

Can project-funded investments in rural development be scaled up? Lessons from the Millennium Villages Project

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Integrated village-based development projects are experiencing a renaissance in Africa and elsewhere. This has coincided with the apparent inability of many countries to make much progress on the Millennium Development Goals (MDGs). The Millennium Villages Project (MVP), developed by a team of scientists at The Earth Institute, headed by Jeffrey Sachs, is among the most high profile of these village-based projects. It supports an integrated package of proven interventions in health, agriculture and other sectors to lift inhabitants above the poverty threshold. This paper draws on a recent review of the MVP to ask what is needed if the numerous current village-level efforts to improve livelihoods are to have better prospects of being sustained and implemented on a wider scale.

Policy conclusions

- For wider scale, more sustainable implementation, village projects need to:
 - » identify shared goals and test interventions with a view to what government or other implementing agencies can realistically achieve, seeking evidence-informed and cost-effective interventions and approaches to meet the goals;
 - » identify national champions and engage in national policy dialogue to raise awareness about the need for rural interventions;
 - » test the phasing of interventions so that they do not place unrealistic demands on public services;
 - » find ways to surmount (often informal) constraints to poverty reduction such as the role of local institutions, including cultural and gender relations, and powerful individuals in capturing benefits;
 - » contribute to overcoming the institutional constraints which will impede scaling up by preventing redefinition of jobs, reallocation of work, redeployment of staff, expansion of civil service cadres etc.;
 - » identify for the short term how limited capacity in delivery agencies particularly at the village level can be alleviated, possibly by using para-professionals, and for the longer term, commit to capacity building; and
 - » identify and address the upstream investments, rural–urban linkages (e.g. roads and markets), infrastructure, training facilities for front-line staff, and enabling institutions required to scale up village-level investments.
- A well-governed public sector capable of delivering new technologies and services requires competitive salaries and allowances for living in difficult environments, perhaps initially with donor assistance. This needs to be accompanied by close supervisory support and performance monitoring.
- Donor assistance should offer increased resource flows for scaling up MVP-type rural investments, but only in ways that are compatible with sustainability goals, and are integrated with government resources through medium term expenditure frameworks.



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Introduction

The MVP is one among a number of new integrated village-level initiatives that have been established in recent years. These include: the Indian Overseas Bank’s efforts to ‘adopt’ about 100 villages in Tamil Nadu and Orissa and support them with credit as well as training in natural resource management and farming techniques, building technologies, health care and tourism; the Starbucks/CARE joint venture to support integrated development in a number of coffee growing villages in Ethiopia; a three year project involving Barclays Bank/ UK, the Guardian newspaper and Amref (an NGO) to provide support in one Ugandan sub-county covering approximately 25,000 people with investments in health, education, water, sanitation and livelihoods.

The MVP is a demonstration project designed by The Earth Institute at Columbia University (Box 1). What distinguishes it from some other village-based projects includes, among others:

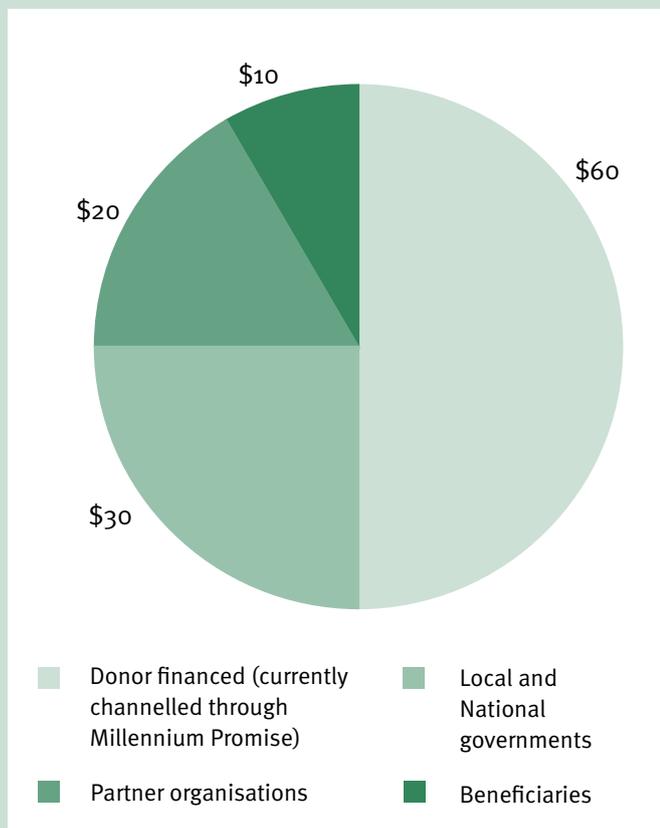
- an explicit commitment to implement interventions linked to the achievement of the MDGs and recommended by the UN Millennium Project;
- a holistic approach to multi-sector investments;
- an intensive five-year investment of \$120 per capita per year over a period of five years;
- a commitment to provide universal access to project services;
- a focus on participatory community decision-making and implementation to ensure local ownership;

Box 1: The Millennium Villages Project at a glance

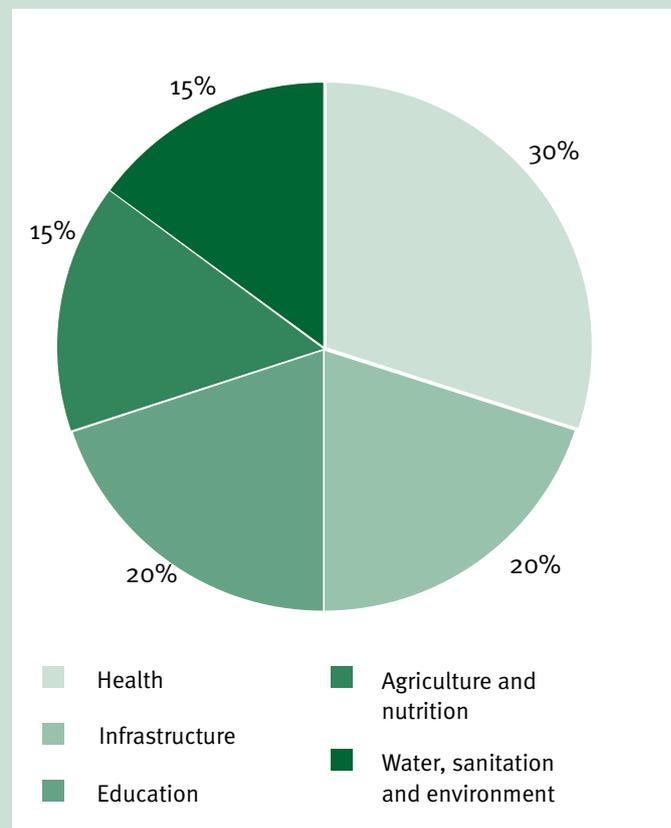
Profile

- Launched on 1 June 2006, initially as a five-year project with a second phase now planned for 2011-2015;
- Covers approx. 500,000 rural people in 80 villages across 14 sites in 10 relatively peaceful and well governed African countries (Ethiopia, Ghana, Kenya, Malawi, Mali, Nigeria, Rwanda, Senegal, Tanzania, Uganda) – each site representing a different agro-ecological zone;
- Each country programme includes a ‘cluster’ of communities of up to 11 villages, with a population of about 5,000 in each.

Financing per capita per year



Budget allocation (suggested)



Source: Sanchez et al., 2007.

- the use of new technologies such as agro-forestry, improved seeds suited to African soils, long lasting insecticide-treated bednets to prevent malaria, antiretroviral drugs for AIDS, and new information and communication technologies; and
- success in achieving high profile among celebrities in the North and among some political leaders in the South.

MVP achievements

During the first half of 2008, the Overseas Development Institute (ODI) undertook a formative review of the MVP in Ethiopia, Ghana, Malawi and Uganda. Emphasis was placed on agriculture and health as representative of the productive and social sectors. The research framework drew on the evaluation criteria established by the Development Assistance Committee of the Organisation for Economic Co-operation and Development.

The review found that, in a short period, the MVP had recorded some remarkable achievements. These include crop yield increases in the range of 85-350% and reductions in malaria incidence of over 50% (Box 2). Sector-specific outcomes, beneficial in their own right, are also generating expected synergies. Agricultural surpluses, for example, are channelled into school meals programmes, helping to increase enrolment, while improvements in health status are reportedly increasing labour productivity. But what are the prospects for sustaining the achievements within the Millennium Villages (MVs) and scaling them up more widely? And what lessons can be drawn for similar initiatives?

Sustaining the Millennium Villages

Stakeholders identify some interventions as sustainable within the MVs, including pot drip irrigation, planting patterns,

Box 2: The Millennium Villages Project at a glance

| | Ethiopia | Ghana | Malawi | Uganda |
|---|--|--|--|---|
| Agriculture Production increases from pre-MVP levels | Cereal crops by 122% (0.9 t/ha to 2.0 t/ha) | Maize by 85% (2.2 t/ha to 4.11 t/ha) | Maize by 350% (0.8 t/ha to 3.6 t/ha) | Maize by 108% (1.9 t/ha to 3.9 t/ha). |
| Distribution of long-lasting insecticide-treated bed-nets cover 100% of MV sites. | | | | |
| Malaria | Almost 50% reduction in malaria cases since inception. | N/A | N/A | 79% reduction in malaria since inception. |
| Maternal, infant and child health | Proportion of deliveries attended by professionals increased from 35% to 51% between 2006 and 2007. 89% of under-5 children are fully immunised. | Between 2006 and 2007, number of women giving birth in health facilities increased by 146%; number of additional women seeking antenatal care increased by 129%. | 45 community health workers provide child health services and antenatal care. | Proportion of deliveries attended by professionals increased from 8% to 70%. 80% of pregnant mothers access antenatal care. |
| Health services | De-worming campaign reached 46,435 residents. Utilisation of Koraro health care facilities increased by 528%. | Number of residents using modern family planning techniques increased by 670% (from 296 to 2,278) between 2007 and 2008. | Since introduction of HIV and TB screening, more than 550 patients started AIDS treatment. | Utilisation rates of cluster health care facilities increased by 230% between 2006 and 2008. |

Source: MVP, 2008

community health action planning and antenatal outreach services. These are all considered low-cost practices, requiring little or no extra effort by government services. Yet, not all interventions are as low cost or capable of being implemented with current public sector staffing. The financial resources available to the MVP are considerably higher than those in typical districts, and enable the project to subsidise inputs or employ highly qualified coordinators and experts. Clearly, there are questions of whether these levels of funding can be sustained for the future, or implemented over a wider area. The Earth Institute asserts that investments in the MVPs can be sustainable if: (i) donors are willing to underwrite \$60 per capita once the MVP withdraws its funding; (ii) host governments are willing and able to support the villages with more funds, and more and better qualified staff than found in other villages; and (iii) the MVP is able to raise an additional \$10-20 per capita per year to pay for management beyond 2011. The funding required to sustain activities in the 80 pilot MVPs is relatively modest, but becomes substantial once taken to scale considering there are approximately 110,000 similar sized villages across Africa in need of comparable rural interventions.

In addition, sustainability will be threatened where the opportunity cost of villagers' time spent participating in committee meetings is high, or where control over project inputs, such as grain banks or vehicles, is perpetuating or exacerbating social divisions and disharmony. Particular effort is needed to put in place the institutional dimensions of achieving and guaranteeing sustainability. For instance, village institutions need to be representative, transparent and capable of equitably resolving conflicts and guarding against elite capture.

Wider lessons regarding the prerequisites for sustainability of village-based initiatives include the need to:

Engage over the long-term: Much-needed targeted investments in rural communities need not await long-term institutional change, but global evidence suggests that, if economic transformation is to be sustained, then appropriate institutional and social change has to be introduced over the medium to long term (OECD, 2006).

Adjust: Flexibility in budget allocation between sectors to accommodate site-specific needs is likely to be required as projects mature, just as interventions may have to be adapted. A higher proportion of resources may need to be committed at levels higher than the village, on e.g. the provision of infrastructure. What may be particularly important is communications infrastructure to allow a search for jobs beyond the village, and the remittance of funds.

Integrate: Integration of project management – including planning, budgeting, executing, monitoring and evaluating – into government systems is a key ingredient of sustainability. Political commitment at district and higher levels has to be won if inter-sectoral collaboration and coordination are to

be achieved in lasting ways – these are not simply technical challenges.

Scaling up village-based rural interventions

'Scaling up' of a successful model can be defined in several ways: as the initiator taking the approach to new areas; as other NGO-type initiatives adopting it; or as expansion implemented by government and non-state actors either separately or in partnership with the initiator or with other NGOs. Our interest here is primarily in expansion implemented by government (and, in certain aspects, the private sector).

Whatever the approach adopted for scaling up, it will depend on increasing resources, primarily from donor sources, but also from governments. Based on the MVP estimate that \$60 are required from donor sources per capita per year over five years to implement the package of interventions and assuming that there are about 540 million people living in rural areas in Africa, total costs for scaling up MVP-type interventions would amount to roughly \$32 billion per year in donor support. This is well within the \$62 billion donors have committed to by 2010 (MDG Africa Steering Group, 2008). However, scaling up pilot village initiatives, such as the MVP, depends on more than financial resources; at least four major requirements need to be met:

Agreement with government on goals, sequences and cost-effective approaches: successful pursuit of scaling up requires interaction with government at several levels. Engagement in national policy dialogue is essential to adapt and embed evidence-based, low-cost rural interventions as a key part of national poverty reduction strategies. Projects can help to start and facilitate this process by identifying and working with national 'champions'. However, governments may find it impossible to commit the skilled staff and funding to permit all goals to be pursued simultaneously.

The low-cost 'starter' elements of projects, preferably requiring little local adaptation, and little change in patterns of public sector behaviour, therefore need to be identified and given priority. Examples of successful interventions initiated by the MVP include pot (pitcher) irrigation and the use of horticultural crops in Ethiopia, the deployment of midwives at community locations outside of health centres and antenatal clinics as part of outreach services in Ghana, single-stem planting and the establishment of drying cribs for maize in Malawi, or comprehensive 'Health Days' to promote greater outreach of health services and an integrated approach to health care and service delivery in Uganda.

Greater joint learning and integration into provincial- and national-level processes will be required, and with both state and non-state partners, both domestic and international, such as agricultural input dealers, national agricultural research organisations and medical associations, as well as relevant ministries. Coordination with government and non-government partners will be necessary at the levels of strategic planning,

personnel policies, funding and possibly M & E. The joint implementation of field-level activities is particularly complex and is unlikely to be a priority.

As part of a scaling up strategy, agreement will also be needed on investment in infrastructure and institutions linking rural and urban areas (e.g. roads, communication and information, power generation and distribution, banking and insurance systems, training and research facilities, etc.). Consequently, a balance needs to be struck between rural and urban investments, and infrastructure and institutional reform, as well as in terms of spatial equity. Agreement on an ideal balance of investments will require much greater discussion and negotiation than simply agreeing that Vitamin A supplementation at village level provides much greater bang for buck than mass influenza immunisation.

Project deliverables are important, but so too are the processes through which those deliverables are generated. These include planning and budgeting, financial management and monitoring and evaluation. Capacity in these areas is often thin at district level, and expertise difficult to retain

Agreement with government on institutional reforms to support scaling: Reforms likely to be necessary relate to: (a) public sector incentives and rewards; (b) progress in effective participatory, equitable and decentralised planning, implementation and monitoring of multi-sector public programmes by accountable and professional district and village administrations, ideally elected as part of local decentralisation processes, as opposed to project committees; (c) business environment improvement (e.g. contract enforcement); (d) development and strengthening of commodity, financial and labour markets; and (e) longer-term challenges, such as clarification of property rights or addressing inequality and adverse gender relations.

The provision of competitive salaries and allowances for frontline government staff, to motivate them to relocate to remote and difficult environments, is likely to be a contentious issue: whilst necessary, the design and introduction of such reforms is fraught with difficulty and places long-term additional demands on government finances. In all events, it will need to be accompanied by close performance monitoring to ensure adequate staff attendance and performance.

Box 3: Bridging the skill gap – examples from the MVP

In Ethiopia, the project has motivated voluntary Community Health Workers (CHWs) and Health Extension Workers (HEWs) in the MVP villages by enabling them to provide treatment for common illnesses (e.g., pneumonia) and facilitating monthly review meetings, capacity building and supply of necessary supplies and equipment. To support community-based workers and transfer skills and practices, nurses are assigned to villages to push forward the government’s health service extension programme in its entirety.

In Ghana, the MVP is facilitating the development of community Action Plans and provides and supervises extension services. Community-based farmer organisations support the work of agricultural extension agents. Farmer Field Schools were established to facilitate technology transfer.

In Malawi, the MVP health staff work hand in hand with government medical assistants and nurses and health surveillance assistants in relation to the mobile clinics bringing much needed skills to rural villages. The project will meet the salary costs (at government rates) of 35 Health Surveillance Assistants (HSAs) for four years to fill vacancies in these critical village level personnel. It is also sponsoring the two year training of 6 HSAs to retrain as nurses and medical assistants. The students have signed bonds with the government agreeing that upon completion of their studies they will work for the public sector for at least a period of five years.

In Uganda, a total of 73 health workers were recruited and deployed at the six project health units, though some were already in post elsewhere so that this does not represent a net gain. Training in basic knowledge and skills was provided to midwives in all the six health facilities.

Bridging the skills gap: government staff skilled in agricultural technology, human health, veterinary care etc. are scarce, and particularly difficult to retain in the more remote areas. Models need to be developed in which these scarce skills are complemented by semi-skilled ‘para-’workers at village level (Box 3). Adequate arrangements need to be made for para-workers to follow simple protocols, obtain advice from the professionals, and refer cases to them. For the longer term, concerted efforts will be necessary to upgrade skill levels.

Outward-oriented learning and policy engagement: Scaling up requires national champions who believe in the project’s philosophy and the need for institutional and structural reforms and who can lobby for funds to pro-poor sectors and rural areas. Dialogue and engagement with policy-makers at various levels, including public affairs initiatives, are needed from project inception. They should not wait until the concepts underlying the project are fully proven as ownership requires early engagement.

The consequences of financing and rolling out interventions that affect different stakeholders, both positively and negatively, need to be understood and taken into account



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in advance. Knowing who is likely to oppose scaling up based on their underlying interests – such as those who might not serve in rural areas or those opposed to raising public sector salaries – will enable village-based projects and their development partners to craft political strategies to deal with resistance, as well as to encourage support.

Conclusions

A number of village-based integrated development initiatives, the MVP among them, have demonstrated how progress can be made in reducing poverty. Although challenging enough in itself, to demonstrate this is the relatively easy part of longer term challenges to make the work sustainable and to scale it up. Sustainability will require not only continued funding (if perhaps at a lower level) but also care to prevent project benefits from being captured by elites. Above all, it will require the flexibility to allow project components to evolve according to local conditions. Scaling up requires close interaction with government at national and local levels in strategic planning (including the planning of infrastructure), performance monitoring, the development of staff resources, and introduction of appropriate emoluments and allowances. Whether and how funds can be obtained for sustaining and scaling up NGO efforts is a moot point. Government resources are inevitably limited, which places a premium on low-cost approaches in which para-professionals can play a role. To rely on donor funding is a tempting option, but unless these are carefully integrated into a medium-term government expenditure framework, may undermine sustainability. There are no ‘silver bullets’ in scaling up those local initiatives that have a good record in poverty reduction. Trade-offs are pervasive, and hard choices have to be made.

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