
Final Report:
**Investigating the Sustainability of
Community Development Councils in Afghanistan**

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About the Author

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About the Afghanistan Research and Evaluation Unit (AREU)

The Afghanistan Research and Evaluation Unit (AREU) is an independent research organisation headquartered in Kabul. AREU's mission is to conduct high-quality research that informs and influences policy and practice. AREU also actively promotes a culture of research and learning by strengthening analytical capacity in Afghanistan and facilitating reflection and debate. Fundamental to AREU's vision is that its work should improve Afghan lives.

AREU was established in 2002 by the assistance community working in Afghanistan and has a board of directors with representation from donors, UN and other multilateral agencies, and nongovernmental organisations (NGOs). Current funding for AREU is provided by the European Commission (EC), the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children's Fund (UNICEF), the World Bank, and the governments of Denmark, Norway, Sweden, Switzerland and the United Kingdom.

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Glossary

<i>arbab</i>	quasi-formal village leader
<i>aylaq</i>	summer pasture land
<i>hashar</i>	collective village labour
<i>jirga</i>	deliberative council
<i>khan</i>	landowner
<i>malik</i>	quasi-formal village leader
<i>manteqa</i>	area or neighbourhood
<i>mawlawi</i>	religious leader
<i>mudir-i-edari-i-woluswali</i>	head of administration for the district government
<i>mullah</i>	religious leader
<i>nomayenda</i>	representative
<i>qaryadar</i>	quasi-formal village leader
<i>qishlaq</i>	village or place of winter habitation or migration
<i>rais-i-qarya/rais-i-deh/rais-i-qishlaq</i>	village leader
<i>rish-i-safid</i>	elder (lit. White beard)
<i>shura</i>	deliberative council (lit. "council")
<i>tazkera</i>	Government-issued national identification card
<i>wali</i>	Provincial Governor
<i>woluswal</i>	District Governor
<i>woluswali</i>	District Government

Acronyms

AKDN	Aga Khan Development Foundation
BRAC	Bangladesh Rural Action Committee
CDC	Community Development Council
CDD	Community-Driven Development
CHA	Co-ordination of Humanitarian Assistance
CLDD	Community-Led Development Department
DACAAR	Danish Committee for Aid to Afghan Refugees
FP	Facilitating Partner
IRDP	Inter-Communal Rural Development Program
JICA	Japan International Cooperation Agency
KDP	Kecamatan Development Foundation
MRRD	Ministry of Rural Rehabilitation and Development
NABDP	National Area-Based Development Programme
NSP	National Solidarity Programme
PMU	Provincial Monitoring Unit
SDF	Sanayee Development Foundation
UNDP	United Nations Development Programme
UNAMA	United Nations Assistance Mission in Afghanistan

Executive Summary

This report examines the impact of Community Development Councils (CDCs) and their prospects for sustainability after the withdrawal of external Facilitating Partners (FPs). Since 2003, CDCs were created throughout rural Afghanistan by the National Solidarity Programme (NSP) of the Ministry of Rural Rehabilitation and Development (MRRD). With support from the Japanese International Cooperation Agency, the Afghanistan Research and Evaluation Unit (AREU) conducted extensive qualitative research in 32 communities in 16 districts across six provinces of the country. During the course of this research, AREU solicited perspectives at the national, provincial, district, and village level from major donors, NGOs, FPs, government officials and citizens.

The two main goals of NSP are to: 1) deliver project-based community development; and 2) to improve community governance. With these aims in mind, tens of thousands of CDCs were rapidly created in a short period of roughly four years. As a community-driven development programme, the NSP's hallmark is the prioritisation and selection of development projects by community members. It attempts to do so through an elected executive committee.

The main objectives of this research project is to assess the sustainability of CDCs formed under NSP, to inform programming for existing CDCs, and to draw lessons to apply to new CDCs. Because of assertions that CDCs should play a larger role in formal community governance, a secondary objective of this research is to investigate the role of the CDCs in village governance. The research study used qualitative data from semi-structured interviews, focus groups and limited participant observations to inform the 32 case studies. Although limited by security concerns, sites were selected to capture variation in key geographical areas and different stages of NSP implementation. This is the first research independent of NSP stakeholders that has examined the sustainability of CDCs.

The challenges of sustainability for CDCs in Afghanistan include: the possibility of withering away due to a lack of project funding and *raison d'être*; insufficient capacity to maintain existing projects; and uncertainty of long-term donor or government support for the organisations. Because different visions of CDCs exist, defining the form in which CDCs could be sustained in the future is a challenge. This project identified three different visions of sustainability for CDCs: experiential, focusing on its role as part of civil society and in mobilising community participation; coordinative, focusing on project implementation and coordination; and formalisation, transforming the CDC into a formal village council or unit of government.

The major current strategy for sustainability articulated by national level actors such as the MRRD focuses primarily on expanding the CDC's authority through formalisation by means of turning the CDC by-law (which currently only applies to the jurisdiction of the MRRD) into national legislation. The by-law bestows significant authority to CDCs that expands their roles beyond coordinative functions and into others such as community planning, recording statistics, registering births and deaths, and dispute resolution. It is important to note that the by-law bestows duties upon the CDCs that go far beyond their existing capabilities. The MRRD's strategy seems to assume that the success of CDCs is based on their institutionalisation and that people will lose trust in the government unless the CDCs continue their work.

The village-level findings of this research project, however, suggest that these assumptions do not reflect attitudes in rural Afghanistan. Many communities have expressed a strong desire for CDCs to continue their work, but this is not due to the organisational capacities of CDCs. Rather, it is because of the infusion of projects and funds that the NSP has injected into the community; those at the village level may assume that CDCs are only in the business of project implementation for NSP funds.

This study sought to answer specific questions in order to assess the sustainability of CDCs as well as to examine the role of CDCs in community governance. Research gathered from the field highlighted these factors related to sustainability:

- the main activities of CDCs (project impact, elections, project decision making and selection, and female participation);
- funding;
- the capacities of CDCs;
- structural factors (including the size of CDCs);
- the activities of CDCs outside of the NSP;
- linkages with formal state structures (district governments);
- linkages with local authorities (quasi-formal leaders and religious authorities); and
- linkages with neighbouring communities (clustering).

At the community level, positive attitudes towards CDCs were the single greatest predictor of individual desires to work with CDCs in the future. In nearly every community, there was a heavy correlation between these positive attitudes and successful project completion.

There are several future trajectories of CDCs that may be considered. After project completion, CDCs communities were mostly likely to be winding down their activities. While communities were interested in CDCs continuing their work, they did not organise this work themselves and held the view that they could do so only if they received more project funds.

It is expected that CDCs corresponding with natural community boundaries are to be more sustainable in the long run. There are, however, some examples of CDCs running counter to natural community boundaries to meet NSP size regulations. The drawing of CDC boundaries in a formalisation process may be a future source of conflict. When community members initially organised into CDCs, they understood that villages and communities would be divided for purposes of project implementation and community mobilisation – not for the purposes of local governance.

The research systematically demonstrated a widespread lack of information about the CDC by-law by community members. Among those who had knowledge of it, there was general confusion about the meaning of the by-law. Several individuals believed that the by-law would put CDCs in direct competition with the *malik* system, causing nervousness and animosity towards CDCs in some communities.

Community participation is a key aspect to the success of CDCs and is the foundation of all visions of CDC sustainability. The study found that community participation in the CDCs varied widely; participation in project decision making did not necessarily translate into a participatory CDC that can function autonomously within the community.

The most basic finding of this study is that the CDCs have been far more capable at improving infrastructure than improving community governance because the programme design, facilitation and activities have largely focused on project completion. If CDCs are to carry out both goals of the NSP in the long run without external facilitation, then far more attention should be placed on improving community participation. Simply increasing the authority of the CDCs through legislation would not on its own increase the participation in the CDCs needed to sustain its activities.

The MRRD should consider developing a long-term strategy for CDC sustainability that focuses more on effective community participation. The by-law or national level legislation alone is not a solution to the facilitation and participatory problems facing many CDCs. The CDCs are only beginning to take root at the local level having only had access to one round of project funds; to be successful, they will require long-term facilitation. While MRRD has advocated that CDCs could become a government institution or carry out related tasks, the research has not presented evidence that CDCs have

adequate capabilities to do so. They should remain part of civil society. At this still early stage, formalisation of CDCs is premature. In attempting to sustain CDCs, it is dangerous to take this step not only because the CDCs lack capacity but because robust local governance already exists at the village level.

The recommendations of this report are intended not only for the MRRD and the FPs currently implementing the NSP but also the Afghan government in general as well as the donor community.

Returning to community-driven development

- refocus attention on the implementation of CDC activities; continued project implementation may not only increase long-term participation in community activities but also support accountability spillovers to village leaders and local government
- stakeholders should carry out more projects through clusters – the size and scale of which may be more sustainable
- revive the idea of “top-up” grants to “graduating” CDCs that completed NSP I
- feature smaller grants (rather than the initial \$200 per family rate) to encourage more genuine participation in community activity and decrease the potential for rent-seeking
- reconsider the current system of CDC elections by scaling down the formalities associated with the elections and bring more fluidity to CDCs rather than focus on rigid structures and the executive committee
- community-level training should be expanded and refocused on participatory rural appraisals
- ensure training and facilitation is extended to all members of the community
- expand monitoring and evaluation of CDC activity, including through the establishment of an independent oversight organisation, social auditing and training local media
- continue CDCs’ independent access to funds

Clustering

- coordinate clustering of CDCs, an important step forward for community mobilisation, between the NSP and other clustering programmes

Transition Strategy

- focus on building capacity within the government to facilitate and manage NSP at the district level, including appointment of MRRD representatives in the districts where NSP operates
- with long-term funding, expand the numbers and capacities of the MRRD’s Community Community-Led Development, which is intended to coordinate CDC activities after the withdrawal of the FPs

CDC By-Law and Subnational Governance

- clarify both the goals and the language of the CDC by-law
- efforts to spread information about the CDC by-law should be halted until other ministries and government departments, including the Independent Directorate of Local Governance, have agreed to this mandate; consider local sensitivities as well as inter-ministerial issues before moving forward with the by-law
- before pursuing national-level legislation, the MRRD and the government should conduct a budget analysis to determine the costs of such a policy
- consider whether CDCs should be the only vessel through which the government, donors, and other actors are to access communities
- expand cooperation with existing district government officials
- consolidate the capacities of the CDCs before their mandates are expanded

1. Introduction

The National Solidarity Programme (NSP) is a national community-driven development programme introduced in June 2002 and administered by the Ministry of Rural Rehabilitation and Development (MRRD). In 2003, the NSP became one of the six initial National Priority Programmes introduced under the National Development Framework. The intended basis for the NSP's design combines customary Afghan practices, such as *shura* or *jirga* councils and collective community labour (*hashar*); Islamic principles; and international community-driven development experience. Since 2003, NSP has created more than 19,000 community development councils (CDCs) in more than 20,000 villages across all 34 provinces. CDCs provide project funds of up to \$60,000 per community to undertake badly needed infrastructure and human capital development programmes.

The projects that the NSP, through CDCs, has successfully implemented in villages have significantly improved and transformed lives in rural Afghanistan, enhancing economic opportunities and livelihoods. The scope, size and context in which NSP operates make the programme truly unique. From its earliest days, the NSP was to be rolled out to provide assistance to every village in the country. In its first three years, the NSP created CDCs in almost half of the villages of Afghanistan in a very challenging context.

The challenges of sustainability for CDCs in Afghanistan include the councils withering away due to a lack of *raison d'être* without project funding, insufficient capacity to maintain existing projects, and uncertainty of long-term donor or government support. The main objective of this study is to assess the sustainability of CDCs formed under NSP, to inform programming for existing CDCs, and to highlight lessons for application to new CDCs. Because the MRRD and other stakeholders have asserted that CDCs should increase their role in formal community governance, a secondary objective is to investigate the role of the CDCs in village governance, examining structures in communities as well as ties between communities and local government structures.

The study is the first on CDCs that examined them independently of NSP Facilitating Partners (FPs). It included national-, provincial-, and district-level interviews with government officials, FP staff, journalists and others who have in-depth knowledge of particular regions. Importantly, both CDC and non-CDCs members were also interviewed.

The current sustainability strategy put forward by the MRRD and other national-level stakeholders is to formalise CDCs through legalising its authority and bestowing upon it additional administrative tasks that belong to the realm of civil servants. This, however, does not correspond to the perspectives at the village level which predominantly see CDCs only as vehicles for project implementation for NSP funding.

This report will present multiple factors affecting the sustainability of CDCs, including their activities, funding, capacity, and linkages to other stakeholders. The role of community participation—a key part of community governance—generated by CDC activities will be highlighted since it plays a crucial role in determining the durability of CDCs. The report will also present several considerations for the future direction of CDCs and recommendations to strengthen prospects for their sustainability.

1.1 Overview of the National Solidarity Programme

Largely through the Afghanistan Reconstruction Trust Fund, the NSP is supported by various bilateral and multilateral donors. It has two stated goals: 1) to deliver project-based community based development; and 2) to improve community governance.

According to the MRRD strategy, these goals may be achieved through four main ways:

- local-level facilitation to assist communities in establishing inclusive institutions through democratic elections, reaching consensus on priorities and project

activities, developing proposals that comply with NSP appraisal criteria, and implementing approved projects;

- a system of direct block grant transfers to support rehabilitation or development activities planned and implemented by elected CDCs;
- building the capacities of CDC and community members in participation, consensus-building, financial management and accounting, procurement and contract management, operations and maintenance, and monitoring; and
- activities linking CDCs to government agencies, NGOs and donors to improve access to services and resources.¹

CDCs: Creation and support

After three years, the first NSP programme (NSP I) ended in September 2006 and was expanded in August 2006 (NSP II).² Under NSP I and II, the MRRD contracted 24 international and Afghan NGOs as Facilitating Partners (FPs) to support the creation, training and project implementation of CDCs in villages throughout the country. After creating 10,400 CDCs in the first two years, the MRRD expanded operations reaching 6,900 more communities and creating more than 17,000 CDCs in just three years.³ To date, there are more than 19,000 CDCs. Rolled out in annual cycles, the CDCs that began mobilising in in 2003 (Cycle 2+) were guaranteed three years of facilitation. The period has been reduced to two years for CDCs mobilised in 2004 (Cycle 2) and 2005 (Cycle 1).

NSP I and II are less ambitious than an earlier proposal that specified support for seven years, follow-up facilitation, top-up grants for existing CDCs, and expansion of the programme to new geographical areas. In contrast, NSP II current plan focuses on expanding to new areas but is limited to a two-year facilitation period for new CDCs and has little follow-up directly with existing councils. It also modifies the management structure of the programme, attempting to generate more cross-ministerial involvement and to encourage Afghan government ownership by reducing the role of the external consultant to more support than oversight functions.⁴

Table 1: Main Output Indicators of NSP as of 30 Meezan 1386 (22 October 2007)⁵

NSP Indicators	Total
Provinces	34
Districts	346
FP personnel deployed	6,123
Communities in the NSP contracted to FPs	22,322
Communities mobilised	19,690
CDCs elected	18,491
Community development plans completed	18,234
Proposals submitted	33,609
Proposals approved	32,629
Number of projects completed	14,559

¹ Ministry of Rural Rehabilitation and Development (MRRD), "The Expansion of the National Solidarity Programme: Empowering Communities to Deliver I-ANDS Benchmarks" (Kabul: Government of Afghanistan, 2006), 23.

² See MRRD, "The Expansion of the National Solidarity Programme"; World Bank, Agriculture and Rural Development Unit, South Asia Region, "Technical Annex for a Proposed Grant of SDR 81.2 Million (US\$120 Equivalent) to the Islamic Republic of Afghanistan for a Second Emergency National Solidarity Project (NSPII)," (Washington, DC: World Bank, 2006).

³ MRRD, "The Expansion of the National Solidarity Programme".

⁴ MRRD, "The Expansion of the National Solidarity Programme".

⁵ *National Solidarity Programme*, http://www.nspafghanistan.org/reports_and_publications.shtm.

Community-driven development

While many of its characteristics are unique to Afghanistan, the NSP is a type of community-driven development (CDD) programme. CDD is an approach that strives to

empower local community groups, including local government, by giving direct control to the community over planning decisions and investment resources through a process that emphasises participatory planning and accountability.⁶

A set of core assumptions underlie why CDD techniques may be more beneficial for communities than using top-down or non-participatory interventions. Advocates for CDD argue that these programmes can reduce poverty by mobilising communities and strengthening human capacity as well as improve community infrastructure. CDD could also improve service delivery at the community level because citizen participation and selection could increase service relevance, responsiveness, and delivery corresponding to demands made by communities. Another assumed advantage of CDD programming is that it is more democratic than top-down alternatives since it seeks to include the voices of all community members, including the poor, and build linkages to local governments from the bottom.⁷

The NSP was inspired by the Kecamatan Development Programme (KDP) in Indonesia, largely funded by the World Bank. Many of those involved in the design of the NSP were deeply involved in KDP programming. Since its inception in 1998, KDP has implemented projects in 36,000 communities throughout Indonesia. Similar to the NSP, the KDP established direct bank accounts so that communities could bypass government bureaucracies and access funds directly. Both programmes share *de facto* financial independence from local government officials in both financing and auditing of projects.

The hallmark of both programmes is the prioritisation and selection of development projects by community members, but several striking differences exist. The NSP features the CDC, an elected executive council (consisting of a head, deputy, treasurer, and secretary) tasked to facilitate this process. Although they were not initially intended to be formal organisations, the MRRD moved quickly to formalise the CDCs as permanent institutions after the implementation of NSP I began. In contrast, the design of KDP features a temporary community body that exists primarily for project implementation after projects are selected using participatory rural appraisals (PRAs) involving the entire community. The KDP does not emphasise institutionalisation of the decision-making and project-implementing body.⁸ The system of project selection in KDP seems closer to local direct democracy than the representative system of NSP.

Unlike NSP, which relies upon FPs — many of which are foreign NGOs — to mobilise communities, KDP relies on social organisers and engineers who are government employees. KDP communities provide their own labour for projects. Under current NSP rules, however, communities can contract out labour and technical expertise to private firms or other organisations. This may be explained by the far greater amount in grants disbursed under NSP (\$200 per family compared to \$1-2 per capita in KDP⁹). In a post-conflict environment, Afghan communities are in far greater need of basic infrastructure,

⁶ World Bank, "Community-Driven Development in the Context of Conflict-Affected Countries: Challenges and Opportunities" (Washington, DC: World Bank, 2006), 6.

⁷ World Bank, "Community-Driven Development in the Context of Conflict-Affected Countries," 6.

⁸ For background on the design principles of KDP see Judith Edstrom, "Indonesia's Kecamatan Development Project: Is It Replicable? Design Considerations in Community Driven Development," in *Social Development Papers* (Washington, DC: World Bank, 2002), 1-15.

⁹ See Susan Wong, "Indonesia Kecamatan Development Program: Building a Monitoring and Evaluation System for a Large-Scale Community-Driven Development Program," in *Environment and Social Development Unit, East Asia and Pacific Region* (Washington, DC: World Bank, 2003), 1. According to Wong, grants between \$40,000 and \$114,000 are given to each sub-district that has a population up to 60,000 consisting of up to 25 villages.

hence the larger block grants. Another explanation may be linked to the levels of human capital in the country, which cannot support project design in all areas.

Perhaps the most important difference between the two programmes is the political contexts under which they operate. KDP has been carried out under conditions of striking political and fiscal decentralisation, transferring significant decision-making discretion to sub-districts. In Afghanistan, NSP operates under very difficult, post-conflict conditions and within a centralised system of government that allocates little *de jure* policy discretion to provinces, districts and villages.

2. About the Research Study

This unique study is the first on CDCs that examined them independently of NSP facilitating partners and that equally sampled both men and women.

2.1 Research objectives and questions

The main objectives of this research project is to assess the sustainability of CDCs formed under the NSP, to inform programming for existing CDCs, and to draw lessons to apply to new CDCs. Because of assertions that CDCs should play a larger role in formal community governance, a secondary objective of this research is to investigate the role of the CDCs in village governance, examining not only structures within communities but also ties between communities as well as to local government structures.

To meet these objectives, this research project seeks to answer the following sustainability-related questions:

- What are the activities of CDCs in year three (Cycle 2+) of NSP implementation? What activities are likely to continue after completion of their projects? These activities could include a second election, development projects, community planning, and dispute resolution.
- What are the factors that affect the sustainability of CDCs? Will CDCs survive without major sources of MRRD funding?
- What are the capacities of CDCs to carry out activities beyond the facilitation period and what capacities are missing?
- Are there structural or institutional factors that influence the level of CDC activity and participation?
- Outside of the NSP, how do CDCs implement community-driven development projects such as the World Bank's community-level Basic Health Sector Reform programme or projects implemented by Ministries other than the MRRD?
- What are the relationships between CDCs and formal state structures (especially at district level), other communities and NGOs that are not FPs? What is the actual or potential impact of the CDC by-law on these relationships? Are CDCs viewed as legitimate bodies outside the context of NSP?
- What are the relationships between CDCs and customary authorities such as *shuras* and *jirgas* (traditional consultative councils), *khans* (landowners), *maliks* and *arbabs* (traditional village leaders) within and between communities? Are CDCs likely to co-exist with customary authorities, replace them, or be replaced by them?

2.2 Qualitative Research Approach: Case Study Methods

This project relied on the use of qualitative data from semi-structured interviews, focus groups and limited participant observations to understand processes within the 32 CDCs. This research not only tells the story of the state of these CDCs but also examines the larger contextual background in which they operate. Despite there being more than 18,000 CDCs, a sample of 32 cases is quite large for a qualitative research project.

Case study research does not generally aim to be representative of all cases of a particular phenomenon. Instead, this method intensively examines particular cases with the purpose of understanding a larger class of similar cases on several relevant dimensions.¹⁰ Case study research is extremely useful because it can "attempt to document practices that

¹⁰ John Gerring, "What Is a Case Study and What Is It Good For?," *American Journal of Political Science* 98, no. 2 (2004).

lead consistently to one set of outcomes rather than another, to identify characteristics that are commonly related to some policy problem, or to find strategic patterns that hold across different venues with different actors".¹¹

This study attempts to understand *processes* at the local level and to get responses beyond binary "yes" or "no" to questions about the 32 communities. In-depth knowledge gained from the cases and interviews was used to make informed policy recommendations and to provide insight into how and why respondents feel as they do. This research sought to capture on-the-ground perspectives in communities, which was found to often be in conflict with perceptions of actors at the provincial and national levels.

2.3 Qualitative research approach: Interview strategy

AREU interviewed more than 500 individuals at the national, provincial, district, and village level to gain a greater understanding of the role of CDCs in local development and decision-making processes.

At the national level, the research team interviewed the MRRD, donors, and FP representatives, local NGOs and others active in the sphere of local governance. At the provincial level, the research team sought out individuals providing a wide range of perspectives to gain a deeper understanding of the political atmosphere and the challenges facing development in various provinces. AREU interviewed, for instance, deputy governors and NSP managers as well as representatives from the MRRD, Provincial Monitoring Units (PMU), FPs, and other relevant organisations that are active in communities or acutely aware of the political dynamics (e.g. UNAMA, UNDP, local NGOs and journalists). The team also interviewed and introduced the research to Ministry of Interior representatives such as the Provincial Security Commander.

Upon entering a district, AREU would first meet with the district governor (*woluswal*) to gain official permission to conduct field research in the area; the team would present a letter of permission or introduction from the Office of the Governor (*wali*) that instructed the *woluswal* to provide support to the team. Generally, the *woluswal* would highlight the district's security concerns and discuss perspectives on CDCs and village governance issues. Out of 16 districts, *woluswals* were not available in three. In these cases, the team spoke to the head of administration at the district government office (*mudir-i-edari-i-woluswali*).

Upon entering a community, researchers would ask to speak to a community elder (*rish-i-safid*) or village leader (*rais-i-qarya*, *rais-i-deh* or *rais-i-qishlaq*). Acknowledging the sensitivity of the entry phase, the research team took great care to ensure that the goals, ethical basis and confidentiality of the research were made clear to village leadership. After introductions, researchers would use both snowball and non-proportional quota sampling to identify respondents such as CDC members, village elders and religious authorities figures as well as other villagers selected at random. In each village, the team conducted interviews with at least four male and four female respondents, including both CDC and non-CDC members. Additionally, the team interviewed the leader of the village who would be identified by members of the community as the village leader, usually a *malik*, *arbab*, *qaryadar*, *mullah* or *nomayenda*¹². The research team was careful not to pre-identify a particular individual as the head of the village. Occasionally, the village leader would be a member of the CDC; in those cases, the interview would be classified as one with a CDC-member.

¹¹ A. C. Lin, "Bridging Positivist and Interpretivist Approaches to Qualitative Methods," *Policy Studies Journal* 26, no. 1 (1998).

¹² The quasi-formal village leader has different titles in different parts of the country. In Herat, Bamyan and Kunduz, quasi-formal leaders are referred to as *arbabs*; *nomayenda* ("representative") in parts of Bamyan province; *qaryadar* in Balkh; and *maliks* in Kabul province. While these leaders have different names, they generally carry out the same set of activities and act as the official representative of the people to the government. For the sake of simplicity, these leaders will be referred to as *maliks* in this paper.

The research team conducted semi-structured interviews and focus groups that lasted up to 2.5 hours in length. While researchers generally sought to conduct semi-structured interviews, these were often quickly transformed into focus groups when family members or neighbours would join the discussion. Community members were usually eager to speak about CDC activities in their community and the research team rarely encountered opposition to a proposed interview. In some cases, however, villagers were simply unavailable because they were busy tending fields and livestock or had migrated to seasonal pasture lands (*aylaq* or *qishlaq*).

At the community level, respondents were asked about their community's history, migration pattern, economic conditions, provision of goods and services, leadership, dispute resolution, and, of course, CDC.

From the pilot phase of the research, the team concluded that unbiased information about CDCs and their activities could be garnered by asking indirectly about the CDC¹³. Accordingly, AREU reoriented interview guides to focus on functions that CDCs purportedly serve, such as project implementation, dispute resolution, social services and aggregation of community preferences. This was done so that individuals did not feel pressure to emphasise or de-emphasise the role of the CDC in their community. Direct questions about the CDCs were asked at the end of each interview.

2.4 Qualitative research approach: Site selection

Research was conducted in 32 villages across 16 districts in six provinces across Afghanistan. Sites were selected according to criteria developed to allow the team to capture variation in NSP implementation. Security conditions limited possible research sites. While the team had to halt research in one district due to intra-communal fighting, the districts selected generally did not face serious security threats at the time of the research.

Aside from security, the two most important variables for district site selection were length of NSP facilitation (Cycle 2+, Cycle 2 or Cycle 1) and approaches used by the FP. Length of facilitation was important because the team suspected that many communities would be more mobilised or active before their projects were completed. Alternatively, CDCs with longer periods of facilitation could have had deeper roots in the community and, thus, be more active. In order to examine both possibilities as they pertain to the sustainability of the CDCs, the research team sought to examine CDCs at varying stages of NSP implementation. In addition, the team sought to capture variation in mobilisation and implementation techniques of FPs; it was particularly interested in how different FP clustering techniques affected sustainability or mobilisation of CDCs. AREU examined the work of eight FPs in total, representing only one third of the CDCs working in Afghanistan.

Site Selection Criteria

District-Level Selection Criteria

- Security
- Length of NSP Facilitation
- Facilitating Partner

Community-Level Selection Criteria

- Distance from district centre
- Type of project implemented in the community
- Absence or presence of CDC clustering programme
- Other structural features (religion, ethnicity, population density)

¹³ When the research team asked directly about CDCs, community members assumed the research team represented the FP.

At the community level, great effort was taken to capture variation in several factors to ensure the research did not over-represent particular issues. In each district, the team selected one CDC that was relatively close to the district centre and another that was much further. Secondly, researchers sought to ensure that the sample of communities adequately covered the full range of projects implemented by CDCs. There was a desire to examine how project selection affected the ability of a CDC to sustain itself and if it would affect the processes of organisation in the community. For example, the team had *a priori* knowledge from both FPs and the MRRD that diesel generator projects were problematic in many communities, possibly influencing community attitudes towards the CDC. While the team examined communities with a wide range of projects, the sample of NSP projects in this study is not statistically accurate.

Another criteria for selection was based on whether participation in or the presence of a clustering programme had a significant impact on CDC activity. At the district level, FPs were selected due to variation in clustering techniques while, at the community level, the absence or presence of a clustering programme was an important factor. In some districts, both CDCs selected were members of the same cluster. In others, the selected communities were not part of the same cluster. In still other districts, the team selected one community that participated in a clustering programme and one that did not.

The research team also tried to capture as much structural variation as possible given the geographical limitations of the study, which was largely due to security concerns. For example, most major ethnic and religious groups in Afghanistan are captured in the study¹⁴ as are sedentary and nomadic communities. The team also looked at both communities that depend on agriculture as their main source of income and those that relied on livestock.

The initial intention of this study was to focus solely on Cycle 2+ CDCs (those receiving three years of FP support and facilitation); these communities are a focal point for both the MRRD and FPs since the support will soon or has already ceased. With Cycle 2 implementation periods limited to two years, FPs are also planning withdrawal from those communities in the near future. It was crucial to gauge the activities in both Cycle 2+ and Cycle 2 communities to gain a more accurate picture of the abilities of CDCs after the facilitation period. To maintain its internal validity, the study's scope was extended to include CDCs at Cycle 2 and Cycle 1 phases of implementation. Without systematically examining communities at other phases, it would be difficult to understand the impact of different types of training, project success and other features. The team conducted research in several communities where no CDC was present; this provided a basis for assessing the impact of CDC presence in a community and to what extent a CDC builds on features endogenous to village society in Afghanistan.

It is vital to note that the team was unable to conduct research in much of southern and eastern Afghanistan due to security constraints. Therefore, AREU is unable to comprehensively address issues facing CDC sustainability in high-risk areas.

¹⁴ Ethnic or linguistic groups included Pashtun, Tajik, Hazara, Uzbek, Arab, Turkmen and Kuchi communities. Religious communities included Sunni, Shia and Ismaili communities.

Table 2: Provinces and Districts Selected for Study

Province	District (Facilitating Partner)	Implementation Cycle
Kunduz	Imam Sahib (ACTED)	Cycle 2+
	Khanabad (GRSP)	Cycle 2+
Balkh	Nahr-i-Shahi (UN Habitat)	Cycle 2
	Dawlatabad (CHA)	Cycle 2+
Kabul	Paghman (SDF)	Cycle 2+
	Guldara (SDF)	Cycle 1
	Qarabagh (SDF)	Cycle 2+
Bamyan	Panjab (AKDN)	Cycle 1
	Sayghan (UN Habitat)	Cycle 2+
	Bamyan Centre (UN Habitat)	Cycle 2+
	Shiber (AKDN)	Cycle 2
Herat	Karokh (UN Habitat)	Cycle 1
	Anjil (UN Habitat)	Cycle 2+
	Pashtun Zarghun (DACAAR)	Cycle 2
	Guzara*	Cycle 2+
Nangarhar	Behzod (BRAC)	Cycle 2
	Surkhrod (BRAC)	Cycle 1

*The research team began research in Guzara but pulled out due to deteriorating security in the district related to intra-communal fighting.

2.5 Previous research on CDCs in Afghanistan

This is the first research independent of NSP stakeholders¹⁵ that has examined the sustainability of CDCs, including prospects for continued activities after the conclusion of the project cycle. Previous research on NSP focused on subjects relevant but not specific to sustainability such as problems of facilitation and access to communities¹⁶, elections in CDCs¹⁷ and the role of CDCs in promoting accountability¹⁸. The largest independent research project on NSP to date was conducted by the University of York, which was contracted by the MRRD to conduct a broad-based evaluation and contribute recommendations for the design of NSP II¹⁹. The only other known research project to date on CDC sustainability was done by ACTED, an NSP FP, which used CDC self-assessment forms completed by CDCs and FP staff as the primary source of data²⁰.

¹⁵ including MRRD, FPs and NSP donors.

¹⁶ Palwasha Kakar, *Fine-Tuning the NSP: Discussions of Problems and Solutions with Facilitating Partners* (Kabul: Afghanistan Research and Evaluation Unit, 2005).

¹⁷ Ingar Boesen, *From Subjects to Citizens: Local Participation in the National Solidarity Programme* (Afghanistan Research and Evaluation Unit, 2004). "dfd"

¹⁸ Yama Torabi, "Assessing the NSP: The Role of Accountability in Reconstruction" (Kabul: Integrity Watch, 2007).

¹⁹ Sultan Barakat et al. "Mid-Term Evaluation Report of the National Solidarity Programme (NSP)" (2006).

²⁰ ACTED, "Transition Strategy and Cycle 2+ Communities: A Study of NSP" (Kabul: ACTED, 2007).

Unlike that study and most previous research efforts on NSP, field research for this project was not facilitated by FPs. Instead, researchers selected villages independently of the FP and other officials. FP staff did not accompany the research team on field visits. To protect the confidentiality of respondents, the research team did not inform FP staff of the communities selected.

This research is also unique in its methodology since half of the village-level interview sample was taken from individuals who were not CDC members. Additionally, the team conducted systematic interviews and field research in communities that did not have CDCs to understand the impact of CDCs and compare how community-decision making processes may have been affected by the introduction of a CDC. The research team was surprised at the divergence of views between CDC and non-CDC members.



Illustration 1: Inauguration of NSP Project, Balkh

3. The Challenges of Sustainability for CDCs

The challenges facing CDCs in Afghanistan are not unlike those faced by other community-driven development programmes around the world.²¹ After the conclusion of the first phase of implementation, many CDCs could wither away due to a lack of project funding and *raison d'être*, insufficient human capital to maintain existing projects, and uncertainty of long-term donor or government support. According to a recent World Bank evaluation, sustainability is the most insurmountable challenge to CDD projects.²² Barriers to prolonging CDD activities cited in the World Bank report were: scarcity of project operation funds for continuing projects and maintenance, lack of technical capacity in communities to maintain or promote projects, and inconsistent donor support.²³

In the context of community development, sustainability has a variety of meanings. For example, programming could focus on the sustainability of projects and the ability of communities to maintain physical structures. There could also be a focus on human assets, such as the sustainability of participation. This research project defines sustainability as the ability of CDCs to continue their activities after the withdrawal of external facilitation.

Sustainability, thus, would entail maintaining financial support as well as intangible aspects such as experience in community participation, which is related to decision making. To this end, this project considered the degree to which CDCs create or enhance community participation and the degree to which they are linked to existing governance structures such as quasi-formal, traditional leadership at the village level, institutions at the district and national levels, FPs, NGOs, donors and neighbouring villages. Given the context and constraints of rural Afghanistan, understanding these linkages is vital to properly diagnose issues of CDC sustainability since the envisioned functions of CDCs vary among different stakeholders.

3.1 CDC sustainability: A conceptual framework

Because different visions of CDCs exist, defining the form in which CDCs could be sustained in the future is a challenge. This project identified three visions of CDC sustainability articulated by various NSP stakeholders.²⁴ It is vital to unpack the assumptions in each of these visions because they imply divergent goals and priorities for CDCs. These visions are not mutually exclusive, but understanding differences between them serves as a useful conceptual framework to clarify various existing notions of how CDCs could be sustained.

Three Visions for CDC Sustainability

<i>Experiential</i>	the CDC is fluid as an organisation and a part of civil society; it mobilises community members and emphasises participation
<i>Coordinative</i>	the CDC coordinates aid and development programmes in the community; it focuses on project implementation and coordination
<i>Formalisation</i>	the CDC becomes a formal village council or unit of government

²¹ World Bank, Operations Evaluation Department, "The Effectiveness of World Bank Support for Community-Based and -Driven Development: An OED Evaluation" (Washington, DC: The World Bank, 2005).

²² World Bank, "The Effectiveness of World Bank Support for Community-Based and -Driven Development: An OED Evaluation".

²³ World Bank, "The Effectiveness of World Bank Support for Community-Based and -Driven Development: An OED Evaluation," 6.

²⁴ The author acknowledges the assistance of Joel Hellman in developing this framework.

The experiential vision

This vision sees the CDC continuing in the ability of communities to carry out the activities currently mandated to them under NSP I – but without the presence of an external facilitating partner. This vision particularly focuses on the two goals of NSP: to deliver project-based community development and to improve community governance. Through experience with community project development and management, this approach stresses community mobilisation, the transformation of citizens and strengthening of the community's social capital. The experiential approach reflects the philosophy and logic of community-driven development programming.

According to this vision, local governments and village leaders are held more accountable because citizens in the community are better informed and more organised as a result of their participation in CDC activities and, as a result, will be better off. It is characterised as “experiential” because it is the experience of going through the mobilisation process that makes each individual a more active, involved citizen.

In most countries where community-driven development activities are implemented, the conventional target for sustainability is not the formalisation of the participatory body that selects and implements projects. Instead, it focuses on the participatory aspects of community life as an end unto itself. The foundation for success in a CDD project, such as NSP, would lie in “the active involvement of members of a defined community in at least some aspects of project design and implementation”, a key objective of which should be to incorporate “local knowledge” into the decision-making processes.²⁵ Participation would then move to self-initiated actions and is expected to ensure better designed projects with better targeted benefits delivered more effectively, equitably and less leakages due to corruption.²⁶

In this regard, a CDC would be defined as sustainable if the mobilisation promoted through NSP continues beyond the facilitation period and has positive spillover effects on other spheres of community governance such as accountability of higher authorities and stimulating community ownership of local projects. According to the experiential approach, a successful CDC project would serve as an engine of community activism generating longer-term participation among citizens to tackle development dilemmas within the community. Not only after FP withdrawal but in the absence of project funds, will this kind of participation continue to be generated by CDCs?

Currently, there are no proposals that incorporate this approach to CDC sustainability. This vision, however, is implicit in the initial NSP proposal as it is in most other community-driven development programmes.

The coordinative vision

A second vision of sustainability promotes CDCs working as coordinative bodies – organising and managing donor and government assistance to communities. The coordinative vision sees CDCs as permanent structures at the community level that are engaged in implementation as well as planning of development projects. According to the coordinative approach, a CDC is more sustainable if it continues to implement projects funded by the MRRD as well as other ministries and donors.

This vision would expand the mandate of CDCs beyond the current activities for which they have received training. CDCs would not only carry out community-based projects but would take a larger role coordinating and implementing projects outside of NSP.

The coordinative vision of CDC is promoted by some FPs and by the MRRD. The CDC by-law incorporates a combination of this vision of CDC sustainability with the third vision,

²⁵ Ghazala Mansuri and Vijayendra Rao, “Community-Based and-Driven Development: A Critical Review,” *The World Bank Research Observer* 19, no. 1 (2004): 6.

²⁶ Mansuri and Rao, “Community-Based and-Driven Development: A Critical Review,” 6.

formalisation. Elements of the coordinative approach are evident in the by-law in relation to their responsibilities for coordinating donor assistance to communities.

The formalisation vision

The third model of sustainability envisions the CDC as a formal governmental institution. In the context of Afghanistan, CDCs could fulfil the role of the village councils that are mandated by the constitution of Afghanistan or future national-level legislation. CDCs would then be responsible for governmental and administrative tasks, such as population registration and maintaining vital statistics. CDCs would also become the most local level of the government. The formalised version of CDC sustainability would move CDCs outside the realm of civil society and turn their members into government employees. Such formalisation would potentially cause confusion among community members who tend to view CDCs as part of civil society and not as a formal government structure.

One possibility corresponding to this vision is that CDCs are accorded the status of the village council called for in the Constitution of the Islamic Republic of Afghanistan. If so, they would take on a role mandated by the national government. It is still unclear whether they would become legislators or politicians at a local level who receive government salaries in the same way that members of both provincial councils and Parliament do. Another possibility discussed relates to nationalising the jurisdiction of the CDC by-law, which is a key part of the strategy put forth by the MRRD and NSP.

3.2 Current strategies for sustainability: The CDC by-law

The MRRD and NSP have articulated a view of sustainability for CDCs that focuses primarily upon the third vision, the institutionalisation of CDCs to serve both coordinative and formal governance purposes. The MRRD's proposal for NSP II outlines a vision for the future of CDCs:

The goal of the government is to ensure the continuity of the CDCs as a permanent part of the governance system and for them to evolve to become the primary service delivery instrument for rural development. However, funds alone will not guarantee the long-term sustainability of CDCs... The CDCs must be recognised by all the government ministries and enshrined in the law of Afghanistan. If the CDCs are legally constituted then they are far more likely to remain as an active institution far into the future, beyond the perceived timeframe of the NSP itself.²⁷

The World Bank, a key funder of NSP, offers a nearly identical vision of sustainability in its NSP II proposal²⁸. Both proposals sought to permanently institutionalise CDCs by granting them legal status and recognition. One rationale provided by the MRRD is that this "would enable the CDCs to seek funding external to the NSP".²⁹

It is not clear whether the CDCs represent the village councils called for in the Constitution of Afghanistan. The MRRD have supported the idea that the CDCs be these councils. In addition, most of the NSP FPs with whom the team spoke expressed a strong desire to create a legal framework guaranteeing a future role for the CDC; in their view, the only way to promote CDC sustainability would be to create legislation enshrining CDCs as these village councils. FPs commonly expressed the belief that formalisation of CDCs as government bodies is the only way the CDCs could continue their work.

The MRRD's clearest articulation of a sustainability strategy for CDCs is a by-law that provides a legal basis for long-term CDC activity. The by-law, signed by President Karzai in November 2006, bestowed significant coordinative and administrative functions upon CDCs. By-laws are administrative regulations governing the activities of a government

²⁷ MRRD, "The Expansion of the National Solidarity Programme," 32-33.

²⁸ World Bank, "Technical Annex for a Proposed Grant," 28.

²⁹ MRRD, "The Expansion of the National Solidarity Programme," 32-33.

ministry; these regulations, however, apply only to the operations of one ministry – in this case, the MRRD – and do not have jurisdiction over other ministries. The MRRD and other national-level stakeholders as well as many FPs have expressed a desire to transform the by-law into national legislation.

The MRRD has put forward a particular view of the by-law whereby the legal enshrinement of CDCs ensures their sustainability:

CDC sustainability will be enhanced by facilitating the development of legislation which will provide a legal framework for CDCs to become legitimate bodies through which development assistance and public investments are channelled at the community level.³⁰

According to the by-law, CDCs are the “social and development foundation at the community level, responsible for implementation and supervision of development projects and liaison between communities and government and non-government organisations”.³¹

At first glance, the by-law articulates a coordinative model of sustainability in which CDCs serve as conduits for assistance to the community. It bestows significant authority to CDCs that expands their roles far beyond coordinative functions of project coordination, selection and implementation. According to Article 16 of the by-law, the CDCs are tasked to:

- design and prepare a development plan for the community, identifying needs and priorities based on consultation with community members and paying attention to the needs of women, children, people with disabilities and other disadvantaged groups;
- establish and administer a community development fund;
- maintain linkages and coordinate with government agencies, NGOs, aid and develop programmes to improve community development and strengthen financial affairs;
- convene regular community meetings and exploit the views and recommendations of community members;
- prepare and maintain financial documents as required by the by-law and report to community members;
- implement the CDC’s decisions concerning the exploitation of community skills and external services when necessary;
- encourage community members and pave the way to establish successful industries (agricultural and industrial) at the community level;
- cooperate in the implementation of government and non-government programmes at the community level; and
- address people’s rights and freedoms in accordance with Islam, the constitution of Afghanistan and other legislative documents.

In addition to these duties, the CDC is “obliged to record the population statistics in the community, including the number of men and women, births, mortality, and marriages”.³² Furthermore, the CDCs are tasked to register and certify birth and death certificates, marriage licenses, and national ID cards. According to Article 17 of the by-law, the CDC may also have the optional role to mediate disputes in the community.

It is important to note that the duties bestowed upon the CDCs through the by-law go far beyond the existing capabilities of the CDCs – as this study demonstrates. It would be a challenge to sustainability since the activities exceed the kinds of training and preparation that CDCs received during their facilitation under NSP I. Should the by-law become

³⁰ MRRD, “The Expansion of the National Solidarity Programme,” 20-21.

³¹ MRRD, *Community Development Council By-Law* [Official English Translation] (2006), art. 4, sect. 1.

³² MRRD, *Community Development Council By-Law* [Official English Translation] (2006), art. 18.

national law, the government would have to undertake intensive additional efforts to train, fund and support CDCs. Currently, there is not an associated government budget to provide for the further facilitation necessary for communities to take on these additional roles. If CDCs are formalised prior to providing proper facilitation, the CDCs would only be able to partially fulfill their mandates.

It is important to note that many of these administrative and dispute resolution functions are already carried out by a range of quasi-formal and informal leaders at the community level. Our field research found that administrative functions, such as certification of ID card applications (*tazkera*), are currently the responsibility of community leaders such as *maliks*.

The precise status of CDCs in the by-law remains unclear.³³ If the CDC becomes an organ of the government – or the lowest level of government in Afghanistan – then the head of the CDC would be a government employee. The language of the by-law remains unclear about this point. MRRD officials stated, however, that the by-law would result in the CDCs becoming “organs of local *governance*, not local *government*”³⁴. In addition, the government’s transition strategy for CDCs, which provides guidance to stakeholders preparing for withdrawal from communities, states, “The CDCs would be recognised and have legal status as the lowest form of local governance. The legislation would not turn the CDCs into civil servants.”³⁵ The distinction between “local governance” and “local government” is not clear, however. According to the transition strategy, CDC members will not be turned into “civil servants” via formalisation, but many of the tasks outlined in the by-law are those that civil servants perform in most other contexts. It is unclear what the legal status of the CDCs will be according to the existing regulations. The MRRD appears to believe that if CDCs are not sustained as a formal institution then mobilisation efforts in communities will be deemed ineffective and futile:

Unless their sustainability is ensured as soon as possible, they face the risk of collapsing and withering away, squandering the vast amount time and money invested in their creation. More importantly, GoA [Government of Afghanistan] will lose the trust it managed to win from its people. There is thus an urgent need to harness political support on CDCs and the by-law from broad constituents.³⁶

In short, two key assumptions are being made by the MRRD: 1) funds spent on CDCs and projects will have been wasted unless CDCs are enshrined institutionally; 2) the government of Afghanistan will lose trust from its people unless the CDCs continue their work.

FPs at the national level interviewed in Kabul tended to echo MRRD sentiments that the NSP would be a failure if the CDCs do not continue their work as organisations in the long term.

If the CDCs are not formalised as village councils with a national law, then all of our efforts are wasted. We need to have a by-law so the CDCs do not just disappear.

—FP Manager, Kabul

³³ National Solidarity Programme Facilitating Partners, “Consolidated Position Paper on the CDC By-law” (2007).

³⁴ Remarks by MRRD official, AREU Sustainability Workshop (presentation, Safi Landmark Hotel, Kabul, 8 March 2007).

³⁵ MRRD, “Managing the Transition from NSP for CDCs” (Kabul: Government of Afghanistan, 2007), 21.

³⁶ MRRD, “Managing the Transition from NSP for CDCs,” 1-2.

3.3 Current strategies for sustainability: Transition for “graduating CDCs”

In the coming months, the period of three or more years of assistance from external FPs will end for many (primarily Cycle 2+) communities. Currently, there are no solidified nationwide plans to provide these “graduating” communities with further assistance or project funds. To prepare both FPs and communities for the end of facilitation and guidance, the MRRD drafted a transition strategy that outlined the process by which CDC activities and documentation would be handed over to MRRD officials at the national, provincial and district levels. CLDD activities are designed to provide a bare minimum of support to existing CDCs; the transition policy is designed to ensure seamless completion of NSP I activities.

The most important part of the transition strategy for communities is the creation of the Community-Led Development Department (CLDD) at the MRRD. The sole purpose of CLDD staff is to coordinate CDC activities after the withdrawal of the FPs. As activities are scaled down in a given district, the FP is to hand over all financial and project documentation to CLDD staff, including providing written capacity assessments of CDCs.

In principal, CLDD staff – at least one male and one female social organiser in each district – should be hired at least one year before FP withdrawal and should be seconded to the FP. They are to be taught facilitation skills and be informed about CDC activities in the district. CLDD staff, furthermore, must live in the district in which they are employed. This strategy also highlights clustering – the amalgamation of existing CDCs into groups – for future implementation of projects and decision making:

Where possible, FPs should arrange clusters of CDCs and nominate focal points for each cluster that can effectively liaise with the NSP PMUs. The clusters should be established along the guidelines used for District Development Assemblies and each cluster should nominate a focal person who has the capacity to liaise with the NSP PMUs and identify issues and problems with ongoing NSP implementation.³⁷

At the end of the facilitation period, FPs are required to prepare and submit capacity assessments of the CLDD staff who were seconded to the FPs. These assessments will be used by the MRRD to plan further training for those staff, preparing them to be future primary government liaisons to the CDCs.³⁸

Our CDCs are ready for their future. The future of the CDCs depends on the FP as well as the CLDD social organisers. If they are competent they can continue their work and the communities will be able to keep their CDCs. I think CLDD should have more people in each district. Two people are not enough.

—FP Social Organiser, Balkh

Finally, the transition strategy requests that FPs should assist “graduating” CDCs in finding alternate sources of funding outside of NSP.³⁹

Unlike most other ministries working in villages, the MRRD does not have representatives working in district government offices. In most cases, the FP (which is often a foreign NGO) is the only representative of the MRRD in a district. Rather than representing the entirety of the MRRD, CLDD staff are only responsible for coordination with CDCs. The MRRD has acknowledged great difficulties in recruiting qualified CLDD staff, largely due to the requirement that they must reside in the district where they are employed.

³⁷ MRRD, “Managing the Transition from NSP for CDCs,” 7.

³⁸ MRRD, “Managing the Transition from NSP for CDCs,” 7.

³⁹ MRRD, “Managing the Transition from NSP for CDCs,” 7.

One constraint for success of this transition strategy is that CLDD does not yet have support from the government budget, which limits resources for social organisers to perform their functions. In research interviews, the greatest concern identified by CLDD representatives was the lack of access to cars and other forms of transportation that would allow them to visit communities.

The national-level long-term and transition strategies suggest that the way to sustain CDCs is through formalisation – a strategy which seems to contradict the fundamental rationale of using community-driven development and empowering civil society.

3.4 Alternative perspectives on sustainability: The village level

The MRRD seems to currently assume that the success of CDCs is based on their institutionalisation and that people will lose trust in the government of Afghanistan unless the CDCs continue their work. The village-level findings of this research project, however, suggest that these assumptions do not reflect attitudes in rural Afghanistan. Generally, community members directly associate the CDC with the NSP-funded projects implemented in their communities; for example, successful project implementation corresponds to positive feelings about the CDC, including extreme gratitude for NSP funds. The impact of successful projects is particularly significant where CDC projects are the sole governmental or external assistance received in villages in recent years. Since most community members seemed to benefit from NSP-funded projects, they did not believe that FP withdrawal or conclusion of CDC activity would mean squandering away an opportunity – the belief more commonly held by FP members, the MRRD and national-level NSP donors.

An explanation for the difference in opinion between the MRRD and community members may relate to the historical memory within communities of many international assistance projects having come and gone during the past decades. In fact, at early stages of project mobilisation⁴⁰, communities did not expect NSP or CDC project funds to continue after the current funding cycle. Even if CDCs disappear when FPs withdraw, communities will not perceive the work done by the CDCs or NSP to have been a failure. To the contrary, projects implemented by NSP have helped millions of people in rural Afghanistan.

In addition, the team found that if a CDC is unable to continue due to a lack of funds, community members do not show ill will towards the government. This is because individual expectations regarding government provision of services remains extremely low in rural areas. Individual disappointment about the lack of continuing funds was generally tempered by past experiences with community development projects. Individuals had higher expectations of international organisations and NGOs to provide services than they did from their own government.

Furthermore, roughly half of the respondents interviewed perceived the CDC and NSP to be a foreign-funded initiative, especially where the FP was an international NGO or organisation; thus, it does not follow that these villagers would lose faith in the government since they had never understood the NSP to be a government programme. There is general confusion as to whether NSP is a government or an NGO programme. It was only when the FP was an Afghan NGO⁴¹ that NSP was more likely to be understood as a government-sponsored project. In most cases, however, community members view their CDC as a foreign-funded NGO project like many others encountered in their communities. Most CDC members understood that the MRRD is the Ministry responsible for the creation of CDCs; non-CDC members generally were not aware of this topic.

The current strategies of the MRRD and NSP provide a framework to sustain the CDCs as a formal organisation. From many communities, an alternative perspective may be

⁴⁰ such as in Cycle 1 communities.

⁴¹ SDO, GRSP and CHA

apparent. They have expressed a strong desire for CDCs to continue their work but not due to the organisational capacities of CDCs. Rather, it is because of the infusion of projects and funds that the NSP has injected into the community. This suggests that those at the village level may view – and prefer – sustainability of CDCs to take place in the framework of the coordinative vision.

When asked, most community members expressed strong reservations that their CDCs could continue without project funds because they associated the CDC almost exclusively with externally funded projects.

I think if they have projects in future they [the CDCs] will stay but if they don't have culverts or other projects they will not remain.

—Male CDC Member, Kunduz

Notably, compared to the views of national-level FP respondents on the future role of CDCs, perspectives changed dramatically when the team interviewed their counterparts closer to the village level. For example, FPs at the district level had less knowledge of the CDC by-law and were more supportive of a coordinative vision of CDC sustainability. These FPs were also more aware of local realities and constraints than their counterparts at the national level. As NGO employees, FPs felt that CDCs would best be able to continue if they could find alternative sources of funding. Very few FP employees at the district level suggested that CDCs should take up formal government work or assume greater administrative roles. One FP social organiser expressed a more tempered view of CDC sustainability, defining it as the ability of communities to raise funds to support projects.

If they [CDCs] want to give another proposal to another organisation so it means they are self-sufficient. They can do these processes by themselves...in some areas people had less money and they looked for another source of funds. People found out that they can reach their targets if they move toward their targets. In one of our CDCs, the community had a transport project and their [NSP] budget was not enough to pay for it. So they looked for other sources and they took some money from an NGO. We have some road gravelling and culverts where villagers contributed and actually worked more than the 10 percent that they should have contributed to projects. Some roads needed more money and so people worked a lot.

—FP Organiser, District Level

Prospects for sustainability may be greatly enhanced if there is a common vision of the purpose of the CDCs. Such a common vision does not yet exist. Even in those communities where NSP projects have been successfully implemented, villagers themselves rarely expect that their CDCs as an organisation will continue to function. This is largely because there is a wide discrepancy between the village and national level in understanding the purposes of the NSP.

4. Factors Affecting Sustainability

At the community level, positive attitudes towards CDCs were the single greatest predictor of individual desires to work with CDCs in the future.

The interest of people and their enthusiasm towards projects explains the most important part of CDC sustainability. Where the people are enthusiastic, the CDCs are most sustainable.

—NSP Manager for FP, Bamyan Province

As noted in Section 2.1, this study sought to answer specific questions in order to assess the sustainability of CDCs and to examine the role of CDCs in community governance. Research gathered from the field on these factors affecting sustainability is highlighted in this section. They are:

- the main activities of CDCs (project impact, elections, project decision making and selection, and female participation);
- funding;
- the capacities of CDCs;
- structural factors;
- the activities of CDCs outside of the NSP;
- linkages with formal state structures;
- linkages with local authorities; and
- linkages with neighbouring communities (clustering).

4.1 CDC activities: Project impact

Many times, individuals in communities did not initially pay attention to the CDC when it formed in their communities because they were unaware of the potential benefits that projects would bring to their communities. In nearly every community, however, there was heavy correlation between successful project completion and positive attitudes towards the CDCs. NSP projects have significantly improved and transformed lives in rural Afghanistan. The table below presents the number and types of projects carried out by CDCs under the programme.

Table 3: Main NSP Achievements by CDC Project Sector as of 30 Meezan 1386 (22 Oct 2007)

Sector	Total sub-projects financed
Agriculture	20
Education	3,512
Emergency Response	10
Health	82
Irrigation	4,806
Livelihood	2,080
Power	4,578
Public Building	22
Rural Development	519
Transport	6,427
Water Supply & Sanitation	7,190
Total	29,246

Implementation of the projects did bring positive effects to the life of the people here. For example, before we were drinking the stream water or the water from open pools this village. Now we are using and drinking water from deep wells which is safe and clean. We had difficulties for transporting sick people, goods, and products to the centre of the district or big cities. Now can reach the centre of the district in few minutes and can take our patients to doctors and hospitals very quickly. The new constructed culverts and bridges helped us to safely move from one side the village to another side.

—Female non-CDC member, Kunduz

Without a doubt, the projects have enhanced economic opportunities and livelihoods in communities where projects have been successfully implemented. In those communities, villagers tend to hold very positive views of the CDCs.

If I said the effect [of NSP] was more than 100 percent you would laugh at me, but I tell you it had very big effect on people's lives. The projects changed the lives of people. We were carrying our sick people by donkey and now we can use car instead of donkey. Suppose someone is blind and you give him sight. NSP has been like that. You see this culvert? Before we had it, my nephew fell in the stream twice with his bicycle twice. It was very dangerous, but now it is safe.

—Malik, Kunduz Province

I can say that NSP has brought some changes in the lives of people and also it has built the capacity of the people. Also it has brought a lot of benefits for the people. I know that many people use these projects. For example, we have school and a lot of girls and boys are going there. Many people use the culverts in the village that we have built with NSP funds.

—Male CDC member, Herat

Implementation of the projects brought lots of positive changes to the lives of the people. We are now using safe drinking water and gravel roads, new culverts and a bridge. Before these projects, we were facing a number of problems and difficulties. Now when we have sick patients - especially pregnant women, they are able to access the hospital and clinic at the centre of the district. Before we were not able to send our patients to the district centre. Another example is that we had just one well before and there was always conflict for taking water from that well. Due to NSP, we have many semi-deep as well as shallow wells. All people have access to water from these wells.

—Female Non-CDC Member, Kunduz

In areas where individuals identify NSP as a government programme, there seems to be greater affinity and loyalty to the Afghan government.

Most communities view their CDC solely as a vessel through which NSP project funds were disbursed — not as an independent or permanent governance body. The most striking aspect of the impact of CDCs lies in their ability to channel funds to communities for badly needed infrastructure projects.



Illustration 2: NSP-sponsored hand pumps, Karokh District, Herat

Impact related to project type

The research shows that the type of project implemented by the CDC has a strong bearing on community satisfaction with the CDC and, in turn, on the willingness of individuals to participate in CDC activities in the long run. This has implications for sustainability in the experiential sense.

A public benefit is akin to a public good, which is defined as both non-excludable and non-rivalrous⁴²; a public good is one that an individual cannot be prevented from consuming, whether he or she pays for it.⁴³ A private benefit is excludable and rivalrous (that is, has a quantity that decreases as consumption increases). In the context of NSP, non-excludable public benefits include: culverts, gravel roads, retaining walls, *karez* cleaning and water pumps. While some of these goods could have been potentially excludable, none of the communities examined in this research constructed barriers to public access to these goods. Excludable public goods from CDC projects include: energy (micro-hydro power, solar power, diesel generators), dishes⁴⁴, and human capital development courses (literacy, tailoring, carpet weaving and animal husbandry).

⁴² Paul Samuelson, "A Pure Theory of Public Expenditure," *Review of Economics and Statistics* 36, no. 4 (1954).

⁴³ Classic examples of pure, non-excludable public goods include fresh air, national defence or a public park.

⁴⁴ In one community, the team found that NSP funds were used to buy a large set of dishes for the community. This was available for community members to rent at a small charge for weddings and other large community celebrations.



Illustration 3: Culvert Constructed with CDC funds, Pashtun Zarghun District, Herat

The team found that the provision of non-excludable benefits through CDC projects corresponded to a greater level of satisfaction and enthusiasm for CDCs among community members. The team also found rivalry or the satiability of a benefit to have a significant impact on community satisfaction with the CDC and individual willingness to participate in and cooperate with the CDC in the future. Positive outcomes were more evident when benefits were more public and where the good was neither satiable nor excludable.

When project materials could easily be expropriated, such as from animal husbandry projects or sewing machines from tailoring courses, communities had lower satisfaction with their CDCs. In most of these cases, community members alleged that these materials were indeed expropriated. This finding suggests that there is not sufficient monitoring of CDCs by external authorities to prevent goods from being commandeered for private benefit. When individuals perceive that there is corruption in their CDCs, they are less likely to participate in the organisation in the future, thus undermining its prospects for long-term sustainability.

We have one project in the village for the community. This is a goat project. We only received 17 male goats. The rich people and the landlords got these goats. The poor people didn't get these goats. And this was a project for women. There were fights and arguments between people about the goats. The people then decided to distribute the goats randomly, but unfortunately the poor people did not receive any of the goats. Additionally, we have a committee that observed how the goats were distributed. But the powerful people used their influence to oversee how the goats were distributed.

—Non-CDC member, Bamyān Province

CDC regulations called for 10 percent of project costs to be covered by community contributions, but this did not necessarily have to be monetary; in most cases, contributions were in-kind in the form of community labour. Implementation, however, was more problematic when user fees were associated with projects. User fees in the context of NSP projects included payments for fuel for diesel generator projects and

batteries for solar power projects. When individuals had to pay for a particular service or materials, communities were usually unable to sustain the project.

We have an electricity project in our village and the electricity works every night. I don't want to use this electricity. Everyone pays the same amount of money. Some people use a lot of light bulbs and watch TV. Other people just use one light bulb and don't use that much energy. I don't think it is fair that I should pay the same amount of money as these people. So, for this reason, I don't use electricity provided by the project. Most people in the village are paying between 200 and 300 Afghanis every month for electricity. During this hot season, some people in the village migrate to other places; they go to the mountains or the desert with their animals. When these people come back during the winter, this project is very active. People aren't using a lot of electricity during the summer. This project is much more active during the wintertime when the village is full.

—Female non-CDC member, Herat

There was a power generator project that failed. As long as the FP was providing fuel for the generator, people were happy and people would use the electricity. But when the FP stopped contributing, our generator stopped because the people couldn't pay for the oil for the generator.

—Female non-CDC member, Kabul

We had a generator electricity project that failed because the people weren't able to provide the cost of fuel and costs. So this project was a failure.

—Female CDC member, Bamyan

People are happy with the wells here. They have been very important to improve people's lives. We also have a power project. One part of our village got power, but they have not put in our transfer yet. But we never tell outsiders or the musaseh [FP] that we don't have the power. A few days ago, my friend was at my home and he asked me at night why we don't have power on this side of the village while the other side has power. I told him that we have some problems with our power lines and we will repair them. But I did not tell him that that we don't have power. But actually it is one year that they have postponed our project and we don't have power. We think the people who live in the other half of the village took our funds.

—Non-CDC member, Balkh

Energy projects were particularly problematic for CDCs to maintain — regardless of whether it was a diesel generator, micro-hydropower or solar power.⁴⁵ Problems sustaining both the technical and financial requirements often led energy projects to fail in the long term⁴⁶. This research found that communities were often unable to provide adequate community contributions to maintain or construct energy projects. For example, in Bamyan, the team found one village using only eight of the 158 solar panels purchased by the CDC. In this case, the community contribution was to be the batteries for the solar panels; individual families were responsible for purchasing their own batteries. Families lamented that they were unable to afford batteries even though the community made this

⁴⁵ Aware of the associated problems in communities, the MRRD quickly moved to limit the ability of communities to select diesel generators as projects.

⁴⁶ These projects, however, were not considered failed projects for purposes of NSP accountability.

decision together. Only one more affluent family in the community could afford a battery. Additionally, in several communities where the research team found solar power projects, solar cells were not equally distributed among families. Wealthier families would have several solar cells while poorer families would share one cell across two or three households.



*Illustration 4: Solar Energy Project, Panjab District, Bamyan
Solar cell is unused and still in its original packaging.*

Communities were initially quite eager to receive energy projects because they assumed that energy would provide opportunities for income-generating activity. They thought that electricity would solve problems and lead the community to greater development and prosperity.

The FP came and proposed that we have a animal husbandry project, but we selected a hydropower project instead. We didn't accept other projects suggested by them because those projects wouldn't build unity in the village. If we give projects to some families, the rest of the families would be deprived of benefits. We collected about 20 percent of project funds ourselves. We selected hydropower, because it could serve all the villagers equally.

—Male CDC member, Bamyan

Many CDC members, however, often regretted their selection of energy projects after they had been implemented.

A deputy governor in one province objected to energy projects, stating that they do not address immediate community needs and often fail. He expressed concern that solar power, diesel generators and micro-hydropower projects often require technical expertise that was not available in communities. Furthermore, he pointed out that failed energy projects contribute to in-fighting and disunity within communities and lead to a breakdown in CDC participation.

Contrary to energy projects, those that featured non-excludable goods were more successful. It may not, however, have resulted from the non-exclusivity of the benefit but

perhaps from the fact that these projects required less technical expertise on the part of the community. Projects that are less technical in nature seemed to be more sustainable because communities were more likely to have the capacity to maintain the projects without significant external assistance.

The greatest predictor of individual willingness to cooperate and contribute to CDC activities in the future is positive attitudes towards CDCs, which is largely derived from project performance and individual satisfaction with the project. When projects were excludable and when user fees are associated with the design of the projects, individuals tended to be less satisfied with the project. They indicated a decreased desire to cooperate with CDC activities and members in the future – having a direct negative influence on CDC sustainability.

I think if CDCs have good people in and they can spend money in correct way it will be very good that they work forever. We would help them, but our people have a lot of problems now and we don't have female CDC members. Our women are complaining a lot about our tailoring project. One family got four sewing machines and most other families don't even have one. The other families are really angry about this.

—Male non-CDC member, Nangarhar

I'm a widow and I have three daughters and two sons. One of my sons was the deputy head of the men's CDC. He recently left the village for Iran and therefore I lost my position as the head of the female CDC. After he left, women in our village became unhappy with the tailoring project we had in our village. When my son was here, they selected two women to serve as tailoring trainers. But after he left, this number increased to three and these women divided the sewing machines in three parts for themselves. The women in the village are unhappy about this.

—Female non-CDC member, Kunduz

Cases of project failure would subsequently lead to negative attitudes towards CDC leadership. Failure, which is defined as insufficient implementation of a project according to the community development plan or priorities set forth by the community, were usually caused by incompetence and malfeasance. Failed projects and the consequent negative attitudes, however, do not necessarily mean that community members would be unable or unwilling to handle projects in the future. In fact, project failure could contribute towards a willingness to work with a reconfigured CDC in the future as individuals are aware of the opportunity that had been squandered. Provision of a second project in those communities would allow citizens to have a second chance and take stock of lessons learned.

4.2 CDC activities: Elections

When considering the coordinative or formalised visions of CDC sustainability, CDC elections are vital. For example, at the MRRD-hosted national consultations in 2005 and 2007, CDC leaders called for greater legal status and a by-law. If the elections of these leaders were not held in a transparent manner, however, one cannot assume that they are representing the voice and will of the people. Furthermore, village elections were not observed by an independent body. In case CDCs take on official government status, as suggested in the by-law, individuals that became members of the CDCs through less than democratic means could eventually become government representatives. This may cause greater rifts between the population and the government, which was observed at several research sites.

The research team found high degrees of irregularity in CDC elections. It was quite unexpected to find wide discrepancies between these research findings and the reports by FPs and claims by the MRRD that elections have transformed local decision making in rural Afghanistan.

Surprisingly, in only about half of the communities visited, the research team found evidence of elections that would meet the democratic, secret ballot criteria outlined in the NSP Operations Manual. In some areas, the team found that formal elections for CDCs never took place. In some communities where elections did take place, communities used procedures – such as voting by hand-raising, consensus or selection at random – that violate those mandated by the NSP Operations Manual. For example, in two districts (totalling four communities), the team found elections held at random where candidate names were placed in a box and selected blindly. In other communities, the team found that CDC members were selected by consensus, using the raising of hands.

We carried out the election with the cooperation of the FP. All the residents of the area cast their votes and selected both men and women representatives for the CDC. Men and women voted separately. Men voted in the mosque and the women voted in a house. The elections in the village were not done by voting, but rather by raising of our hands. This was done for both the men and women's CDC.

—Female CDC member, Balkh

Sometimes when the ladies [female social organisers] came from Kabul or from Mazar, they would come to my house and talk with me. When our [male] villagers gathered in one place, they selected me as the women's representative. All the women in the village came to congratulate me, but I didn't know what was happening. The representative from the FP said to me that I had been selected as the head of the female CDC.

—Head of Female CDC, Balkh

In one district in Bamyan, the FP instructed communities to elect two men and two women to the executive committee and that they need not elect other members to the CDC; this situation did not allow for female and male subcommittees even though the NSP Operations Manual allows for up to 15 CDC members. According to interviews with both men and women in this district, community members expressed outrage that they were forced to select “illiterate women” to serve as both the secretary and treasurer since there were no literate women in the village. In another district in Bamyan, there was systematic evidence that the same FP had instructed communities only to select a total of five members: four for the executive committee plus one alternate. These instances clearly violate the rules laid out for FPs in the NSP Operation Manual.

An even more surprising result is that the way CDC elections were held in the community did not seem to have a significant impact on individual attitudes towards the CDC. This finding contradicts the philosophical underpinning of community development whereby effective participation should ensure that funds are used with more accountability and for purposes that are agreed upon by the community. It may possibly be explained by the high degree of legitimacy of current local institutions, such as the *malik*, as well as the community satisfaction resulting from infusion of cash into such communities that greatly lack infrastructure.

In many communities, villagers were unaware of CDC activities and had not participated in elections or project selection. They could, however, still hold very positive attitudes towards the CDC because individual satisfaction towards the CDC more likely depended on successful project implementation and the degree to which individuals could access benefits from the project.

The team found a subsequent election of CDC members was held in less than one third of the cases examined. While CDC leadership often turned over, these changes were not always due to a new election but rather due to resignations or leaders moving to a different location. This finding contradicts information from one of the largest FPs, which indicated that upwards of one third of CDC members were replaced when re-elections occurred.⁴⁷

More community interest to participate in re-elections, however, was generated by the introduction of new activities beyond NSP, especially the clustering project. In communities where NSP projects were completed and new projects did not arise, community members appeared less interested in participating in a second round of elections. Some FPs acknowledged difficulties in engaging villagers in re-elections.

It is difficult for us to get people in the villages to participate in second elections. Without more money for projects, it is hard for people to understand why they should participate in another round of elections. People understand the CDCs to be about the projects, so without project funds people don't understand why they should participate in the CDC.

—NSP National Manager of an FP, Kabul

4.3 CDC activities: Project decision making and selection

According to the design of NSP, CDCs were intended to be a more democratic and participatory form of project decision making than other methods of project implementation. This research found that FP-facilitated elections were not only uneven, but the structure of an elected executive committee may ultimately limit broader community participation in CDC activities. Limited community involvement in CDC activity detracts from achieving broad participation in decision making and democratic representation, which are the main goals of development schemes such as NSP. Without sustained participation by community members, the CDC will not continue to function — at least the way it was intended to as an organisation that represents all segments of the community.

In most cases, CDC members were the only recipients of training and facilitation.

The only training we had in our village was about evaluation and monitoring for the head and deputy head of the CDC. The FP also trained the cashier for accounting.

—Male CDC Secretary, Herat

Once elected, the executive committee of a CDC would often transform into an exclusive rather than representative body. In many cases, the PRA that should have been inclusive of all community members instead became a forum for members of the executive committee who would unilaterally select projects without broad-based public support.

The PRA is advocated as a tool to increase community participation in project decision making and as a means to promote transparency and accountability. The use of PRA methods lies at the heart of community-driven development. In fact, without proper use of PRA or similar participatory methods, the CDCs created by NSP may not necessarily be community-based bodies. In most cases, only the CDC members (usually those who form the executive committee) receive training in PRA methods. In those cases, it is generally the CDC members, rather than community members in general, who prioritise project needs for the community. Even among the executive committee, the research team found knowledge of PRA methods to be very limited.

⁴⁷ Interview with NSP National Coordinator (Kabul, February 2007).

Surprisingly, we found little correlation between public support of project selection and individual satisfaction with the projects provided by the CDC. As mentioned earlier, successful project implementation – and not participation in the CDC – seems to be the largest contributing factor towards community satisfaction with CDCs. Individuals can be satisfied from public benefits that the CDCs provide without having participated in the process of selecting the projects. Research elsewhere has demonstrated that not all elites who control community projects are corrupt and that, in many cases, they are willing and able to facilitate community-level projects that benefit the entire community and even the most impoverished in their communities.⁴⁸

Accountability of CDCs: Corruption and oversight

If CDCs are to be sustainable as participatory organisations according to any of the visions articulated in this report, they must be accountable to the citizens which they serve. The research showed that it common for villagers to assert misuse of funds by their CDCs; it was, however, difficult for the research team to verify cases of corruption. In several instances, villagers complained about non-delivery of promised projects.

In cases of alleged misallocation of project funds or faltering project quality, community members called for more oversight in their CDCs, FPs and the MRRD. In communities where allegations of corruption or misuse of project funds were pervasive, community members often expressed anger that their complaints were not addressed by the FP or the MRRD. In many locations, community members stressed that their *woluswals* were the only authorities who would listen to their grievances regarding the CDCs. Community members were unable to articulate a coherent complaints procedure to present grievances against their CDC.

I think if the CDC members are good and, if they are, the CDC should be governmental. If the CDC members are not good people and they are corrupt with our money, our CDCs will not be good and the CDC cannot be successful.

—Male non-CDC member, Herat

In one Bamyān community, villagers expressed outrage that the head of their CDC seemed to have misused NSP funds but later was made the head of a CDC clustering programme (supposedly through elections). In this community, the head of the female CDC had expressed dismay that members of the men’s CDC never disbursed allocated project funds to women. Several community members had told the team that they had approached the FP on several occasions about their issues but was told that their community would not receive funds for clustering projects if they continued to complain.

In the women’s CDC, there are three people. They never see each other and never have meetings. The women’s CDC has an office with furniture but they don’t ever use this. As the head and the other members of the CDC never meet with each other, the women’s CDC in this village is a failure. And all the money that was allocated for the project was taken by the head of the women’s and the men’s CDC. [The head of the women’s CDC] is illiterate and all her work was done by my daughter. But [the head of the women’s CDC] took all the money. All the money which came to our village was never shared with us. The members of the CDC or other committee members never knew about it. We went to the FP to complain and they wouldn’t listen to us. We also went to the donor who was sponsoring our clustering programme, but they just said that the women in our village just like to complain.

—Treasurer of Women’s CDC, Bamyān Province

⁴⁸ Aniruddha Dasgupta and Victoria A. Beard, “Community Driven Development, Collective Action and Elite Capture in Indonesia,” *Development and Change* 38, no. 2 (2007).

Oversight of CDCs involves a complex procedure of registering complaints about a CDC, which falls under the responsibility of the FP and provincial MRRD or NSP representatives. Community members and CDC officials were generally unaware of these procedures. Aside from the emerging CLDD social organisers (many of whom are seconded to FPs), however, the MRRD does not maintain representatives at the district government (*woluswali*) level. *Woluswals* and community members did not always feel that the FP social organisers or other staff could be sufficiently neutral to help them resolve disputes or address complaints. Both parties suggested that the MRRD should have their own staff at the district level who would be independent from the FP and who could aid in the investigation and resolution of such disputes. Most ministries working in the field of rural development generally maintain their own employees at the district government level.⁴⁹

It is better for the CDC to be part of the government. The CDC work needs to be monitored and observed. MRRD or the woluswal or other ministries should observe the work of the CDC. Someone should be monitoring them.

—Non-CDC member, Bamyan Province

Sometimes we had gone to the FP and asked them to visit our village. One time we went to the FP because one of the water wells that was built in our village broke. It wasn't working. The CDC in the village didn't want to deal with this matter so we went to the FP directly and asked them to help. But the FP didn't pay any attention to our complaint. So I don't think it's worth our time to go to them.

—CDC member, Nangarhar

Although each community is unique, the research team encountered a fairly common mechanism to deal with grievances throughout rural Afghanistan. If a conflict exists within a community, community members will at first attempt to resolve their dispute within the community. If they are unable to resolve a dispute internally, they will then approach the *woluswal* or other officials working in the *woluswali* for a solution. While *woluswals* and district government employees do not in fact have jurisdiction over CDC complaints, villagers often opted to go to these government officials to solve problems within the CDC. *Woluswals* often discussed their support for the CDCs, but they expressed dismay about not having jurisdiction to mediate grievances that arose within communities.

FPs do not seem have the staff nor the resources to oversee conflicts within each CDC as many of them are overstretched organising, training, and providing technical assistance to CDCs... Woluswals and other district level officials are often called in to settle these disputes, often using customary or alternative dispute resolution to alleviate a conflict over CDC funds when they arise. MRRD officials at the district and provincial level also expressed personnel constraints that prevent them from adequately monitoring CDCs. MRRD selects the villages and it is very difficult for MRRD also to monitor the villages and all CDCs. We cannot do the monitoring very frequently.

—MRRD official

⁴⁹ The research team often encountered representatives from the Ministry of Finance, Education, Interior and Agriculture among others at district government offices.



*Illustration 5: Sayghan District, Bamyan
CDC-constructed retaining wall that has collapsed*

When CDCs worked well, they seemed to build accountability into existing structures of local governance such as *woluswals* and *maliks*. In one district in Herat Province, the team found that the experience of participating in CDC elections encouraged community members to begin holding elections for their *maliks* as well. In this case, the CDCs became powerful members of civil society that could advocate for change. Often, the success of the CDCs in a community is attributed to its independence.

4.4 CDC activities: Female participation

Female participation may enhance the probability that CDC activity will continue in the future. The MRRD and FPs claim that the CDCs represent the first time that females have participated in development activities, which is what they argue makes CDCs different from other forms of Afghan community governance. Most importantly, female participation can be an end unto itself. The experiential vision of CDC sustainability emphasises that women (and all individuals) become better citizens because they have participated in development and project planning at the village level.

During the first year of NSP facilitation, FPs were allowed to create separate male and female CDCs if community members wished. In 2005, NSP modified the Operations Manual, which mandated that women and men must participate jointly in CDCs. If joint participation is for some reason was not feasible, separate female and male subcommittees could be established. The research team, however, encountered only one integrated CDC where men and women jointly participated in CDC activity. This occurred only for a short period of time before the women in the community asked that joint meetings be disbanded.

Communities did not describe separate male and female subcommittees but rather spoke about their “male CDC” and their “female CDC” each with a separate executive committee. Men and women generally met separately and communicated with one another through interlocutors (generally spouses). In cases where FPs demanded that both men and women serve on a single CDC, men and women continued to meet separately. In these cases, the team observed that men were selected to be the head and the deputy of the CDC while women were selected as treasurer and secretary.

In many communities, female CDC members were not aware of CDC activities in their village. Women frequently complained that they were selected to satisfy an FP requirement and had no actual role in the community and no voice in how NSP funds were spent. Many women said they were only known as members of the CDC to outsiders visiting the village that specifically sought to speak with female CDC members (such as the AREU research team). The female researchers working on this study had a difficult time finding women who had detailed knowledge of CDC activities in a majority of communities. Even women who are members of the CDC (or even head of the female CDC) had only rudimentary knowledge of CDC activity in their communities.

I am a school teacher and I am also the deputy director of the CDC in our village. I am bored with the CDC job. The head of the CDC does not pay any attention to me. When they buy something for our projects, they don't tell me. They don't give me any information about it. When they bought the materials for the project, they informed me afterwards. Then they come back after buying everything and start giving me instructions for what I should do in the village. They never include me in the process.

—Female CDC member, Bamyan

In many communities, male CDC members maintained *de facto* control over resources allocated for women in the village. In one community, women chose to use NSP funds to start an animal husbandry project. The FP in this particular district mandated separate projects for women. Members of the male CDC did not want to allocate resources for a separate women's project and discussed this issue several times with the FP, but the FP would not give in to their demands. According to the women in the community, the men bought several sheep for the women in the community to satisfy the needs of the FP. After completing the project, the men quickly sold the sheep at the bazaar and purchased more solar panels for the men's CDC project.

It will be about four years since I have been the head of the CDC. The people of the village elected me to the position. I have always met with the women of the village and organised meetings for women. We used to meet with the women before when we had a project, but now we don't meet. The people of the village think that I am a liar because I have not done anything for the people of the village. The women of the village ask me all the time what happened to our project money. I ask the male CDC members what happened to our money. I ask them all the time where our money went. The men said that they have retained our funds to build a public bath in the village. I don't know what to do. My work with the female CDC has had no benefit for the people. For four years, we have cheated the women in our village. All the women of the village are waiting for literacy courses as well as tailoring and embroidery courses. The men had at least two disbursements of money. So when they got the second disbursement of funds we asked them again where our money would be for our courses. And yet again the men would not give us funds. No one listened to my words. I am always telling the men in our CDC that they should serve the people. I want to gather the women and gain the right that the women have for these projects through our own strength. We have a contribution box and we collect five Afghanis per month from the women. We put this money in the box. So the money that we collect in this box can be used by the women if they face an unexpected problem. The members of the male CDC tell us that we should use the money that we collect in our contribution box towards the public bath. The men say that they have our money. They say that they are keeping the money to build a public bath. They say that during the cold weather our sons and daughters will use this bath. But we do not know when this bath will be built. I know that the male members cheat us and have taken our money.

—Head of Women's CDC, Herat Province

The lack of female participation in the CDCs translates into the lack of female benefits from NSP projects. In fact, women were often the most emphatic in their support of the projects their communities had received. Many women spoke of their desire to have separate projects so that they could work with other women in the village on their own priorities.

For example, women – who are most often responsible for carrying water – expressed strong appreciation for NSP-sponsored water pumps constructed in their communities, which provide access to clean drinking water. The location of water pumps in communities has also saved women time because they no longer have to travel long distances to retrieve clean water for their families.

In those communities where women were not allocated a separate project, women consistently, expressed a deep desire for human capital development opportunities, such as tailoring, embroidering and literacy courses as well as animal husbandry projects. As discussed earlier, the type of project implemented in the community has significant impact on attitudes towards the CDC. The most excludable projects – such as human capital development courses and animal husbandry – are generally targeted towards women. The problems with excludability associated with these programs tended to backfire against the female leadership of the CDCs because the women leaders were ultimately held accountable by female non-CDC members for inequitable distribution of benefits. There were also widely acknowledged by those same women as not having been fairly elected to the CDC or involved in project selection.

I participated in the CDC election. We wrote our candidate's name and we voted for her but we don't know after that about a women's CDC and I don't know if they have meetings or not. I know we have a women's CDC head but she has not gathered women together for meetings. No one has informed us about project selection.... The people of village are very happy from our projects and we are very happy from our generator power.... We also use have clean water for drinking and it has had a good effect on the lives of people. We have nice facilities for water and power now.

—Female non-CDC member, Herat Province

4.5 Funding

In discussions about CDC sustainability, there are no assumptions that the NSP will continue the large amounts in block grants – up to \$60,000 per community – beyond the programme. In communities where block grants have been spent, CDCs are quickly disappearing though they may still exist in name. National-level sustainability strategies focus on sustaining the CDC as organisations, emphasising the future role of CDCs as a combination of formal government bodies and coordinative structures. While these proposals for formalisation focus on national-level efforts to create a legal framework, they do not indicate how funding to support the expanded functions of these CDCs can be guaranteed in the long run.

Among communities, the most significant barrier to continuing participation in CDC activity is this perception that CDCs cannot continue project implementation without external funding. Without the infusion of funds, most community members do not see a reason for their CDC to exist. This view is derived from community experience with the CDC playing a coordinative role. In the eyes of the community, the CDC was created to facilitate the transfer of a large amount of NSP project funds from the MRRD to communities; project implementation is the only activity community members associate with their CDC.

When probed on whether CDCs could continue their activities after FP withdrawal, individuals at the community level expressed strong reservations because they did not

believe that their communities could find sufficient funds to support the large projects that NSP had funded.

One way that the participatory aspect of CDC activities may be sustained, however, is with longer-term facilitation involving repeated grants of smaller amounts. This may encourage communities to make use of the skills they have already learned in order to implement smaller projects on a continuous basis. In other words, communities must have a reasonable expectation that their CDC was created for more than merely a one-off disbursement of NSP development funds.

Given limited availability of funds to support operations, the participation within CDCs must be able to continue without external FP assistance if they are to be sustainable as local organisations. There has been little discussion in sustainability strategies about how to maintain facilitation capacities of CDCs and the participation already generated by existing CDC activity after the withdrawal of FPs. Without the participation of community members or reason to continue CDC activity, the councils will wither away.

4.6 Capacities

As mentioned earlier, robust facilitation and training – especially in participatory rural appraisals – have not taken place in CDC communities. This has already limited community participation in project selection and monitoring and, in the future, will limit the ability of community members to successfully implement projects.

This research suggests the most obvious problems facing the future of CDCs is the lack of facilitation, training and support to CDCs and their communities. While institutionalisation of the CDCs is the solution currently offered by national-level stakeholders to promote sustainability, this does not seem to accurately reflect needs of capacity at the community level to carry out community-driven development. Rather, the desire to institutionalise CDCs may ultimately undermine the very community-driven aspects that can be such an asset to the NSP. In fact, the focus on formalisation within the communities, through the selection of an executive committee, has already limited broader community participation in CDC activity.

4.7 Structural factors

Without quantitative data, it is difficult to verify precisely how structural factors such as ethnicity, income inequality and other features affect CDC sustainability. A few observations, however, may be noted from the research.

Lack of arable land seemed to correspond with increased project participation. Similar to how the lack of land may be seen as a proxy that measures income, higher rates of poverty may lead to CDC activity having a more noticeable impact. This corresponds with anecdotal evidence gathered by the team: more impoverished and remote communities that have fewer economic opportunities place greater emphasis on the outcomes of their NSP-funded projects. In addition, where populations had migrated out of the community and large numbers had yet to return, individual attitudes towards the CDC tended to be more positive. Such instances were also correlated with significant shortages of land and lack of other economic opportunities.

Size of CDCs

In most cases, the physical boundaries of CDC communities were created by external – often international – organisations; most of these agencies will not remain as a long-term presence there, however. The borders and “communities” created by CDCs may eventually have more meaning to its residents but only if facilitation will take place for a longer period of time.

Smaller community size contributed to greater unity and harmony among citizens. When group size is smaller, individuals face fewer obstacles in organising for collective action

and participation. With larger CDCs, there was an increased likelihood that cooperation within the community was more tenuous.

This finding, however, runs counter to another factor regarding CDC sustainability. CDCs operate at a very small scale, which may be useful for community development programmes. The small size of CDCs and, subsequently, large number of CDCs may prove to be the greatest threat to long term CDC sustainability. As the borders of a CDC rarely match those identified by communities, individuals do not necessarily consider the CDC to be a viable mechanism for other activities other than small-scale project implementation.

4.8 CDC activities outside of NSP

A number of different efforts are already underway to support CDCs outside of the NSP. These efforts rely on the experiential and coordinative visions of sustainability. Projects outside of the NSP expect that communities have prioritised their problems in a participatory manner and have taken steps towards addressing them.

The the MRRD-run clustering project, the National Area-Based Development Programme (NABDP), proposes that CDC members sit on District Development Assemblies, which are to create district development plans together with district government officials. JICA's Inter-Communal Rural Development Programme (IRDP) is another clustering programme engaged with CDCs, which carries out larger scale projects involving three to five CDCs. In addition, some NGOs use CDCs as delivery mechanisms for project implementation, corresponding to the vision that they are coordinative bodies.

In the field, the research team did find some evidence in a few cases of project activity taking place outside of NSP, especially through IRDP. In another example, a major UN agency working in Nangarhar told the research team that it no longer works with NGOs – either international or local – due to corruption or poor quality of service provision.⁵⁰ To distribute emergency assistance and food aid to communities, they insisted that they are working only with CDCs. There was evidence of one non-FP NGO systematically working with CDCs in Kunduz Province.

The team, however, did not in general find widespread, systematic patterns of CDCs working with donors or NGOs outside of the NSP framework to implement development projects in their communities. In many cases, NGOs have established separate development *shuras*. Several times the team found alternate *shuras* created by FPs that were implementing non-NSP projects in districts where the FPs were not the NSP implementers. In most cases, however, where FPs implemented non-NSP projects in the district where there were FPs, they tended to work with the CDCs.

Out of 32 communities examined, only four were working with non-NSP donors and NGOs even though, in nearly two thirds of the villages, other donors or ministries were working in the communities. There are several reasons why FPs and other donors and NGOs may not work with CDCs in communities where they are not implementing NSP.

Inter-ministerial rivalry may play a part in this. Some ministries of the Afghan government have not embraced CDCs as primary unit through which development projects should be channelled. For example, the Ministry of Agriculture has developed cooperatives to encourage agricultural development. NGOs and other donors that work with this Ministry, which may include FPs, are not tasked to implement their project through CDCs but rather work with alternative bodies.

The most plausible explanation for why donors do not work with FPs is the small scale of communities created by the CDCs, which is not viable for all types of projects. The scale of a project varies by community or by the scale of a particular problem. Additionally, many donor-funded programmes roll out nationally, provincially or district-wide. Because

⁵⁰ Interview with UN employee (Jalalabad, Nangarhar Province, October 2007).

the NSP does not yet cover the entire country, CDCs may not be present in all the communities relevant for a particular programme. This makes the inclusion of CDCs in project design and implementation challenging for some NGOs or donors.

We need project funds to continue. Only two CDCs out of 115 found outside funds. But not all CDCs have the capacity to work with outsiders.

—NSP Social Organiser, Kunduz Province

In several communities, CDC members discussed the fact that the MRRD was supposed to be building roads through their community. The engineers, implementers and MRRD officials, however, had never met with CDC members. Despite the by-law and efforts by the MRRD and NSP office to consolidate the role of the CDCs, it appears there is no consistent agreement within the Ministry on the usefulness or the expediency of working with the CDCs for all development projects. If the MRRD cannot coordinate its own activities to work through the CDCs, it may be unrealistic to expect all government ministries to use them. The mechanics behind the coordinative vision of CDC sustainability may make it the most difficult among the three approaches to be successfully realised.

4.9 Linkages with formal state structures

Linkages with district governments

District government officials are potentially crucial for CDC sustainability because they can integrate the CDCs into broader development activities in the district. Local cooperation between the two bodies would enhance sustainability because it would generate a local purpose for the CDCs outside of their one-time grant implementation duties.

Research from the field, however, showed that linkages between CDCs and the district government are minimal. This outcome is not surprising given the design of NSP and the fact that building these particular linkages is not a focus for most FPs. While most *woluswals* were aware of the organisation of the NSP and that it is a programme sponsored by the MRRD, many expressed disappointment that there was not greater coordination between the FPs, the MRRD and the *woluswal*.

Despite the lack of formal communication mechanisms between district governors and CDCs, district governors were almost uniformly supportive of CDC activity.

We are very happy with the CDCs in this district for they have started their work in some villages here... We are in contact with all the CDCs here...CDCs are doing very good work here.

—*Woluswal*, Herat Province

In most cases, *woluswals* believe that the funds brought in through the NSP have served as engines for economic growth in their communities by providing basic infrastructure projects.

Many *woluswals* did, however, suggest a need for better coordination between the MRRD and other ministries at the local level. *Woluswals* expressed dismay at feeling they had marginal input in the roll-out of NSP in their districts and at having no ability to legally intervene when disputes arose between the CDCs and FPs⁵¹. In several cases, community members detailed how conflicts over NSP project funds were eventually taken to the

⁵¹ The significance of the August 2007 reassignment of the administration of governors to the Independent Directorate of Local Governance is still unclear, but it will likely decrease the reporting relationship of *woluswals* to the Ministry of Interior. See Independent Directorate of Local Governance, "Strategic Framework" (Kabul, 27 September 2007).

woluswal for arbitration. *Woluswals* consistently shared examples in which they spent significant time settling disputes between CDC members and citizens over allegations of corruption, misappropriation of funds and lack of project implementation.

I think the CDCs are not good for the villages and that [the FP] just plays with them. The FP just spends money and they make the CDC, but they are not useful for the people. I don't know about their work. I know that when they start their work, the FP brings a letter to me. But I am not involved in their operations. They usually just ask about security and we take care of that. I really don't know so much about their work and how they work and they are also not interested to talk with us. When I want to talk and ask maybe they think I am interfering...I don't know [who monitors their work]. If we want to monitor their work they tell us that they are independent and that we don't have the right to interfere... I think all of this work is done by foreigners and. So maybe the foreigners are monitoring and control these people, but I don't really know.

—*Woluswal*, Nangarhar

4.10 Linkages with local authorities

Quasi-formal village leaders

In most Afghan communities, the *malik* is the recognised representative of communities to the government. In most communities where *maliks* and other quasi-formal leaders participated in CDC activities, CDCs were more successful in implementing projects. In fact, the most successful CDCs were those where these leaders actively embraced CDC activities.

In literature and rhetoric, *maliks*, *arbabs* and *qaryadars* are often referred to as traditional leaders.⁵² They, in fact, derive their legitimacy from the district government. Many *woluswals* interviewed for this research project consider the *malik* to be the representative of the government in the community.⁵³ In most districts, the *woluswal* recognises the *malik* as the official leader of a community and presents the *malik* with a government stamp that can be used to certify official documents such as government ID card applications and land tenure transactions.

In most communities, *maliks* — who are usually large landowners and literate — are selected by their respective communities to represent village interests to the government. The *malik* becomes the primary conduit through which the government accesses community interests and through which community interests are represented to formal authorities at the district level. In past periods, the *malik* system represented the lowest formal level of government in the community. While *maliks* may derive legitimacy from their position in the community, community members do not view *maliks* as completely traditional because of their long history as government representatives; they are perceived as quasi-formal leaders.

In most of the communities examined in this study, CDCs seem to complement existing governance structures and do not serve as replacements for them. In communities that have both a CDC and a *malik*, most individuals identified the CDC as responsible for

⁵²see Boesen, *From Subjects to Citizens* 44; Raphy Favre, "Interface between State and Society in Afghanistan: Discussion on Key Social Features Affecting Governance, Reconciliation, and Reconstruction" (unpublished paper, 2005).

⁵³ The only part of the country where the team did not encounter the *malik* system was in areas of Bamyan province. Migration patterns significantly influenced the disappearance of the *malik* system in that area. This study found that, in areas where the *malik* system was weakened, district governors created a *nomayenda* ("representative") system. *Woluswals* asked communities to appoint a notable individual to serve as the representative of the people to the government.

development endeavours and the *malik* as responsible for coordinating with the government.

I think CDC works practically and maliks work more generally. I participate in the maliks' shura which meets at the wuluswali. We talk about security and poppies and other problems in the villagers. The poppy problem is not one the CDCs are responsible for. This poppy problems is a security problem and falls under the maliks. So if there are some problems in the villages we talk about them. The CDC is just for development and projects. They have to implement projects.

—Malik, Nangarhar Province

We have a *qaumi* [tribal] *shura* in our village which is for solving problems, keeping security and punishing thieves. This new *shura* is for projects.

—Male CDC member, Kabul

CDC does not interfere in my work and they are busy with their own work. The head of CDC cannot solve problems and they have never solved the problems among people. They work with money, but we work for people. I mean they work because they have money and we work because of the people. I have influence on them and they accept my advice. So we have good relations and if they need help I will help them. I'll give up my authority as a malik if I no longer have influence on people.

—Malik, Kabul Province

It is quite common for quasi-formal leaders to be elected as members or heads of CDCs in their communities. Community members stress the importance of quasi-formal leaders as the essential bridge between the people and the government, but the CDC is not usually the organisation at the community level that seems to play this role. When the *malik* is elected as the head of a CDC, the CDC may subsume the role of the *malik*, however. It is important to note that, in most communities, the constituency of a *malik* is far larger than that of a CDC. A *malik* may govern between one and 10 villages, which could make up a territory that could contain more than 15 CDCs. In this case, a *malik* may be elected to head the CDC in the village where he resides but not in other locations.

Maliks are the representative to the government. CDCs are MRRD representatives: So we don't have room there in the wuluswal to meet each other. On the other hand, wuluswal support the qaryadars. Actually they are formal representatives of wuluswal in villages; we belong to MRRD and we are not so powerful as the qaryadars. Also every NGO and ministry works through the wuluswal and they do their work through qaryadars—not through the CDC.

—Head of Male CDC, Balkh

Formalisation of the CDC in the future may create conflict in communities – not prevent it. Information campaigns about the by-law seemed to set up conflict between quasi-formal leaders and CDCs, even in those areas where there is generally cooperation between them.

Both maliks and district officers are opposed to CDC shura because they both say that we are the same people to solve the problems of villages. There is no need for CDC to be in the villages aside from wuluswals and maliks. So there is no need for a second organ to be involved in the solving problems of the villages. As we see, the CDC shura in the villages are very happy from the CDC shuras and from its members. They respect the shuras and I think they will remain in the future. There are some people who do not respect the shura or they don't accept the CDC shuras. There is common proverb in Pashto language "da zar pa qiemat zargar phohegee"—the value of gold is known only by the goldsmith. Now we think that the CDC is very important and valuable for the future. They have done a lot to improve welfare and services in our village. But I would like to say that the maliks are also very important people for the village and are important people for the CDC. We need to encourage the CDC people and the maliks to share their opinions in order to serve community welfare.

— Male non-CDC member, Nangarhar Province

Even though the MRRD has argued that the *malik* system is an unequal and exploitative system of governance, the research suggested that the participation of these leaders in most cases benefitted CDC activity because it meshed with existing community structures. CDC sustainability is enhanced when it links with existing structures.

Without broader input from the community, the greatest threat resulting from the formalisation of CDCs is that it may create conflict and tension between CDC members and quasi-formal leaders. FPs appealed to quasi-formal leaders such as *maliks* when they initially sought to enter the community. *Maliks* and other leaders allowed the FP to work in the communities and *ex ante* attempts to formalise the CDCs could represent a fundamental breach of the social contract that first allowed CDCs to enter the community. Formalisation without a fuller dialogue with other ministries, elders and quasi-formal leaders could potentially be disastrous for the political landscape and state-building enterprises in rural Afghanistan since it could cause resistance against CDCs. If quasi-formal leaders anticipate that CDCs will legally usurp their authority in the community, they will be much less likely to work with them in the future to serve the aims of community governance.

Religious and Spiritual Authorities

When NSP first rolled out into rural communities in 2003, some scepticism arose from religious leaders about the role of CDCs⁵⁴—likely because of a long history in Afghanistan of the central government trying to impose its norms at the village level. Only once it became clear to religious leaders that the NSP would be for development purposes did religious leaders give permission for the FPs to begin their work in the community. CDCs are more likely to be sustainable when they cooperate with and gain support from existing community authorities.

In only three communities out of 32 did the team find a *mullah* or other religious figure to be a CDC member. In one case, a *mullah* was the head of the CDC. Quite often, however, CDC members would solicit support of religious leaders during the period of project selection. In communities where CDC meetings took place, CDC members generally actively sought the input and approval of religious leaders for project decisions.

Where CDCs are involved in dispute resolution, they are unable to do this work without the assistance of traditional and religious authorities such as *mullahs* and *mawlawis*.

⁵⁴ Boesen, *From Subjects to Citizens*; Kakar, *Fine-Tuning the NSP*.

4.11 Linkages with neighbouring communities

Clustering is a scaling-up method that gathers several neighbouring CDCs. Clustering of CDCs may represent an important ingredient in sustaining participation and development in rural Afghanistan because the current number of CDCs may be too large to sustain financially and administratively. Clustering would merge three to five communities that have experienced NSP into a larger body, reducing the total number of CDCs.

Most communities generally have well-defined means of resolving disputes within their own borders but face challenges when attempting to resolve disputes with neighbouring villages. Most examples of referring disputes to the district government level concerned intra-communal disputes. Clustering may bring communities together to help them solve problems on a larger scale that they would have difficulty resolving without government assistance.

Clustering approaches can focus on geography (*manteqa*), a specific project or both. When clusters occur along natural boundaries self-identified by communities, participation fostered within the cluster may endure. Project-specific clustering, however, does not build on local linkages. If a cluster is designed for the purpose of implementing a project, communities may not have a need for the cluster once the project is completed.

Programmes that involve the scaling-up of CDC activity seem to be project-oriented, focusing on a common need between communities. As all clusters encountered by this research project were conducted in Cycle 2+ communities, community members viewed the cluster as a continuation of CDC activity. When interviewed, community and CDC members rarely could articulate how their cluster was formed, making it difficult for the research team to differentiate between clustering approaches.

The clustering programme created by the MRRD through the NABDP represents a very important opportunity to sustain community mobilisation efforts created through CDCs. Because the number of clusters is substantially less than the number of CDCs, this may be more sustainable in the long term beyond NSP. As discussed earlier, the current number of CDCs difficult to sustain even considering the large amounts of donor assistance.

5. Considerations for the Future Trajectory of CDCs

The research in this report suggests that the experiential approach to sustainability is most appropriate for rural Afghanistan at this current stage. CDC activities are just beginning to take root. Government capacity remains weak. This approach serves to make Afghans better, more informed citizens who will be more empowered to deal with the development challenges they face. Other visions for CDC sustainability – including coordinative and formalisation – are premature for two reasons. Firstly, the CDCs remain very weak and do not have the capacity to carry out increased coordinative or bureaucratic duties. Secondly, bestowing increased authority to the CDCs without a dialogue with other branches of the Afghan government and society could potentially cause chaos in the countryside as formalisation of the CDCs breaches the very social contract through which they were allowed to enter most communities.

5.1 CDCs after project completion

Individuals generally view the CDC as an engine of project implementation. In the third year of project implementation, communities were winding down their work. In some cases, community and CDC members were searching for additional funding opportunities.

While many communities eagerly began working with CDCs to reap the fruits of their projects, the team noticed a broad trend in communities where projects had been completed: CDC activity generally ceases after the completion of sub-projects. Where projects had been successfully and equally implemented, non-CDC members showed more eagerness to work with the CDC in the future.

CDC members told us that during the period of project implementation, the CDCs would meet as often as once a week. CDC activity dwindled after project completion; respondents said that they would initially meet once a month but over time the meetings would cease.

When we were designing the hydropower project, the male and female CDC would meet separately several times a month. Now that the project has ended, the CDC does not meet. The women do not meet at all anymore because we don't have any projects. We only get together when someone from some organisation comes and says they want to meet with the CDC members.

– Head of Women's CDC, Bamyan

Most Cycle 2+ FPs were due to withdraw from their districts at the end of March 2007, but no-cost extensions allowed most FPs to remain in their districts at the time this research was conducted. In some cases, FPs maintained a presence in the district because they were rolling out CDCs across various project cycles or are implementing projects outside of NSP. Although FP support may have technically been completed in most Cycle 2+ at the time of this research, FP staff continued to provide support to “graduated” CDCs in such districts. This research did not encounter the complete withdrawal of an FP in any district although, in some districts, FP facilitation dwindled due to project completion.

One option for CDCs to continue activities after the end of NSP implementation was clustering programmes targeted at Cycle 2+ communities. CDC members saw clustering projects as a way to maintain CDC activity.

As for activities not related to project implementation, with a few notable exceptions, the team did not find many communities that had strong abilities for dispute resolution or community planning. While a few FPs discussed planning exercises they conducted in communities, CDC members never referred to such exercises during research interviews. CDC members may have understood their project selection process as a planning process.

Furthermore, the existence of the executive committee within the CDC seemed to serve as another mechanism for elite capture rather than community representation.

While communities expressed interest in the CDC continuing its work, they did not organise this work themselves. CDC members stated that the CDCs could continue its work if the community received more project funds. These conversations reinforced the finding that communities viewed the CDCs as engines of project implementation rather than as independent bodies of local governance.

5.2 Sustainability of the boundaries and size of CDCs

As noted earlier, the boundaries and size of a CDC community are an important factors for sustainability. It is expected that CDCs corresponding with natural community boundaries are to be more sustainable in the long run. There are, however, some examples of CDCs running counter to natural community boundaries. One explanation for this phenomenon is the fact that FPs are contracted to roll out a fixed number of CDCs in a district; in some cases, the number of CDCs does not correspond with the number of existing communities. For example, in Nangarhar, the team found one half of a village participating in the NSP while the other half of the village did not. When asked how this came to be, villagers stated that all decisions about the boundaries and size of the CDC depended on the FP working in the district.⁵⁵

The ideal size of a CDC community may be an obstacle for other donors and programmes working with CDCs. The team encountered CDC communities that were both smaller and larger than would be allowed by NSP regulations, which is a ceiling of 300 families. Larger CDC communities that were aware of this figure would lament that their CDC was too large. In two communities visited, villagers said that their CDC contained over 1000 families while the number of families listed by the FP was less than 300.

On the other hand, communities never complained that their CDCs were too small. In one district, the *woluswal* stated that there were only 15 villages in the district, but there were 40 CDC communities. The CDCs in that district were similar to sub-villages. While many NGOs and external actors are involved in rural development projects, the small size of CDCs may not offer the appropriate scale for every instance.

The drawing of CDC boundaries in a formalisation process may be a future source of conflict. When community members organised into CDCs, they understood that villages and communities would be divided for purposes of project implementation and community mobilisation – not for the purposes of local governance. Boundaries between communities were drawn by FPs, often international organisations. In those areas where this is the case, community members are less likely to view NSP as an Afghan government programme; they may raise eyebrows at the borders and size of CDCs should the existing structures become legal entities.

5.3 Community views on formalisation and continuing activity of CDCs

The research systematically demonstrated a widespread lack of information about the CDC by-law by CDC members and other members of the community. Only half of the FP social organisers interviewed had knowledge of the by-law. In one case, a provincial-level FP manager had no knowledge of the by-law. Those social organisers that were aware of the by-law had little substantive knowledge of the contents of the regulation.

We haven't received that law. We don't know anything about it.

—NSP District Manager

⁵⁵ Interview with non-CDC member in non-CDC village (Nangarhar Province, September 2007).

According to the new by-law, the CDC should be the only shura in village and they should solve all problems in villages. But I want to say that if CDC members do not have a salary, the people who work in the CDC will get tired and will leave the CDC because they need food for their families and they won't have time for the CDC anymore. You know many mullahs are not interested in saying azaan [the call for prayer] without money, so why would a CDC member work without money? They'll just get tired.

—CDC Member, Nangarhar

More importantly, there is no general consensus within communities as to whether CDCs should be formalised. Data collected suggests a wide divergence between CDC members and non-CDC members on whether CDCs should be formalised as government structures or retain their current informal status. CDC members overwhelmingly supported formalisation of CDCs, but non-CDC members seemed much less keen to see CDCs as part of a larger governmental hierarchy. Female respondents, both CDC and non-CDC members, also expressed far stronger reservations about the formalising CDCs.

There was general confusion about the meaning of the by-law among those who had knowledge of it. Several individuals believed that the by-law would put CDCs in direct competition with the *malik* system, causing nervousness and animosity towards CDCs in communities where a CDC did not exist before. For example, in communities where quasi-formal leaders are aware of the CDC by-law, there was anxiety about the future of the *malik* system. In a few of those situations, the leaders were not as eager to provide assistance to CDC activities outside of project implementation.

In most communities, *maliks* did not view CDCs as a challenge to their legitimacy at the community level and in most cases they were quite supportive of the public benefits brought to the community through NSP funds. *Maliks* view CDCs as a complement to existing structures because the FPs introduced the CDC as an informal body—not one that would potentially seek formal authority. *Maliks* generally did not suspect nor did they seem to be aware of the MRRD's vision that the CDC system could replace disparate forms of local self-governance in rural Afghanistan, including the *malik* system. In most cases, *maliks* and other citizens are unaware of the by-law and other efforts to formalise CDCs, and hence are more supportive of the CDC because they do not view them as potential competitors. The research showed that most community members supported the CDCs because they perceived them to be for relatively non-political and somewhat benign development purposes — similar to previous NGO projects implemented in their village.

Maliks and other citizens said they would have paid more attention to their CDCs if they had known the councils were for political or governmental purposes. Religious leaders, *maliks* and community members opened their arms to CDCs on the understanding that they were for development purposes. Changing the goals of the CDC after they have been introduced into the community may violate the social contract that allowed the CDCs to work in villages.

The government should support the CDC. The government is very important in this field. For example, the people are poor and they don't have money. They don't have money to make or build something by themselves. Our people are so poor. The government is responsible for the CDC. They should keep the CDC alive so that people can continue doing these projects. The government should give projects to the CDC.

—*Arbab*, Herat

Responses to questions about continuing CDC activity were very informative in gauging understandings of the CDCs' mission and goals. Almost uniformly, individuals associated continued CDC activities with prolonged access to project funds.

It would be better for us if the CDC remain independent from the government because government officials will take the money for themselves and we will see less of the money to do our own projects.

—Female non-CDC member, Balkh

I think as we see corruption and opium and mafia in our government and, as we make CDC governmental, so we will expand corruption in districts and villages. It will be new kind of corruption. For example, we build a school with \$60,000 but if government wanted to build it they need more than \$200,000 for that so even the level of corruption is different. If a CDC is corrupt with money, their level of corruption will be less than that of government official.

—Male Social Organiser, FP

Yes, we had tribal shura and my father was a member of this shura. With the assistance of the qaryadar, this shura solved the people problem [common, day-to-day disputes] as the qaryadar responsible for the security issue in the village and he is liaison person between the village and Government. Now the qaryadar is also responsible for the village. The responsibility of the CDC is to build schools and other things, but they do not decide issues of the villager.

-Male CDC member, Balkh

Consistently found throughout the countryside was the view that the CDC is responsible for projects while community leaders are responsible for security and local government issues. Individuals in the communities have clearly delineated what they believe to be an appropriate role for the CDC, which is a development role that contradicts the political ambitions of the by-law. There are risks associated with formalising and bestowing authority on CDCs in an already extremely rich institutional environment.



Illustration 6: NSP-sponsored water supply system, Sayghan District, Bamyan

5.4 Community participation in CDCs

Project success heavily and positively influences the views of community members towards CDCs and their willingness to cooperate with them in the future. This research has found that, in general, community members (both CDC and non-CDC members) rarely see CDCs as a broader governance mechanism in and of itself. As mentioned earlier, there is a wide discrepancy between these local understandings of the purposes of CDCs and the goals of the MRRD, donors as well as NSP FPs at the national level. In contrast, actors at the national level stress the role of CDCs as local governance structures.

Community participation is a key aspect to the success of CDCs and is the foundation of all visions of CDC sustainability. Community participation in the CDCs varies widely; participation in project decision making does not necessarily translate into a participatory CDC that can function autonomously within the community.

The research team was puzzled from the finding that, even in those communities where CDCs performed well, community members did not feel that they could sustain the initiative to continue CDC activity after project completion. One explanation for this may be related to perceptions of the aims of the CDC and NSP. When interviewed, most individuals understood the CDC as strictly related to the activities of the NSP; both CDC and non-CDC members generally perceived CDCs to be instruments of project implementation. When probed, community leaders suggested that they would be willing to continue the work of the CDC if there were further funds to implement subsequent projects.

Very rarely did communities perceive the role of the CDC as anything more than NSP project development, planning and management. CDC members said they spent extensive time on NSP projects because the sum of money that the programme brought into communities was far greater than project funds they had received in the past (\$200 per family and up to \$60,000 per CDC). The funds transferred to communities through NSP are considerably larger than similar CDD projects⁵⁶.

The most significant institutional barrier towards building sustainable participation in CDC activity is that the design of NSP, as outlined in the Operations Manual, mandates that most of the interaction and activity provided to CDCs by FPs is focused on project implementation. This demonstrates that both CDC and non-CDC members currently believe the purpose of their CDC is to conduct only development activities. In most cases, they see the CDC as implementing a one-time programme through the NSP.

According to the Operations Manual, the responsibilities of FPs are to:

- mobilise the community including facilitating the establishment through elections of a CDC and related project implementation committees as agreed with the community;
- facilitate a participatory planning process that includes women and the weaker sections of the community;
- strengthen community capacity to identify and prioritise needs;
- assist the community to prepare a community profile with baseline data;
- facilitate the preparation of a community development plan and proposals for specific project(s) with budget(s);
- provide technical assistance to develop proposals for appraisal through either:
 - facilitating community access to technical assistance available in the market or from other agencies or
 - technical assistance provided by the Facilitating Partner;

⁵⁶ For example, recipients of KDP funds in Indonesia receive approximately \$1 per capita in grant assistance.

- approve the community development plan and proposal(s) with respect to technical quality, financial feasibility and inclusive community involvement in planning and decision making before they are submitted to NSP.⁵⁷

From the list above, FP involvement in the community focuses heavily on project implementation. Communities are mobilised for the purposes of project implementation. The secondary NSP goal of improved participatory community governance is designed to be achieved as spillover from successful mobilisation for project organisation.

There are several possible explanations for the singular focus on project implementation by the CDCs. One lies in the prior use of community councils or *shuras* for development and project implementation purposes in communities. As early as the 1950s, under the premiership of Daud Khan, the government created Community Development Councils with elected leaders, deputies, secretaries and treasurers – a form directly mimicked in the current design of NSP. Subsequent governments – including the Communists and the Taliban – all used *shura*-type interventions in the community level either as elements of welfare transfer or as elements to gain access to communities.⁵⁸ Over the past decades, donors and NGOs have created *shuras* to gain community support and buy-in for particular programmes. For example, during the war in the 1980s, nearly all major donors used *shuras* created by mujahedeen commanders to distribute aid and promote community development projects.⁵⁹ Currently, a plethora of NGOs and donors continue to create their own *shuras* for specific projects that are in parallel to the CDCs. Communities throughout Afghanistan may suffer from *shura*-fatigue. Through the decades, donors and their NGO projects have come and gone, resulting in very low expectations of communities regarding NGOs and short time horizons. Communities have become adept at creating and disbanding *shuras* to implement development projects.

There was no difference between that [the mujtame shura during the time of the Taliban] and the CDC. Just the name is different. The responsibilities are the same. The mujtame also had elections and also they had clusters. In addition, during the Taliban period, we were kept like prisoners. We were not allowed to have elections nationally, but our people had elections here in our village. A small difference between the mujtame and the CDC is that the women could not participate. The mujtame had really nice workshops. All the NGOs who worked in Bamyán tried to implement their projects through our mujtames.

—Male CDC Head, Bamyán Centre, Bamyán

Another explanation for the focus on projects may result from the necessity of FPs to focus on the completion of sub-projects. NSP has been rolled out in an incredibly short period of time. The accomplishments of the programme since 2003 have been impressive; but FPs had strong incentives by stakeholders – both from communities and the MRRD – to spend funds on projects in a timely manner. This pressure faced by FPs is also reflected in the focus on procurement training to CDC members. While national-level FP staff stress the range of training opportunities available to CDCs, procurement training seems to be the only substantial training common to all CDCs.

The current design of NSP, both in its first and second phases, is extremely top-down and bureaucratic. Both the MRRD and the World Bank recognise the bureaucratic agony faced by communities and FPs in their struggle to implement NSP⁶⁰. This top-down nature goes

⁵⁷ MRRD, “National Solidarity Programme Operations Manual,” (Kabul: Government of Afghanistan: 2006).

⁵⁸ Under NSP I, NGOs that had a long-term experience in particular provinces were sought.

⁵⁹ Lynn Carter and Kerry Connor, “A Preliminary Investigation of Contemporary Afghan Councils” (Peshawar, Pakistan: Agency Coordinating Body for Afghan Relief, 1989).

⁶⁰ Such red tape involves the collection of budgets, community development plans, receipts for procurement as well as self-assessments and other implementation reports.

far beyond bureaucracy and affects implementation. Due to the very short time horizons and intense pressure to spend project funds in a timely manner, the NSP is in danger of evolving into a one-size-fits-all programme targeted at villages – rather than focusing on some of the principles of community-driven development, such as working with differences between communities or the relative success of some communities over others.

The lack of broad community participation, ongoing facilitation and emphasis on procurement training has resulted in the perception by many communities that NSP is a top-down process. The lack of substantial local government involvement has furthermore contributed to the image of NSP serving the agenda of the central government rather than being participatory and community-driven development.

NSP has also become very bureaucratic. A hallmark of CDD programmes is community participation in decision making; but the focus of the NSP on procedural issues such as elections, paperwork and the appointment and selection of CDC members has not necessarily translated into genuine participation. In fact, the elite capture resulting from the executive committee structure is what the NSP was intended to counter. In very few cases did the research team encounter broad-based community participation in project selection and design.

This research found community members actively participating in project implementation in one third of the communities. Surprisingly, the team did not find that participation in CDC planning or meetings had a significant impact on community satisfaction with projects or with the CDC. In many communities where individuals had no knowledge of CDC activities, individuals still expressed satisfaction with the public benefits provided by NSP. When projects were successful, participation did not seem to be a key factor.

Participation, however, was an important factor where projects failed. Where community projects failed and community participation was high, communities generally shared the blame in the failure of the project, accepting the failed project as a “lesson learned”. The combination of project failure and lack of participation generally – and probably rightfully – led to allegations of corruption and malfeasance.

In only a handful of communities did the team find community members actively involved in participatory project selection or design. This was perhaps because, in many cases, FPs concentrated facilitation efforts on a limited number of individuals, usually CDC members or the CDC executive committee. As a result, there was often elite capture of CDCs since only a few individuals had access to training and the vast amounts of project resources.

These results regarding community participation in CDCs may be surprising or may contradict previous research on CDCs. The research team’s systematic efforts to interview non-CDC members may explain such divergence. Furthermore, the large sample in each community allowed the research team to triangulate stories and shed new light on the day-to-day processes through which CDCs operate.

Focus on elections and procedures within the CDCs in some instances could enhance sustainability and participation. In other instances, however, the executive committee created through elections would operate as another element of elite capture that limited individual access to information or further participation in CDC activities. In most communities, awareness of the CDC elected committee was limited. The individuals interviewed could only identify the members of the executive committee but were not aware of other CDC members.

6. Conclusions and Recommendations

The MRRD should consider developing a long-term strategy for CDC sustainability that focuses more on effective community participation. The by-law or national level legislation alone is not a solution to the facilitation and participatory problems facing many CDCs. The CDCs are only beginning to take root at the local level having only had access to one round of project funds; to be successful, CDCs will require long-term facilitation. At the current rate and quality of implementation, it may take many more years of sustained facilitation and learning from experiences for the CDCs to develop firm roots in communities.

While the MRRD has advocated that CDCs could become a government institution or carry out related tasks, the research has not presented evidence that CDCs have adequate capabilities to do so. They should remain part of civil society. At this still early stage, formalisation of CDCs is premature. In attempting to sustain CDCs, it is dangerous to take this step not only because CDCs lack capacity but because robust local governance already exists at the village level (for example, the *malik* system), which most individuals see as a legitimate expression of their aspirations and desires. People are most concerned with security – not with development. Turning local governance on its head at this point through formalising CDCs would do a great disservice to the people of rural Afghanistan.

James Scott developed rules of thumb that could make development planning less prone to disaster: take small steps, favour reversibility, plan on surprises and plan on human inventiveness.⁶¹ The programming and policy recommendations below seek to build on these insights to aid not only the MRRD and the FPs currently implementing the NSP but also the Afghan government in general as well as the international donor community.

The MRRD, the World Bank and FPs have done an extraordinary amount of work channelling funds to communities for projects in a very short period of time. While some of the recommendations below may seem critical of these achievements, they represent an effort to ensure increased participation in CDCs, which is vital to sustaining activities, project implementation and enhanced local government in the future.

The most basic finding of this study is that the CDCs have been far more capable at improving infrastructure than improving community governance because programme design, facilitation and activities have largely focused on project completion. If CDCs are to carry out both these goals of the NSP in the long run without external facilitation, then far more attention should be placed on improving community participation. Simply increasing the authority of the CDCs through legislation would not on its own increase the participation in the CDCs needed to sustain its activities.

6.1 Returning to community-driven development

A fundamental rationale for creating CDCs was that they would spur community development based on the foundations of community participation. This research demonstrates that while NSP has improved community development, community participation in CDCs is uneven at best. In fact, given the nature of participation in the cases examined, it would be a misnomer to describe the NSP as a CDD project since many of the fundamental elements present in CDD programming have not been adequately implemented. Regardless of whether they will be part of civil society or coordinative or formal structures, greater attention should be paid to facilitating community participation in order for the CDCs to be sustainable in the long term.

The lack of systematic elections relating to CDCs that took place does not reflect a lack of interest in elections or participation on the part of the Afghan public. Community

⁶¹ James C. Scott, *Seeing Like a State : How Certain Schemes to Improve the Human Condition Have Failed* (New Haven, Connecticut, USA: Yale University Press, 1998).

members did not believe that CDC elections were government-sponsored elections for public positions; the elections were not supervised by the Central Election Commission or other oversight body. Rather, the lack of participation or interest in elections may reflect prior experience with CDD projects whereby community elections have been held for the creation of development *shuras*. These *shuras* were theoretically participatory, but during previous periods of conflict, it was difficult for NGOs to monitor them. During the jihad, for example, it was fashionable for NGOs to work through commanders⁶² – a tactic that most NGOs would gasp at now.

The MRRD and FPs have worked to build a legal framework that sustains CDCs as coordinative and formal structures. Their sustainability strategy suggests that a legal framework is a necessary condition for CDC sustainability, but this research illustrates that a legal framework by itself is not a sufficient condition for sustainability. In fact, if a legal strategy is pursued without paying attention to facilitation needs at the community, CDCs will become structures without coherence or legitimacy at the community level.

The MRRD and the FPs have rolled out a large number of CDCs in an incredibly short period of time and the degree to which the projects provided by the NSP have aided communities is almost unparalleled in Afghanistan history. But the speed through which NSP has been rolled out is not without its costs. Unfortunately, due to time pressures to spend project funds, procurement training is the only form of facilitation common to CDCs.

Meanwhile, CDCs are most sustainable in those environments where they have received extended facilitation by FPs. Ongoing facilitation seems to be a key to long-term sustainability; future facilitation could take the form of continued projects as well as enhanced training opportunities for both CDC members and non-members.

A longer-term option to reduce opportunities for elite capture and promote long-term sustainability of CDCs would be to enhance decentralised policy and planning. Such decentralisation would allow for increased revenue collection by CDCs. Evidence suggests that when communities themselves are responsible for raising revenue for projects, opportunities and instances of elite-capture of projects is significantly reduced.⁶³

There are potential legal pitfalls associated with community contributions to CDCs – especially if the CDCs become institutionalised in the law. According to the Constitution of the Islamic Republic of Afghanistan, municipalities are the only local government bodies that have the right to collect and retain revenue. Should the CDCs become formal governance structures, extraction by those structures – even in the form of community contributions – may be perceived by some as a form of taxation. In that case, such revenue collection would currently be deemed unconstitutional.

The MRRD could consider implementing CDC facilitation directly without the use of FPs. This would allow the Ministry to build its own capacity while building stronger allegiances of community members to the government. Without assistance from the FPs, the Ministry's capacity, while lauded, is still very limited. For example, the MRRD has encountered difficulties recruiting qualified CLDD managers at the district level. At the national and provincial levels, the MRRD has strong capacity to design and implement projects, but this research team did not encounter any MRRD representatives in district government administration offices (aside from CLDD representatives who work only in selected districts and on the NSP). One of the benefits of external implementation is the ability to channel funds directly to communities outside of the national budget. Since the CDCs have their own bank accounts, they can access funds directly. This access reduces transaction costs and opportunities for corruption and rent-seeking from higher levels of government. Access to bank accounts, however, would not eliminate all sources of corruption.

⁶² Carter and Connor, "A Preliminary Investigation of Contemporary Afghan Councils".

⁶³ Jean-Philippe Platteau, "Monitoring Elite Capture in Community-Driven Development," *Development and Change* 35, no. 2 (2004).

CDCs seem to believe that they can operate more honestly and efficiently because their project funds do not come from the central government budget. Based on interviews with villagers who were both CDC and non-CDC members, keeping CDC funds outside of government, even if timely and costly, seems to support CDC sustainability and eliminate perceived opportunities for corruption than those that would exist if project funds were channelled directly through the government. This view suggests clear opposition to formalising CDCs at this stage.

If government facilitation of NSP is not feasible or desirable, the MRRD may want to consider contracting the facilitation to Afghan NGOs; communities would more likely experience and recognise the NSP as a government programme rather than perceive it as one imposed by foreign NGOs.

This research suggests a need for greater oversight, monitoring and evaluation of CDC activities. The current design of NSP does not provide FPs with an incentive to report problems arising from projects; community members often spoke of difficulties approaching FPs with complaints about their CDCs. FP social organisers and engineers at the district level did not have incentive to report allegations of corruption or the mismanagement of funds to their colleagues at the district or national level. They discussed how such allegations could slow down the implementation of the NSP and result in delays of disbursement. In the challenging context of rural Afghanistan, high project failure rates and incidence of corruption and rent-seeking by CDC members are expected. The failures and problems faced by communities represent tremendous learning opportunities for all relevant stakeholders. Constructive criticism of CDCs by community members and other stakeholders should be encouraged to ensure that CDCs can remain a vibrant and active part of civil society in rural Afghanistan. In the future, MRRD may wish to create an oversight mechanism independent of the FPs, the MRRD and the World Bank that would continuously monitor CDC activities.

Programmatic recommendations

- The MRRD and other actors should refocus their attention on the implementation of CDC activities. While the sustainability strategy outlined by the MRRD focuses on coordinative and formal functions of the CDC, communities are in desperate need of reason to exist once they complete NSP activities. Expectations of communities by the NSP and FPs are extremely high considering CDCs have gone through only one cycle of project funds – under very challenging circumstances. CDCs have demonstrated that they are able to implement projects successfully at the community level, but their deliberative capacity is still limited. Continued project implementation may not only increase long-term participation in community activities but also support accountability spillovers to village leaders and local government.
- If the number of CDCs is not sustainable in the long run, stakeholders should carry out more projects through clusters – the size and scale of which may be more sustainable. While NSP I and NSP II have been costly endeavours, future facilitation may be less costly if activities are carried out in clusters rather than through individual CDCs. The NSP should increase its cooperation with NABDP for the facilitation of projects at the cluster level.
- Revive the idea of “top-up” grants to “graduating” CDCs that completed NSP I. While funds for these grants never appeared, such continued implementation of projects either at the community or the cluster level may be the only way to help communities build participation in the CDCs.
- Small grants may have large benefits. A second stage of implementation in NSP I communities feature far smaller grants (\$20 to \$50 per family rather than the \$200 per family rate in NSP I and II). It may be the case that when financial stakes are smaller, more genuine participation in community activity may emerge. Participation

by those interested in CDC activity for rent-seeking purposes may decrease since their potential benefits would decrease due to the lower amounts of funding.

- The MRRD and FPs should reconsider the current system of CDC elections. This research found disappointing variation in elections. Even when CDC elections were held in communities, their presence did not guarantee participation. As the CDCs are not part of a larger chain of accountability either in the government or in society, elections do not seem to promote transparency of CDC activities at the village level. The MRRD should consider scaling down the formalities associated with the elections and bring more fluidity to CDCs rather than focus on rigid structures and the executive committee.

Recommendations regarding training

- Training at the community level should be expanded and refocus on PRA training. Communities experience NSP and their CDCs as vehicles for project implementation because the training and facilitation they receive from FPs is usually related to these issues. As FPs and the MRRD are well aware, without significant training and facilitation by the FPs, communities would be unable to fulfil NSP's paperwork requirements. While accounting training is important for auditing purposes, it does not necessarily translate into useful skills since they are meant to meet specific NSP goals.
- The MRRD, FPs and the World Bank should continue their collaboration to lessen CDCs' accounting and paperwork burden. These burdens seem to be the largest factor in explaining why communities experience the CDCs solely as vehicles for project implementation. Decreasing these requirements should enhance local participation in the CDCs.
- FPs should ensure that training and facilitation is extended to all members of the community – regardless of whether an individual is a member of the CDC. Open participation in all CDC activities can potentially serve to limit opportunities for corruption and enhance transparency at the community level. In fact, FPs may want to encourage communities to ensure a significant proportion or quota of participants in training activities are not CDC members. Bringing non-CDC members into training and project selection would represent an important step in de-bureaucratising the CDC at the community level.

Recommendations regarding oversight

- Stakeholders should seek the establishment of an independent oversight organisation – possibly an Afghan NGO or other independent organisation – that continuously monitors and evaluates CDC activity⁶⁴. Corruption and accountability remain as significant obstacles to CDC sustainability and individual good will towards the CDCs. In many communities, corruption by CDC members has led to disunity. The current complaints procedure of the NSP is inadequate. FPs are currently stretched in their implementing capacities and do not seem to have resources to address complaints from the community. The MRRD's PMU is not only unknown to most villagers but is usually geographically too distant to provide regular monitoring.
- Social auditing may be an important way to increase transparency within the CDCs. The MRRD should to expand monitoring and evaluation of CDC activities, including not only the financial aspects of CDC activity but also participatory shortcomings within communities.

⁶⁴ For example in Indonesia, more than 45 NGOs monitor KDP activity. Additionally, local journalists and researchers are invited to examine KDP to enhance monitoring and reduce corruption. See Edstrom, "Indonesia's Kecamatan Development Project," 12.

- CDCs should continue to have independent access to funds. The establishment of bank accounts will allow the government to reduce transaction costs so that communities can access funds quickly. Access to increased funding, however, should be matched with increased independent auditing, monitoring and evaluation.
- Local journalists should be trained to monitor CDC activities. Journalists can not only serve a role in discussing problems in CDCs, but they can also work to tell important success stories. Lessons from project successes and failures transmitted by journalists may help CDCs learn about challenges faced by other communities in their district or province.

6.2 Clustering

Another significant risk for CDC sustainability is the vast number and small size of the CDCs. Financially, the current number of CDCs is not sustainable – even with the large amounts of external donor assistance that the NSP has received. The MRRD has only been able to provide funds for approximately half of the CDCs at any given time. NSP II expands coverage for new communities but does not provide continued support to NSP I communities.

Continued external support could focus primarily on clustered CDCs because the numbers of clustered communities would be far smaller than the projected 30,000 CDCs to be created by NSP I and NSP II combined. Clustering of communities may also provide intervention at an important scale. Villages in rural Afghanistan are generally quite resilient at overcoming collective action problems at the community level and NSP facilitation has supported these traditional abilities. Coordination breaks down, however, between communities. The use of clustering projects could potentially help resolve intra-community conflicts as well as provide larger-scale public goods that are more difficult for communities to achieve on their own. Future clustering activities should also closely involve district government administration.

Recommendations regarding clustering

- Clusters of CDCs represent an important step forward for community mobilisation. There should be closer coordination between the NSP and NABDP as well as other clustering programmes.
- Clustering CDCs may represent a more realistic, sustainable means to support CDCs in the future. According to the transition strategy, CDCs should be clustered before handover to CLDD. It may be easier for CLDD representatives to interact with CDCs at that cluster level rather than with each individual community.
- The NSP should focus on working with those clusters already created by the NABDP. Creation of a second set of clusters for NSP in districts would not only be duplication but may result in massive confusion at the community level.

6.3 Transition Strategy

At the district level, the capacity of the MRRD to implement NSP lies with the FP; aside from the FPs, the Ministry has limited cooperation with district government officials. In most of the districts visited, the FPs were the only visible MRRD representatives. Unlike other ministries working in rural development such as Education, Health and Agriculture, the MRRD does not maintain representatives at this level.

The CLDD represents an important step in establishing new MRRD presence at the district level. CLDD representatives, however, are only responsible for NSP and CDC-related activities and do not represent the broader interests or programmes of the Ministry. CLDD facilitation may improve the capacity of the government but may also improve individual belief in the capacity of the government. If the CLDD does succeed, CDC facilitation would

go directly from the government to the people and not through external FPs – the presence and activities of which vary.

This study found that CLDD representatives are earnest in their work but often confused about their goals. These representatives interviewed were nervous about taking over large numbers of CDCs with very limited staffing and no access to a budget or other resources. The CLDD officials have been placed in communities without clear terms of reference and without the resources to support their existence.

Lessons from crafting the transition strategy, however, may be useful for the MRRD and the NSP. While the research team did not see any strong evidence of CLDD activity or leadership since most of these representatives are not yet in place, the design of CLDD can potentially provide the basis for more long-term and cost effective facilitation of communities.

It is clear that without project funds, CDCs will disappear. The speed at which CDCs have begun to fade suggest that CDCs do not yet have strong roots in the community. Their withering also suggests that CDCs do not have legitimacy in communities beyond their role in distribution and provision of project funds. As described earlier, most of both CDC and non-CDC members we interviewed see their CDC as an instrument for implementing NSP project funds. In a few cases, CDCs have taken up other tasks but this is the exception rather than the rule.

Recommendations to Enhance Transition and Improve Sustainability

- The MRRD should focus on building capacity within the government to facilitate and manage the NSP at the district level. Facilitation does not necessarily mean that the government should implement NSP but rather play a greater role in leading the programme at the district level.
- One important step would be the appointment of MRRD representatives (besides CLDD) in each district where the NSP operates, including at least one to each district administration office. While the FPs have resources and facilitation skills, these skills are not transferred to a cadre of qualified civil servants.
- Expand the capacity of CLDD to provide genuine facilitation in communities. The training and recruitment of these representatives needs to be prioritised.
- The current number of CLDD representatives in each district is currently inadequate. The MRRD should consider expanding the number of CLDD staff to at least four in each district.
- Long-term funding for CLDD staff needs to be considered. At the current time, CLDD staff do not have access to vehicles and have difficulty accessing communities without FP assistance.

6.4 By-law and subnational governance

Efforts to formalise the CDCs do not constitute a sufficient sustainability plan for the CDCs. In fact, while stakeholders such as FPs, the World Bank, and the MRRD seem certain that the road to CDC sustainability is through institutionalisation of the CDCs, this may put at risk the very elements that make CDCs thrive in the most successful cases.

The by-law is a quick and easy solution to the question of sustainability. But having a law on paper does not alter the challenges that CDC face in their communities. The research conducted during the past year at the village level suggests the largest problem for communities is the scarcity of facilitation opportunities, lack of oversight and project completion. CDCs have almost uniformly called for continued projects and facilitation.

At this stage, CDCs are not prepared for broader administrative or coordination tasks; they are still struggling to manage projects within their own communities. Participation in the

CDCs has been limited. The creation of an executive committee within the CDC may have increased transaction costs and may have actually created barriers to community participation in the CDC. Much of the facilitation provided goes directly to the CDC and does not reach the greater community.

Individuals who are not members of the CDC expressed concern about possible formalisation of the CDCs. In many cases, they view the government as corrupt and fear that formalisation would bring the tentacles of the government down to the village level. Many non-CDC members have also shared stories of corruption within their CDCs and do not want to be legally beholden to them. Given the dearth and quick speed of facilitation in many communities, it seems premature to formalise the CDCs into permanent governance structures.

Formalisation of these organisations may breach the social contract through which CDCs were introduced to communities. Having donors, NGOs, and other ministries channel development funds exclusively through the CDC may seem like an efficient and appealing solution. Without proper oversight, however, such a solution may provide additional potential for corruption and increase elite capture of development funds. CDCs will face significant moral hazard problems. Furthermore, given the extremely small size of the CDCs it is difficult to envision that many rural development projects will be satisfied with the scale of the CDCs for all of their activities. Using CDCs for development activities should be based on the performance of individual CDCs and should be at the discretion of particular donors and ministries.

Most importantly, the MRRD and other stakeholders should consider that national-level legislation bestowing administrative and coordinative tasks to CDCs will require money for training as well as implementation. Mandating CDCs to do administrative tasks would cost tens of millions of dollars in facilitation, training and long-term support. Without assured funding to perform these tasks, CDCs would turn into another structure that would be unable to perform the duties accorded to them. It is difficult to imagine that funding from central government or donor sources will sufficiently finance CDCs in the long-run.

Stakeholders should be reminded that one of the two goals of the NSP and CDCs is to improve community governance. When CDCs work well, participation in their activities is a transformative experience. Community members build on existing skills and learn new ways to solve old problems. CDCs then become active vessels for change within their communities. In this light, CDCs improve community governance not by transforming themselves into governance structures but rather through their advocacy work and presence as a vibrant source of civil society.

The NSP Transition Strategy as well as MRRD and World Bank proposals for NSP II call for the eventual transition of the CDCs into the village councils called for in the Constitution. At this point, transforming the CDCs into formal village councils is premature and the risks associated with this move may be greater than long-term benefits.

The MRRD needs to provide more opportunities for other ministries to use the CDCs rather than wait for other ministries to approach the MRRD. Inter-ministerial competition is not unique to Afghanistan. As long as CDCs are housed in the MRRD, they will be unable to serve as administrative or formal organisations with which other ministries will be willing to work. Transforming CDCs into broader administrative or governance structures requires serious consideration of moving responsibility for the CDC out of the MRRD and into the newly-established Independent Directorate of Local Governance under the auspices of the executive branch of the Afghan government.

CDCs seem to be more sustainable when they are linked directly into existing power structures in the community. While there are certain risks of corruption and elite capture associated with working with existing structures, the benefits associated with working with existing local power-holders may outweigh these risks. *Woluswals* and other local

government officials tend to have an overwhelmingly positive attitude towards CDCs and the projects they have implemented. In many cases, *woluswals* have lamented the fact that they had little input into CDC operations; in nearly all cases, *woluswals* felt that they had no jurisdiction over the CDCs but were burdened by resolving CDC-related conflicts such as project design and financial mismanagement issues.

Although the transition strategy explicitly states that formalisation will not turn CDC members into civil servants, the duties they are to perform may turn them into just that. Village councils are government bodies and, like provincial councillors and members of parliament, village councillors would likely receive a government wage. In addition, most of the administrative tasks accorded to CDCs are already carried about by quasi-formal leaders at the village level.

The number of CDCs is currently not sustainable as administrative units. In many communities, the CDCs are far too small and natural communities are divided into several CDCs. One explanation for this phenomenon is the fact that FPs are contracted to roll out a fixed number of CDCs in a district; in some cases, the number of CDCs does not correspond with the number of existing communities. At the current time, the MRRD is only able to fund half of the CDCs. The second half of CDCs will receive funding with the commencement of NSP II.

Recommendations regarding the By-Law and Issues of Subnational Governance:

- The MRRD should clarify both the goals and the language of the by-law.
- Efforts to spread information about the CDC by-law should be halted until other ministries and government departments, including the Independent Directorate of Local Governance, have agreed to this mandate. Promotion of the by-law also requires a more inclusive dialogue with village leaders who perceive CDCs as units of project implementation rather than local governance. Changing the mandate of the CDCs at this stage could promote (and in several cases has already promoted) conflict at the community level. The MRRD should consider local sensitivities as well as inter-ministerial issues before moving forward with the by-law.
- Before pursuing national-level legislation according CDCs with greater administrative and governance tasks, the MRRD and the Afghan government should conduct a budget analysis to determine the costs of such a policy. Drafting legislation without ensuring adequate funding is a recipe for disaster and could undermine the long-term viability of the CDCs. The example of the CLDD, which was implemented without securing proper funding, should be instructive; recruitment and maintenance of CLDD representatives will continue to be a challenge as long as their budgets remain unclear.
- Stakeholders should consider whether CDCs should be the only vessel through which the government, donors and other actors access communities. Given the difficulties of donors to coordinate projects at the national level, is it reasonable to expect that communities will be able to coordinate projects of various shapes and sizes at the community level? While coordination of project funds seems to be an innocuous task, without proper oversight and accountability, opportunities for corruption would only increase as the size of the CDC budget increases.
- There should be greater cooperation with existing district government officials, especially district governors and representatives of other ministries active at the district level. Regular meetings with these officials may be a way to encourage cooperation. Such meetings may also serve to enhance broader government ownership of the project. Through the incorporation of other ministries and actors, development activities implemented through CDCs may fit more comprehensively into district development needs.

- The capacities of CDCs should be consolidated before their mandates are expanded. As this research has found, communities who have completed three years of NSP facilitation are still struggling to carry out activities mandated to them by the programme. It is thus premature to expand administrative and coordinative tasks to the CDCs.

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Appendix: Case Studies

The case studies discussed below represent three typical communities that the research team examined.⁶⁵ The first example, Shadi Khel, represents a CDC where participation seemed most likely to continue and where CDC activity – in both project implementation and participation – would endure. The second, Manzil Bagh, represents a worst-case scenario for CDC sustainability; it is a community where the presence of the CDC has actually damaged individual willingness to work together in the future. The final case, Chardeh, represents a CDC that has experienced mixed results. Future implementation of NSP should assume communities are most similar to Chardeh. Stakeholders should consider the dangers of Manzil Bagh as well as of the potential of Shadi Khel when designing future programming.

Shadi Khel: A Sustainable Model

The CDC in Shadi Khel has strong prospects for survival after the withdrawal of external facilitation and grants. The village has 294 families living within the boundaries of a provincial capital.⁶⁶ Land in the village is in short supply, but families are able to cultivate vegetables on the plots that are available. The location of the community next to large markets facilitates livelihoods. Literacy rates in the community, especially amongst men, seemed higher than average. Some men are employed by the provincial government or by NGOs working nearby.

Fighting between Soviet forces and mujahiddin resulted in physical destruction of the village in the 1980s. Further destruction occurred during the civil war between various commanders in the 1990s. While the village suffered physical devastation during these periods, community members described the Taliban occupation of their village as the most psychologically anguishing since its brutality demoralised the community. Men and women recalled how the Taliban arrested family members; many of them were never heard from again. The Taliban burned down areas of symbolic importance including historic landmarks, pilgrimage sites and mosques.

Villagers migrated to Iran and other provinces during the civil war, with the majority of villagers returning in 2001 and 2002. People described their community as peaceful and could not recall any major internal conflicts within the village.

Residents detailed a long history of NGO mobilisation in the community through small grants, programmes and trainings. In fact, community members could recall NGO programmes that existed in the community both during the civil war and the Taliban regime. In their minds, the NSP and the resulting CDC were an expanded version of previous mobilisation efforts in their community. Participatory rural appraisals were tools they had used before. Villagers told of two other development *shuras* created in the past ten years they felt were similar to the CDC.

In 2003, the community gathered with the help of the FP to hold elections to select CDC members. Those elected were limited to the executive committee of the CDC: head, deputy, treasurer and secretary. There were no women elected to the executive committee. Women elected their own CDC executive committee. There were eight CDC members—four men and four women—all with executive titles.

In addition to the CDC, the village had two other councils: a *shura-i-mardomi* (people's council) as well as a *qaum-i shura* (tribal council). Villagers organised the *shura-ye mardomi* with several neighboring villages to address issues relating to the government.

⁶⁵ The names of the villages used in case study have been changed to protect the confidentiality of respondents.

⁶⁶ Official documents from the FP indicate 150 families living in the community. Villagers insisted that 294 families lived in the geographical area that constitutes the CDC. This number was reflected consistently on written documents in the CDC office as well as echoed in interviews with community members.

The *qaum-i shura* existed for decades at the village level to deal with land, water and criminal matters. Young people in the village also established an active youth committee that sought out grants from other NGOs and donors to provide literacy and computer courses for boys and girls. Unlike the CDC, these other councils were self-organised.

Shortly after the CDC was elected, members gathered and conducted a PRA. At the gathering, villagers discussed the problems in the community and how CDC projects could help solve these issues. Community members selected three projects: culverts, a diesel generator and a bakery. The FP provided extensive training to the community on accounting procedures before and after disbursement of block grant funds. Men and women began to hold joint meetings, but after a few meetings the women asked that meetings be held separately because they felt "shy".

Community contributions to two of the projects were in-kind: villagers donated land for the construction of the bakery and provided labour to construct culverts. In order to receive electricity from the diesel generator, each household was to contribute 150 Afs per month.

Most villagers discussed the success of the culverts that gave each family vital access to main roads so that they could transport their sick family members to clinics and their crops to markets more rapidly. Community members were also excited about the bakery that they had built. Shortly after construction, however, the bakery building collapsed due to use of sub-standard construction materials and flooding in the area.

NSP block grants also brought a diesel generator to the area. The generator was in good, working condition, but individuals were no longer willing to contribute funds to the generator. Non-CDC members said they would not contribute to the generator because poor families who used little electricity were expected to make the same monthly contribution to fuel costs as wealthier families who consumed more power. After using the generator for one year, a wealthy member of the village built a micro-hydropower station that replaced the generator as the main source of power in the community. The diesel generator purchased with NSP block grant funds sits idle, no longer used by the community.

There were no complaints about corruption in the community. Even while several villagers complained about fuel costs for the generator and bemoaned the collapsed bakery, most were keen to continue their work with the CDC. They felt that, because they participated in the design and selection of the projects, the entire community was responsible for the success and failure of the projects.

It is important to note that the CDC members themselves did not recognize that the NSP was a government-sponsored programme. Due to the long history of development *shuras* implemented by NGOs and the facilitation of the programme by an NGO, they assumed that NSP was another "foreigner" project.

CDC members were increasingly active in dispute resolution but only along with the *shura-i-mardomi* and the *qaum-i-shura* in their community. CDC members, however, clearly differentiated between the CDC and these other *shuras*. They understood that the CDC was responsible for project implementation but not responsible for relations with local government officials or dispute resolution. Most members of the community were eager to continue their work with the CDCs in the future but felt that they would be unable to raise the large levels of funds necessary to carry out "CDC projects".

The FP recently began implementing a clustering programme in the community. The community selected their projects along with neighbouring communities. They felt the cluster fell along natural borders with communities with which they were familiar and had good relations. CDC members said they were now busy with the clustering programme and that the NSP project in the community had finished.

Lessons learned

- Broad participation in project selection has significant impact on attitudes towards the CDC, regardless of whether those projects are successfully implemented.
- NGO efforts to mobilise community members are key towards maintaining participation in the community.
- Past experience with community mobilisation resulted in realistic expectations of participation and project results.
- Community mobilisation efforts can have positive spillover effects and raise the accountability of village leaders.
- Clustering along geographical rather than project boundaries may lead to future sustainability because geographical clusters build on existing local patterns of participation and communication.

Manzil Bagh: A Challenge to Sustainability

According to information from the FP, Manzil Bagh is a community of 346 families located approximately 15 km from the district centre. The village has low levels of literacy among both men and women. Destruction in the village occurred during all three major conflicts of the past 30 years: the Soviet Invasion, the civil war and the Taliban occupation. The community has relatively large amounts of both land and water. Most families seem well-endowed with land and there were few complaints of inequality in the community. Farmers cultivate cotton, watermelon and family plots for vegetables.

The FP began mobilising community members in the area in 2003. Men in the village gathered to elect the CDC. The election, however, was held through consensus procedures rather than through NSP-mandated secret ballots. As a result of the gathering, the men selected their *malik* who is also a *mullah*. They elected him because he was a trusted, respected leader who was responsive to community needs.

After the men selected the CDC head and three other members of the executive committee, the FP announced that these individuals would have access to funds to implement development projects in the community. There were no elections held for female CDC members. One woman in the village was appointed by the CDC to be the head of the “female CDC”. She did not participate in any meetings or project planning. This woman said she only acted in her capacity as a CDC member when FP representatives or other donors and outsiders visited the community. She described how she would speak with these external actors to create the image that women were working with the CDC.

Shortly after the CDC began its work, a local commander became interested in the work of the CDC—especially after he heard of the large amounts of money it would infuse into the community. Shortly after the first election, he unilaterally announced that he would be the head of the CDC and replaced the CDC executive committee with his allies in the village.

After the commander dismissed CDC members, villagers complained to the FP. Both CDC and non-CDC members in the village felt that the FP did not take their complaints seriously and were not given instructions on how they could further their complaint. The CDC members also went to the *woluswal* who had no time to deal with their complaint. The *woluswal* also said that he did not feel that he had jurisdiction to deal with CDC problems because it was an MRRD programme.

The FP continued to work with the commander and did not provide any training or facilitation to the original CDC members. Villagers were not aware of CDC meetings or the broader goals of the NSP. Meetings of the CDC did not seem to take place.

FP trainings in the village were limited to accounting and bookkeeping issues. There were no broader PRA trainings or participatory project selection meetings open to the entire community. The commander selected three projects: a bridge, wells and culverts. After

project selection and block grant disbursement, villagers eagerly contributed their labour to the project and expected to be paid for their services as the commander had promised. After project completion, however, those who contributed their labour were never reimbursed. One technical expert in the community who engineered wells and culverts said that the commander had made promises on several occasions but kept the money for himself.

Two other NGOs began working in the community after the establishment of the CDC. The first organisation was heavily involved in NSP. They established their own separate development *shura* to deliver block grants to the community for the purposes of small business development. The commander declared himself to be the head of this second development *shura* as well. He built a bakery adjacent to his home with the project funds from the second *shura*. Shortly after its construction, the bakery ceased to operate due to a lack of funds. Another organisation – an FP that was implementing NSP in other districts but not in Manzil Bagh – organised a microcredit programme in the community. This organisation did not cooperate with the CDC, establishing instead a parallel structure to facilitate group loans in the village.

Due to the community's disputes with both the commander and the FP, villagers stated that NSP has brought "disunity" to the community. They said that prior to the infusion of CDC funds, the commander was not interested in village leadership issues or dispute resolution because these tasks were the domain of the *malik* who they respected and trusted.

While there was limited participation in project selection, villagers were generally satisfied with the projects they received from the NSP through the CDC. Even the CDC members who were removed from their positions by the commander said that the projects had a positive impact on the community. In particular, they discussed how the projects built with NSP funds improved the health of their children. Instead of water taken from the stream or open pools, the village now had access to safer drinking water. The construction of the bridge and the culvert allowed safer and swifter transport of patients to doctors and clinics. Furthermore, the culverts promoted easier communication within the village since families no longer had to traverse streams and ditches to visit each another.

According to the FP, all the villages in the district were part of a cluster. The FP along with CDC members designated the boundaries between clusters. None of the community members, however, were aware of the clustering programme except the local commander who was also the head of the CDC. He stated that, through the clustering programme, the villagers of his and neighbouring communities elected him to be a representative of the District Development Assembly. The FP – who was also responsible for clustering CDCs – showed the research team pictures of the launch of cluster mapping at the district level. Information about the clustering, however, did not trickle down to members of the community.

Collective action within the community regarding dispute resolution and other vital issues continued as it had before the existence of the CDC in the community. The *malik* (the first head of the CDC) continued to be active in social and other issues in the community. The commander was now involved in donor activities in the community and became the external face of the community. The commander viewed donor activities as more lucrative, leading him to be less accountable to people in the community. The *malik* continued to work on behalf of the people.

Lessons Learned

- Quasi-formal leaders can play an important role in the governance of the CDC.
- Complaints and grievance procedures about CDCs are unclear and not widely disseminated to community members, especially non-CDC members. It is unclear to

whom CDCs are ultimately accountable: FPs? The District Government? The provincial department of the MRRD?

- Successful project implementation does not ensure sustainable participation or sustained collective action within the CDCs.
- Without accountability mechanisms and without links to external enforcement mechanisms, the CDCs in some instances may contribute more instability to a community.
- If donors themselves are unable or unwilling to use the CDCs to coordinate donor assistance to communities, is it fair to ask communities to bear the burden of these tasks?

Chardeh: An “Average” CDC

Chardeh is a community of more than 300 families, located more than 20 kilometers from the district centre. The district suffered acute water shortages over the past decade which has limited agricultural output. Landholdings in the village are also limited. There are several large landowners who control most of the arable land. Since 2001, more young women than young men were attending school in the village because young men had to work as daily labourers or sharecroppers in the fields. Fathers especially noted this fact and were upset that they had to force their sons to work instead of allowing them an opportunity to become literate.

There are two ethnic groups living in the community, each having its own *qaum-i-shura* to resolve internal disputes. When disputes occur between the two communities, the two *qaum-i-shuras* gather to discuss the issue at hand.

The FP first introduced the idea of the CDC into the community in 2003 and held elections for male members of the CDC. Elections were held for members of the executive committee. Community members elected the *malik* as the head of the CDC.

Elections were not held for female CDC members, but there was a leader of a female CDC “leader”. She admitted, however, that she did not run for this position nor was she present at the CDC elections. She had little information about CDC activities in her community. She felt her role in the community was largely symbolic.

The executive committee of the CDC selected three projects: one “male” project, a diesel generator for the community-at-large; and two projects for women, carpet weaving courses and equipment for an animal husbandry project.

FP facilitation in the community focused almost exclusively on accounting issues for members of the CDC executive committee. The members of the executive committee chose the projects for the community because they felt that as members of the CDC they were responsible for this task. They did not seek input of community members, because they did not feel that they should be soliciting outside opinions in the selection of the projects.

Aside from an exchange visit with a CDC from another province, the community’s entire encounter with the FP focused on issues of accounting, bookkeeping and project implementation and issues related to the disbursement of funds.

The CDC members were active members and well-trained in the bookkeeping procedures outlined by the FP but did not see a larger role for the CDC outside of project implementation. Community members, in turn, were supportive of the CDC but were not involved in decision-making activities.

The FP was an Afghan NGO. Most community members, even those who were not aware of the CDC, could identify the projects implemented by the CDC as funded by the Afghan government. Unlike other cases when the FP was an international NGO, community

members did not know the name of the Afghan FP but instead referred to them as part of the government.

The problems surrounding project implementation were akin to those of other communities who selected similar projects. The villagers complained about the user fees associated with the generator. The generator only worked during winter months when there was less sunlight and when more people were present in the village; during the summer, many left to work in fields in other parts of the province. There were complaints that each family had to pay the same amount for fuel; they suggested that wealthier families should pay more because they could not only afford more electricity but also consumed more.

Women in the village also suggested that the system for selecting female participants in the NSP-funded animal husbandry project was not transparent. According to women who were not CDC members (of which there was only one), the animals were supposed to be distributed to women through a random lottery; the event never took place and the animals went to only a few select families in the community rather than being widely distributed. There were similar complaints about the carpet weaving programme. The women said that materials to make carpets went only to a few houses. They seemed, however, more pleased with the carpet project because carpet-making skills could be taught to a larger number of people.

A clustering project was introduced into the community. The cluster was selected according to project needs and consisted of five CDCs. CDC members described how cluster members chose a school as the cluster project and how the cluster was chosen to facilitate its construction. The selection of the school was, in fact, the preferred choice of the organisation implementing the cluster project rather than that of the community. After community members complained that the proposed location of the school was too far away to suit their needs, Chardeh and one neighboring community got their own project within the cluster and no longer participated in the school project.

The CDC successfully completed all of the NSP projects and paperwork. Villagers said that a few of the NSP men were now working on the cluster. The only reason the CDC could continue was because of the funds it had for the cluster. The cluster seemed to reinforce the notion that the CDC exists for purposes of project implementation. The CDC in the village was not linked to projects outside of the cluster or to other decision making in the community.

Lessons Learned

- Projects that have excludable characteristics (such as animal husbandry) and user fees (such as the diesel generator) may facilitate unequal distribution of project funds in the community.
- Clustering programmes extended the life of the CDC in the village. A new project extended the purpose of the CDC.
- The focus of the cluster on projects reinforced the notion that the CDC exists to implement projects.
- Community was generally satisfied with the projects even though it did not participate in project selection.
- Presence of an Afghan NGO as an FP improved community knowledge that projects funded by NSP were supported by the Government of Afghanistan.