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Community-driven development: does it build social cohesion or infrastructure?

A mixed-method evidence synthesis

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Governance



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About this working paper

This paper synthesises evidence on 23 community-driven development programmes. It combines narrative synthesis and meta-analysis to examine the impact of these programmes along their causal chain. It summarises the main findings of a longer technical report available on the 3ie website.

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Summary

In community-driven development (CDD) programmes, communities are in charge of identifying, implementing and maintaining their own externally funded development projects. These programmes have been implemented in low- and middle-income countries to fund public infrastructure. Sometimes, they have also been used to finance private transfers to individual households.

In the last few decades, CDD programmes have received substantial funding, notably from the World Bank. During this period, they have evolved from being a response for mitigating the social cost of structural adjustment to becoming an alternative and presumably cheaper delivery mechanism for social services that works directly with communities.

CDD programme objectives have evolved over time. The programmes in the early 1990s had more of an emphasis on poverty reduction and infrastructure building; the programmes in the late 1990s and 2000s have focused on decentralisation and improving local governance and social cohesion.

We carried out this synthesis study to assess how CDD programmes have evolved over the years. We were interested in examining whether programme objectives and design have changed over the decades and how effective CDD has been in improving outcomes. We synthesised evidence from 25 impact evaluations, covering 23 programmes in 21 low- and middle-income countries.

How CDD programmes work

The CDD programme implementing agency typically carries out communication and outreach activities to make communities aware of the programme and build support for broad participation. The funding structure takes one of two forms – the application-based model, in which communities are required to apply for block grants, or the allocation model, through which the implementer allocates grants to targeted communities.

Community members usually select development projects at a meeting organised by an existing community organisation or a newly established community project committee that is set up for the programme. Most CDD programmes require a community project committee to be set up to manage the development projects.

The committee oversees implementation of the community project, management of financial resources, procurement of materials and hiring of contractors. The committee and other community members may receive training in project and financial management and governance, and technical training for maintenance. Community members are usually also required to contribute cash, materials or labour to the project.

The CDD programme implementer usually facilitates the process of community participation in project selection and management. Facilitation has been used to increase the participation of women and marginalised populations. Facilitators have also played a part in conflict resolution.

The theory of change for CDD programmes focuses on two sets of outcomes: (1) social welfare; and (2) social cohesion and governance. For CDD programmes to achieve these outcomes, there are several assumptions about implementer and community capacity, as well as the political economy.

Impacts

Social infrastructure and social welfare

CDD programmes have made a substantial contribution to improving the quantity of small-scale infrastructure. But these programmes have a weak effect on health outcomes and mostly insignificant effects on education and other welfare outcomes. The exception is the clear impact of improved water supply on time savings.

Construction quality of infrastructure is generally comparable to that of other investments, but there are exceptions when it is inferior. CDD programmes' lack of impact on higher-order outcomes can be explained by CDD's focus on infrastructure, where complementary inputs have not always been provided to address context-specific challenges to social welfare.

There is presumably a cost advantage to using CDD approaches. However, it is not clear if CDD programmes are a more cost-effective delivery mechanism, especially compared with local government.

CDD programmes have put in place different institutional and financial mechanisms for operating and maintaining community projects. However, there are sometimes challenges in maintaining projects, such as limited community capacity, and recurrent expenses are not always met.

Social cohesion and governance

CDD programmes have little or no impact on social cohesion and governance. This synthesis study shows that the assumption that the entire community participates in the programme is not valid. Data show that the participation in decision-making is limited to a small number of community members. There is a clear 'funnel of attrition'; many people may be aware of the programme and the community meeting, but few participate in the meeting and fewer still speak or participate in decision-making. People participated in making bricks, not decisions.

CDD programmes may be using social cohesion rather than building it. Numerous factors may affect community involvement, such as the role played by the elite or prime movers in the community, intra-community divisions and the perceived benefits of participation.

CDD's impact on governance is sometimes undermined by the creation of parallel structures for the sake of the programme. The function of these governance structures is not clear once the community projects end.

How CDD programmes promote equity

Targeting

CDD programmes, especially social funds, have explicit mechanisms such as poverty maps to reach poorer areas. This approach has been successful in achieving greater allocation of resources to poorer areas, but not always to the poorest communities in those areas. Where an application-based, demand-driven model was used, better-off communities within districts tended to benefit more than poor communities. Implementers have overcome these biases through fund allocation rules with clear eligibility criteria.

The community's elite or prime movers can play an important role in application-based CDD programmes, as they are more likely to know about the programme and have the skills for putting together a proposal. The type of community project selected and the community contribution requirement also affect who benefits from the programme.

Community-driven reconstruction programmes are generally successful in reaching conflict-affected areas. However, it can be contentious to target ex-combatants or conflict-affected persons for support rather than the community as a whole.

Participation of marginalised people and women

Although CDD programmes have included measures to improve the participation of marginalised groups, there is no evidence on the impact of such measures. There is also no information about how programme implementers facilitated the participation of different ethnic and religious groups living in a community.

Although women rarely feature in the objectives of CDD programmes, they are named as a beneficiary target group in 15 of the 23 programmes included in this review. Most programmes also had rules or measures for encouraging women's participation in project identification and on project committees, implying an assumption that by engaging in these activities, women are more likely to benefit from supported projects. Several CDD programmes had an indicative target for the percentage of women on the project committee or a rule for ensuring female representation on it.

Gendered cultural norms and socio-economic factors powerfully and negatively influence women's participation in the public sphere. Where female participation is a target, not a requirement, women's participation appears to fall short. Available data show that women are only half as likely as men to be aware of CDD programmes, even less likely to attend the community meetings and even more less likely to speak at the meetings.

Although CDD programmes have features that encourage women's participation in meetings and village committees, less attention has been paid to their participation in project implementation, operations, maintenance and monitoring. Not many studies have carried out sex-disaggregated analysis of participation. Fewer still have assessed whether CDD programmes have empowered women to take a more active role in the public sphere, beyond the scope of the programme.

Implications for CDD policies and programmes

- The evidence from this synthesis and previous studies suggests that it may be better to abandon the CDD programme objective of building social cohesion and focus instead on sustainable, cost-effective delivery of small-scale infrastructure.
- Programme implementers need to assess if community members are willing or able to make contributions to development projects.
- Moving beyond the definition of a community as a geographical administrative unit and considering different groups and gendered power relations in the community would be important for delivering more equitable programmes.



- Since small-scale infrastructure is a major programme output, implementers should pay explicit attention to the technical, institutional and financial mechanisms in place for ensuring that these facilities are maintained and operate properly.
 - Designing CDD programmes involves a number of decisions where various trade-offs need to be considered:
 - The institutional set-up of the CDD agency, whether as an independent agency or as part of an existing ministry or department, influences the impact of the programme. There is a trade-off between the possible greater efficiency and flexibility of an independent agency and the greater government buy-in and sustainability of the processes implemented by an existing ministry.
 - The choice between using an application-based model and an allocation model should be informed by community capacity, financing and programme targeting objectives.
 - There is a trade-off between breadth and depth of coverage – reaching more communities or spending more in each.
 - Quantitative impact evaluations should assess the political economy of local decision-making or the different levels of existing social cohesion between sub-groups in a community.
 - Evaluations should also examine how issues related to the type of institution involved in implementation, the targeting of communities and the sustainability of arrangements influence programme impact. Future studies also need to examine how factors such as grant size, continuity of funding, facilitation of community participation and longer-term provision of training improve outcomes.
 - Impact evaluations should give more explicit attention to the comparison condition and what the counterfactual is measuring.
 - A cost comparison of CDD programmes and other delivery channels is one of the most important areas for future research. This would allow cost-effectiveness or cost–benefit analysis to be carried out and capture the practical significance of the impacts.
 - We need more process evaluations and qualitative research for causal chain analysis – for assessing why and for whom programmes work or do not work at each stage of implementation.
- Implications for research**
- Social cohesion is a complex concept. Most impact evaluations have assessed both *bonding* social capital, such as trust and cooperation in the community, and *bridging* social capital, such as social connectedness with authority. It would be important to consider the possible friction between these elements of social capital.

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Abbreviations and acronyms

| | |
|---------------------|---|
| BRA–KDP | Badan Reintegrasi Aceh – Kecamatan Development Program |
| CDC | Community development committee |
| CDD | Community-driven development |
| CDR | Community-driven reconstruction |
| DRC | Democratic Republic of Congo |
| FISE | Fondo de Inversión Social de Emergencia (Nicaraguan Emergency Social Investment Fund) |
| FONCODES | Fondo Nacional de Compensación y Desarrollo Social (National Fund for Social Compensation and Development) |
| KALAHI–CIDDS | Kapitbisig Laban sa Kahirapan – Comprehensive and Integrated Delivery of Social Services |
| KDP | Kecamatan Development Program |
| NSP | National Solidarity Programme |
| PNPM | Program Nasional Pemberdayaan Mandiri (National Community Empowerment Program) |
| WASH | Water, sanitation and hygiene |



In community-driven development (CDD) programmes, the community is in charge of identifying, implementing and maintaining its own externally funded development projects. These programmes have been implemented in low- and middle-income countries to fund the building or rehabilitation of schools, water supply and sanitation systems, health facilities, roads and other kinds of public infrastructure. Sometimes, they have also been used to finance private transfers to individual households.

There has been substantial external support for CDD programmes, notably from the World Bank. Between 2000 and 2008, the World Bank lent US\$1.3 billion per year for CDD programmes.¹ More recently, CDD programmes have also received funding support from UK aid and from the International Rescue Committee.

1.1 Evolution of CDD programmes

The origin of CDD programmes can be traced to ones that were established to mitigate the social costs of structural adjustment.ⁱ Interventions such as the Emergency Social Fund in Bolivia and the Programme of Actions to Mitigate the Social Costs of Adjustment in Ghana were the foundation for the World Bank's social fundsⁱⁱ – the first kind of CDD programmes.

CDD programmes have evolved in several ways. The first shift was from being emergency compensatory programmes to alternative delivery mechanisms for social services, bypassing government to work directly with communities.² Donor interest in community participation was fuelled by growing disillusionment with the capacity of developing-country governments to provide high-quality public services.³

Over time, the administration of CDD programmes was devolved to local governments at the district or sub-district levels. These programmes were part of a new wave of decentralisation, as they supported the devolution of governance.

ⁱ Structural adjustment programmes promoted market-oriented institutional and macroeconomic reforms as a response to the developing country debt crisis. The criticism of adverse social effects was highlighted in Cornia and others (1987).

ⁱⁱ Social funds were set up across Latin America, Africa and Asia, often with World Bank support, in the late 1980s and early 1990s. They focused on community projects, in most cases with community engagement using a CDD approach.

‘Among the 23 programmes included in this evidence synthesis report, the share supporting decentralisation rose from 40 per cent in the 1990s to 75 per cent in the 2000s.’

CDD programmes that initially focused only on creating local public infrastructure were increasingly used to create local governance structures and community-based organisations. This development is reflected in recent programmes that explicitly focus on using CDD to improve local government.

This focus on improving local governance is seen clearly with the most recent CDD programmes implemented in conflict-affected contexts. These programmes are called community-driven reconstruction (CDR). The focus on governance has, in some cases, been part of a broader agenda to promote democracy.

In line with these changes, the objectives of CDD programmes have also shifted over time. Programmes in the early 1990s emphasised poverty reduction and infrastructure building, whereas those in the late 1990s and 2000s focused on increasing decentralisation and improving local governance and social cohesion. Among the 23 programmes included in this evidence synthesis report, the share supporting decentralisation rose from 40 per cent in the 1990s to 75 per cent in the 2000s.

1.2 About this evidence synthesis study

The rapid scale-up of CDD programmes in the 1990s was not matched by a similar rise in robust evaluations.⁴ However, in recent years there have been a number of high-quality impact evaluations, including randomised controlled trials in the Democratic Republic of Congo (DRC), Liberia and Sierra Leone.⁵

The CDD programmes reviewed in this report have two main defining characteristics: (1) communities are involved in the identification, implementation and maintenance of the supported community-development projects; and (2) the projects benefit the whole community or selected target groups, not individuals. That is, the programmes deliver public, not private, goods. However, in some cases they may provide what are called group goods and services – for example, goods and services used by identifiable groups, such as farmers.

The CDD programme implementing agency typically carries out communication and outreach activities to make communities aware of the programme and build support for broad participation. Reaching out to communities is especially important when communities have to apply for funding of development projects (the application model) compared with when communities are selected by the implementing agency (the allocation model).

2.1 Public awareness

National programmes have used mass media, including television, radio and print media, as well as leaflets and posters to disseminate information. In Afghanistan, a television soap opera promoted the programme,⁷ whereas in Indonesia, the Badan Reintegrasi Aceh – Kecamatan Development Program (BRA–KDP) radio drama helped explain the details of the programme in easily understandable language and in a humorous manner.⁸ Professional associations, such as parent–teacher associations and informal networks, have also been used to spread information about a CDD programme.

At the community level, information was shared in meetings with community members or just community leaders. Other channels for raising awareness included posters, cartoon handbooks and announcements in churches and mosques, as in Afghanistan⁹ and the DRC;¹⁰ town criers in Sierra Leone;¹¹ sending invitation letters for the meeting in Indonesia;¹² and a roadshow in Afghanistan.¹³

2.2 Project selection

In CDD programmes, community members usually select development projects at a community meeting organised by either an existing community organisation or a newly established community project committee that is set up for the programme. CDD does not imply that communities can choose any kind of local development project. Most of them (19 of the 23 we reviewed) had a positive list of permissible projects. Nearly a quarter combined a positive list and a negative list of ineligible items and projects. The proposed project is screened for approval by the implementing agency, which could be the national or local government, an NGO or a governance entity created for the programme.

2.3 Community project management

Most CDD programmes require a community project committee to be set up to manage the development projects. There may also be a separate maintenance committee. The three programmes that were exceptions – those that did not have community project committees – were Latin American or Caribbean social funds from the 1990s. In those cases, the projects were managed by NGOs or local municipalities.

Project committees may be based on existing groups, self-selected from influential community members, appointed or elected. Elections have become more common over the years as CDD programmes have focused more on governance issues. However, elections may be combined with mechanisms to engage with local leaders, such as appointments. For example, the committee could include the village head and head of the facility being rehabilitated, as well as elected members of an existing community-based governance body, such as a school-based management committee. There could also be requirements to include women or representatives of marginalised populations.

The use of elections required the CDD agency or local implementing partners to be more closely engaged in managing the community process, since communities usually have little experience in organising elections. In general, project committee selection is no longer left for community members to work out on their own, as was the case in some earlier CDD programmes.

‘The provision of external facilitation has grown over time. It was provided in just half of CDD programmes from 1990 to 1999, but in all programmes from 2000 onwards.’

The community project committee oversees implementation of the community project, managing financial resources, procuring materials and hiring a contractor. The committee and other community members may receive training in project and financial management, governance, and technical training for maintenance.

The CDD programme implementer usually facilitates the process of community participation in project selection and management. The provision of external facilitation has grown over time. It was provided in just half of CDD programmes from 1990 to 1999, but in all programmes from 2000 onwards. Facilitation is intended to increase participation and build community capacity in project management.

Facilitation may be carried out by a single community facilitator covering several communities or by a dedicated team of workers in a specific community. For instance, the Kecamatan Development Program (KDP) in Indonesia had community facilitators recruited from the village where the programme was being implemented; it also had facilitators at the sub-district level to look after technical infrastructure-related matters and participation-related issues (Box 1). The National Solidarity Program (NSP) in Afghanistan, on the other hand, contracted NGOs to serve as ‘facilitating partners’ for implementation of the programme.¹⁴ In the Philippines, facilitation was managed by municipal-level teams.¹⁵

Facilitators worked on increasing the participation of women and marginalised groups and they also played a part in conflict resolution. In CDR programmes, this meant working on ensuring the participation of ex-combatants and conflict victims.

Responsibility for maintenance of facilities built or rehabilitated rested with the relevant line ministry, if the government was the implementer. However, the responsibility for maintenance could also rest with the community.





Box 1: Facilitators of the KDP in Indonesia

KDP appointed village facilitators (*fasilitator desa*) and sub-district facilitators (*fasilitator kecamatan*) who had different roles and positions in the implementation system. At the village level, two facilitators were elected, one of whom had to be a woman. The role of village facilitators was to introduce the programme to village residents and local leaders, organise meetings at the hamlet and village level for discussing and prioritising project ideas, link the community with outside assistance and ensure that project implementation ran smoothly. Most village facilitators lived in the villages they represented,¹⁶ and were typically recent high school graduates, asked to take the job as service to the community. They received a small stipend (approximately US\$10 per month) to cover their operational expenses.¹⁷

At the sub-district level, two facilitators were appointed by the implementing agency. One facilitator was supposed to focus on technical issues, such as infrastructure design, quality checks and budgeting. The other was meant to focus on social participation issues.¹⁸

KDP tailored its facilitation efforts in conflict-affected settings. In Aceh, additional information facilitators were hired at the sub-district level to help coordinate activities with other development programmes. These facilitators were meant to help coordinate the collection and sharing of data and share information related to the peace process.¹⁹

2.4

Community contributions

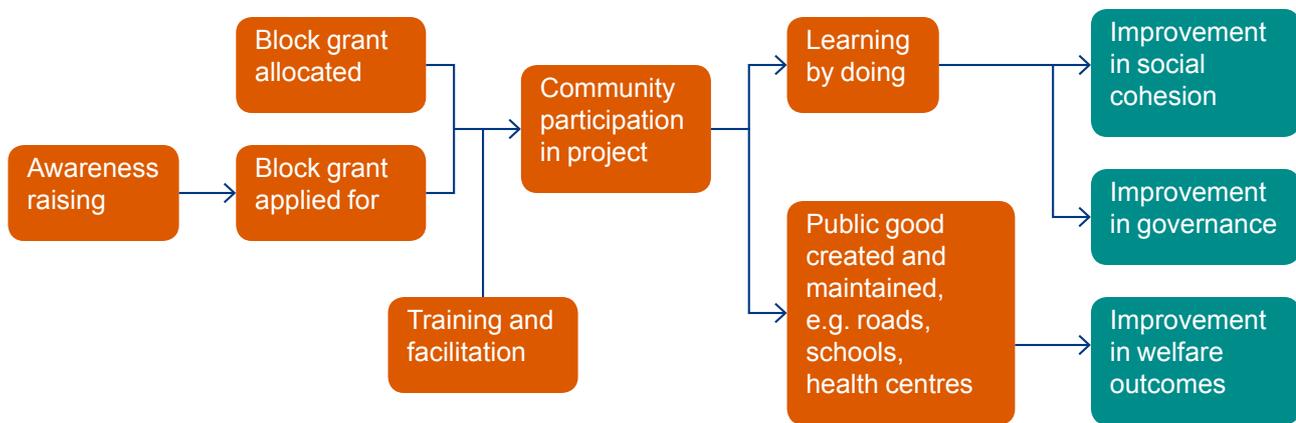
Community members were usually required to contribute cash, materials or labour to the project. In the CDD programmes included in this study, community contributions ranged between 5 and 50 per cent of the total project cost. In the majority of cases the required contribution was below 25 per cent, sometimes varying with the type of project. In some cases, communities chose between contributing in cash or in kind, but some programmes required both. For example, Moldova's Social Investment Fund required a contribution of 15 per cent of project cost, of which at least 3 per cent had to be in cash.²⁰

2.5

Theory of change

The theory of change for CDD programmes has two sets of outcomes: (1) social welfare; and (2) social cohesion and governance. As shown in Figure 2, CDD programmes support building or rehabilitation of public infrastructure, such as schools, health centres, water supply and sanitation facilities. Creation of this social infrastructure is expected to improve social welfare outcomes. Facilitation of participatory development gets communities to work together and learn by doing. The inclusive and transparent participation process presumably leads to an improvement in social cohesion and governance.

Figure 2: Theory of change



Assumptions

Design and identification

- Targeting is accurate.
- Awareness raising is carried out.
- Community has skills and social capital to apply for programme.
- Community projects are in line with community preferences and needs.

Implementation

- Programme is well implemented.
- Facilitation and training are of high quality and appropriate duration.
- Men, women and marginalised people are aware of and participate in all stages of the project.
- Community members have financial resources, time and labour to participate.

Impact and sustainability

- Community lacks social cohesion and ability to manage community projects.
- Participatory process builds trust between community members and with leaders.
- Complementary inputs are present, e.g. teachers and health workers.
- Systems are in place for maintenance.

To varying degrees, CDD implementers facilitate the participatory process and provide training in managing development projects. Either the implementer selects the communities that participate in the programme, or communities are required to apply for funding. If communities are required to apply, then the implementer must carry out public awareness activities to inform communities about the opportunity.

There are several assumptions underpinning this theory of change. For communities to apply for the programme, they need to know about it. For the participatory process to be truly inclusive, poor and marginalised community members should be involved in project implementation and have a say in decision-making.

There are assumptions being made about implementer and community capacity. CDD implementers should have the capacity to support the project by providing the necessary level of training and facilitation, and communities should have the capacity to manage and maintain the project.

For improved social welfare outcomes, community projects need to be adequately funded and complementary resources for infrastructure use should be in place, along with adequate operations and maintenance arrangements.

The participatory development process is meant to increase trust in the community and improve governance. Increased trust is expected to improve social cohesion, as we assume the community lacks social capital.

How has the public infrastructure created by CDD programmes affected the availability and quality of social infrastructure and welfare outcomes? Overall, we find that CDD programmes have made a substantial contribution to improving the quantity of small-scale infrastructure. However, they have had a weak effect on health outcomes and a mostly insignificant effect on education and other welfare outcomes (Figure 3).

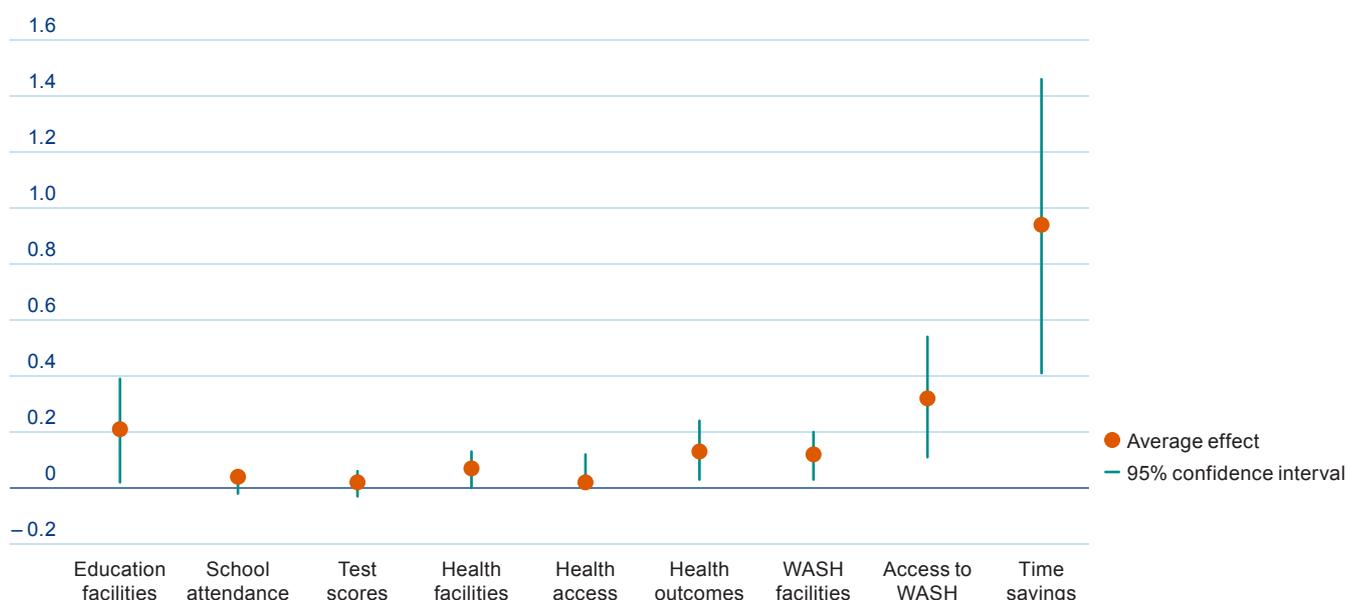
3.1 Impact on infrastructure creation

CDD programmes have supported large numbers of community projects that have often covered a wide geographical area. For example, more than 80,000 projects in 22,000 villages were supported in the second phase of the World Bank’s support to KDP in Indonesia;²¹ nearly 55,000 projects were undertaken on over 40,000 poor rural communities in Brazil;²² and the National Fund for Social Compensation and Development (FONCODES) in Peru supported more than 12,500 projects.²³ The Kapitbisig Laban sa Kahirapan – Comprehensive and Integrated Delivery of Social Services (KALAHI–CIDDS) programme in the Philippines supported 8,206 projects in 6,136 *barangays* (smallest administrative division).²⁴

‘These projects have resulted in a substantial increase in infrastructure creation, particularly for building or rehabilitating schools, health centres, water, sanitation and hygiene facilities, roads and rural electrification.’

These projects have resulted in a substantial increase in infrastructure creation, particularly for building or rehabilitating schools, health centres, water, sanitation and hygiene (WASH) facilities, roads and rural electrification. The numbers of facilities created or rehabilitated often extend to thousands, particularly for long-running programmes. For example, more than 10,000 new classrooms were constructed in Yemen²⁵ and more than 3,000 classroom blocks and 4,000 school latrines were built in Zambia.²⁶ Some projects provided equipment; more than 360,000 school desks were supplied in Honduras.²⁷ More than 100 health centres were constructed or rehabilitated in Afghanistan, Nicaragua and Senegal.²⁸ More than 57,000 septic tanks and latrines were constructed in Honduras,²⁹ 2,800 clean water units and 1,300 sanitation units were provided in Indonesia³⁰ and nearly 1,400 water projects were supported in Peru.³¹

Figure 3: CDD programme effects on social welfare





3.2 Impact on social welfare

3.2.1 Education

Since CDD programmes generally rehabilitate existing facilities rather than create them, they may improve quality but not access. For example, in Sierra Leone, 45 per cent of project communities had a primary school, compared with 46 per cent of control communities, but construction quality was significantly better in project communities.³²

In general, however, we cannot tell from most studies whether the CDD investment improved facilities, since we do not have information on what happened in the comparison group. Finding no impact may mean there were improvements in treatment and comparison areas, which is likely, as CDD programmes cover only some communities. For example, in Yemen, the Social Fund for Development built 7,685 new classrooms between 2006 and 2009, which was 30 per cent of the total number of classrooms built nationally over that period. Some of the other 70 per cent may have been in comparison areas used for the impact evaluation. So, the comparison tells us the quality of CDD-funded community projects compared with that of other programmes.

‘As CDD programmes have not focused on addressing specific contextual barriers to enrolment, attendance or learning, the lack of impact may be expected.’

In general, CDD-supported investments are of comparable or better quality, although there are some exceptions. In Honduras, 70 per cent of beneficiaries rated the construction of water facilities as good, but the figure was 90 per cent in non-programme areas. There was also a problem with the construction of toilets in schools and electrical installations, with 20 per cent not working in programme schools, compared with just 4 per cent in non-programme areas.³³

The impact of CDD programmes on school quality is best seen from the before-versus-after comparison, which is only reported for the Poverty Reduction Fund in St Lucia, which shows the largest improvement in the seven cases for which there are measures of impact on school quality.³⁴

Overall, the impact evaluations find no impact enrolment or attendance (measured in 12 cases) or improved test scores, although test scores were measured in just three cases. As CDD programmes have not focused on addressing specific contextual barriers to enrolment, attendance or learning, the lack of impact may be expected. The study of the Poverty Reduction Fund in St Lucia, for instance, states, 'Given the high prevailing level of school registration in St Lucia, Poverty Reduction Fund projects are not aimed at increasing the enrolment rate, but rather at improving the quality of facilities'.³⁵

Three programmes are exceptions in terms of improvements in enrolments, in Afghanistan, Peru and Nicaragua. However, these programmes are not exceptions to the observation that CDD-supported facility improvements do not seem to affect attendance. Investments in schools were marginal in the NSP in Afghanistan, so it is more likely that the effects came from the NSP's emphasis on female participation, which may have addressed cultural barriers related to the movement and activities of girls and women.³⁶ In Peru, in addition, to construction and rehabilitation, FONCODES implemented a centrally managed school uniform and school feeding programme, where the latter was shown to have improved attendance.³⁷ In Nicaragua, the Emergency Social Investment Fund (FISE) schools had more teachers than non-FISE schools, which contributed to the increase in enrolment.³⁸

The provision of additional components does not necessarily guarantee an impact. Program Nasional Pemberdayaan Mandiri (PNPM) in Indonesia provided uniforms, school supplies, scholarships and a transport subsidy. However, there was no effect on school attendance, which suggests that cost was not the binding constraint for the households receiving these benefits.³⁹

3.2.2 Health

Overall, CDD programmes have no significant impact on health facilities. This finding is due, at least in part, to the 'CDD impact evaluation problem'; in other words, the impact of the quality of health facilities is being measured for all treatment communities, including those where no investments were made in health, which dilutes the effect. This problem is less for education as education is the most common investment.

Results for nine programmes show that access to and use of health services improved significantly, although the magnitude of the effect is small. In Sierra Leone, 25 per cent of project villages had a traditional birth attendant house compared with just 8 per cent for the control.⁴⁰ The largest positive impact on the use of health services is seen with PNPM Generasi in Indonesia – an extension of PNPM that focused on health.⁴¹



Overall, health outcomes improved marginally, but there is significant variability across programmes. As in the case of education, where there have been improvements in outcomes, CDD projects supported more than just facilities. The CDD programmes that had no impact on health include those where there were no substantial investments in health.

The Bolivia Social Investment Fund's investments in health centres and water supply systems resulted in a significant reduction in the mortality of children under five years of age. Investments in health centres went beyond improving infrastructure, including provision of medicines, medical supplies, radios for calling ambulances, motorcycles for supporting outreach to patients and improving communication with regional centres and hospitals. The investments led to an increase in the use of health centres, particularly for prenatal care, which likely contributed to the reduction of mortality of children under five.⁴²

The National Rural Infrastructure Project in Senegal led to an improvement in the nutritional status of children in poor households. The improvement was attributed to an increase in access to clean water and healthcare facilities. The programme's agricultural infrastructure projects also led to a significant increase in household expenditures per capita, which may have driven the improvement in child nutrition.⁴³

The CDR programme in Liberia did not lead to an improvement in either access or health outcomes – assessed in terms of sickness of children under five years of age. In this case, communities chose to invest in the construction of community facilities, including *palaver* huts (traditional, circular huts) and government guesthouses. The treatment communities also had fewer existing health facilities, as they were more rural and less accessible to the main road.⁴⁴ The lack of results on access and health outcomes is therefore not surprising.

What is clear from these studies is that the size and kind of investments made in health are important for improving access to services and outcomes. Complementary interventions, such as water supply, transportation and income-generating projects, can also improve health outcomes.

3.2.3 Water supply and sanitation

Evidence from eight programmes shows WASH community projects have a significant impact on improving access to improved water and sanitation. This improvement is strongest for the before-versus-after comparison for the Poverty Reduction Fund in St Lucia. There, the share of households having drinking water and water for domestic use rose by 53 and 57 percentage points, respectively.⁴⁵



In the case of clean water, a focus on rehabilitation in some cases meant investments did not result in increased access. In Honduras, approximately 90 per cent of households had access to clean water in both treatment and comparison communities,⁴⁶ but there was improved access in the case of sanitation projects. Moreover, 90% and 82% of households in project areas used sewerage and latrines, respectively, compared with 78% and 66% in comparison communities that had been accepted by the programme but had not yet begun activities.⁴⁷

Investments in WASH infrastructure have reduced the time required for collecting water, which studies of three programmes have measured. In Yemen, 40 per cent of households reported a reduction, compared with 10 per cent in a comparison group from communities that had not yet received the project.⁴⁸ In Honduras, there was a small but significant reduction of nearly one hour per month spent collecting water in Honduran Social Investment Fund communities compared with non-Honduran Social Investment Fund communities.⁴⁹

In St Lucia, the proportion of households with a drinking water supply in their house or yard jumped from 35% to 88%, and the proportion of water for domestic use rose from 34% to 91%. Consequently, the proportion of people who regularly had to fetch water from outside decreased from 69% to 21%. The time saved mainly benefited women, as they were usually assigned this task. Seventy-five per cent of households involved in a community project stated that they had more time available.⁵⁰

3.3 Economic investments and outcomes

CDD programmes have not had an overall impact on economic outcomes. They had no effect on income and expenditure in the six programmes where this outcome was assessed. On average, there was also no effect on employment for the three programmes where it was assessed. There are short-run employment effects during project construction that are not captured in these studies.

Of the three programmes, the Philippine KALAHI–CIDSS programme is an exception, with a 4 percentage-point increase in the likelihood of employment. The effect was driven by an increase in female employment as a result of greater economic activity generated by the project, rather than project-related employment opportunities.⁵¹

Data from four programmes show that they lead to an increase in asset ownership. However, these results are driven entirely by the large impact of the National Fadama Development Project in Nigeria, which included the provision of private asset transfers for building individual livelihoods.

There was no significant impact in the other three programmes where asset ownership was measured (DRC, Liberia and Sierra Leone). In these three programmes, block grants were made to communities rather than individuals.

There is no improvement in the use of infrastructure, including transport infrastructure. However, there is variability across programmes. The provision of roads for the National Fadama Development Project led to improved access to transportation services. The use of roads for productive purposes, such as agricultural input and output transportation, increased substantially.⁵² In the Philippines, the large number of roads financed by the KALAHI–CIDSS programme had a positive impact on accessibility. Roads led to lower transport costs and greater household mobility, and increased the proportion of houses that were accessible through the year, increasing access to utilities and business opportunities.⁵³

However, CDD programmes in the DRC, Senegal and Afghanistan had no impact on infrastructure access and use. In Afghanistan, transportation and irrigation projects were both found to be of limited effectiveness, although they accounted for a significant proportion of the grant expenditure. For instance, local transportation projects (which included bridges, footbridges, culverts, secondary and tertiary road resurfacing, retaining walls and access roads) accounted for 16 per cent of block grant expenditure in treatment villages. The lack of impact has been attributed to issues with project design and maintenance.⁵⁴ In Senegal, the lack of impact was attributed to the late implementation of road projects.

3.4 Cost-effectiveness

CDD programmes have sometimes, but not always, been more cost-effective than alternative delivery mechanisms, in which the government or NGOs have completely managed the programme. There is limited evidence on cost-effectiveness. The available evidence suggests that local government is systematically cheaper.

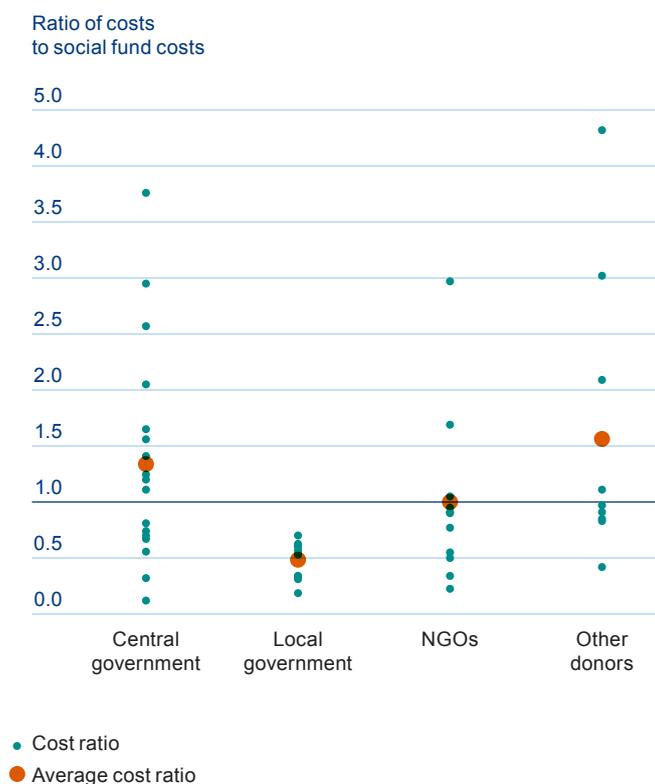
The most comprehensive analysis is from a World Bank study of social funds, which made cost comparisons in Armenia, Honduras, Nicaragua and Zambia.⁵⁵ The comparisons are with central government, local government and NGOs. The results from this analysis are shown in Figure 4, in which the figure measured on the vertical axis is the ratio of construction costs for the agency type (horizontal axis), compared with the social fund for that country and construction type (which thus by definition has a value of 1). Each green dot is a cost comparison, and the brown dots show the average ratio for that agency. The sectors covered are education, health and water supply.

‘The cost advantage of CDD approaches is not proven, but may be present. It is, however, likely to vary depending on context.’

Figure 4 shows that the cost estimates for local government are consistently lower than those for social funds, while those for central government are generally higher, and higher on average. However, a more recent cost analysis carried out for the KDP in Indonesia found that KDP-managed construction of water supply, roads or bridges and irrigation schemes cost roughly half (44 per cent cheaper) of what the same projects would have cost using local government contractors.⁵⁶ A large part of these savings came from the use of community labour for the construction of infrastructure.

The main conclusion from this discussion is that the cost advantage of CDD approaches is not proven, but may be present. It is, however, likely to vary depending on context. Further research is required on cost-effectiveness.

Figure 4: Cost-of-construction comparison of CDD programmes compared with other agencies (ratio of cost to CDD programme)



Note: Derived from Rawlings et al. (2004).

3.5 Sustainability

The evaluations reviewed in this synthesis were all undertaken only a few years after implementation of the community projects was completed, so there is no direct evidence of sustainability. Instead, we can consider the likelihood of sustainability by examining whether the necessary conditions are being met.

There are three pre-conditions for sustainability:

- **Technical sustainability:** are CDD-supported works and infrastructure of good technical quality and properly maintained?
- **Institutional sustainability:** are institutional mechanisms in place so that the responsibility for who does what, in terms of implementation and maintenance, is clear?
- **Financial sustainability:** are financial resources allotted and available to meet recurrent costs and maintenance expenses for CDD-supported public works?

3.5.1 Technical quality

In some countries, such as Brazil⁵⁷ and Indonesia,⁵⁸ CDD-supported infrastructure has generally been reported as being built to a high quality. However, poor quality of works has been mentioned as an issue in Afghanistan, Armenia, Honduras, Malawi, Nicaragua and Peru.⁵⁹

A study of construction quality in Malawi found that, of 121 school blocks and teachers houses sampled, 35% of the school blocks and 18% of the teachers' houses were reported to have serious defects, with almost 50% of the school blocks having some damage on the floor.⁶⁰ Beneficiaries in Malawi reported that the roads were below standard and that latrines had collapsed a few weeks after construction.⁶¹ In Afghanistan, an evaluation report states: '40–45 per cent of the 13,000 projects are of good quality, but for the others there is concern that the quality will not be as good because the community development councils have insufficient capacity.'⁶²

The poor quality of infrastructure has been blamed on the lack of technical specifications given to contractors, the quality of contractors and the quality of supervision. In schools in Honduras, for instance, contractors were not given technical specifications to make connections to the mains for electricity. This meant that 28 per cent of the installations built by the Honduran Social Investment Fund remained unconnected, compared with 4 per cent of those built by other agencies.⁶³



A lack of technical specifications was blamed for variable and poor-quality construction in Afghanistan,⁶⁴ Armenia⁶⁵ and Nicaragua.⁶⁶ Poor supervision, poorly qualified contractors and engineers and insufficient capacity of implementing agencies have resulted in poor-quality projects in Afghanistan, Armenia, Malawi, Nicaragua and Peru. In Armenia and Jamaica, the awarding of contracts to the lowest bidder irrespective of their track record has hampered the implementation of community projects.⁶⁷

In contrast, in Zambia, the use of standard blueprints, training provided to contractors and supervision of construction by district education buildings officers helped in maintaining high quality in construction.⁶⁸

3.5.2 Institutional sustainability

Institutional mechanisms for ensuring quality construction have included: (1) providing standard blueprints; (2) selecting and training private sector contractors who are right for the job; (3) on-site supervision; and (4) commissioning a quality assessment of completed works. The presence of these institutional mechanisms varied greatly among the CDD programmes included in this synthesis. Some programmes have all of them in place, and some have none.

Issues have arisen about programme implementers' capacity to supervise large numbers of projects and lack of enforcement of quality provisions in construction contracts. In Peru, for example, only 20 per cent of FONCODES-supported construction projects were subject to supervision.⁶⁹ For CDD programmes implemented through local government structures, as was the case in Indonesia and the Philippines, the implementing agency was able to provide more on-site supervision of construction and ensure compliance with procedures. In the case of the Armenian Social Investment Fund, where work was of inferior quality, the contractor was paid less than the full amount agreed in the contract, rather than rejecting the work and requiring it to be built to standard.⁷⁰

Arrangements for maintenance have sometimes suffered from a lack of clarity about roles and responsibilities. For example, responsibilities may be split between the local government and community project committees, but there is a lack of clarity on who does what and when. This situation can result in low participation by the community in project maintenance.

3.5.3

Financial sustainability

The cost of maintenance has been borne by a central agency, shared between a government or implementing agency and the community, or borne wholly by the community. When the CDD implementing agency is solely responsible for financing operations and maintenance, such as in St Lucia, then it can be doubtful that financial sustainability will be achieved.⁷¹ The Nicaraguan government established a maintenance fund for FISE,⁷² whereas the Moldova Social Investment Fund provided for maintenance from its core operating budget.⁷³

Other programmes put in place local financing mechanisms. Under the NSP in Afghanistan, for instance, households had to pay a monthly fee in cash or in kind for covering depreciation costs and for appointing technicians to maintain project facilities.⁷⁴ User fees were charged for public services provided under the Social Investment Fund in Bolivia.⁷⁵

Recurrent expenditures for operations, notably salaries, are more likely to come from central government agencies. This would only be required if new infrastructure is created rather than rehabilitated. For example, in Nicaragua, the responsible government ministry or agency became the owners of the facilities, for which they committed themselves to financing the operations and maintenance costs.⁷⁶

Despite these measures, lack of funds for operations and maintenance is frequently mentioned as an issue, because communities have not been able to contribute, as in Afghanistan,⁷⁷ or there was a lack of commitment from central agencies, as in Benin.⁷⁸

Impact of CDD on social cohesion and governance

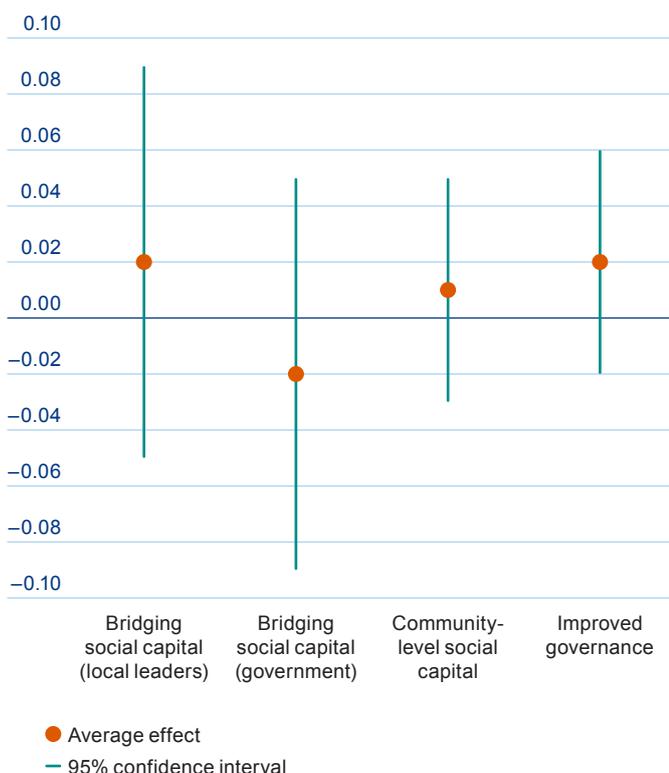
A meta-analysis of CDD programme effects shows that they have had no impact on social cohesion, decentralisation or governance. The analysis captured three separate aspects of social capital or social cohesion:

- Bonding social capital or community-level social cohesion, which included measures of trust and cooperation between community members;
- Bridging social capital, which included measures of social connectedness, especially to those in authority; and
- Governance, which included measures such as participation in decision-making and the political process.

For all three aspects of social cohesion outcomes, the overall effects were very small and never significant. This result is consistent, and there is little variation across most of the included studies (Figure 5).

Social cohesion has been the most closely studied outcome of CDD programmes. A number of studies reported findings on various indicators of social cohesion at each stage of the causal chain:

Figure 5: CDD programme effects on social cohesion



- Six impact evaluations assessed meeting attendance and participation as an activity related to social cohesion for six programmes. There is no effect found on this measure for the large CDR programmes in Afghanistan, the DRC, Indonesia and Liberia, while positive effects are seen in Honduras and Sierra Leone. However, the overall average effect across all six programmes is not significant.
- Five impact evaluations assessed skills related to social capital, such as better mobilisation, managerial and other related skills. All of the studies except one (Sierra Leone) reported insignificant impacts. However, even in Sierra Leone, the average effect is small.
- Fifteen impact evaluations reported on bonding social capital or community-level social cohesion. None of them found a significant impact, with the effect size commonly close to zero. Hence, the overall effect size is close to zero and not significant.
- Ten impact evaluations reported bridging social capital with the local leadership. All but one case (Poverty Reduction Fund in St Lucia) are insignificant. There is also some heterogeneity, as three studies report small to moderate negative effects, which are insignificant. The overall effect size is, however, very small and insignificant.
- Five studies report on bridging social capital with government. It is always insignificant, with a negative but insignificant overall average effect.
- Six studies report the impact on governance. There are some examples of significant impacts – for example, on participation in local governance in Sierra Leone – but the average effect is insignificant for all six programmes, as is the overall average effect.

This clear finding that CDD had no impact on social cohesion echoes what is consistently reported in earlier literature. The World Bank’s review of social funds concluded that they ‘operated as users rather than producers of social capital’.⁷⁹ A slightly later World Bank review of CDD programmes similarly concluded that ‘much more success has been achieved in community-based development or CDD projects on quantitative goals, such as the construction of infrastructure, than on qualitative goals, such as capacity enhancement or quality of training’.⁸⁰ A recent impact evaluation of the GoBifo programme in Sierra Leone concludes that there is ‘no evidence that GoBifo led to fundamental changes in the way in which community members interact or in their capacity to act collectively outside the immediate sphere of the project’.⁸¹

Another review of impact evaluations of CDD programmes concludes that ‘there is no evidence, however, that CDD transforms local decision-making or empowers the poor in any enduring way’.⁸²

4.1 Why have CDD programmes failed to have an impact on social cohesion?

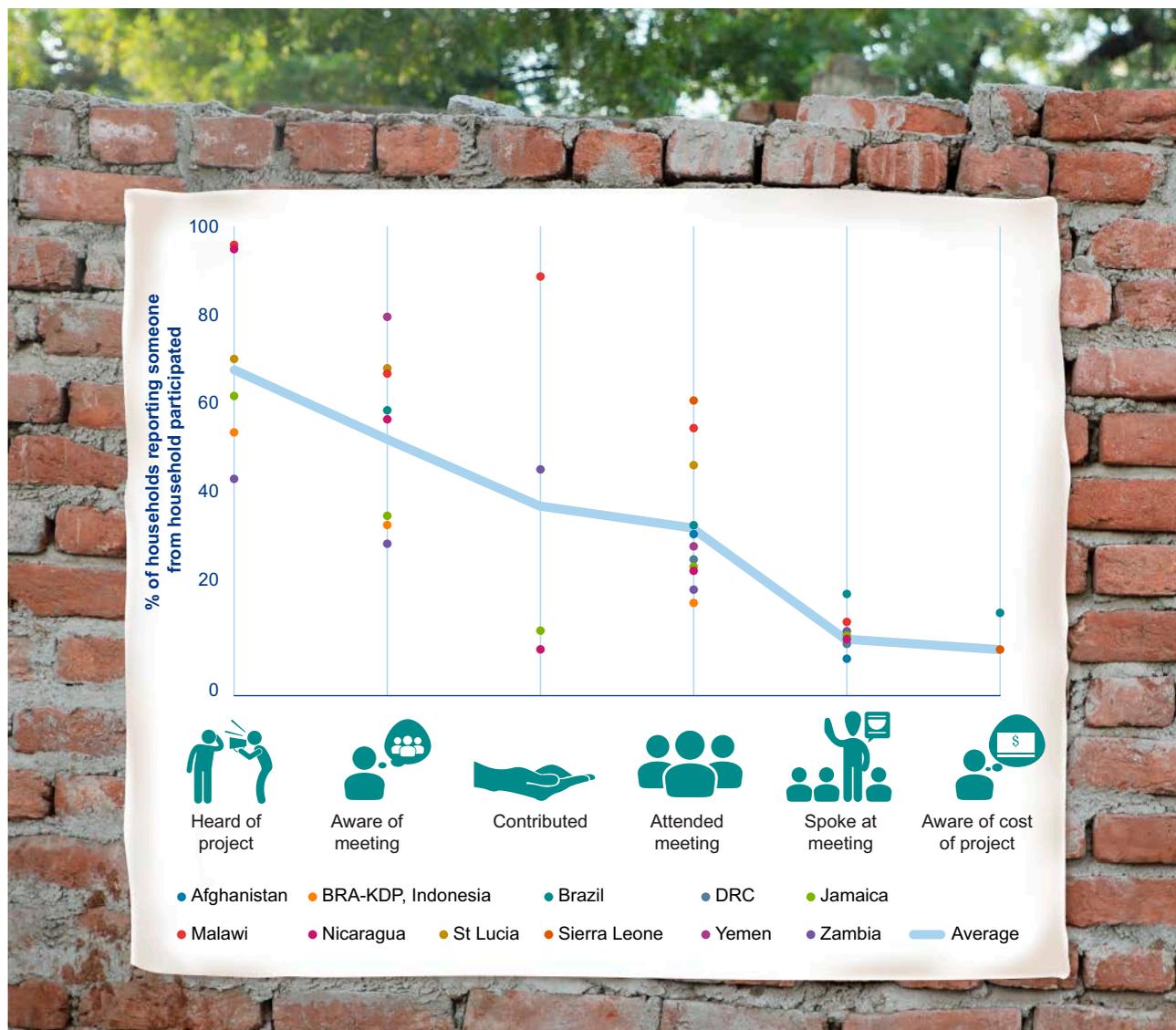
According to the theory of change, the community participates in project identification, management and implementation. The participatory and inclusive process is meant to build trust among community members and improve governance. The learning by doing in this process is meant to create social cohesion and improve the ability to collectively undertake more projects in the future. However, this review finds that the assumptions made for this theory of change to work may not be quite realistic. We examine the reasons in this section.

4.1.1 Limited community participation in decision-making

The CDD process is meant to begin with the community meeting where the project is identified. How participatory is this meeting, in practice?

Data on community awareness and participation in meetings were available for just nine CDD programmes. Figure 6 shows a clear funnel of attrition; community participation declines along the chain of participation in decision-making. All programmes show a consistent declining trend. On average, 73 per cent had heard of the CDD programme, but only 57 per cent were aware of the meetings related to it. Forty-one per cent attended the meetings, but only 16 per cent spoke at the meeting and a slightly lower percentage were aware of the cost of the project. Qualitative data also support the observation that the majority in the community had limited engagement in actual project selection.

Figure 6: Proportion of households participating: the funnel of attrition





4.1.2

What are the reasons for limited community participation?

CDD programme design may favour the elite: Prominent community members, rather than the community as a whole, influence project identification the most. This is especially the case in the application model, in which the elite or the prime movers played an active role in applying for the project. Illiterate villagers could not fill in the programme forms, as was mentioned in the evaluation of NSP in Afghanistan.⁸³

Community leaders frequently made project applications for the Jamaica Social Investment Fund without extensive consultation with community members. Consultation often meant simply informing people rather than taking their views into account.⁸⁴ In Malawi and Zambia, community members who attended the meeting were informed about the need for material contributions, such as bricks and sand, rather than consulted on the choice of community project.⁸⁵ People participated in making bricks, not decisions.

Just as the choice of project is usually determined by a few community leaders, actual management of the project is not undertaken by the whole community, but by the few people who are in the community project committee. The requirement for community contributions may engage a large proportion of the community, but their role is restricted to making cash, in-kind or labour contributions, and does not include decision-making.

‘People participated in making bricks, not decisions.’

In Malawi and Zambia, traditional leaders mobilised the community and used sanctions to enforce the contribution requirement. Fines in the form of money, livestock or labour contributions were imposed on community members who did not contribute.⁸⁶

Communication and outreach activities for encouraging participation may also favour educated members of a community. Mass media channels such as radio, television and newspapers may not be effective in reaching community members unless they are appropriately customised. In Aceh, people in rural areas were reluctant to read print materials about BRA–KDP, such as Q&A-style advertisements published in newspapers. Purchasing a newspaper takes time and money, and some community members said that it was difficult to understand the technical language used in the advertisements. Radio was also ineffective in the case of the BRA–KDP, as the radio drama aired on national public radio, while the target audience had a strong preference for local stations.⁸⁷

Customised communication materials that included visual aids have been useful for disseminating information about programmes. To reach illiterate intended beneficiaries, NSP in Afghanistan printed a cartoon handbook to explain each phase of the programme.⁸⁸ However, there is very little information on whether such customised communication material has been used across programmes, for example to address the needs of illiterate populations or to deliver material that has not been translated into local languages.

Intra-community divisions: Most CDD programmes have defined a community as a geographic administrative unit, which ignores the multiple ways in which a community may be divided. In Yemen, many communities are divided along political and tribal lines. In some cases, these divisions have prevented communities from coming together to agree on the services they needed or the location where these services would be provided.⁸⁹ Similarly, in some areas in Afghanistan, different groups within communities found it difficult to participate in the community development committee (CDC) because of long-standing enmities and conflicts. They were able to participate only after proportional representation for different groups was negotiated.⁹⁰ In some cases, influential individuals opposed a more broadly representative CDC, as their authority was being challenged by the elected body.

Lack of cooperation from local leadership: Qualitative research highlights instances where CDD programmes have been seen as an external imposition that threatens the authority of existing leadership. In Indonesia, village heads sometimes retained control over decision-making on village administration, planning and development. The KDP principles of community participation, transparency and accountability were therefore not followed.⁹¹ In Afghanistan, religious leaders and community members in some areas resisted the programme as 'anti-Islam' or 'an American trick to trap them'.⁹²

Perceived benefits from participation: Community participation depends on whether members perceive the benefit of participation. In Moldova, participation was highest in school-related projects, since most members were parents.⁹³ In Jamaica, households without school-aged children did not participate in the rehabilitation of schools.⁹⁴ Attendance in village- and sub-village-level meetings was significantly higher for BRA–KDP,ⁱⁱⁱ compared with the regular KDP in Indonesia because the former funded livelihoods proposals from individuals. More people attended the BRA–KDP meetings where the selection of beneficiaries took place. Participation subsequently declined.⁹⁵

The opportunity cost of participation may be another barrier. In Afghanistan, people were more occupied with farming during the spring and summer months. Although winter was more conducive for securing community participation, accessing communities was a challenge for programme staff.⁹⁶

Lack of programme rules and facilitation to encourage participation: Some CDD programmes had minimum attendance requirements for the community meeting at which projects were selected. For example, the Moldova Social Investment Fund required 25–30 per cent of the community members to be present for communities of fewer than 2,000 people, if a decision had to be taken at the meeting.⁹⁷ In addition, the fund required a house-to-house referendum vote to confirm the project priorities chosen in the community meeting.⁹⁸ However, not all of the programmes had prescribed participation rules. For those that did have them, we found no information on how they were enforced and whether they worked in improving participation.

Facilitators employed by the implementation agency can also play an important role in improving participation, as happened under KDP (Box 1). Sustained engagement over the years, rather than a single-project approach, can encourage deeper participation. In Indonesia and the Philippines, participation in village meetings increased as subsequent rounds of funding became available. In contrast, lack of finance and facilitation resulted in poor participation in the second phase of the National Fadama Development Project in Nigeria.⁹⁹

Our analysis shows that the nature, intensity and duration of facilitation varies greatly among programmes. However, there is no evidence on whether facilitation improves participation in the long term or empowers different groups in the community to participate actively in decision-making beyond the scope of the project supported by the CDD programme.

4.2 Why do CDD programmes not improve governance?

CDD programmes have sometimes created parallel community-level organisations that can create friction with local leaders, have negative effects on governance outcomes and sometimes serve no purpose after the completion of the projects.

A community may be defined in a way that is not consistent with existing administrative boundaries. In the DRC, the Village Development Committee combined several existing villages, so the Village Development Committee and higher-level CDCs were new bodies whose coverage did not correspond to the existing administrative unit.¹⁰⁰

iii The Badan Reintegrasi Aceh (Aceh Peace Reintegration Agency) (BRA), with technical assistance from the World Bank, adapted the community-based block grant mechanism used by the Government of Indonesia's Kecamatan Development Program (KDP) to target conflict-affected villages. Community-Based Reintegration Assistance for Conflict Victims, or BRA–KDP, involved communities in identifying conflict victims and determining the assistance they should be receiving.



In Afghanistan, where the CDC corresponded to a subset of the village or a group of villages, the impact evaluation of the NSP found a negative impact on the quality of local governance. The CDCs created for the programme were of limited institutional relevance beyond project completion. The study found no impact on the probability that the key decision makers in the village were affiliated with the CDC. The study also used village benefit distribution analysis to assess programme impact on the equity of food aid distributions by village leaders. The evaluation showed that the presence of the CDCs increases the incidence of embezzlement of funds. In this case, the presence of an additional community organisation created ambiguities. After completing the NSP-funded projects, the role of the CDC may have become unclear.¹⁰¹

Similarly, the impact evaluation of Tuungane in the DRC concludes, 'It may be more fruitful to try to build on existing local governance capacity rather than seeking to change it.' Traditional leaders enjoy considerable legitimacy and are not considered authoritarian and their dominance in decision-making does not necessarily reflect elite capture.¹⁰²

'Political divisions may exist between groups within a community or between communities. These may not correspond exactly to the administrative units typically used for implementing CDD programmes.'

Although there may be governance-related issues in post-conflict countries, it cannot be assumed that these challenges are at the village level. Political divisions may exist between groups within a community or between communities. These divisions may not correspond exactly to the administrative units typically used for implementing CDD programmes. They are therefore unable to create sustainable changes in local participatory institutions and governance structures.

Most CDD programmes have identified poor and vulnerable populations as their target beneficiaries. Most CDR programmes, on the other hand, identified conflict-affected people and ex-combatants as their target groups. To reach them, CDD agencies and implementers have used different targeting methods, facilitated the community participation process and mandated requirements, such as quotas, to ensure a more diverse representation of community members in the project committees.

5.1 Targeting CDD and CDR programmes

CDD programmes used geographical targeting methods, such as poverty maps, to allocate resources.^{iv} For example, the Rural Poverty Reduction Project in Brazil used government data and indices, such as the General Index of Socio-economic Development and Municipal Human Development Index, for identifying poor states, regions or municipalities.¹⁰³

^{iv} A poverty map calculates an overall index for geographical units in the country, such as districts. The map may be based on income or expenditure poverty measures, but more commonly uses a range of socio-economic indicators.

‘CDR programmes face a particular challenge in identifying conflict-affected populations. Accessing reliable, impartial data to identify groups within a population may be difficult, and the very act of targeting can be a sensitive process.’

Analysis of six World Bank social funds and a more recent analysis of the Tanzania Social Action Fund show that geographical targeting of CDD programmes led to allocation of resources to poorer areas, but not always the poorest communities in those areas. In St Lucia, 47% of the programme’s resources directly benefited households in the bottom 30% of the income distribution, and only 11% were received by households in the top 30% of the distribution.¹⁰⁴ The Peruvian social fund FONCODES, for instance, reached the poorest districts, but not the poorest households in them. Better-off households were slightly more likely to benefit than poorer households.¹⁰⁵



CDR programmes face a particular challenge in identifying conflict-affected populations. Accessing reliable, impartial data to identify groups within a population may be difficult, and the very act of targeting can be a sensitive process.¹⁰⁶

For BRA–KDP in Indonesia, facilitators helped communities identify conflict victims who would be the main beneficiaries of the programme.¹⁰⁷ However, the idea of labelling individuals or subsets of households as conflict victims was controversial in the early stages. In many cases, the unwillingness to label people led to communities requesting that funds be allocated equally to all individuals or households. Some communities said that they would prefer to receive no assistance if the funds could not be divided in an equal way.¹⁰⁸ And indeed, the evaluation of BRA–KDP showed that conflict victims and non-victims were equally likely to benefit. There is also evidence that the programme resulted in conflict victims having lower acceptance of ex-combatants. This increased social tension may have been due to combatants receiving cash grants that were meant for victims.¹⁰⁹

5.1.1 What have we learned about targeting?

Our analysis shows that several programme design elements influence who benefits.

The elite play an important role in the application model of CDD programmes: The nature and extent of awareness-raising activities affect which communities apply to the CDD programme under the allocation model, which was the most common model. In contrast, CDR programmes used an allocation model.

In Zambia, the social fund used the annual Headmasters' Conference as an outreach channel, which is part of the reason why a large share of funds was used for rehabilitating schools.¹¹⁰ In Zambia and Malawi, public sector workers, such as teachers and health workers, have been important in project committees. They have also worked closely with traditional authorities in the community to get them to support the application process.¹¹¹

The approach in the KALAHI–CIDSS programme in the Philippines led to fewer applications from poorer and less geographically and politically connected villages.¹¹² Similarly, better-off communities were far more likely to apply for funding under the Tanzania Social Action Fund. However, the allocation of funds was more pro-poor at the local level. The fund applied eligibility rules, including defining vulnerable populations that counteracted the bias in applications. Although targeting was found to be pro-poor, the funds still flowed towards households that had high levels of civic engagement and were connected to the local elites.¹¹³

As mentioned earlier, the role of the elite or the prime movers in the community is important in the demand-driven application model. The elite are both more likely to know about the programme and more likely to have the skills and the networks necessary to submit a proposal. They may be able to influence community decisions because of their status, wealth or education.

The type of community project influences who benefits: The type of project selected by the community determines which households benefit from the project. In Nicaragua, FISE used a poverty map based on national household living standards data for targeting the poor. An impact evaluation that examined FISE's targeting at the municipal, community and household levels found that the social fund's investments in latrines, schools and health posts benefited poor communities and households. There was an element of self-targeting. Investments in water systems were poverty neutral. However, sewerage projects benefited those who were better-off. In this case, the nature of the projects had a bearing on who benefited from the projects.¹¹⁴

Community contribution requirements can restrict benefits to poorer and marginalised areas and populations: The inability to pay can limit the participation of poorer communities and poorer groups within communities. During the implementation of the Armenian Social Investment Fund, several projects with high potential benefits to poor people had to be dropped, as very poor communities could not come up with the required 15 per cent contribution. The fund then lowered the community contribution to 10 per cent for all local development projects and 5 per cent for communities identified as poor, based on an assessment of poverty and capacity to pay. A significant improvement in the number and range of community contributions occurred after the rules changed.¹¹⁵

'The elite are both more likely to know about the programme and more likely to have the skills and the networks necessary to submit a proposal. They may be able to influence community decisions because of their status, wealth or education.'

However, the 10 per cent contribution requirement in Armenia still deterred the poorest rural communities from applying for new schools or water facilities.¹¹⁶ In Nigeria, many community projects for women and vulnerable people have not been implemented because the targeted groups could not pay their contributions.¹¹⁷

5.2 Facilitating the participation of marginalised people and ethnic and religious groups

CDD programme implementers have employed facilitators to increase the participation of marginalised populations. In Sierra Leone, for instance, GoBifo facilitators divided the community into groups – women, youth and men. Each group had to come up with its own development plan. This approach was meant to encourage women and young people to express concerns, something that they may have been uncomfortable doing in the general meetings.¹¹⁸

In the case of BRA–KDP in Indonesia, a special effort was made to involve ex-combatants by separately interacting with them or recruiting some of them as facilitators or programme staff.¹¹⁹

In Liberia and the DRC, programme implementing staff were responsible for engaging with diverse power holders in the community. In the DRC, an advisory board had to be established to engage with a range of local leaders.

The advisory boards were meant to include different religious and ethnic leaders, government officials, political leaders, business leaders and members of chambers of commerce, civil society leaders, chiefs, and women and youth leaders.¹²⁰ In Liberia, the community mobilisers were responsible for looking out for elite capture and spotting changes in local conflict issues that could trigger the resurgence of violence. They also had to set up an advisory group including five influential people from different groups – older and younger men, older and younger women, ex-combatants, ethnic groups and the physically challenged. Programme staff sought the help of this advisory group for resolving conflicts.¹²¹

Although measures were taken to improve the participation of marginalised groups within a community, there is no evidence on their impact. There is also no information about how programme implementers facilitated the participation of different ethnic and religious groups living in a community. Most studies do not report either quantitative or qualitative data regarding this issue.

5.3 Women's participation in CDD programmes

Although women rarely feature in the objectives of CDD programmes,^v they are named as a beneficiary target group in 15 out of the 23 programmes included in this review. Most programmes also had rules or measures for encouraging women's participation in community project identification and on project committees, implying an assumption that engaging women means that they will be more likely to benefit from supported projects.

^v The exceptions are Benin and Senegal.



Figure 7: Women's participation in CDD programme activities



Several CDD programmes either had an indicative target for the percentage of women on the project committee or a rule for ensuring female representation on it. In Afghanistan, community members had to vote for two people, one man and one woman, although this requirement was waived in areas affected by conflict.¹²² In Sierra Leone, women were required to serve on the village development committee and be co-signatories to community bank accounts.¹²³ Women typically served as the treasurer on community committees, as they were considered more trustworthy for handling finances.¹²⁴ Similarly, in Malawi, women held senior positions in the project committees, such as chairperson, treasurer or secretary.¹²⁵

CDD programmes also targeted women by either mandating that proposals come from women's groups or offering projects aimed at women's groups. In Nigeria, attention was paid to ensuring that proposals came from women's groups.¹²⁶ For KDP, at least one proposal from every village had to come from a women's group, with these proposals reviewed in a meeting where only women participated.¹²⁷

Women were also targeted by including relevant items on the menu and ensuring they got access to employment. In Yemen, the programme's menu included projects such as community midwife training, literacy classes and schooling for girls.¹²⁸ Women were also targeted through employment opportunities with CDD-funded projects. In Moldova, women had to be offered a higher share of employment opportunities for project-related work.¹²⁹

5.3.1 To what extent do women participate in CDD programmes?

Data available for seven CDD programmes (Figure 7) show that women are only half as likely as men to be aware of CDD programmes, even less likely to attend the community meetings and even more less likely to speak at them.^{vi} Women are less likely than men to participate in CDD programmes, with participation declining along the causal chain.

^{vi} This lower participation by women is also reported in a broader review (Mansuri and Rao 2013) of more than 500 participatory programmes. Participants of such participatory development programmes tend to be male, wealthier and better educated, and with better connections.

Generally, women are under-represented in project committees. Committee members are, on average, nearly three times more likely to be men than women.^{vii} Women's participation in these committees also varies across contexts – a reflection of the difference in gendered social norms about women's roles in public life, as well as differing emphasis on women's inclusion across programmes.

Mandating the inclusion of women in the project committee may not make a difference to participation. In the DRC, a comparison was made between communities that had to fulfil a gender parity requirement for project committees and those with no such requirement. Even in communities where there was no such requirement, women accounted for 30 per cent of committee members.¹³⁰ Gender-related requirements also may not be enforced. Two of the five elected committee members in Yemen's Social Fund for Development were required to be women, but on average there were fewer than two, with the average declining over time.¹³¹

Where female participation is a target, not a requirement, women's participation appears to fall short. In Malawi, women made up 25 per cent of committees against a target of 50 per cent.¹³² In Zambia, in the early years of the social fund, women accounted for only 3% of committee members, prompting the target to be lifted from 20% to 50%.¹³³

5.3.2 What have we learned about women's participation in CDD programmes?

Mandating the participation of women does not change the power dynamics of participation in the short term: Gendered cultural norms and socio-economic factors powerfully and negatively influenced the participation of women in the public sphere. Gendered household and labour roles greatly increased the opportunity cost of attending meetings. The meeting times often did not take into account when women are busy with household or other responsibilities. Structural discrimination also meant that higher illiteracy among women was cited as yet another reason for their poor participation in project meetings and other activities.¹³⁴

Women's participation challenged traditional power relations that men have in the public domain. In the first phase of the NSP in Afghanistan, men and women reportedly did not sit together to create the community development plan.¹³⁵ Although the NSP mandated gender equality in CDC elections, project selection and project management, such rules have encountered resistance. Male relatives may control voting decisions, precluding women's participation in CDCs, or de-prioritise projects favoured by or benefiting women.¹³⁶ Women may not contest gendered power relations for the sake of the way a programme has been designed. For example, women in Afghanistan have reportedly given their votes to their male relatives, who elected an all-male senior CDC, which approved project proposals.¹³⁷ Where women have to be involved, there were reported instances where a powerful man then controls his wife or sister to act on his behalf.¹³⁸

vii Calculated from data in sources for Figure 7.



‘Gendered cultural norms and socio-economic factors powerfully and negatively influenced the participation of women in the public sphere.’

An impact evaluation of the second phase of NSP in Afghanistan found mixed effects of the programme on gender norms. Men’s acceptance of women in leadership positions at local and national levels had increased, as had women’s participation in local governance. These results were mainly attributed to the NSP mandating women’s participation in their supported projects and the fact that the programme offered women a platform where they could engage with men. Yet, the impact evaluation found that NSP did not lead to any change in men’s attitudes towards women’s economic and social participation or girls’ education.¹³⁹

Women’s participation is also tied to their socio-economic status in the community. The creation of separate female farmer groups in Nigeria increased women’s participation in Nigeria. However, only a few women could be part of these groups. Membership was highly related to a woman’s economic and social ties with others in the community and the support she received from men. Men who were involved in farming helped women who worked in the processing sector gain access to the project. The most successful women were those who had worked out such productive arrangements with their husbands or a male relative.¹⁴⁰

Similarly, as part of the Indonesian PNPM, women-only forums were meant to encourage them to express their ideas and opinions and participate in decision-making. However, an assessment of PNPM found that, although women’s participation in village-level meetings increased, decision-making was often limited to the elite and the activists among participating women. Although women dominated the discussion at the women-only forums, men could still influence the decision-making process. In some cases, women’s suggestions were renegotiated at the village level.¹⁴¹

Women’s participation varies depending on the type of activity: In Afghanistan, women were more involved in project selection than in the election process, as they saw the latter as a male domain.¹⁴² Similarly, a gendered division in the roles in the KALAHÍ–CIDSS programme in the Philippines meant that women were more likely to participate in proposal selection and preparation, while men were more likely to participate in local project implementation.¹⁴³

Many of the construction-related activities – contracting, supervision and construction work itself – were male-dominated areas. In Yemen, women were less visible or involved during the implementation of the project, particularly when it required supervision of work involving construction, such as roads.¹⁴⁴ Managing construction or labour contracts was seen as a male-dominated area.¹⁴⁵ In Indonesia, despite the fact that KDP achieved high levels of women’s participation in decision-making, men were nearly four times more likely to be employed in project work.¹⁴⁶

Longer-running programmes have increased women’s participation by using multiple measures: The rules and measures taken to improve women’s participation have shown results, in the case of long-running programmes, such as the KDP in Indonesia and the KALAHÍ–CIDSS programme in the Philippines (Box 2).

Box 2: Design elements to increase women’s participation: the case of KDP, Indonesia, and KALAHÍ–CIDSS, Philippines

Longer-running programmes, such as KDP in Indonesia and KALAHÍ–CIDSS in the Philippines, have incorporated several design elements to increase women’s engagement in the CDD process.

In Indonesia, these measures included:

- Intense facilitation to improve the participation of marginalised and poor women, such as women who were the heads of households or women who had no primary education;
- Facilitation for preventing elite women from dominating decision-making;¹⁴⁹
- Separate meeting invitations to women;¹⁵⁰
- Appointment of women as village facilitators, members of Unit Pengelola Keuangan (Kecamatan financial unit), operations, maintenance and monitoring teams;
- Fifty per cent representation on every village delegation for kecamatan-level decision-making meetings;¹⁵¹ and
- A microfinance component for funding women-only credit groups.¹⁵²

The KALAHÍ–CIDSS programme in the Philippines offered special training to women to participate in public decision-making and to equip them for paid construction-work opportunities funded under the programme. Three per cent of the grant to the community could be used to pay for training women to acquire skills.¹⁵³

Women's participation in meetings is higher in villages where KDP was being implemented, compared with villages where it was not.¹⁴⁷ By the end of the Philippines KALAHI–CIDSS programme, 53% of the community facilitators were women, 55% of the community members that participated in barangay assemblies were women, and 58% of committee members were women, over half of whom had leadership positions.¹⁴⁸

But women's participation in CDD programmes may not necessarily empower them to take on active roles in the public sphere after the programme ends. A review of five CDD programmes in Indonesia, including KDP, found that the programmes had only a weak impact on women's empowerment.¹⁵⁴ Women's credit groups had little impact because they rarely included poor women. These groups also focused on women's traditional economic activities (cooking, sewing and kiosks) and did not offer new opportunities. Women's participation in CDD programmes also did not spill over into participation in other governance-related activities, such as village planning or elections.

Overall, our analysis shows that CDD programmes have features that encourage women's participation in meetings and village committees. However, less attention has been paid to their participation in project implementation, operation, maintenance and monitoring. Women's empowerment is not listed as a programme objective, which may be why programmes do not consistently have features encouraging women's meaningful participation. The design of CDD programmes will benefit from assessments of the context-specific constraints that women face.¹⁵⁵ For empowering communities, it would be imperative to have objectives that translate into measures for encouraging the participation of women and other marginalised populations.

‘For empowering communities, it would be imperative to have objectives that translate into measures for encouraging the participation of women and other marginalised populations.’

Few studies have carried out sex-disaggregated analysis of participation. Fewer still have assessed whether CDD programmes have empowered women to take a more active role in the public sphere, beyond the scope of the programme. A recent assessment of the gender-related features of the World Bank's long-running rural CDD programmes recommends that future studies capture the quality of participation and its outcomes, particularly with respect to the economic, political and social empowerment of women.¹⁵⁶

6.1 Overview of findings

CDD programmes have evolved over the last 30 years to become a well-established approach to development in low- and middle-income countries. Development donors, particularly the World Bank, have invested a large amount of money in these programmes.

Over these last three decades, CDD programmes have moved from being a response to mitigate the negative effects of structural adjustment to becoming an alternative mechanism for quicker delivery of presumably cheaper public infrastructure. However, in the past decade or so, there has been additional emphasis on using CDD for building social cohesion, increasing decentralisation and improving governance.

Figure 8 highlights our findings on the effectiveness of CDD programmes across the causal chain in the theory of change. CDD programmes improve facilities for education, health, water and sanitation. They slightly improve health- and water-related outcomes, but not education.

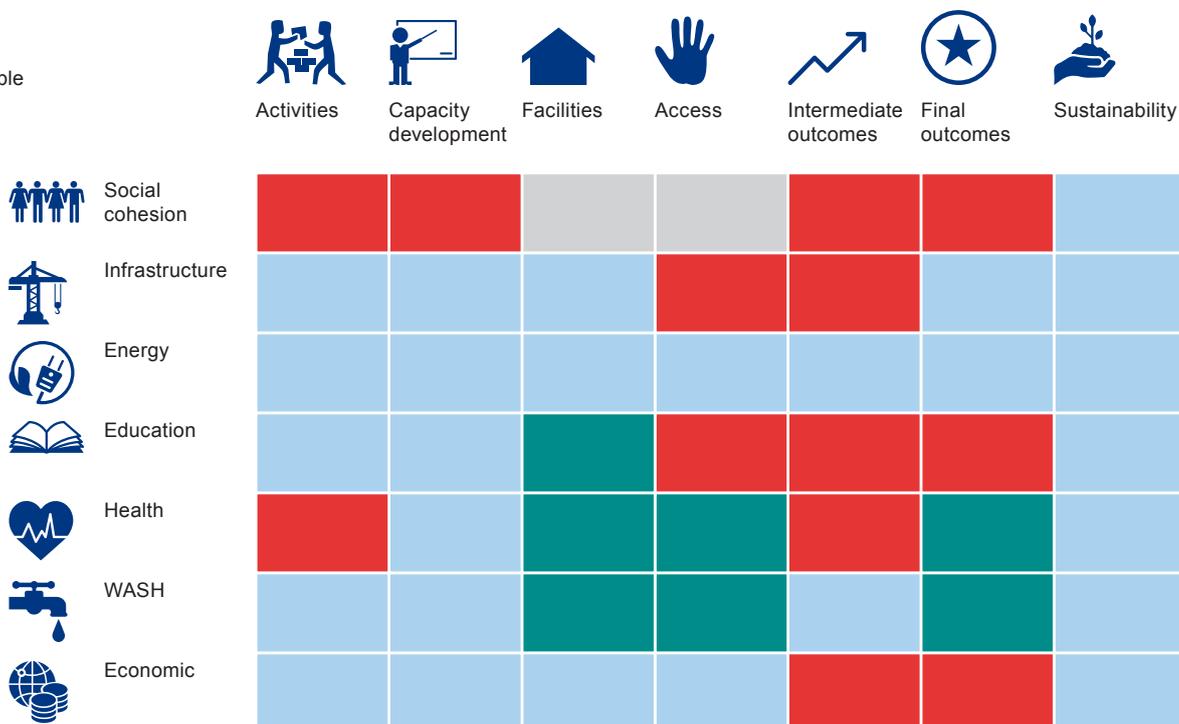
‘We find that the assumption that the entire community is involved in decision-making is not valid. The pathways of change leading to improvement in social cohesion are particularly unclear.’

The lack of impact on higher-order outcomes can be explained by CDD’s focus on infrastructure, without providing complementary inputs to address context-specific challenges in health and education. The figure also shows that CDD programmes have no impact on social cohesion or governance. This is a consistent finding across contexts.

We find that the assumption that the entire community is involved in decision-making is not valid. Attempts to reform governance have run into problems, especially when they have tried to create parallel structures.

Figure 8: Overview of effects

- Positive effect
- No effect
- No data
- Not applicable



‘There are numerous socio-economic barriers to community participation – lack of time, exclusionary or limiting norms, perceived benefit or capacity, the community contribution requirement, poor engagement of the CDD agency and projects not serving community members’ interests.’

The pathways of change leading to improvement in social cohesion are particularly unclear. Social cohesion has been defined as behaviours and attitudes within a community that reflect members’ propensity to cooperate.¹⁵⁷ If this is used as a working definition, then it is unclear how the inclusive process of community participation in implementing development projects automatically engenders cooperation. CDD programmes may actually be users rather than producers of social capital.¹⁵⁸

There is also a need to distinguish between interpersonal and inter-group social cohesion. The definition of a community in terms of a geographic administrative unit is a limited one.¹⁵⁹ A community may consist of different groups, in which class, caste, ethnicity, age and sex reflect, reinforce and reproduce determinants of exclusion and inequality. It is unclear how CDD programmes specifically address, traverse or change them.

There are numerous socio-economic barriers to community participation – lack of time, exclusionary or limiting norms, perceived benefit or capacity, the community contribution requirement, poor engagement of the CDD agency and projects not serving community members’ interests. Gendered cultural and socio-economic barriers affect women’s and vulnerable or marginalised populations’ participation. However, these barriers vary depending on the context.

Explicit mechanisms to make CDD more inclusive – for giving women and marginalised community members more of a voice – have had mixed success. Mandating women’s participation through programme rules, such as quotas for female membership on project committees, have generally, though not always, achieved greater representation for women. Such formal requirements work better than indicative targets, but there is no evidence to show that increasing women’s representation in meetings or on project committees has helped them benefit more from CDD-financed activities. There is also no evidence to show that increasing women’s participation empowers them to take on a more active role in public life, beyond the scope of the project.

6.2 Implications for CDD policies and programmes

The evidence from this synthesis and previous studies suggests that it may be better to abandon the CDD programme objective of building social cohesion and focus instead on sustainable, cost-effective delivery of small-scale infrastructure. However, it remains to be proven that CDD programmes are a cheaper delivery mechanism than local government and NGOs. The evidence may change depending on the context.

Programme implementers need to assess if community members are willing or able to make contributions to development projects. Contribution requirements can restrict benefits received by poor and marginalised participants. Targeting strategies and programme rules, such as quotas, can help in increasing their participation. However, facilitation, training and additional support would be required to sustain participation in the long term.

Moving beyond the definition of a community as a geographic administrative unit and considering different groups and gendered power relations in the community would help in delivering more equitable programmes.

Since small-scale infrastructure is a major programme output, implementers should pay explicit attention to the technical, institutional and financial mechanisms in place for ensuring that these facilities are maintained and operate properly. Approaches to operations and maintenance have been variable. Project documents have revealed that communities face numerous challenges in maintaining projects. However, programmes such as KALAHI–CIDSS in the Philippines have used good practices that are worth learning from.



While designing CDD programmes, a number of decisions on the various trade-offs need to be considered:

- The institutional set-up of the CDD implementer, as an independent agency or as part of an existing ministry or department, influences the impact of the programme in different ways. There is a trade-off between the possible greater efficiency and flexibility of an independent agency and the greater government buy-in and sustainability of the processes implemented by an existing ministry. Social funds that ran for years show that more integrated work between the local and national governments can facilitate greater local ownership and promote institutional sustainability. Where decision-making authorities exist, the creation of parallel governance structures may not serve a purpose beyond the scope of the programme, and may even undermine attempts at more inclusive governance.
- The choice between using an application-based model and an allocation model should be informed by community capacity, financing and programme targeting objectives. Where communities must apply for funds, the better-off tend to benefit, as leaders have the wealth, education and capacity to put together the application. Allocating funds to the poorest communities may require more training and support for project implementation. Reaching the poorest communities and supporting projects in those communities takes more time and effort.

- There is a trade-off between breadth and depth of coverage – deciding whether to reach more communities or spend more in each. Community engagement with the programme appears to be greatest where funding has been continuous. Provision of facilitation has increased participation of various groups in a community in long-running programmes, such as KDP. But such depth of coverage takes resources away from reaching more communities.

6.3 Implications for research

This synthesis sheds light on the numerous areas where there is limited or no evidence about CDD's effectiveness. It also shows us how problematic assumptions made about the programme have influenced evaluation designs, research questions and analyses. We offer some important pointers on further research in this area.

6.3.1 Shift emphasis from social cohesion

Many of the CDD programmes and their impact evaluations have had a misplaced emphasis on social cohesion. Implementers and evaluators assume that social cohesion needs to be built in the countries where such programmes are being implemented. They assume that CDD increases collective action beyond the scope of the project. Both are problematic assumptions.



Communities already have decision-making structures. Attempts to bypass these existing structures can create tensions. After project completion, if the mandate of the new governance structure created for programme implementation is not clearly defined, the sustainability of the arrangement is questionable.

The concept of social cohesion is a complex one. Most impact evaluations have assessed both *bonding* social capital, such as trust and cooperation within the community, and *bridging* social capital, such as social connectedness with authority. It would be important to consider the possible friction between these elements of social capital. For example, if cooperation and trust among community members increase, they may be more likely to come together to complain about the misuse of funds and corruption of authorities. The increase in bottom-up accountability may not necessarily contribute to building trust with authorities.

6.3.2 Assess the political economy of local decision-making

Quantitative impact evaluations have not assessed the political economy of local decision-making or the different levels of existing social cohesion: between households, between sub-groups (for example, men versus women, poor versus rich), between community leaders and households, between villages, and between local and central government.

A political economy analysis would consider if participatory governance is integral to the existing political system. If so, how inclusive is it? Can different groups in the community participate on equal footing (for example, women, youth, old people, physically challenged people)? Is facilitation required for the community to participate or to do so in a more inclusive manner? If so, how much facilitation and training is required? Is the training provided to the community project committee sufficient for improving governance? Is CDD subject to elite capture? What are the characteristics of existing power hierarchies and levels of cohesion?

6.3.3 Widen and sharpen the focus of rigorous impact evaluations

Although the latest generation of impact evaluations have used more rigorous designs to establish causal relationships, they have generally ignored issues related to the type of institution involved in implementation, targeting of communities and sustainability of arrangements. Impact evaluators have suggested that the small size of the grants, particularly when viewed on a per capita basis, may be one reason CDD programmes do not improve welfare outcomes. Future studies need to examine how factors such as grant size, continuity of funding, facilitation of community participation and provision of training over the long term improve outcomes across the causal chain.

6.3.4

Address the CDD impact evaluation problem

Evaluations have looked at a broader range of outcomes, such as health, education and WASH-related outcomes in a given programme. However, these estimates run into the ‘CDD impact evaluation problem’. The demand-driven approach across multiple sectors means most estimates are diluted; for instance, they measure the impact on health outcomes in all communities, irrespective of whether investments were made on health projects in those communities. Study designs should consider using a ‘treatment of the treated’ or instrumental variable approach to get more meaningful impact estimates for these outcomes.

6.3.5

Factor in what is going on in the comparison group

Studies generally give insufficient information on the comparison communities or groups. We do not always know if there is nothing going on in the comparison group or if there is an alternative delivery mechanism or agency working in the area. Where baseline data are available, the single difference estimate of indicators, such as quantity and quality of infrastructure, should be reported, as well as the double difference estimates.

6.3.6

Focus on practical significance as much as statistical significance

The studies we reviewed focus on statistical significance rather than practical significance. Cost-effectiveness analysis is one way of enhancing a study’s practical significance. A cost comparison of CDD programmes and other delivery channels is one of the most important areas for future research. This would allow cost-effectiveness or cost–benefit analysis to be carried out and capture the practical significance of the impacts. This is important, as the cost-effectiveness of CDD approaches is not proven.

‘We need more process evaluations and qualitative research for causal chain analysis – for assessing why and for whom programmes work or do not work at each stage of implementation.’

6.3.7

Carry out equity-focused qualitative research and process evaluations

We looked for qualitative research and process evaluations to analyse the mechanisms influencing the impact of CDD programmes. However, there were few such studies. The evaluation of impact is best located in a broader evaluation framework. We need more process evaluations and qualitative research for causal chain analysis – for assessing why and for whom programmes work or do not work at each stage of implementation.

Evaluations should assess the extent of participation of community members, particularly based on sex and age, and also on vulnerability or marginalisation of different groups in the community. The few studies that have done this mainly look at participation in project committees and meetings. More studies should examine involvement in project decision-making and CDD’s effects on women’s agency and empowerment beyond the scope of the project. Well-designed gender- and equity-responsive mixed-method research would throw more light on the barriers to participation in different contexts.

Appendix

List of programmes and countries included for synthesis

| Country | Programme |
|------------------------------|--|
| Afghanistan | National Solidarity Program |
| Armenia | Armenian Social Investment Fund |
| Benin | Borgou Region Pilot Rural Support Project |
| Bolivia | Bolivia Social Investment Fund |
| Brazil | Rural Poverty Reduction Project |
| Democratic Republic of Congo | Tuungane (Let's Unite) |
| Honduras | Honduras Social Investment Fund |
| Indonesia | Badan Reintegrasi Aceh – Kecamatan Development Program |
| Indonesia | Kecamatan Development Program (renamed National Community Empowerment Program in Rural Areas or PNPM-Rural in 2006) |
| Indonesia | Program Nasional Pemberdayaan Masyarakat – Generasi Sehat dan Cerdas (National Community Empowerment Programme – Healthy and Smart Generation) |
| Jamaica | Jamaica Social Investment Fund |
| Liberia | Community Driven Reintegration and Reconstruction |
| Malawi | Malawi Social Action Fund |
| Moldova | Social Investment Fund |
| Nicaragua | Fondo de Inversión Social de Emergencia (Nicaraguan Emergency Social Investment Fund) |
| Nigeria | National Fadama Development Project |
| Peru | Fondo Nacional de Compensación Desarrollo Social (National Fund for Social Compensation and Development in Peru) |
| Philippines | Kapitbisig Laban sa Kahirapan (Comprehensive and Integrated Delivery of Social Services project) |
| Senegal | National Rural Infrastructure Project |
| Sierra Leone | GoBifo (Forge Ahead) |
| St Lucia | Poverty Reduction Fund |
| Yemen | Social Fund for Development |
| Zambia | Zambia Social Recovery Projects I and 2 (later called Zambia Social Investment Fund) |

Endnotes

- 1 Humphreys et al. 2014.
- 2 Carvalho et al. 2002.
- 3 World Bank 2004c.
- 4 Mansuri and Rao 2004.
- 5 Humphreys et al. 2014; Fearon et al. 2009, 2011; Casey et al. 2012.
- 6 Kumar 2005 p.xi.
- 7 Barakat 2006.
- 8 Morel et al. 2009.
- 9 Barakat 2006.
- 10 International Rescue Committee 2006b.
- 11 Sesay et al. 2011.
- 12 Olken 2007.
- 13 Barakat 2006.
- 14 Barakat 2006; Beath et al. 2013.
- 15 World Bank 2014a.
- 16 Barron et al. 2006.
- 17 Olken 2010.
- 18 Guggenheim et al. 2004 and World Bank 2003a, in Barron et al. 2006 and Voss 2008.
- 19 Barron et al. 2005.
- 20 World Bank 1999b.
- 21 World Bank 2008a.
- 22 Binswanger et al. 2009.
- 23 World Bank 1998a.
- 24 World Bank 2014.
- 25 World Bank 2010.
- 26 World Bank 1999a; World Bank 2001a.
- 27 Wong 2012.
- 28 Beath et al. 2013; World Bank 1997; World Bank 2006a.
- 29 World Bank 1994.
- 30 World Bank 2006b.
- 31 World Bank 1998.
- 32 Casey et al. 2012.
- 33 Walker et al. 1999.
- 34 ESA Consultores International 2003.
- 35 ESA Consultores International 2003 p.ix.
- 36 Beath et al. 2013.
- 37 Kristjansson et al. 2004.
- 38 World Bank 2000.
- 39 Olken et al. 2011.
- 40 Casey et al. 2012.
- 41 Olken et al. 2011.
- 42 Newman et al. 2002.
- 43 Arcand and Basole 2007.
- 44 Fearon et al. 2008.
- 45 ESA Consultores International 2003 p.17.
- 46 Walker et al. 1999.
- 47 Walker et al. 1999.
- 48 Recovery and Development Consortium 2010.
- 49 Walker et al. 1999.
- 50 ESA Consultores International 2003.
- 51 Labonne 2013.
- 52 Nkonya et al. 2008.
- 53 Labonne 2013.
- 54 Beath et al. 2013.
- 55 Rawlings et al. 2004.
- 56 World Bank 2008a p.30.
- 57 Coirolo and Lammert 2008.
- 58 World Bank 2003a.
- 59 Barakat 2006; World Bank 2001b; Carvalho et al. 2002; World Bank 2004a; Dijkstra 2000; World Bank 1998.
- 60 World Bank 2002b.
- 61 World Bank 2004a p.33.
- 62 Barakat 2006 p.63.
- 63 Carvalho et al. 2002.
- 64 Barakat 2006.
- 65 World Bank 2001b.
- 66 Dijkstra 2000.
- 67 World Bank 2001b; Dijkstra and Green 2000.
- 68 Carvalho et al. 2002; Van Donge 2004.
- 69 World Bank 1993.
- 70 World Bank 2001b.
- 71 World Bank 2004b.
- 72 Dijkstra 2000.
- 73 World Bank 1999b.
- 74 Barakat 2006.
- 75 World Bank 2002c.
- 76 Dijkstra 2000.
- 77 Barakat 2006.
- 78 World Bank 2002a.
- 79 Carvalho et al. 2002 p.xviii.
- 80 Kumar 2005 p.xiii.
- 81 Casey et al. 2012 p.vii.
- 82 Casey 2017 p.1.
- 83 Barakat 2006.
- 84 ITAD 2002.
- 85 Vajja and White 2008.
- 86 Vajja and White 2008.
- 87 Morel et al. 2009.
- 88 Barakat 2006.
- 89 Jennings 2006.
- 90 Barakat 2006.
- 91 Barron et al. 2006.
- 92 Barakat 2006 p.58.
- 93 Donnelly-Hall Ltd 2004.
- 94 ITAD 2002.
- 95 Morel et al. 2009.
- 96 Barakat 2006.
- 97 Donnelly-Hall Ltd 2004.
- 98 World Bank 1999b.
- 99 World Bank 2014b.
- 100 Humphreys et al. 2014.
- 101 Beath et al. 2013.
- 102 Humphreys et al. 2014.
- 103 Coirolo and Lammert 2008.
- 104 ESA Consultores International 2003.
- 105 Paxson and Schady 2002.
- 106 World Bank 2013.
- 107 Barron et al. 2009.
- 108 Morel et al. 2009.
- 109 Morel et al. 2009.
- 110 Carvalho et al. 2002; Vajja and White 2008.
- 111 Vajja and White 2008.
- 112 Labonne and Chase 2009.
- 113 Baird et al. 2011.
- 114 Pradhan and Rawlings 2002.
- 115 World Bank 2001b.
- 116 Chase 2002.
- 117 Nkonya et al. 2008.
- 118 Casey et al. 2012.
- 119 Morel et al. 2009.
- 120 International Rescue Committee 2006b; Humphreys et al. 2014.
- 121 International Rescue Committee 2006a.
- 122 Barakat 2006.
- 123 Casey et al. 2012.
- 124 Casey et al. 2012.
- 125 World Bank 2002b.
- 126 World Bank 2003b.
- 127 Barron et al. 2006; World Bank 2008a.
- 128 Jennings 2006.
- 129 World Bank 1999b.
- 130 Humphreys et al. 2014.
- 131 Recovery and Development Consortium 2010.
- 132 World Bank 2004a.
- 133 World Bank 2001a.
- 134 Voss 2008; Jennings 2006.
- 135 Barakat 2006.
- 136 Beath et al. 2013.
- 137 Barakat 2006.
- 138 Nixon 2008, in Beath et al. 2013.
- 139 Beath et al. 2013.
- 140 World Bank 2014b.
- 141 Haider 2012.
- 142 Nixon 2008, in Beath et al. 2013.
- 143 Labonne 2013.
- 144 Jennings 2006.
- 145 Recovery and Development Consortium 2010.
- 146 World Bank 2003a.
- 147 Barron et al. 2006.
- 148 World Bank 2014a.
- 149 World Bank 2008a.
- 150 Barron et al. 2006.
- 151 World Bank 2008a.
- 152 Voss 2008.
- 153 World Bank 2014a.
- 154 Wong 2003.
- 155 World Bank 2017.
- 156 World Bank 2017.
- 157 Hooghe and Stolle 2003.
- 158 Carvalho and White 2004.
- 159 King 2013.

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In community-driven development (CDD) programmes, community members are in charge of identifying, implementing and maintaining externally funded development projects. This synthesis study assesses how these programmes have evolved over the years and examines what their impact has been. The authors synthesised evidence from 25 impact evaluations, covering 23 programmes in 21 low- and middle-income countries. They also drew on evidence from process evaluations and qualitative research to examine the factors influencing success and failure. They test the numerous assumptions underpinning CDD's theory of change, particularly the link between community participation and social cohesion. The paper also assesses the effectiveness of measures to promote sustainability and equity.

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