL	64,014	60,177	61,391	59,882	69,235

Table 1: Distribution of active TRC volunteers by region from 2014 to 2018

Year	Volunteers categories	Maritime Region	Plateaux Region	Central Region	Kara Region	Savannah Region	Total
2014	CM members	3,280	3,120	4,501	6,940	31,662	49,503
	Active CM	164	156	225	347	1,583	2,475
2015	CM members	3,360	3,120	4,501	6,940	31,662	49,583
	Active CM	168	156	225	347	1,583	2,479
2016	CM members	3,360	3,200	4,492	6,954	31,968	49,974
	Active CM	168	160	225	348	1,598	2,499
2017	CM members	1,890	4,680	2,858	7,110	31,968	48,506
	Active CM	95	234	143	356	1,598	2,425
2018	CM members	5,759	5,925	4,378	7,285	31,968	55,315
	Active CM	140	237	155	356	1,598	2,486

Table 2: Distribution of active MCs in Togo by region from 2014 to 2018

5. Growth Factors for Mothers' Clubs in Togo

Several factors contributed to the growth of MCs including:

- The decentralization of the TRC. In 1996 the TRC initiated a decentralization process, which led to the establishment of Regional Coordinations in all five of the country's regions: Centrale (1998), Plateaux (2001), Savannah (2001), Maritime (2009) and Kara (2009). Since TRC's administration has come closer to the communities through regional coordination, activities have grown. The presence of a permanent team in the regions is a determining factor not only in the scaling up of the MCs but also in the fulfillment of other activities the TRC runs for the benefit of the most vulnerable populations.



- Taking community needs into account for project design. As the first experiences of the TRC in creating MCs were satisfactory, this approach is systematically integrated into all TRC projects. This way MCs work as doorways into communities. Therefore, the TRC strategic plan mentions the importance of MCs TRC's activities.
- The request to create new MCs by localities bordering communities where MCs already exist. Localities with MCs implement changes that are highly appreciated by the neighboring communities. The changes recorded include increased cleanliness of public places (markets, squares, clinics or health centers), solidarity among MC members and better cohesion among neighborhoods and villages, reduction in diseases' cases and increased household incomes through income-generating activities initiated either individually or collectively by MC members. In most cases, MCs volunteers wear a uniform that can either be a t-shirt or a skirt. These positive changes move women from neighboring villages to solicit the creation of an MC in their village. Sometimes surrounding villages' authorities approach the TRC to solicit the creation of an MC.
- Presence of trainers in all region. The first training sessions of the MCs were supervised by the health department of the TRC, from where the trainers travelled to the center of the country. The TRC headquarters team in Lomé was assisted by the local health officer and the regional coordinator. From 2005, multi-purpose trainers took over the MCs' training sessions, supporting the Community Mobilization Officers. Multi-purpose trainers are instructed to lead training sessions related to the maternal and child health, water, sanitation, and hygiene (WASH), women's rights, sexual and reproductive health among others, with the only exception of first-aid. The presence of multi-purpose trainers makes it possible to satisfy MCs' educational needs and ensure close follow up.
- Media coverage. The TRC maintains good relations with the media, which allow access to radio programmes and coverage in national and local press articles.

6. Activities Carried out by the Mothers' Clubs

Various activities have been carried out by MCs, such as

- Educational talks among MCs members and within the communities on various topics. Every MC receives basic training and tools from the TRC to make it easier to perform its tasks. MC's educational talks initially take place among club members, then involve other women in the area, and finally the general population. MC members' talks are about potable water, home hygiene and sanitation, personal hygiene and food safety, malaria, diarrhea, children's nutrition, vaccination, and more. Aside from TRC staff, for health-related questions MCs members often turn to health workers in the area.
- Celebration of event days. MCs members often celebrate the event days in their area, not only to be visible among their communities but, most importantly, to spread the event day's messages. The most celebrated days by MCs are: International Women's Day (8 March 8), African Women's Day (31 July), Global Handwashing Day (15 October), World Toilet Day (19 November). Sometimes women receive financial help from partner organizations to organize activities during these days, but most often they finance activities by themselves.
- Public health operations. MCs members take on the organization of health operations themselves. Such activities are often conducted in collaboration with other types of volunteers, when they are present in the area. The community is often called upon for these environmental health practices, but often there is little involvement among the non "RC volunteers".
- Identification and management of individual or collective income-generating activities. Apart from health aspects, one of the key actions of MCs is the financial empowerment of its members. As such, women trained in the identification and management of small income-generating activities are happy to change the economic level of their household through different initiatives. Mostly, these initiatives are collective, but this does not exclude individual entrepreneurship. MCs income-generating activities involve:



- Grains storage: purchase, conservation and sales of grains and legumes, such as beans, millet, corn, vouanjou, black eyed peas and peanuts;
 - Local products' processing: coming from farming backgrounds, the women do not hesitate to process agricultural products before selling them to the community. Milk, cheese, and soy products are common exchange goods in MCs. Other products are millet bread, peanut oil, peanut cakes, a local drink made from millet, corn, traditional soap made from oil and nut shells. Some women make other non-agricultural products such as beads, shoes, mats and travel bags;
 - Collective or individual fields: MCs women request land for agricultural production, where they can grow corn, rice, sorghum, peanut, cotton, peanut and beans. Women reserve one day a week to work in the field for the club. Harvested crops are then sold and the funds returned to the club's treasury;
 - Public latrines' management: some MCs take care of this activities and collected funds go partly to latrines' maintenance and partly to MCs treasuries;
 - Local markets' cleanliness management: stall vendors have to pay a fee to MCs according to the space they occupy. The fee can be 25, 50, 100 or 150 CFA;
 - Fountains management: this activity provides drinking water to the people, as well as resources for the MCs.
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- Promotion of health through health solidarity funds. Each MCs has at their disposal two or three different funds: the Health Solidarity Fund (HSF), the income-generating activity fund (IGAF), and the operations fund. Most of the time, the IGAF and operations fund coincide. The HSF is financed by members' contributions, after the setup funding for the IGAF is retained. The amount and frequency of the contributions depend on the members of each club. In most cases, contributions are collected weekly, biweekly, or monthly. The amount vary between 50 CFA and 200 CFA.
 - Establishment of school farms with the support of experts. School farms have been introduced in the last three years within the training activities reserved to MCs members. The objective is to improve women's agricultural production and thus increase households' income. These activities are carried out in maritime regions (food security project) and Savannah (project for the resilience of people living in the Savannah region).
 - The *tontine*. Nearly every MCs believes that tontines will improve their living conditions. There are two types of tontines:
 - *Simple tontine*: The women themselves agree on how much and how often they contribute. If a weekly schedule is agreed, the funds, once collected, are handed over to a different member of the club each week, until each woman in the club has received an amount and the circle can restart. The amounts vary between 200 CFA and 1,000 CFA per week.
 - *Improved tontine*: The members of the club also agree on how much and how often to contribute, with the only difference that the funds are kept until the end of the cycle and each woman has received an amount. The amount varies from 200 to 500 CFA per week as a "share", with a share limit or maximum five per member. For this purpose, management tools such as payment booklets, loan booklets, stamps, inkwells, metal boxes with three locks, and cups in different colours are used. Aside financial contributions, some MCs also contribute with soap to be returned to the members on a rotating basis. This soap is also a product the women can trade.



7. The impact of Mothers' Clubs

The establishment of MCs has had positive impacts in a number of areas among others:

- Improved households health. The implementation of messages received within different health trainings has allowed MCs members to significantly reduce the healthcare expenses of their families. The knowledge accumulated by MCs members ensures they not only to get rid of breeding grounds for mosquitoes and comply with hygiene measures, but also that they systematically use treated mosquito nets. Those households which, ignoring the basics, were devoting considerable financial resources every month for members' healthcare, especially children, now spend less, because preventive efforts have been fruitful. The savings made allow households to invest in other things, such as children's education.
- Improvement in children's education. As many MCs members did not have access to education but have learned about its importance during different MCs' dedicated training courses, they do not spare their children the chance to pursue their studies. The opportunity to access education is increasingly offered to boys as much as girls in the household. Women who have received literacy training take the time to teach their children at home, at least for children attending primary school.
- Improvement in couples' relationships. The different training courses offered to MCs members, along with group discussions and experience-sharing sessions, seem to have a positive effect on women's relationships with their husbands and on the couple's life. Some husbands, who experienced changes in their relationships encourage their wives and remind them about the club's meetings and activities.
- Increased participation of women in business management. Through MCs, more women have acquired experiences and skills that allow them to contribute more actively to their towns or villages' business life. Indeed, women are reluctant to get involved in some associations in their villages due to illiteracy. This issue is being reversed through the literacy training courses offered by the TRC. As a result, between 2010 and 2018, more than 5,000 women have been trained in functional literacy. Consequently, women participate more in local decision-making processes. In particular, they participate in village development committees, water management committees, hygiene and sanitation committees, village leadership meetings, the pupils' parents associations, and the local Red Cross committees among others.
- Increased women's public speaking. The traditional circumstances that used not to offer women the option and chance to speak in public are gradually disappearing. MCs' members are becoming more and more resourceful and empowered to freely and authoritatively express their opinions on matters concerning the development of their community in local forums, meetings, and village assemblies.

8. Conclusions: the Success and Sustainability Factors of the Mothers' Clubs

The reasons why MCs are so successful is to be found in a summary of success factors:

- The needs in the community: available facilities do not cover for all;
- The successful decentralization of the TRC, which increased proximity with the beneficiaries;
- The availability of trainers;
- The key partnership role with the decentralized state health facilities;
- The focus on women's literacy;
- The organization of regional volunteer exchange camps;
- The distribution of gadgets and the edition of Red Cross' publications;
- The positive atmosphere in MCs and the joy of belonging to a large movement such as the Red Cross;
- The successes collected by MCs' members (land ownership, household harmony, healthier families) which makes them proud;
- The creation of a MCs programme overseen by a National Manager.



The Mothers' Club sustainability factors include:

- The implementation approach. Local authorities and potential club members are involved from the beginning in the process of creating the MCs through a village assembly, ensuring immediate buy-in and collaboration. MCs members are from the same area and are linked by the same common background and therefore have an interest in continuing activities within their community;
- Working tools and equipment: the CMs are provided with work equipment consisting of a Participatory Hygiene and Sanitation Transformation Suitcase, which helps in the prevention of diarrhea-related pathologies, image boxes, advice cards and a training guide. These communication and animation tools belong to the CM and are used whenever the need arises;
- The relationship between the CMs and the Health Training Managers. The TRC has good working relations with the Ministry of Health. At the local level, the activities carried out by the MCs help relieve the tasks of Health Training Managers. Some MCs even hold their meetings as part of health training sessions;
- Close monitoring at different levels: by the local coach, the prefectural coach, the community mobilization officer, project managers (where applicable), regional coordinators, department heads and even local, prefectural, regional or national governance;
- Motivational gadgets. Volunteers, including the MCs, most often receive free items such as T-shirts, skirts, caps, scarves, earrings and chains bearing TRC's logo. Most of these items are produced with club resources, when projects do not sponsor them;
- Animation/celebration. Songs and dances create an atmosphere within the club that allows women to put aside their problems at home, while they are at the club;
- The Health Solidarity Fund and community health solidarity actions continue to save the lives of many MC members in difficult health situations. A member can access money from the club to deal with hers or family-related health problems;
- The income-generating activity fund is a big support to members;
- Motivational camps and exchange meetings, as well as capacity building and social cohesion, contribute to the success of MCs;
- The support of local authorities and the interest they take in the activities of the CMs is also key.



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