Taking a Community Approach to Development
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Taking a Community Approach to Development

Poverty is about much more than just income levels—it also encompasses vulnerability, exclusion, unaccountable institutions, powerlessness, and exposure to violence for the poor, among other things. For countries eligible for support from IDA, the World Bank’s fund for the poorest, broad-based growth, capacity development, and protection of vulnerable groups are common development objectives. IDA has established a strong presence in the social sectors, introducing new approaches to better deal with complex institutional issues such as deficits in public sector management and institutional development.

CHALLENGES

IDA countries have made significant progress in the past decade; however, many of the countries’ growth has been accompanied by rising inequality and disparities, with lagging regions and disadvantaged groups within countries.

Weak governance is one of the key challenges for development in IDA countries. The link between poor governance and persistent poverty is difficult to break, as building and operating successful public institutions is a long-term challenge for governments. In particular, weak local government institutions and poor governance over development resources are key contributors to inequitable, or a lack of, access to basic infrastructure and services for the poor. The complexity of this challenge is compounded by the volatile conditions found in many IDA countries (particularly fragile or conflict affected states), where human security, social cohesion, political stability, and economic activity can be uncertain and volatile.

Of the 77 IDA-eligible countries, 28 are considered fragile or conflict affected states (FCS).

Globally, about 700 million people are still living in extreme poverty, of which about 500 million live in IDA countries. Access to basic infrastructure and services is a persistent challenge—globally, 1.1 billion people live without access to electricity, 2.4 billion lack access to sanitation, and 660 million people do not have access to clean water.

Such countries present the most profound challenges to development in the world today. In both fragile and conflict-affected situations, poverty levels are usually high and welfare outcomes low. The stability and social cohesion necessary for development is frequently lacking. And often there are no strong and legitimate institutions to address poverty and manage conflict. Violent conflict is more likely to reemerge in such areas, leading to further impoverishment, undercutting social cohesion, and further eroding institutions. The result can be a vicious cycle of deprivation and insecurity which is difficult to dislodge or change.
CDD APPROACH
Community-Driven Development (CDD) is an approach to local development that gives control over planning decisions and investment resources to community groups (including local governments). It is a powerful, effective instrument for empowering communities and delivering services to otherwise under-served populations. It is unique because it departs from traditional approaches to development that focuses on enabling central governments. CDD programs operate on the principles of transparency, participation, local empowerment, demand responsiveness, greater downward accountability, and enhanced local capacity. Empowering local decision-making and putting resources in the direct control of community groups has led to the efficient delivery of basic services and, when sustained over time, measurable reductions in poverty, particularly among the poorest populations and communities.

Experience has shown that when given clear and transparent rules, access to information, appropriate capacity, and financial support, poor men and women can effectively organize to identify community priorities and address local problems by working in partnership with local governments and other supportive institutions. The World Bank has supported CDD in IDA countries to help address a variety of urgent needs, including water supply and sanitation, school and health post construction, nutrition programs for mothers and infants, rural access roads, and support for micro-enterprises. CDD has proven useful in responding to conflict and fragility, and in post-disaster contexts, as it has shown to be fast, flexible and effective at re-establishing basic services. In FCS, the approach has also helped rebuild social capital and trust within communities, and between communities and governments.

ACTIVE IDA-FINANCED CDD PORTFOLIO
The World Bank has a robust IDA-financed CDD portfolio. As of August 2016, there were **100 active projects** in **45 IDA countries** with a total of approximately **US$10.2 billion** dedicated to CDD. The South Asia and Africa regions have the largest share of the active CDD portfolio (33 projects worth US$5.5 billion and 34 projects worth US$2.8 billion, respectively.) India has the largest country portfolio: 18 projects worth US$3.7 billion.
32 active CDD projects worth US$2.2 billion support FCS countries and contexts, with the Africa region having the largest share of the operations at 15 projects, totaling US$1.2 billion. The East Asia and Pacific region follows, including the national CDD project in Myanmar worth US$480 million.

**RESULTS**

Many CDD programs that began as small stand-alone operations have gradually expanded to reach full national coverage, and have been linked to Governments’ formal decentralization strategies. These projects have delivered positive results across a range of measures including economic welfare (income and consumption) and access to services. Also, in post-conflict settings, CDD has proven effective in delivering services quickly and providing targeted support for short-term jobs.

A review of 17 robust impact evaluations of World Bank CDD projects shows an overall positive role in improving household living standards or welfare in a large majority of projects that measured results on income poverty, more effective poverty targeting, and increasing access to services, particularly in the areas of health, education, and clean drinking water. A separate review of CDD projects in East Asia demonstrated positive income returns to participating communities. Assessments of several CDD projects across the globe have shown subproject infrastructure investments to be of equal or better quality than those managed by local governments or sectoral agencies, and often at lower unit costs. An evaluation by the Bank’s Independent Evaluation Group (IEG) also finds a significant increase in girls’ school enrollment in many FCS countries as a result of effectively mainstreaming of gender in FCS within the health and education portfolios and in CDD projects.

**Illustrative Results from Closed IDA-financed CDD Projects**

Between 2010 and 2015 the Bank completed 90 IDA-financed CDD projects. Approximately US$7.6 billion in IDA financing leveraged approximately US$39.7 billion through World Bank operations. The projects covered 51 countries in all six of the Bank’s regions. The Africa region had the largest share of projects, followed by the South Asia region, and the East Asia and Pacific region.

These projects delivered in total more than 164,000 subprojects and
reached approximately 176 million beneficiaries. Among these subprojects, the top three sectoral areas covered are income generation and job creation; water and sanitation; and education.

**For income generation,** CDD projects supported the development and rehabilitation of critical economic infrastructure (roads, storage facilities, etc.) and the financing of training, subgrants, and other support for value-chain analysis, small business advice, and the construction of training centers and vocational schools, among others.

**In Benin, 38,000 people (of which 77 percent were women) have gained access to micro-finance services thanks to the National CDD Support Project. When CDD projects target poor areas, they have proven to be an effective poverty reduction tool. For example, in communities that participated in the Tajikistan Community Agriculture and Watershed Management Project, the proportion of people above the poverty level increased from 3% to 30%.

**In water and sanitation,** CDD projects have built or rehabilitated water supply units for drinking and daily use, as well as latrines and other sanitation infrastructure for communities. These efforts led to an increase in access to safe drinking water and a reduction in the time households spend collecting water. Public latrines
contributed to improvement in hygiene and sanitary conditions for people in poor rural communities. In the Sri Lanka Second Community Development and Livelihood Improvement Project, communities implemented a total of 463 community water supply projects, which led to time saved in collecting water, improved health, higher levels of community sanitation and time freed for other income-generating activities. In Nepal, the Second Rural Water Supply and Sanitation Project provided improved access to water supply for more than 1.1 million people in rural areas, who are now able to collect water within a 15-minute round-trip walk from their residence.

**In education,** CDD projects have largely supported the construction and renovation of school facilities such as classrooms, libraries, and staff quarters, as well as the provision of school equipment, from pre-schools to communal colleges. These efforts have led to an increase in school enrollment and attendance as well as learning, notably for girls. An impact evaluation of the Community and Social Development Project in Nigeria and the Local Government Support Project in Tanzania, for example, demonstrated the projects’ contribution to increased school enrollment and attendance.

**In agriculture,** CDD projects helped build agriculture infrastructure such as irrigation, markets, community storage, and slaughterhouses, among others. Communities rehabilitated their irrigation systems through CDD subprojects, leading to increased crop yields in client countries. Reporting on the Community and Social Development Project in Burundi showed that vendors used to display products on small wooden tables and mats on the ground; but the new rural market, with a cement floor and roof sheeting to protect against the elements, increased the number of vendors on market days.
In health, CDD projects contributed to decreases in malnutrition and improvements in maternal and child healthcare. Clinics and health centers including maternity wards were developed by subprojects, which led to increased use of primary health facilities. In Bolivia, the share of women receiving prenatal care and the share of attended births increased significantly. As a result of Gambia’s Community-Driven Development Project, 109,640 households benefitted from the health intervention. It was reported that a health facility where people used to receive care only once a week started to see on average, 200 to 250 patients per day. This has contributed to improved access to health care, especially for pregnant women, mothers and children.

In transport, public infrastructure subprojects such as roads, bridges and bus stations have contributed to the enhanced access of beneficiaries to basic socio-economic infrastructure/services such as markets, schools, and health facilities, thereby reducing travel time and cost. A recent impact evaluation for the Laos CDD project (the Poverty Reduction Fund) demonstrated a reduction in travel
time from the beneficiary communities to their nearest neighboring village by between 25% and 50%, depending on the season. A study on the impact of community subprojects of the Burundi Community and Social Development Project found that the average distance to access health centers and primary schools was reduced from 5 to 10 km to less than 5 km. Transport projects have also led to reduced isolation of agricultural production areas and increase in the volume of agricultural products being transported to markets by farmers.

While supporting the subprojects to provide access to basic services and infrastructure to the poorest populations, CDD projects aimed to empower communities and strengthen community participation, decision-making, and control of resources. Projects have embedded capacity development components to enhance the ability of the project facilitation teams and local community groups to manage resources effectively as a community, covering skills such as procurement, contracting, reporting, and business development.

**Contributing Factors to Positive Impacts**

Factors contributing to the success of CDD projects in reducing poverty and improving access to services include:

- Strategically targeting resources to poor areas using poverty maps, the latest national statistical data, or other sources agreed to among key stakeholders;
- Establishing a more participatory and inclusive model of service delivery, allowing communities to identify their own development needs as well as the poorest among them;
PROJECT CASE STORY I

Inclusive Rural Community Development in Afghanistan

National Solidarity Program (NSP): 2003–

CHALLENGE

Afghanistan has made significant political, economic and social progress following the fall of the Taliban government in 2001. The country has held five national elections and established a much more open and inclusive society, notably for women. While volatile, economic growth averaged 9.4 percent per year during 2003–12, which helped raise GDP per capita from US$186 in 2002 to US$688 in 2012. Key social indicators have also improved. Net primary school attendance rate increased from 37 percent to 57 percent in 2007–11, while girls’ net attendance rate increased from 29 percent to 48 percent in the same period. Primary health care coverage expanded by more than eight times from 8 percent to 68 percent in 2001–08. Access to other services also improved significantly. Access to electricity increased by three-fold during 2005–11; access to drinking water rose from 27 percent to 46 percent in 2007–11; and travel times between major cities such as Kabul, Kandahar, and Herat have been reduced to a quarter of what it used to take.

Major security threats, however, pose formidable challenges to continuing socio-economic progress. And despite earlier accomplishments, Afghanistan remains one of the least developed countries in the world. Poverty rates stand at 39.1 percent as of 2013–14, with signs of growing inequality. The vast majority of the population—about 70 percent—lives in rural areas, where the poverty rate is even higher, literacy rates are lower, and basic services are more scarce. Compounding the problems facing Afghanistan’s rural population is that government institutions, as defined by the country’s constitution, do not yet exist below the provincial level, making delivery of

• Providing high-quality and adequate facilitation and technical assistance;
• Building the capacity of communities to engage in these participatory processes and to directly manage development resources;
• Ensuring transparency in community and subproject selection and in accounting for the use of project resources at the community level;
• Providing block grants of sufficient size over several years that are used for economically productive purposes;
• Building flexibility into project design and implementation, to better adapt to lessons and insights that emerge as the project matures.

The World Bank actively supports the CDD approach as it grows and evolves worldwide through targeted analytical work, technical assistance to flagship CDD programs around the world, quality assurance support through information and knowledge exchanges, and staff skills development, all of which can lead to a greater impact on poverty, empowerment and an improvement in basic service delivery in client countries.
the most basic services all the more difficult.

In terms of local amenities and services, there remains an immense need for the government of Afghanistan to adopt and implement a more coordinated and multi-faceted development approach with the support of the international donor community. This approach needs to include elements of both local governance enhancement and provision of much-needed reconstruction and rehabilitation.

**APPROACH**

Currently in its third phase since its inception in 2003, the National Solidarity Program (NSP) is one of the Government of Afghanistan’s flagship, national priority programs. NSP applies a community-driven development approach to tackle local governance challenges and to support basic service delivery. Overall IDA commitments to the three NSP phases stands at US$398 million, while more than US$1.6 billion has been provided through the Bank-administered Afghanistan Reconstruction Trust Fund.

The NSP aims to build, strengthen and maintain Community Development Councils (CDCs) as effective institutions for local governance and socio-economic development. The councils have been given the mandate to identify, plan, manage, and monitor their community’s development projects, thereby building a sense of ownership and empowerment.

A CDC can be formed with approximately 50 percent female participation in any community with a minimum of 20 households. Residents elect CDC members through secret ballot. A CDC comprises 12 to 30 members who serve for a term determined by NSP’s implementing agency, the Ministry of Rural Rehabilitation and Development (MRRD), following which they are replaced by new members elected through another free and secret ballot election.

**RESULTS**

Since 2003, NSP has successfully established CDCs in over 35,000 communities, and supported subsequent rounds of CDC elections in over 11,500 of these communities.

Cumulatively, over all the NSP phases to date, CDCs have received some US$1.6 billion in community block grants to finance over 89,600 subprojects, of which more than 79,000 have been completed. Subprojects include investments for transportation (30 percent), water supply and sanitation (25 percent), irrigation (26 percent), power (5 percent), and other small-scale infrastructure schemes (14 percent). These activities generated over 52 million paid labor-days for skilled and unskilled workers.

CDCs, established in 85 percent of villages in Afghanistan, have shown to be highly effective in implementing development projects by engaging local communities. “CDCs have members from every part of the community so they know best about what their communities need,” says Sher Shah Shahid, 41, former director of NSP in Balkh Province. “No other structure can be as effective as CDCs in identifying and prioritizing village-level problems. They know best how to implement...”
projects so that the impact reaches the widest number of residents.”

In the small locality of Kod-e Barq in Balkh Province, a 963-meter long canal was built alongside the road. Although there are no big fields here, residents can grow vegetables in their own little yards—thanks to the water from the canal. The NSP provided 3 million Afghanis towards the canal’s rebuilding cost, while residents of Tokhta village and Kod-e Barq contributed over 300,000 Afghanis. 938 families are benefiting from the canal, says Homayon Ajam, NSP Provincial Manager in Balkh Province.

Mohammad Anwar, 57, a resident of Kod-e Barq, is pleased that the canal has been rebuilt. “Previously, when the canal was still unpaved, most of the water was absorbed into the ground instead of running into the adjoining streams,” says Anwar. “Moreover, it took the water two to three hours to reach the neighborhood. However, now that the canal has been paved, water can reach us as quickly as 20 to 30 minutes. The water brought by this canal has already irrigated all the greenery here.”

The canal has not only revived the greenery surrounding the neighborhood, but it has also brought arable land back to life. Fields that had lain uncultivated due to water shortage now grow wheat for Kod-e Barq. Residents are glad to see their lands growing crops again, which has had a positive impact on the local economy.

NSP has also played an effective role in building capacity and empowering women in a country that remains near the bottom of the human development index with some of the worst social indicators among women and children, who constitute more than half the population. In most cases, half of CDC membership has been allocated to women, giving them the opportunity to participate in decision-making at village level and to voice their opinions. “NSP has provided a unique opportunity for women to participate
in the development process from a government-sanctioned platform, allowing women to gather and discuss their development priorities within a formal framework for the first time and have their concerns taken seriously,” said Naseer Ahmad Durrani, of the Government Ministry overseeing NSP. Atif Poya, a CDC member from Daikundi Province, says that women are now given more voice in community matters. “Women did not have the right to participate in discussion or any decision-making process in the past,” she says. “In our meetings, we now have around 40 percent female participation and women’s views are respected in decision-making.”

A robust impact evaluation conducted in 2013 to quantify the results of the second phase of NSP on access to services, infrastructure, and utilities; economic welfare; local governance; political attitudes and state-building; and social norms found notable positive outcomes important to women.

The evaluation showed that the project improved access to clean drinking water, both by reducing the time households spent collecting water and increasing the use of protected water sources, and electricity. It showed increased access to education, health care, and counseling services for women, as well as improved school attendance and quality of learning for girls. The evaluation also showed that the program appeared to have improved villagers’ perceptions of their economic well-being. Women in particular were more likely to have sustained positive economic perceptions, which is demonstrative of the economic, institutional, and social improvements brought to women through participation in NSP. The evaluation found that CDC elections appeared to have increased villagers’ satisfaction with local governance services, increased the provision of these services to women, and increased the proportion of women involved in local assemblies as well. The evaluation concluded that NSP “creates a durable channel for female representation that persists beyond project completion.”
PROJECT CASE STORY 2

Demand-driven Local Development in Haiti

Urban Community-Driven Development Project (PRODEPUR): 2008–

CHALLENGE

Crime and violence pose serious challenges to Haiti’s development. Poor urban neighborhoods in Haiti have been both victims and causes of explosive conflicts that combine demographic, socioeconomic, institutional, and political risk factors. Armed gangs in the country’s major disadvantaged urban areas—particularly those of the capital, Port-au-Prince—have used these areas as a base for kidnapping and other criminal activities. The negative activities of these groups extended across the capital and beyond, with damaging losses to human welfare and economic activity, and fueling high rates of violent crime. Violence and insecurity in Port-au-Prince’s disadvantaged urban areas in particular have undermined Haiti’s political process, fueled conflict, impeded economic activity, imposed costs on residents and businesses, increased migration abroad, and negatively affected development and reconstruction efforts following the 2010 earthquake.

Partly due to this crime and violence, living conditions in Cité-Soleil, Bel-Air, Martissant, and the other violent, impoverished areas in Haiti’s cities have ranked among the worst in the Americas. Amid high unemployment and acute poverty, malnutrition prevailed among residents. Poor access to safe water and sanitation in these slums, as well as a lack of solid waste collection, threatened residents’ health and the environment. There were few public facilities or services and only a nascent presence of state institutions of any kind, including law enforcement.

APPROACH

The CDD approach, which grants control over planning decisions and investment resources for local development projects to community...
groups, was selected as a means to help mitigate conflict and violence in Haiti and to support stabilization in targeted slum areas by quickly providing improved access to basic services and income generation opportunities to beneficiary communities. IDA has committed US$53.2 million to the Haiti Urban Community-Driven Development Project (PRODEPUR in French).

PRODEPUR operated in 10 of 17 “priority zones” identified by the government across five municipalities. The government focused interventions in the priority zones to build political stability by restoring basic services and demonstrating visible improvements for the residents of these particularly volatile neighborhoods, which had high levels of violence and crime. Community-based organizations, through a participatory process, proposed, selected, implemented, and maintained subprojects that improved access to basic and social services. The project also introduced a flexible and participatory demarcation method to identify intervention areas as official demarcations barely existed.

**RESULTS**

PRODEPUR helped improve the living conditions of more than 270,000 persons (as of February 2015) by supporting existing community initiatives to expand access to water, electricity, and sanitation services. The program also helped improve neighborhoods by constructing public spaces and rehabilitating roads and corridors, thus connecting residents to health centers, schools, and other services in nearby communities.

Under the project, 493 subprojects were implemented in targeted areas of Port-au-Prince and three other cities. In response to the January 2010 earthquake, with additional financing, the project immediately prioritized subprojects that addressed the disaster recovery needs of project communities, such as cash-for-work subprojects focused on the removal of debris from public spaces and cleaning of local drainage ditches. These activities provided temporary jobs to over 5,000 people in the neighborhoods of Belair, Cité Soleil, Delmas, and Martissant. The additional financing funded a new component—Housing Repair and Reconstruction—that contributed to community-wide upgrading, including basic infrastructure and services which benefited approximately 24,800 urban households.

PRODEPUR also supported small-scale infrastructure and productive/income-generating subprojects. Force d’Entraide Nationale pour le Développement (FENAD), a small brick-making factory, is one of the completed subprojects funded by PRODEPUR. When FENAD decided to start the business in 2010, it lacked financial and technical resources. Identified by PRODEPUR in 2012 as a promising subproject to support, FENAD put up more than ten percent of the equity capital and received US$20,000 in funding. Thanks to technical and administrative training from the program, workers and senior staff improved both the product and the management of the company.

By 2015, FENAD had grown to 40 workers from the community, 50 indirect workers, 1,500 bricks sold daily, and up to 150,000 Haitian gourdes (approximately US$3,200) in monthly profit. These numbers
true represent a success story for a company that started out with ten workers and sold at most 150 bricks daily. Today, in addition to being self-sustaining, FENAD has also bought its own land. “We worked hard; we paid one million gourdes (roughly US$21,000), using the profit we made,” says Chevelin Nicolas, the FENAD manager, proudly.

PROJECT CASE STORY 3

Inclusive Community and Local Development in Lao PDR

Poverty Reduction Fund II: 2011–

CHALLENGE

Despite rapid economic growth in the last few decades, poverty remains high in Lao People’s Democratic Republic (PDR), especially in rural areas and among ethnic minority groups. Issues of social inclusion and effective service delivery feature prominently in the country’s development discussions. Many Lao citizens who escaped poverty in the recent past have again fallen back below the national poverty line due to economic or climate-related shocks. Considerable differences in poverty rates persist across the different geographic areas and the country’s 49 different ethnic groups.

A lack of basic infrastructure makes it harder for poor communities to escape poverty. For example, it is difficult for children to get an education if there is no school in the village, or no road to the nearest school. It is also harder for villagers to keep their children healthy if there is no health post nearby, or safe water supply. Currently, about 19 percent of Lao citizens are undernourished, and 44 percent of children below five are stunted.

APPROACH

The Poverty Reduction Fund (PRF) was established in 2002 to improve access to and utilization of basic infrastructure and services in the project’s targeted poor communities. This objective will be achieved through inclusive community and local development processes, and the financing of basic social and economic infrastructure with an emphasis on ensuring sustainability.

The second phase of the project (PRF II) began in 2011, and IDA has committed US$36.6 million to the project. PRF II assists the Government of Lao PDR in its ongoing efforts to reduce poverty by financing community infrastructure, building local capacity, and strengthening the ability of local institutions to use participatory decision processes in programming and managing development resources. Some 70% of PRF II beneficiaries are ethnic minorities. As with other CDD projects, the PRF II provides block grants for small-scale tertiary public infrastructure identified by beneficiary villagers themselves, while strengthening and improving processes that enable community members and local government officials to identify needs and address them in a transparent and accountable manner.

RESULTS

As of September 2016, the total number of subprojects implemented under the PRF II has exceeded 1,900, and benefited
about 650,000 people in the rural areas of Laos, or about 10 percent of the national population. More than 90% of subprojects which are more than four years old are still in good or fair condition, and PRF investments are overall equally or more cost effective as compared to similar investments financed by other sources.

A randomized impact evaluation using quantitative and qualitative research methods, and which surveyed around 4,400 households in four project provinces, was conducted to assess the project’s results on access to services, and community perception of participation and governance. The end line survey carried out in 2015 found significant results in treatment villages (as compared to control villages), which include between a 25% and 50% reduction in the time (depending on the season) required to access the nearest village; an almost 6% increase in household access to protected water sources in the dry season; improved perceptions of the quality of school construction; and a more than 9% improvement in the perception of PRF communities having influence in village decision-making. Many of these results were particularly strong for the poorest 40% of households in the project treatment areas.

In July 2016 an additional US$30 million was committed, in response to a request from the Lao PDR Government, to finance the third phase of PRF. It will allow the PRF to scale up some of the results from the earlier phases of the project. In the new phase, the majority of project beneficiaries will be poor ethnic minority groups who live in remote mountainous areas with poor access to infrastructure.