

Making a Difference: Role of Women Religious in Bridging Democratic Leadership in Africa

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Women religious play a colossal role in bridging democratic leadership gap through programs that address needs for the underprivileged. Using 22 women participants of a three-year Hilton Foundation funded Sisters Leadership Development Initiative; this study examines the impetus for Catholic Sisters starting development programs in Africa, and implications of ethics of care in their practice of leadership. Data were collected through a Survey Monkey and face-to-face interviews. Findings indicate the overarching goal of their programs is to alleviate poverty for the underserved, to improve life and to increase opportunities for self-reliance. Also, capacity building programs increase effectiveness in service delivery.

INTRODUCTION

Under-representation of women in positions of leadership within the church, government, corporate and non-profit sector around the globe is common (Ngunjiri & Gramby-Sobukwe, 2012; Wakahiu & Salvaterra, 2012; Madimbo, 2012). Although the landscape is changing with more women in Africa taking on leadership roles in governments, corporate and not-for-profit, by and large fewer females hold top management positions. For example, there are very few women who have held positions as president or vice-president in Africa. Some of the celebrated heroines are Presidents Ellen Johnson-Sirleaf of Liberia and Joyce Banda of Malawi and Vice Presidents Marina Barampana of Burundi and Phumzile Mlambo-Ngeuka of South Africa. These women are a source of inspiration to other women; they tell a story that women have a capacity to lead.

In the same vein, in sub-Sahara Africa, far fewer females than males have the opportunity to acquire higher education, a prerequisite for taking on high profile leadership roles. Women in SSA continue to struggle to break the glass ceiling phenomenon as well as to redefine leadership and power in their own terms and cultural context. According to Wirth (2001), glass ceiling refers to the invisible barriers created by attitudinal prejudices to block women from taking on senior executive positions. These barriers may be invisible; (Ngunjiri, 2010; Bjork, 2006), nevertheless they limit women from holding top-management positions. Some of these barriers are culturally mediated and some are because of lack of job-relevant skills, education or experience (Powell 2000; Wakahiu & Salvaterra, 2012; Bjork, 2006; Madibo, 2012). Moreover, the credibility of women in leadership has not been fully accepted even when they have all the qualifications needed to assume a leadership position (Ngunjiri, 2006; Maathai, 2006). Madimbo (2012) argues that the entire social structure makes it difficult for women to penetrate through and be accepted as leaders. In some cases, women have to work harder to proof their capability. Wangari Maathai, in the *Unbowed*, explicitly shows the struggle she had to go through for male political counterparts to accept

that she can play the roles of both mother and a political career. Furthermore, in *Women's spiritual leadership in Africa: Tempered radicals and critical servant leaders*, Ngunjiri (2010) explicates stories of ten women who suffered immensely to be recognized in Kenya as role models, educators, leaders and advocates of human rights. The struggle of women and lack of inclusion in management of corporations, and organizations suggests denial of their democratic rights and thwarting their own development.

The focal point of this study is propelled by various questions: what is the role of women religious in bridging democratic leadership in Africa? How can the underprivileged persons be engaged to become active in community participation? Can leadership development programs teach participants to become community leaders?

Individuals cannot fully participate in democratic process without an understanding that their opinions count. In this study, democracy is characterized by advocacy and is based upon the principles of social equality to sweeping requirements for social-economic equality (Kimanthi, 2010). Democracy implies the ability of the people to have equal say in the decisions that affect their lives. However, the vast majority of the underprivileged persons in developing nations may not be fully participating in the decisions that affect their lives. More often than not women are considered as an underprivileged lot. Lack of relevant knowledge and engagement may be a reason for their lack of active participation. Glass ceiling obstacles that include, cultural barriers, gender inequality, low access to loans and investment opportunities continue to hinder women's development. According to Maslow and Lowery (1998) if deficiency needs are not met, individuals cannot yearn for higher level needs such as aesthetic, self-actualizations, and self-transcendence. Norwood (1999) adds that individuals at the lowest level seek coping information in order to meet the basic needs. In this view, enabling underserved individuals by providing knowledge, skills and providing basic social services may be a strategy to rebuilding their confidence and their ability to participate in a democratic process. Moreover, eliminating barriers that discriminate underserved persons and enabling them access opportunities that build their talents will not only allow them to generate income to support their families but also improve their income level and reliance on government subsidies.

A 2008 study by Cecilia De Mellow established that "women leaders readily fill the gap in their communities left by the absence of the state, effectively work across development sectors, and at individual, community and international levels" (De Mello e Souza, p.482). Women religious in Africa work as social workers, and engage in improving life for their people through myriad activities including job training, home visitors, HIV/Aids care, schools, community health workers, microfinance programs, and rehabilitation for street children. Their programs focus on youth, children, ailing and primarily areas where government services are limited. This study uses cases of women religious from four African nations. Studying these women and their ministries will provide an understanding of their impetus to initiate programs for the underprivileged, and how they bridge democratic leadership in Africa.

This research studies 22 women religious, a portion of over 600 women religious drawn from four sub-Saharan nations of Kenya, Uganda, Ghana and Nigeria. These women are alumnae of a three-year Conrad N. Hilton Foundation funded - Sisters Leadership Development Initiative (SLDI) program. They have achieved top or middle level management status in organizations established to serve underprivileged persons in sub-Saharan Africa. According to a 2011/2012 survey conducted to over 480 congregations of women religious in Ghana, Nigeria, Kenya, Uganda, Tanzania, Zambia, there are over 34,000 women religious serving in these countries (ASEC, 2012). They run projects that include, but not limited to, schools, hospitals, HIV/AIDS, unwed mothers, orphanages and programs for the elderly. Also, they start and serve in educational and healthcare institutions with a goal to provide quality services and promotion of values while alleviating human suffering.

RESEARCH CONTEXT

One focus of this study is to establish the voices of women religious in Africa because their voices are missing in leadership literature. Since 1850s European and American missionaries penetrated the African continent with a goal to evangelize and civilize Africa. At the onset, missionaries established schools,

healthcare units and taught catechesis (Obiakor, 2004; Liking, 2000). With time, many African girls joined the missionaries to become women religious (nuns, Catholic sisters) – adopting western religious values. As was the norm, the new entrant negated African norms of marriage and bringing forth families of their own. Their family became the community which they so willingly served and continue to serve. On becoming women religious, they too continued with similar missionary activity (Liking, 2000). To date, Catholic Sisters in sub-Saharan Africa are renowned for their dedication and servant leadership in education, healthcare, social and pastoral services. According to Greenleaf (1998) the desire to be a servant leader begins with a natural feeling in an individual to want to serve, then, a conscious choice to aspire to lead. These women make a conscious choice; spend a time in training and discernment after which they are consecrated through the profession of the evangelical counsels. Their consecration inspires a way of living that has eloquent social impact on the African society – their life and works fundamentally communicate a life of fidelity and authenticity to their vocation in service to their people.

Wakahiu and Salvaterra, (2012) postulates that women religious engage in leadership and management of humanitarian programs at grassroots levels, in community mobilization and in promoting welfare of the underprivileged persons. These women are social constructionist: they are motivated to contribute in eradicating social and economic challenges. They build, launch, and operate projects that tackle social needs that are inadequately addressed by existing institutions. However, no research about their leadership styles, leadership experiences, impacts of the programs they initiate and manage in Africa. Although these women contribute to the development of Africa and its peoples, not many studies reveal their motivation to establish their programs, or what other benefits have been fostered because of their initial efforts. Do these activities engage the underprivileged to take on democratic actions in their localities? Lessons drawn from these women's stories and leadership experiences can inform organizational leaders on ethical and democratic leadership practices in Africa.

A scan of the more than 500 projects operated by the SLDI alumnae reveals that more than half of these projects are located in remote rural regions in Africa and in the slum areas of large cities such as Nairobi and Lagos. These ministries – enable women religious to provide education, alleviate healthcare concerns, empower staff with leadership skills and create jobs leading to social and economic empowerment of the people, a prerequisite for democratic actions. Using a sample of 22 women selected from four African countries, this study examines the underlying motivations that lead Catholic Sisters to initiate these ministries in their locations, performance of these projects despite the low income status of the people being served and the impacts and practices adopted by these women after engaging in the SLDI Program. In addition, this study applies ethics of care to substantiate the work and leadership approach of these women in Africa.

AFRICAN WOMEN'S LEADERSHIP APPROACH AND ETHICAL LENS

Sub-Saharan Africa is characterized by a diverse ethnic composition and heritage. Characteristics include multitude of languages, cultures, structures, and an array of ethnically allied lifestyles (Gyekye, 2002; Wakahiu, 2011). Demarcation of Africa ignored existing ethnic and historical boundaries and local sociopolitical dynamics (Wakahiu, 2011). Despite the diversity, Africa is similar in many respects that define the “African-ness” of the peoples. In this light, Mangaliso (2001) argues that women in SSA manifest characteristic of social connection, they share cultural and historical similarities in the region. Because of the similarities that exist within the region, this study treats the regions as a single entity particularly as it pertains to women religious because their way of life springs from Christianity as brought to the region by missionaries. Although their leadership approaches may differ, there are similarities being that 98% of women religious in Africa live a life that is defined by the teachings of the Catholic Church. In their programs, these women are at the forefront in living out the message of life and love by responding to the perennial and innumerable needs of their people.

Following Africa's cultural tradition, women's roles included that of farming, homemakers and subsistence production for the family. Women endeavored to nurture and ensure family stability and community sustainability. The spirit of *ubuntu* is innate in African women because they are the mothers of

a community. *Ubuntu* refers to “the essence of being human being” illustrated as a person is a person through other persons” (Tutu, 2000, p.31). An individual with *Ubuntu* is open and available to others. Propelled by the spirit of *ubuntu*, it can be argued those women religious respond to their vocation through the spirit of *ubuntu* - to help other people, to create a world where people are cared, nurtured, and where humanity is called to be more conscious in the support of the underprivileged persons.

The leadership styles of these women suggest components of participation, team spirit, collaboration, nurturing and caring. Women religious define their core values as to serve the poor, needy, orphans, and the elderly and to create positive influence for change in the society where they serve through education, nursing and social-welfare programs. According to Lowe (2011) women in Africa have a tendency to promote the welfare of others and not their own welfare. Bass (2010) contends that women are generally more democratic in their approaches to leadership and tend to be more collaborative. The goal of a collaborative leader is to motivate others to follow in ways that are personally and professionally beneficial. Members feel engaged and taking part in the decisions for the growth of their organization. Women are prone to adopt transformational, democratic and collaborative leadership approaches because they are more interested in transforming workplaces into what works best for the organization (Wakahiu & Salvaterra, 2012; Bass, 2010; Ngunjiri, 2010). Lowe (2011) posits that women encourage subordinate to share in the power and participation structures rather than being self-serving. Collaborative leadership is positively correlated with organizational success and employees’ satisfaction (Yukl, 2002; Liking, 2000). Bass (1990) adds that subordinate perceive transformational leaders as more effective within the organization as well as contributing more positively to the company than transactional leaders who work for goals, objectives and justice issues. In addition, Northhouse (2010) posits that the ability of women to collaborate and seek consensus is sometimes realized at personal costs. Therefore, institutions that promote female leadership may stand a good chance for growth and success. On the other hand, too much of listening and soliciting ideas may hinder prompt decision making by women.

Ethical leadership is a requirement for all leaders in corporate, government and not-for-profit organizations. This part examines woman’s leadership with an eye for ethics of care. Ethics of care arose from the scholarly work of feminist appreciation of the importance of care and caring. It is credited to Sara Ruddick, Carol Gilligan and Nel Noddings (Shapiro & Stefkovich, 2005; Held, 2005; Gilligan, 1995; Beckner, 2004). Gilligan (1982) argues that women approach ethics and morality from a relational model and males tend to pursue justice based on rules and rights orientation. Ethics of care is a moral concept that is pertinent in women’s approach to leadership approaches. Majority of women take a leading role in caring and nurturing life, and they use similar approaches in their leadership. For example, Catholic sisters in Africa insinuate their vocation as called to be the light and hope for underprivileged in a society characterized by political instability, rampant conflicts and wars, sickness, and other social concerns – they take lead in initiating projects that address these ills- hence ethics of care. The attributes engrained in the spirit of *ubuntu* are pertinent in ethics of care. *Ubuntu* encourages being human and practicing relational aspects for community or organizational growth.

Held (2005) posits that ethics of care is concerned with transforming the structures within which practices of care take place. In addition, ethics of care is focused to attending the needs of others for whom we have responsibility for. It recognizes that humans are interdependent (Held, 2006; Shapiro & Stefkovich, 2005). For women, care begins with self, home and to the community and society. In addition, ethics of care offers a fruitful way to rethinking about women in leadership particularly in Africa where patriarchal norms continue to inhibit women’s leadership development and the role of care and nurturing that is propagated by women in their communities. For effective leadership, practice of multiple ethical paradigms to make leadership decisions is essential. For this study, ethics of care is applied to facilitate an understanding of the underlying reasons women religious in Africa initiate and run ministries for the underprivileged persons, their preferred leadership practices in their organizations. Studies imply that women tend to view their power and authority from another-centered notion and ways to enable the other (Ngunjiri, 2006; Bass, 1990). These perceptions propel women to want to bring relief and support other persons including colleagues at workplaces. Women listen to their staff more than males

do. In SSA, the nurturing roles attributed to women learned via cultural socializations easily lead them to want to care for others.

In leading others, women are more sensitive to interpersonal relationships and building community (Lowe, 2011). In their ministries, women religious undertake the responsibility to administer programs that facilitate to transform and encourage living the gospel virtues that perpetuate works of mercy – to feed the hungry, to give drink to the thirsty, to cloth the naked, to harbor the homeless, to visit the sick, to ransom the captive and to instruct the ignorant (Mathew 25: 31-46). To enable the underprivileged persons take on active participation in their communities and to create desired transformations in perception and attitudes providing good environment for empowerment is essential. The underserved feel left out and cannot participate in democracy effectively if their basic needs are not met. Women religious in Africa, take on the tasks to care, to educate, to support and to encourage the underprivileged to grow and reclaim self-confidence and their ability to earn a positive living. It is only then, they can participate effectively in democratic actions.

It can be argued that these women's leadership is engrained in ethics of care and justice in that they engage the poor by providing them with basic tools to stand for themselves. Caring is a virtue and a caring person is compelled to act that way by a greater power within the self (Held, 2005; Beckner, 2004; Campbell, 2004; Johnson, 2012) and to reach out to others in a responsive way. A caring individual is guided by the need to care, empathy, and trust and is sensitive to alleviating the needs of others. Caring brings inner peace, relief and transformation in another person's life.

PURPOSE

The purpose of this study is threefold: to examine the underlying motivations of women religious in initiating programs that serve the underserved populations in Africa, to describe the impacts in their ministries after engaging in a planned leadership development program, and to explore the implications of ethics of care as practiced by these women in their organizations. This study responds to the following research questions: a) What are the impetus of women religious in initiating development programs in Africa b) What leadership practices do they consider important and how they apply in their organizations? d) What are the implications of ethics of care in the practice of leadership? e) How does planned leadership development program influence women in the practice of effective leadership?

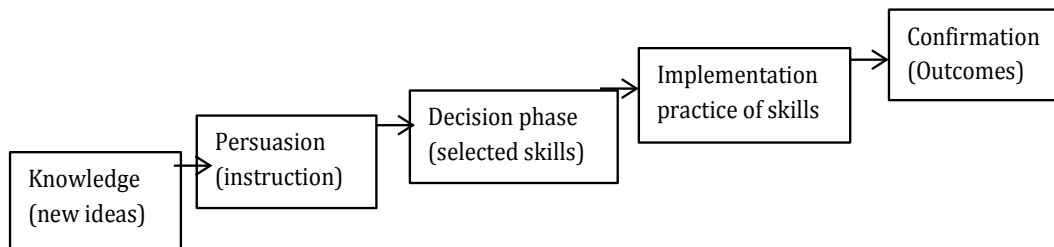
PROGRAM DESCRIPTION

The SLDI program was envisioned in 2006 by Steven M. Hilton, and operationalized in 2007 through a 2- million dollar grant by the Conrad N. Hilton Foundation to the African Sisters Education Collaborative (ASEC) and Marywood University. The program was designed in a cycle of theory-practice-theory, where participants congregate for four-week workforce development training and return to their ministries to implement the action plans and the knowledge and skills acquired. This competency based program is geared towards imparting the following skills: basic project management, participatory leadership, strategic planning, financial management, human resource management, written and oral communication, fund-raisin, project cycle, program evaluation, information/communications systems such as computer tools and software applications for management. At the completion of the program, participants acquire the following skills; personal leadership skills in communications, teamwork, creative problem solving, interpersonal relationships, self-direction flexibility, professionalism, resource management and computer literacy skills. The SLDI objectives are stipulated: a) ability to transfer the skills and knowledge needed for effective project and financial management; b) encouragement of creative and effective leadership; c) increase in abilities to identify and mobilize resources; d) expanded knowledge of development issues that impact the socio-economic and political life of individuals and communities; e) enhancement of skills in human relations; f) development of a strategic plan and plans to ensure sustainability of the projects (SLDI Program, Handbook, 2007).

THEORETICAL PERSPECTIVE

This study applies diffusion of innovation theoretical perspective to conceptualize knowledge and skills gained by women religious and how they disseminate these skills to transform their ministries and communities they serve. Roger (2003) diffusion of innovation model is essential to understanding skills transfer to workplaces. The model propagates adoption of leadership behaviors permeated through leadership development to workplaces by a consideration of the innovation, style of communication, steps in decision making and practice. As such, democratic action is possible for the underprivileged if they are effectively engaged.

FIGURE 1
ROGER'S (2003) DIFFUSION OF INNOVATION MODEL



METHODOLOGY

A narrative inquiry approach is applied to study 22 women participants of a three-year Hilton-Funded Sisters Leadership Development Initiative (SLDI) program. Data were collected in the spring-summer, 2012. A Survey Monkey was sent to a sample of 30 SLDI participants in Kenya, Uganda, Ghana, and Nigeria. In addition, the researcher spent time to interact with the participants in their ministries and collected data via engaging participants to share their success stories and life experiences and observed the skills practice. Twelve women were interviewed; a follow-up was done via telephone calls. Criteria of selection were that participants must have graduated from the SLDI program and had been in leadership position for a minimum of three years.

Interviews with each participant took approximately 30 to 45 minutes. During the interviews, the interviewer becomes the main instrument because that individual directs the interview process (Kvale & Brinkman, 2009). So, keenness is essential in crafting the interview questions, to ascertain credibility and dependability of the items. Because of the distance of travel within the cities in these countries, telephone interviews were conducted to some of the participants and a follow-up via email to clarify responses. Face to face interviews were audio recorded. The interviewer transcribed the recordings and developed themes that responded to the research questions. The researcher visited with some of the participant in their ministries to observe their skills practice. Notes taken during the site visit helped to clarify ideas and ascertain credibility and dependability of the transcripts.

FINDINGS

Participants in this study were SLDI alumnae a representation of each track in figure 2.

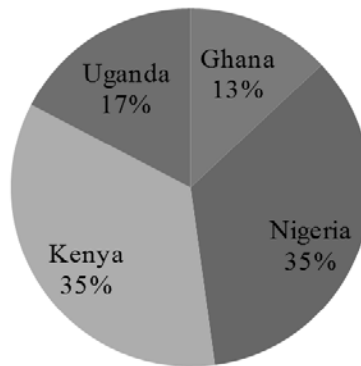
FIGURE 2
PARTICIPANTS BY TRACK ENROLLED

Participants by Track Enrolled

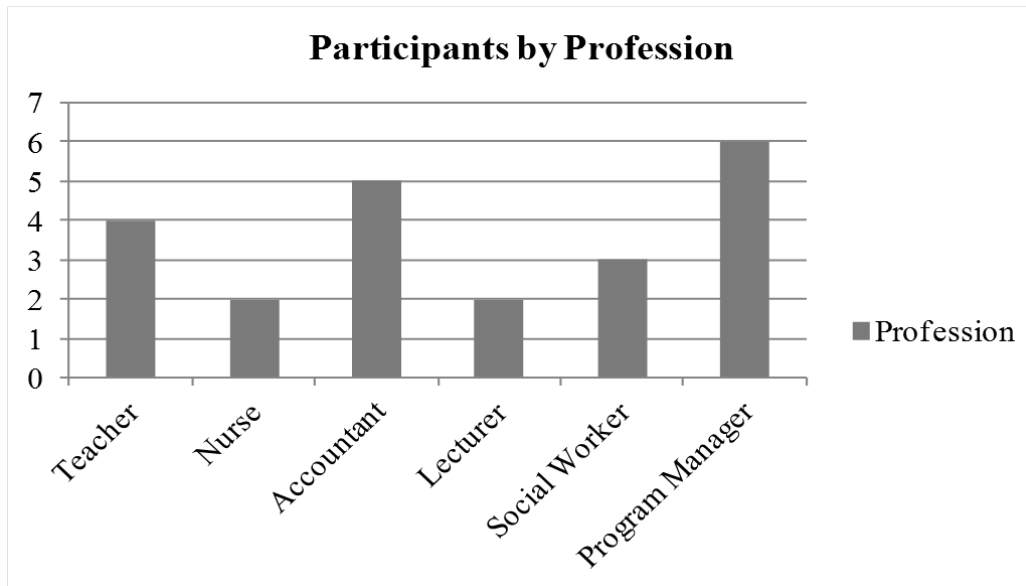


FIGURE 3
PARTICIPANTS BY COUNTRY OF RESIDENCE

Participants by Country of Residence

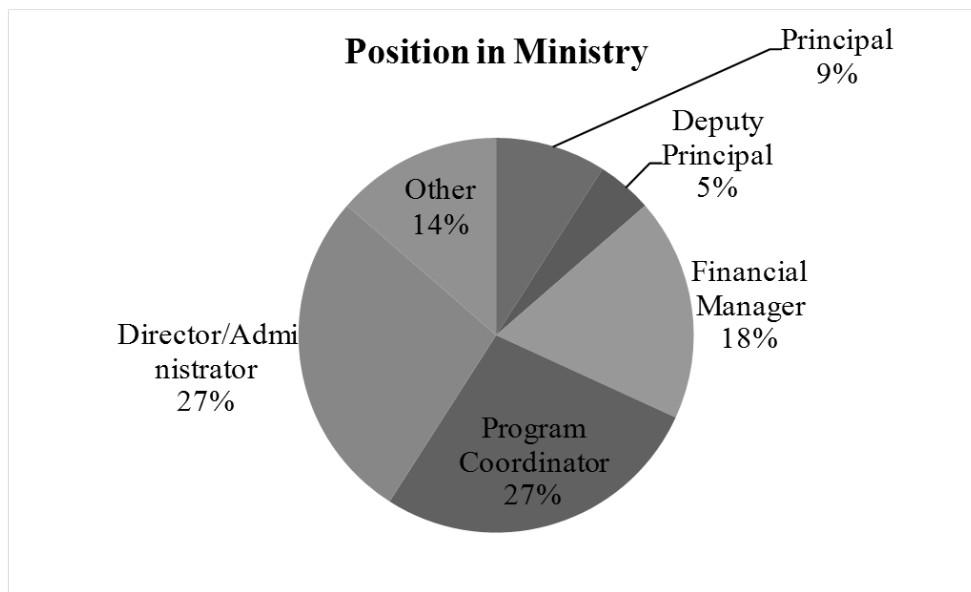


**FIGURE 4
PARTICIPANTS BY PROFESSION IN THE MINISTRY**



In addition, they hold variety of positions in their ministries as shown in the pie chart,

**FIGURE 5
PARTICIPANTS BY POSITION MINISTRY**



Three major themes emerged. a) Underlying Motivation to initiate projects and programs; b) Impacts on the programs, projects and organizations; c) strategies for improving community leadership and engagement

Underlying Motivations to Initiate Projects for Underprivileged

Whereas organizations initiate programs with a goal for profits, findings from this study established that women religious establish projects, and programs with a goal to reach to the underprivileged and underserved population by and helping them to break poverty barriers that inhibit their own development. Interviewees expressed a deep desire for service to humanity and transformation of people's lives. They expressed their deep connection with the people they serve and a need to change their lives for the better. More than 94% of the respondents indicated that they established the projects to help the needy; 92% said to provide quality and holistic education; 90% to support healthcare needs of the communities they serve. Interviewees narrated their motivations to initiate programs in the following description: Maria is a headmistress of a school with a population of 1,340 children. The school is located in an informal settlement along the margins of Nairobi city. Majority of the residents in the slum area are jobless. Illicit alcohol, drug abuse, frequent fights, and other social evils are mundane, affecting most of the children social and emotional development. The school is a haven where children feel safe. As a result, Maria introduced programs to support these children. The school has a feeding program, children are provided with a hot meal each day, in most cases, the only meal they will have for that day. Also, there is a small infirmary to care for ailing children and a social worker to attend to the needs of the traumatized children. Maria expressed the motivation of her community to initiate the school:

“to be able to reach out to the needy who otherwise would not have an education at all ... our projects are geared towards, providing education, healthcare and social services to the communities we serve... these projects are for supporting the most vulnerable.” She added “our hope is that we can bring a change in their lifestyle now and in future.”

Susan affirmed the same notion, that the motivation to initiate the project she runs: “to help the youths in Kaduna area in Ghana ... these people are very much impoverished by the collapse of the textile factories... my desire to uplift and support the youths in the area led to initiating the training institute where the youths can train in apprenticeship.” In addition, Lucy's perception and motivation to initiate the healthcare unit was: “to provide healthcare services to the rural community in order to improve nutrition, treatment, pre-natal and post-natal care, and, laboratory services, child welfare, and support and treatment of HIV/AIDS patients and related ailments, as well as providing voluntary counseling and testing.” Other statements that indicate motivations for initiating programs suggest intrinsic values to nurture, to care and to provide for the underserved populations. Marietta expressed:

“this hospital was started with a goal to provide healthcare to women who suffer from fistula and child bearing related problems... we serve women who otherwise would have lost their children and their lives through medical problems that can be readily addressed.”

Theopista added that the goal for her community to initiate the school was to “provide standard education to the poor and marginalized children in Gulu, Uganda by enabling rural women to become self-reliant and to be able to cater for their family needs ... provide for education of their children.” A variety of responses on the motivation elucidated desire to address greater needs for the community as expressed in these terms - empowering children with disabilities by training and giving them opportunities to bring out their talents and live independently; providing children with disabilities with medical rehabilitation, appliances, school fees, upkeep and resettlement packages.”

Over 90% of the respondents indicated that the ministries they manage are located in semi-urban, rural and slum areas because these are the areas where most underprivileged live. In examining the

suitability of the location of the projects, interviewees revealed that projects are located in these areas to provide the much needed services that address community needs. Teresia a healthcare provider described:

“ it is important to have the hospital, social welfare program and a school at this place because we have a high number of youths from this locality... most are joblessness, this makes them desperate... they are prone to engage in premarital sex ... teenage pregnancy is high, unplanned parenthood, sexually transmitted diseases are common and other ailments ... the number of orphans is growing, we felt the need to establish these programs to provide education, healthcare services, counseling support groups, creating jobs for them ... we have seen positive behavior change and ability to communicate and developing new perspective in these youths... some have become advocates of responsible living.

Majority 94% of the participants' echoed similar statements. The underlying reason to initiate the projects in these locations is to provide services at proximal points where the beneficiaries do not have to spend money travelling for the services. With availability of services and educational opportunities close to the underprivileged residential locations it has enabled some of them to break the cycle of poverty by acquiring relevant skills such as computer literacy, tailoring and dressmaking, carpentry, masonry and cookery. As a result, they create job in within localities, “we provide them with small grants to initiate self-help initiatives.” This is transforming their living and engagement in social and economic sustainability. These finding correlate with De Mello (2008) that “women are moved to solve problems of their communities and disturbed by extreme poverty and injustice ... absence of government initiatives and the need for basic services” (p. 26).

Impacts of the Programs and Projects Initiated

Participants were very positive and pleased with the achievements they had made in impacting the communities they serve. They told touching stories of the changes that had resulted in their clients and attitude change towards community participation, behavior change, increased school attendance and parents taking part in supporting their children. Majority of the participants 92% explained that through the SLDI program they learnt strategies to engage staff and community in helpful ways to make informed decision about their lives and planning for their future. Clear impacts of the program resulted from effective transfer of knowledge and skills to their ministries. Restetituta, a program director in a congregation that serves within East Arica narrated about her responsibilities that revolve around planning and implementing programs including increasing agricultural productivity to provide for the school run by her congregation, planning for food programs for underserved children and overall planning and executing plans for the welfare of all congregational projects that include schools, hospitals, and microfinance programs. Since graduating from the SLDI program, Susan has created large impacts as described;

I have written grants to help transform lives for the people we serve. I wrote and received a grant in the amount of \$6,578 ... for water tanks and gutters, for the purpose of harvesting rain water which was destroying the building of our school... another \$8274.72 for sinking a borehole to provide clean water in Kibiko, Kenya for local community and the sisters.... \$15,000; for the purpose of construction of nursery school in Zinga Bagamoyo, Tanzania; 18,000 Euros, to sink a borehole in Kikuletwa, Arusha, Tanzania for the local community; 13,000 Euros for the support of ongoing formation for the sisters; 6,700 Canadian dollars for education of two sisters studying.

Restetituta explained that her leadership skills were not only transformed but her way of planning and executing plans is completely changed with more engagement, delegation, teambuilding and documentation of the activities. She added,

“I have mentored eight staff members and facilitated workshops to sixty employees in east Africa...I wish I had the knowledge and skills I have now when I was starting in this position.”

Furthermore, participants described that on completion of the SLDI training; they engaged their workforce in meaningful ways and made efforts to reach out to transform their communities. The SLDI program intensified their need to involve the community in activities of their ministries. Ephraim participated in Web Design workshop that endowed her with skills in web design and editing. As soon as she returned to her ministry she developed a site for her congregation and ministry. She explained:

“After being involved in the Web Design track ... I designed a website for my congregation ... I am currently working to improve the site ... I am able to update the happenings in our ministries ... I wrote a grant to help improve the site and equip our new hospital... it was like a dream to receive funding... I have trained two boys who have been under our care as orphans, they too are excited about internet and web development... they are helping me in managing the site.”

Participants described capacity building skills as relevant for them as individuals, for their ministries and for empowering others in their communities. The skills helped them to advance their potential to implement new skills and reinvigorate their ministries. Mary observed:

“Capacity building seminars helped me to initiate and support training for the rural people in the villages and also in credit management... some of our clients started small scale farms such as fish pond vegetable farms through the funds that I provided through a grant that I wrote to the Hilton Fund for Sisters.”

In addition, Juliana a director of a social welfare program described how she initiated a newsletter to inform the community about the program: “I have initiated a newsletter to disseminate information on our programs I have seen people donating food stuff and financial support ... I attribute these donations to people understanding what we do and their help was needed to improve the lives of the poor children and women.” Another participant, Sophia added

“I was engaged in four projects... piggery, vegetable growing, and vocational training. I have found the skills I gained to be very useful ... grant writing, planning and resource management skills... these skills are not for personal benefits but to be used for services... I am using the skills to bring change in the training center.”

On leadership skills acquired in the program Mariana from Nigeria reported:

“Team building has really helped me to be able to work with different people without having many problems because I am more aware of the different behaviors that exist in a group. With this knowledge I have been able to carry those I am working with along and there has been great progress.”

Another, Stella in Uganda observed:

“Leadership has helped me to be able to share responsibility with those I am working with knowing that I cannot do it alone. It has also helped me in giving instruction to staff ... planning and supervision has really helped me because I now know that before any work can come out well, prior planning is essential. With this I am doing well because I am able to apply it to my work.”

Several participants cited the skills they gained and how they applied them in their ministries: “I gained accountability, communication, strategic planning, delegation, conflict management and creative programs that can help the community to become self-sustaining ... I have also kept dairy cattle and sheep to generate more income for the school.” Esther affirmed that the knowledge and skills she gained have not only benefited her but also the larger community she serves:

I wrote a proposal to Mission Zentralle and got \$14,117 for baking machine and to Hilton Fund for Sisters in the amount of \$6,360 for incinerator... I have initiated a nutrition program for the malnourished children and ante-natal Mothers.” Magdalene added, “I undertook a project for purchasing a car for pastoral care services... I conducted a fund raiser ... that raised \$41,866... now we can go visit the rural areas to bring medical care the community.

Other projects initiated included, sinking borehole for clean water in the communities, providing healthcare support such as dental care for children with no insurance, services to elderly individuals, orphanages and care for people with leprosy. These projects engage the communities served to provide them with a bridge to break poverty barriers and supporting them to develop self-esteem, confidence and attitude change. Most of the served particularly youths, in schools and orphans have become more engaged in ways no one would have imagined. Sophia observed: “Loss of their parents and relatives ... and with no counseling support seemed to have shattered these children lives ... however, our programs here provided the needed support and they have responded with positive attitudes that there is light at the end of the tunnel.”

Strategies to Involve Community in Leadership

Participants explained about strategies they have used to engage the community served to become more creative, problem solvers, and taking on making decisions that affect their lives. According to Bandura (1986), Social Learning Theory indicates that human behavior is learned through observation and modeling others. The results, of such observations are that learning becomes a reciprocal relationship between an individual and the environment. In addition, Bandura (1977) suggests that humans learn behavior through socialization (e.g. leadership, moral behavior) and model behavior from their parents, older siblings, leaders, and educators. Modeling may be perceived as transfer of skills by participants to their ministries, mentoring and conducting workshops to those they serve. As a result, thought process and patterns of behavior may be altered. Charbonneau, Barling and Kelloway (2000) in a research on application for social learning theory established that people tend to mirror behavior exhibited by their parents/seniors and exhibit similar behaviors with their peers.

Over 90% of the participants expressed that through the SLDI program, they acquired knowledge and skills that enabled them to improve their leadership styles and ascertain community engagement in leadership, decisions making and effectively sharing management roles. Some engagement strategies cited as relevant included participatory, delegation, consultation, team-building and sharing responsibilities. The outcome of staff and community engagement was evident in staff becoming friendlier, creative, and resourceful, engaged, energized to deliver services and rewarding experiences leading to significant improvements in programs and related outcomes.

Over 92% of the participants reported more involvement in leadership and community support services. Susan said, “I involve colleagues and the community we serve in identifying the needs, discussion on ways to address those needs and decision making through correspondences ...I solicit their opinion especially when a decision becomes a problem from the immediate team.” Posner added:

I try to show concern ... by being interested in the lives of staff in the health care center and outside of official duties ... I ask them about their family, children, and events taking place in the neighborhood ... I try to engage them by wanting to know what is happening and how they are doing, and how we can engage more, as a result they have become

interested, feel appreciated and cared for ... in return I have seen more laughter and engagement and participation in search for solutions in community issues ...being interested with the underserved and wanting to know their challenges and including them in searching for solutions seem to have unlocked their human potentials.”

Similar statements were expressed: Irene reported,

“I always ask for their opinion, I engage them in the management team.” And Luciana said, “I do a lot of teamwork with the employees ... by distributing duties to staff and sharing on the challenges and ways to overcome them.” Patricia added, “I share experiences with colleagues, together we have helped each other in the implementation of major projects.”

Mentoring was cited as an essential strategy that facilitated engaging particularly women in the neighborhood. Participants felt so empowered by having regular meetings to discuss ways to nurture and sustain their families. Majority 90% cited mentoring as a strategy they all use to engage staff and communities they serve. Tanisa explained, “I first mentored staff ... I shared the knowledge and skills I acquired from the program ... now we both have similar skills.” Margaret reported that meeting regularly and sharing with the staff and community helped to build a community:

There was bonding with staff and community members...

I see them taking problems and challenges in the community as a family, they donate for tuition for children who are orphaned ... they donate to support funeral expenses for the orphaned children ...slowly their lives and attitudes towards life is changing... they only need someone to hold their hand to show them the way, and they follow. Bibiana added: “we hold monthly meetings and share ideas and views concerning our clients and their needs, this has helped us to create programs that are relevant to address the community needs.”

Certainly, examples provided here reveal that community engagement builds social capital, improves social relations ties, creates networks and overall provides support for the underprivileged persons. As a result, changes have been reported in community health and wellbeing. More participation has been reported on the communities that otherwise would have waited for support. They have been engaged in human rights workshops, conflict management and resolution and have set community watchdog committee. There is less behavior problems reported because the youths are engaged in the community. The communities are becoming neighborhood watch adults are playing roles of each other’s keeper and their children too. However, there are challenges of creating jobs for the youths and women in order to lower idleness, and bingeing.

CONCLUSIONS

Present-day organizations invest in leadership development as a resource for maximizing productivity and improving performance (McCall, 1998). In support of leadership development, Charan, Drotter and Noel (2001) assert that quality leaders shift their focus from individual performance to leading others. Also, successful leaders encourage sustained skills training, mentoring and coaching to build meaningful leadership potential in the organizations thereby increasing productivity (Hill, 2003; Ladyshewsky, 2007; Patterson, 2003). These kinds of leaders enable the workforce to become functional contributors and motivate them to mentor and coach others to increase the organizational outputs and enhance quality relationships that encourage altruism, humility, vision, trust and service. The findings in this study reveal that leadership development was essential in increasing women religious self-confidence and esteem in

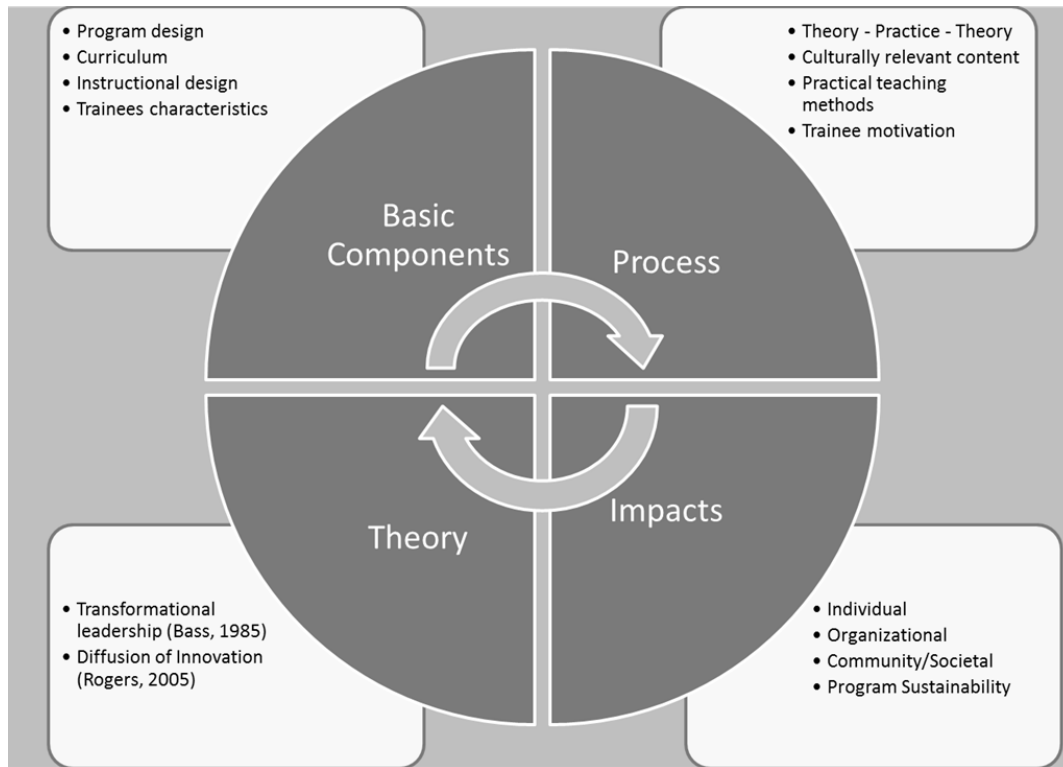
leadership. The women applied the knowledge and skills in their projects creating huge transformation in these programs and positively affecting the people they serve.

Jackson (2004) argues that amid the impressive activity of leadership development, practitioners are not clear why and how leaders in Africa change their behavior. The case of SLDI provides some lessons, that having a goal-oriented program with clear attainable and measurable objectives can facilitate increased capacity in leaders. In addition, clear program delivery measures of such a program can facilitate attitude change, adaptation of new skills and implementation of these skills in organizations. Moreover, majority of organizations are conduits in engaging other people to take active roles in social, economic and political change. For the women religious, their organizations focus towards empowerment of the underprivileged. Practice of the skills they gained from the SLDI program created change in them, their ministries and the people they serve. As a result, skills trickle down to the workforce and beneficiaries of their programs. SLDI participants were eager to gain knowledge and skills as well as practice and create desired changes in their communities. However, skills adaptation and transfer depends on the knowledge and skills individuals wish to transfer to their workplaces, as well as the level of acceptance and adoption of the new skills in workplaces.

Leadership descriptions provided by the participants indicate that they adopted collaborative, democratic leadership models that sought to involve their colleagues and those they serve. Plummer (2003) suggests that "good leadership involves collaborative relationships that lead to collective action grounded in shared values of people who work together to effect positive change" (p. 256). Majority of these women were able to establish a broader connections and contacts for business success, thereby forming social networks that facilitate collaboration in leadership roles. Their increased ability in fundraising locally and internationally to support their ministries attests to their networking capacities. Sorenson et al, (2008) adds that "networks enable women to acquire resources to meet business needs." Furthermore, women have the ability to see things in an integrated system, "women view business, family, community and society as an integrated whole not as a separate economic reality" (Plummer, 2003, p. 242).

The services provided by these women as described in this research attest to their ability to apply ethics of care. Ethics of care was evident in their leadership which derives in the conscious awareness to protect, to nurture, to nourish, and to support humanity. In initiating the projects, these women seek to address the needs of humanity. They recognized that each decision a leader makes, it comes with a level of restructuring of human life. So, good administration at its heart may be a resolution for moral dilemmas because leaders would resolve issues as soon as they arise. Because of the uncertainties, complexities, and operations, as leaders these women described the need for leadership development that helped them to be open to and applying multiple lenses to deal with emerging issues in their community and organizational setting. Moreover, mentorships was seen as a favorable strategy to increase investment returns for women empowerment and reframing organizations by adopting the best leadership strategies through practice of skills and engaging their communities to resolve their issues amicably. In forming their leadership concepts and practices, the SLDI program was essential to reshape these women's leadership styles and evaluate strategies and approaches they use in leading others. The diagram below illustrates theoretical perspectives pertinent for a beneficial leadership development program in Africa as evident from the participants' practices and feedback from their organizations. SLDI program has produced best practices that other workforce development programs can learn.

FIGURE 6
THEORETICAL PERSPECTIVES THAT INFORMS SLDI PROGRAM



The SLDI program had meaningful investments in the women religious in the six sub-Saharan countries. Participants have learned to undertake fundraising activities that have yielded many benefits for the ministries and improved services for the people they serve. Because women religious initiate projects that primarily serve the underprivileged, the outcomes of this study revealed the use of ethics of care guides most of these woman’s actions and services in their ministries. Overall, the data gathered from the interviewees revealed that the SLDI program had consequential impacts on the trainees, their ministries and their communities. Effects of the skills gained were evident in sustainable mentoring, the innovative projects created and in the endeavor to pass on knowledge and skills to co-workers.

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