Overseas Development Institute

Formative Review of the Millennium Villages Project: Synthesis Report

Beyond the village: The transition from rural investments to national plans to reach the MDGs

Sustaining and scaling up the Millennium Villages

Kent Buse, Eva Ludi and Marcella Vigneri

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November 2008

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Cover photo: Schooling in Koraro Millennium Village, Ethiopia. May 2008 by Kent Buse, ODI.

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Acronyms

AEA	Agricultural Extension Agent (Ghana)
AIDS	Acquired Immune Deficiency Syndrome
ART	Antiretroviral Therapy
AWARB	Amansie West Rural Bank (Ghana)
CBO	Community Based Organisation
CD	Community Development
CHEW	Community Health Extension Worker
CHW	Community Health Worker (Ethiopia, Uganda)
CNHDE	Centre for National Health Development for Ethiopia
DFID	UK Department for International Development
ETB	Ethiopian Birr (1US$ = 9.93 ETB, 01.09.08)
EC	European Commission
EU	European Union
FBO	Farmer Based Organisations
FFS	Farmer Field Schools (Ghana)
FGD	Focus Group Discussion
FSP	Fertiliser Subsidy Programme (Malawi)
GDP	Gross Domestic Product
GHC	Ghana Cedi (US$ 1 = 11,773 GHC, 01.09.08)
GNI	Gross National Income
HEW	Health Extension Worker (Ethiopia – government)
HH	Households
HIV	Human Immunodeficiency Virus
HSA	Health Surveillance Assistants (Malawi)
ILO	International Labour Organization
IMF	International Monetary Fund
IRD	Integrated rural development
KII	Key Informant Interview
LLIN	Long-lasting Insecticide-treated Bed-nets
M&E	Monitoring and Evaluation
MCI	Millennium Cities Initiative
MDG	Millennium Development Goal
MoU	Memorandum of Understanding
MSDP	Model Sub-county Development Programme (Uganda)
MV	Millennium Village
MVP	Millennium Villages Project
MWK	Malawi Kwacha (US$ 1 = 144.46 MWK, 01.09.08)
NAADS	National Agricultural Advisory Service (Uganda)
NEPAD	New Partnership for Africa's Development
NGO	Non-governmental organisation
NHIS	National Health Insurance System (Ghana)
ODA	Official Development Assistance
ODI	Overseas Development Institute
OECD	Organisation for Economic Co-operation and Development
OECD/DAC	OECD/Development Assistance Committee
OPD	Out Patient Department
OSI	Open Society Institute
PASDEP	Plan for Accelerated and Sustained Development to End Poverty (Ethiopia)
PfA	Prosperity for All (Uganda)
PRSP	Poverty Reduction Strategy Paper
R&D	Research and Development
SACCO	Savings and Credit Cooperative Organisation (Uganda)
STD	Sexually Transmitted Disease
SWAp	Sector Wide Approach
TB	Tuberculosis
TBA	Trained Birth Attendant
t/ha	Tons per Hectare
UShs	Ugandan Shilling (US$ 1 = 1,656 UShs, 01.09.08)
UN	United Nations
UNDP	UN Development Programme
UNICEF	UN Children's Fund
UNMP	UN Millennium Project
USAID	US Agency for International Development
UYAAS	Uganda Youth Anti-AIDS Association
VCT	Voluntary Counselling and Testing
VHW	Village Health Worker
WDR	World Development Report
WFP	World Food Programme
WHO	World Health Organization

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Executive Summary

Key Messages

The Millennium Villages Project (MVP) has achieved remarkable results and has demonstrated the impact of greater investment in evidence-based, low-cost interventions at the village level to make progress on the Millennium Development Goals.

The MVP points to, but cannot address given its limited budget, the many upstream investments, rural–urban linkages, infrastructure and institutions required to scale up village-level investments.

Countries need to situate MVP scale-up in the context of a national development strategy. Donors should give special support to at least one country, which, having successfully implemented the MVP, now wants to take it to national scale.

Scaling up rural investment depends on donors living up to their commitments. When plans are vertically linked and adequately embedded, donors should support them and the MVP to provide facilitation.

Many countries are not on track to meet a number of the Millennium Development Goals (MDGs) established by the international community. This has serious consequences for the world's poor – many of whom reside in Africa. If Africa's rural poor are plagued by poverty traps, can a concerted effort enable them to break free and propel their communities towards growth, development and prosperity? The Millennium Villages Project (MVP) is an ambitious attempt to test this proposition. In 80 villages across Africa, the project is supporting pilots in which an integrated package of tried and tested interventions – including better seed and fertiliser, insecticide-treated bed-nets and school feeding programmes, among others – has been introduced to lift the inhabitants above the threshold of deep poverty and to set them on the road to development. The MVP aims to demonstrate that meeting the MDGs is possible, across a range of disadvantaged remote rural communities, within the present aid commitments and well within the established timeframe. The experiment is important as it concentrates resources at the community level and prioritises these investments, at least initially, over complementary rural–urban linkages (such as infrastructure and market access) and institutional reform. Although it is early days, as the village project dates from 2006, it is not too early to ask if there is evidence that the approach is working and, more pertinently, whether the model is sustainable and scalable.

To answer these questions, the Open Society Institute (OSI) commissioned the Overseas Development Institute (ODI) in January 2008 to undertake a formative review of the sustainability and scalability of the MVP. As a major financial supporter of the MVP, OSI sought to understand the opportunities, challenges and possible pathways to ensure the sustainability of MVP-supported interventions in the villages and the scaling up of similar investments across Africa.

The review was conducted in Ethiopia, Ghana, Malawi and Uganda, representing different regions and agro-ecological zones across the continent as well as some differences in project implementation. Agriculture and health were selected as representative of productive and social sectors, respectively, that would face distinct challenges and opportunities. Close interaction with the researchers responsible for the design and implementation of the project was maintained throughout the process to ensure credible and forward-looking recommendations. Qualitative insights gathered from fieldwork were complemented by reviews of secondary material.

The analysis has limitations, most notably in the selection of just four countries and two sectors. Generalisation beyond these contexts requires caution. Moreover, the review was carried out at an early stage of the MVP experiment and the full dynamics of the processes may not yet be clear. Despite the best efforts of the national research

teams, the findings rely on a limited number of stakeholders sharing their experiences and perceptions of the MVP. Data collection for the review was carried out only in MVP villages, not in control villages, and no systematic effort was made to assess impact, effectiveness and efficiency of individual interventions.

The Millennium Villages Project

The MVP, the brainchild of the Earth Institute headed by Jeffrey Sachs, endeavours to provide 'proof of concept' of the feasibility of achieving the MDGs through community-led development strategies. The demonstration project aims to achieve quick wins by implementing interventions recommended by the UN Millennium Project in a multi-layered, multi-sectoral and integrated manner. The MVP network spans a variety of technical, scientific and operational tasks across different levels. In each country, highly qualified project staff link the community with local and national governments, non-governmental organisations (NGOs), intergovernmental organisations and development professionals. MDG advisors, based in the UN Development Programme (UNDP) office, provide a bridge between the MVP and national policy-makers. Two regional MDG Centres, in Nairobi, Kenya, and Bamako, Mali, provide scientific, technical and policy support to governments and other stakeholders. Finally, in New York, a team of scientists and managers from The Earth Institute and Millennium Promise, and UNDP coordinate the technical and operational aspects of the project.

A Millennium Village (MV) comprises a group of rural communities of approximately 5,000 people. Each country programme includes a cluster of adjacent communities with up to 11 villages. Launched on 1 June 2006 as a five-year project, as of early 2008, the MVP covered 80 villages across 14 sites in 10 countries in Africa, reaching a total population of around 500,000.

In a typical rural community, the programme invests an estimated average of $110 per capita a year over a five- to 10-year period. An additional $10 per villager per year is budgeted for management. Of the $120 per capita per year, $60 will be MVP-financed. Local and national governments contribute $30, partner organisations $20 and villagers $10. Of these funds, roughly 30% is invested in health, 20% in infrastructure, 20% in education, 15% in agriculture and nutrition and 15% in water, sanitation and environment.

The MVP sees the transformation of agriculture from subsistence to cash crops - accompanied by value-added activities - as central to achieving sustainability, with all that is needed to accompany this transformation, such as the development of agri-businesses and infrastructure and local institution building. By 2011, the MVP expects that national and local governments will provide more and better services to all rural communities, backed by progress on the promised doubling of official development assistance (ODA), to which donors committed themselves in 2005 in Gleneagles. The goal of the project in Years 1 to 5 (through 2011) is to achieve the non-income MDG outcomes, such as progress on health and education, while the focus in Years 6 to 10 will be on securing the cluster-based institutions necessary for long-term economic development. According to the MVP, if donors live up to their promises of increased aid, it should be possible to scale up the experiences of the MVP through six specific pathways.

Achievements of the MVP

Since its launch in 2006, the MVP has recorded remarkable achievements on the ground. Observers cannot fail to be impressed by the establishment, staffing and implementation of a complex demonstration project in largely remote and difficult villages by a dedicated and hard working team of national experts. There is considerable evidence of significant improvements at household and village levels in the health and agriculture sectors, as well as in a number of crosscutting domains. The interventions are valued highly by communities, and a number of low-cost interventions are being adopted and scaled up by districts. MVP interventions are closely aligned with the poverty reduction strategies of governments and facilitate the implementation of those strategies in contexts where governments are constrained from doing

so, although some differences in the strategies used to implement them exist.

Increased yields, thanks to the use of subsidised fertilisers and improved seeds, an intensified agricultural extension system and improvements in natural resource management are particularly visible and spectacular. A more diverse range of crops are grown, contributing to improvements in nutrition and income.

In health, impressive results have been achieved, partly through the intensive use and professionalisation of community health workers. Improved community-based prevention and treatment of common illnesses were found in all MVs, with a special emphasis on malaria, TB and HIV/AIDS. The project supported upgrading and strengthening of clinics and referral services through in-service training, support for additional staff, improvements in physical infrastructure and provision of supplies.

There is early evidence of synergies. For example, increased yields enable communities to support school meals programmes, leading to increased enrolment and better nutrition. The MVP finds that the reduction of the malaria burden has increased the labour productivity of adults, for example at harvest time, and boosted school attendance.

The MVP invests in community development, mainly through on-the-job training and capacity building, and includes government staff in training activities. An array of capacity development and training activities are provided in both agriculture and health. Skills, knowledge and expertise represent benefits that are highly valued and will persist and which, if applied, will continue to make significant contributions towards achieving the MDGs.

A strong sense of ownership of interventions was found among individuals and households in the villages. Evidence of ownership was progressively less visible at the district, regional and national levels.

The model has been adapted in terms of sequencing, sectoral emphasis and policy innovation in response to the preferences of different stakeholders, local circumstances and different administrative and political realities, while at the same time maintaining the principle of multi-sectoral and integrated investments.

MVP-type interventions in rural economies in Africa are patently and urgently needed to achieve the MDGs and the efforts of the MVP are to be highly commended – not least for enabling governments to implement stated policy and for piloting different strategies to enable them to do so more efficiently. As a testament to its early achievements, a number of governments have requested support to replicate such rural investments outside the present MVs. Moreover, additional countries have requested support to launch their own MVs.

The project leadership's continuous advocacy, urging rich countries to live up to the commitments they have made on aid, to finance such interventions more widely to attain the MDGs, and the project's global and national policy dialogue on the art of the possible in relation to difficult reforms, are also highly admirable. The continued and scaled-up success of interventions, as piloted by the MVP, depends on donors meeting their commitments, and it is only right that donors should do so.

Sustaining the Millennium Villages

Stakeholders have identified some interventions as sustainable. Examples include pot drip irrigation, planting patterns, community health action planning and outreach antenatal services. These are considered sustainable because they are low cost and do not require extra efforts by government extension agents. Not all of the interventions are quite so low cost or capable of being implemented with current public staffing. The financial resources available to the MVP are considerably higher than current district budgets. This allows the MVP to employ a staff of highly qualified sector coordinators and a large expert team.

Concerns raised by stakeholders about opportunity costs, such as the time spent participating in committee meetings, require attention. A number

of village residents complained that the modality of project input delivery has, in some cases, perpetuated or exacerbated social divisions and disharmony, for example in relation to control over assets, such as vehicles or grain mills, resulting from unequal power relations within the villages. Moreover, the perceived hurry to move from one project activity to the next has not allowed sufficient time to embed interventions and associated processes and to learn from the experiment.

The investments in MVs can be sustained if: (i) donors are willing to underwrite the $60 once the MVP withdraws its funding, either directly or through national programmes; (ii) host governments are willing and able to support the project with more funds, and more and better qualified staff than apply 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.

Interventions owned by beneficiaries and other stakeholders are more likely to be sustained than those perceived as 'external'. Ownership of project activities was found to be strong at the village level in all four countries, given the tangible benefits. However, there was little evidence in any of the countries that the successes, challenges and issues concerning the MVP are debated in national fora. An MDG advisory post was established in each country's UNDP office to help address this problem, but this approach is not yet having the required traction.

Recommendations relating to sustainability

Long-term commitment. Long-term institutional change should not be used as a pretext to delay much-needed targeted investments in rural communities. Yet in a number of cases, a timeframe of longer than the five or 10 years will be necessary to: (i) deepen efforts made in institutional development and confront deep-rooted social norms, or adverse power or gender relations; (ii) build capacity beyond the village level; (iii) facilitate economic transformation; (iv) learn lessons from the MVP and adjust national policies and service-delivery mechanisms; and (v) mobilise the necessary aid.

Integration. Integration of MVP management – including planning, budgeting, executing, monitoring and evaluating – into government systems is one of the key ingredients of sustainability. Ensuring that achievements are lasting requires recognition that inter-sectoral collaboration and coordination are not simply technically, but also politically, challenging, requiring strong interest from the district leadership.

Strengthening village institutions, rules and procedures and linking them to government structures is part of the integration agenda. Project efforts to ensure that village institutions are representative, transparent and capable of equitably resolving conflicts and guarding against elite capture, both inevitable by-products of external investment, should be redoubled. While project-led, sector specific committees have proven useful in many instances, overall, less emphasis should go on such committees, which often have no official recognition and may not, therefore, be sustainable, doing little to promote local accountability as they are accountable only to the project.

Adaptation of the model. Flexibility in budget allocation between sectors to reflect local conditions and accommodate site-specific needs should be maintained as a guiding principle for the second phase. The balance between interventions and investments in the villages and those made at district or higher levels may need adjustment – although it will be important not to retreat on promises made to the communities. Investments in infrastructure seem to be spread too thinly and threaten to leave present village-level investments vulnerable once the MVP pulls out.

The MVP should explore minimum conditions for sustaining MVP investments. This might involve adaptation of interventions (e.g. different combinations of chemical and organic fertilisers) or service delivery (e.g. staffing quality and quantity), subsidy levels, minimising indirect costs to beneficiaries, etc. As part of the experimentation on developing 'adapted MVs' – assuming that not all of the necessary aid is available by 2015 – the MVP could develop a set of indicators that track progress in creating the conditions for sustainability.

Engage national governments. Governments should be encouraged to allocate resources in: (i) government personnel; and (ii) the required vertical linkages (e.g. roads, markets, electricity) to complement the village-level investments by the MVP, within a publicly justified framework that balances geographical equity considerations with the public interest of sustaining this policy experiment.

Scaling up MVP-type interventions

The MVP has elected to concentrate its efforts at the village level to demonstrate that the MDGs can be reached in rural communities in a short period of time. Testing the viability of a vertically integrated model to deliver sustainable development outcomes is outside the current financial and staffing envelope of the MVP. We recommend that the Open Society Institute, other private philanthropists, donors and the private sector consider funding to expand these complementary investments in a number of the present MVP countries over the medium term.

The project scale-up depends on ensuring the sustainability of interventions (e.g. bed nets) as well as best practices (e.g. home visits by community health workers) as discussed above. MVP interventions are generally well aligned with government policies and those that are cost-effective ought to be scaled up within national programmes. Scaling up support for rural investment entails increased funding, a supportive national policy framework and learning from the pilot villages. It requires a focus on additional factors external to the target villages and is predicated on more and better aid and the ability of governments to absorb it. The MVP expects progress on the committed doubling of aid to Africa between 2005 and 2010 but recognises that, given the recent trajectory of aid, this is uncertain.

Recommendations on project scale-up

Build upon the MVP model. The move from sustaining to scaling interventions should be undertaken in a sequenced manner. Interventions that need little adaptation to local conditions, with few or minor reforms to institutions, should be scaled up first. Most prominent are those that have been replicated without additional funding – for example, pot drip irrigation and school feeding programmes once surplus yields are produced. A second set of interventions is the provision of competitive salaries for frontline government staff that motivate them to work in remote and difficult environments. It may, however, take time to convince and enable governments to support such reforms and deal with the ensuing political opposition – for example to higher salaries.

Include more outward oriented learning and policy engagement. Successful rural development programmes progress through three stages in moving from being pilots to being delivered at scale. The MVP is currently in stage one, that of learning to be effective. The project should experiment and identify which of the interventions are most responsive to beneficiaries' needs and contribute most to reaching the MDGs in different contexts. In stage two, that of learning to be efficient, which could start towards the end of the present phase (in 2011), the focus should be on simplifying and adapting the programme, and adjusting the manner in which interventions are delivered, to ensure that they are cost-effective in a particular context. Stage three, expansion, should focus on identifying ways to reduce operating procedures to those strictly necessary and to simplifying procedures so that they can be operated by the staff likely to be available in sufficient numbers at local and district levels. During all three stages, the learning process should involve identifying which of the second-order investments and institutions pose the most serious bottlenecks to successful implementation.

When moving to scale, an 'enhanced MVP' should also be concerned with managing the political consequences of financing and rolling out interventions that affect the lives of different stakeholders, both positively and negatively. A clearer understanding of the politics of who is likely to oppose project scale-up on the basis of their underlying interests would enable the project to craft political strategies to deal with possible opposition, as well as to encourage support.

Sustaining the achievements and taking them to scale beyond the present clusters require national champions who believe in the project's philosophy and the need for the institutional and structural reforms, and who are capable of taking the MVP agenda forward over the longer term, lobbying for funds for pro-poor sectors and rural areas. Champions should help to raise the project's visibility through any number of nationally appropriate means, not just discussions in development fora but also through advocacy campaigns. Public affairs and ongoing engagement with policy-makers at various levels should not wait until the full results of the proof of concept experiment are available, but should receive early attention.

As interventions are scaled up, much greater joint learning and integration into processes at regional and national levels will be required. This will entail more interaction with additional state and non-state partners, both domestic and international, such as agricultural input dealers, national agricultural research organisations and medical associations, to name a few. The MVP requires additional resources to establish and cultivate functional working relationships with these partners.

Move beyond the model. While recognising that the MVP's strategy includes some upstream elements, its scale-up will require moving beyond the focus on village interventions towards making upstream investments in the expansion of human resources, strengthening vertical rural–urban linkages and reforming and strengthening institutions.

The following complementary investments are important determinants of the sustainability of MVP interventions and their successful scale-up:

- Production, training and deployment of front-line staff at the intensity and skill level the project demonstrates is required;
- Infrastructure and institutions linking rural and urban areas (e.g. roads beyond the village level, communication and information, power generation and distribution, banking and insurance systems, training and research facilities ranging from vocational training institutes to universities, etc.); and
- Ongoing support for institutional reforms related to: (a) progress in effective participatory, equitable and decentralised planning, implementation and monitoring of multi-sector public programmes at the district and village levels; (b) improvement in the business environment to support the emergence of the vibrant private sector that is necessary to drive economic growth; (c) the development and strengthening of commodity, financial and labour markets; and (d) longer-term challenges, such as clarification of property rights to support pro-poor growth and provide the necessary security for small-scale farmers, or addressing inequality and adverse gender relations.

The MVP architects acknowledge that village-level investments are just one piece of the larger development puzzle and support auxiliary efforts and champion other development partners to invest more heavily in these areas.

Past experience with integrated multi-sectoral development, taken to scale, suggests that it is administratively demanding and requires close coordination across ministries, particularly at the district level, and carries high transaction costs. This will inevitably require the use of government systems which, even in the relatively well-governed countries selected by the MVP, require considerable capacity building and institutional reforms. Project deliverables are important, but so too are the processes through which those deliverables are generated. Such processes include planning and budgeting, financial management and monitoring and evaluation (M&E). Capacity in these areas is often thin at district level and expertise difficult to retain, something donors need to address.

When governments want to emulate the MVP by making increased investments in basic development interventions at the village level, donors should support them. Moreover, both governments and donors should consider how such investments can be sustained and scaled up. This will involve consideration of the adaptation of MVP interventions and the complementary investments. Deliberation on scaling up should take

place in wider policy debates, including Poverty Reduction Strategy (PRS) dialogues and linked to relevant pan-African initiatives. There is also a role for civil society to hold governments to account for progress on MDGs and to monitor the plans to take the project to scale. It would be useful to develop an analytical plan that sets out both direct investments at village level plus complementary investments in infrastructure, enhanced public sector capacity at district and field level and institutional reform. This would help to identify the obstacles, resources and policy reforms needed – in the context of MDG road-maps. The same plan, implemented through government mechanisms but with private sector participation, can help set targets and milestones to allow stakeholders – including civil society – to monitor progress.

In this context, an important role for the MVP in particular, alongside its support to the ongoing implementation and demonstration of the integrated package of investments in the current MVs, is in its continued engagement in national and global policy dialogues, to share the experience that it has gained through the village-level interventions to date and in advocating the merits not only of MVP-type investments, but also of complementary investments. It would be unrealistic to expect the MVP to engage at the level required within the context of its present budget and, therefore, further funding is merited.

Conclusions

The MVP has demonstrated the impact of greater investments in evidence-based, low-cost interventions at the village level on progress towards the MDGs. Efforts need to be made to sustain these commendable pilots as important national policy experiments and to adapt them as required. The MVP points to, but cannot address under its funding limitations, the many complementary upstream investments required to sustain and scale up village-level interventions. We advocate that, in those sites where governments have expressed their intention to introduce or scale up MVP-type investments, development partners should support them with additional finance. Such efforts should be located within national development strategies, such as poverty reduction strategy (PRS) processes and national development plans and, indeed, should be key components of them. While we are not advocating more talk and less action, we think that these plans need to be developed, implemented and monitored on the basis of an ongoing dialogue and analysis, involving a watchful civil society, in the wider political and institutional environment. There is much that can be learned from piloting a more vertically integrated model in keeping with the ambitions of the planners of the MVP to support communities to achieve the MDGs.

Summary recommendations

For the MVP:

- Invest time in communicating more at national level. Look for local champions who can take the idea forward as a personal commitment;
- Engage in national policy dialogue and planning that will help adapt and embed science-based, low-cost rural interventions as a key part of national MDG and poverty reduction strategies; and
- Provide, at least in some pilot countries, support to help governments and development partners plan for scaling up.

For governments:

- Learn from the MVP. Governments should be ambitious and plan to scale up the things that work in their countries – with a special focus on the vertical linkages and institutional reforms required to sustain rural investments; and
- Request development partners to supply the additional funds required to scale up MVP-type rural investments.

For donors:

- Engage with, and support, governments that want to introduce or scale up MVP-type rural investments. Mali's plan to expand the programme to 166 communes makes it a promising candidate for donor action;
- In scaling up the village-based interventions, place specific emphasis on the vertical linkages and institutional reforms that are required to support village-level investments;

- Support governments that want to join or emulate the MVP by providing financing and by engaging in PRSP policy dialogue to identify necessary complementary investments to be embedded in national strategies and linked to relevant pan-African initiatives;
- Live up to overall aid commitments, on which the recipient countries must rely to achieve the MDGs;
- Recognise that, while all innovations imply risks, the risks of not acting – in terms of the continuing costs of poverty to individuals and nations – are unacceptable in the 21st century.

1. Introduction and overview

The Millennium Development Goals (MDGs) are the most determined effort in history to galvanise international action around a set of universally agreed development targets. Achieving these and other such goals in Africa holds the promise of saving millions of lives, addressing illiteracy, hunger and malnutrition, ensuring that all children have access to education and health and are enabled to lead productive lives (MDG Africa Steering Group, 2008). At the international level, the MDGs have helped shift the development policy from the Washington Consensus back to a human development agenda (Braunholz-Speight, 2007).

Substantial progress has been made in achieving the MDGs, particularly in countries where commitment from the top leadership is backed by appropriate policies and public expenditure. Progress is also enhanced when efforts are made across a number of mutually reinforcing goals (Shepherd, 2008). However, many countries remain off track to meet the targets by 2015. This is particularly true in large parts of Africa, at a time when development efforts are beset by climate change, rising food and oil prices, as well as the continuing threat of chronic poverty, growing inequality, poor governance and the extreme problems facing the most fragile states, where the necessary leadership is often lacking (ibid).

In recent years, important success stories have emerged from across Africa. Select goals will be met in many countries, thanks to carefully designed programmes and sound policies that are backed by strong government leadership and support from the donor community. The primary responsibility for achieving the MDGs, however, remains with African governments. Substantial progress has been made to-date to strengthen the policy and regulatory environment across Africa and to mobilise the private sector and non-governmental organisations (NGOs). African governments and regional bodies, such as the New Partnership for Africa's Development (NEPAD), show that progress can be made in attaining the MDGs if the global partnership agreed to at the Monterrey Conference on Financing for Development is implemented (MDG Africa Steering Group, 2008).

The MDG Africa Steering Group has identified a list of concrete opportunities to implement and scale up interventions in support of the MDGs in areas including agriculture, food security and nutrition, education, health, infrastructure and trade facilitation, as well as strengthening national statistical systems to accurately monitor progress towards the MDGs. Financing all these interventions cannot be achieved through domestic resources and private sector contributions alone. Overall external public financing for development in Africa needs to rise to US$72 billion per year to support the achievements of the MDGs. Of this, roughly US$62 billion (at 2007 prices) will come from G8 and other donors, while the remaining amount needs to be met through commitments made by non-OECD (Organisation for Economic Co-operation and Development) donors, improved South–South collaboration, private philanthropy and public–private partnerships. The MDG Africa Steering Group also notes (2008) that the quality of aid is important, as outlined in the Paris Declaration on Aid Effectiveness.

Few would deny the seriousness of Africa's problems and the need to intervene, but some question whether a very large injection of aid will make much of a difference (Killick, 2005). Issues raised relate to excessive dependence on aid, diminishing returns to aid, absorptive capacity challenges, macroeconomic problems, political accountability and moral hazard, the danger of undermining aid effectiveness and using aid from OECD countries as an easy option for not addressing the fundamentals such as agricultural protection or man-made environmental threats (ibid).

It is against this backdrop that the Millennium Villages Project (MVP), a partnership initiative designed to identify and scale up solutions to achieve the MDGs, was launched in 2006. The project aims to highlight the synergistic value and feasibility of simultaneously implementing an integrated package of community-based investments

over a period of five years. It endeavours to provide a 'proof of concept' on how it is possible to translate words into ground-level results through broad-based, community-led development strategies. The MVP takes the G8 Gleneagles Summit commitment (2005) to double official development assistance (ODA) between 2005 and 2010 and aims to demonstrate how that financial support could be used to accelerate achievement of the MDGs.

The experiment is important as it concentrates resources at the community level and privileges these investments, at least initially, over complementary rural–urban linkages and institutional reform. Although it is early days, since the village project dates from 2006, it is not too early to ask if there is evidence that the approach is working and, more pertinently, whether the model is sustainable and scalable.

To answer these questions, the Open Society Institute (OSI) commissioned the Overseas Development Institute (ODI) to undertake a formative review of the sustainability and scalability of the MVP. As a major financial supporter of the MVP, OSI sought to understand the opportunities, challenges and possible pathways to ensure the sustainability of MVP-supported interventions and the scaling-up of similar investments across Africa.

This report synthesises findings from four country reports and a Synthesis Workshop held in London in June 2008. The second section of the report provides some background material on the logic, structure and processes of the MVP, including its evolving thinking and approach to sustainability and scaling-up. This is followed by a section setting out the nature, scope and methods of the review. The following three sections present and discuss findings and make recommendations in relation to: (i) the achievements of the MVP; (ii) progress, constraints and opportunities to foster sustainability; and (iii) scaling-up. The report concludes with a summary and the presentation of key recommendations.

A great deal of material is included in annexes in an attempt to limit the length of the report. These include details on country-level findings and lessons from past experience with integrated rural development.

2. Background[1]

2.1 The Millennium Villages Project: A 'proof of concept'

A background paper on the core concepts underlying the MVP lays out the central premise behind this initiative (The Earth Institute, 2007a). The MVP was conceptualised in response to the fact that:

> '[...] dozens of African countries have made enormous strides in preparing their "MDG-based" national strategies, but not a single one is yet being implemented.'

Researchers from The Earth Institute suggest that the critical barrier to the realisation of the MDGs in rural Africa is a lack of (financial) resources.

The MVP endeavours to provide a 'proof of concept' on how it is possible to translate words into ground-level results, consistent with achieving the MDGs through broad-based, community-led development strategies. The MVP takes the G8 Gleneagles Summit commitment (2005) to double official development assistance (ODA) between 2005 and 2010 and aims to demonstrate how that financial support could be used to accelerate achievement of the MDGs.

Four key premises guide the Millennium Villages model (The Earth Institute, 2007a):

- Africa's long-term and self-sustaining economic development requires a combination of public and private investments. To this effect, the MVP supports a basic set of integrated, science-based and community-led investments in the following sectors: agriculture; education; health; energy; infrastructure; and environmental management;
- A major boost in agricultural productivity is a necessary condition for rural sub-Saharan Africa to escape extreme poverty. Therefore, the MVP puts its intervention priorities on science-based investments to boost yields first in staple crops, and subsequently in cash crops;
- The MDGs must enable the empowerment of communities on their own terms, with their own reference points, and under their own effort; and
- The lessons learned from the villages must inform national policy and strategy-making processes.

2.2 The investment package: Financing and allocation

The baseline budget draws from the bottom-up, needs-based MDG methodology developed by the United Nations (UN) Millennium Project. In its final report to the UN Secretary-General, 'Investing in Development', the UN Millennium Project estimated that a typical low-income country in sub-Saharan Africa needs to increase public investments to approximately US$75–80 per capita per year as of 2006, rising to US$125–160 by 2015. In a typical rural community, this implies average annual investments of roughly US$110 per capita[2] over a five- to 10-year period (The Earth Institute, 2007a). On top of this, an additional US$10 per villager per year is required for establishing, training and operating the village-based systems (Jeffrey Sachs, personal communication, 31 July 2008).

The financial planning of the MVP assumes that, in a typical sub-Saharan African economy, US$60 of the US$120 per capita/year will need incremental donor finance. In the MVP itself, resources are channelled through Millennium Promise (or the UN Development Program – UNDP). Local and national governments contribute US$30, partner organisations (e.g. bilateral and multilateral organisations, non-governmental organisations

1. The information contained in this section is based largely on MVP documentation and clarifications provided by the MVP team.

2. In 2005, ODA per capita was: US$ 24.15 in Ethiopia, US$ 49.08 in Ghana, US$ 43.32 in Malawi, and US$ 41.32 in Uganda (UNData, data.un.org, accessed 30. August 2008).

such as NGOs, private corporations, etc.) contribute US$20 and villagers US$10.

Approximate funding requirements for African villages, which serve as a flexible and context-specific guide for resource allocation in the MVP are: 30% to health; 20% to infrastructure (i.e., energy, transport and communications); 20% to education; 15% to agriculture and nutrition; and 15% to water, sanitation and environment (Sanchez et al., 2007).

2.3 The design of Millennium Villages and clusters

The MVP applies a multi-layered, multi-sectoral and integrated approach which attempts to link to district, national and global strategies. Described by its designers as a 'network initiative' rather than a circumscribed project, the MVP formally includes three core partners: The Earth Institute at Columbia University; Millennium Promise; and UNDP. In practice, the initiative interfaces with policy and programme activities of a variety of government ministries at different levels, as well as with a growing number of NGOs and the private sector. Its leadership, most notably Jeffrey Sachs, participates in high-level national and global policy discussions, as well as in advocacy and fundraising for investments towards achieving the MDGs. The MVP is also described as a co-learning experiment and an adaptive learning process, through which the project model can be adjusted to changing policy circumstances and opportunities (e.g. the potential launch of a new international financing mechanism for agriculture).

A Millennium Village (MV) comprises a group of rural communities, generally referred to as a 'village', intended as a social and budgeting unit of approximately 1,000 households or 5,000 people. A 'cluster' is a group of typically adjacent villages. Millennium Village 'clusters' include up to 11 villages, consisting of a total target population of up to 55,000 individuals.

The selection criteria for identifying the initial MV sites are well-documented in a background concept note to the project (The Earth Institute, 2007a). The following three conditions apply as minimal requirements for any village to be considered 'eligible' to host the project: (i) located in a hunger hotspot as defined in the UN Millennium Project Hunger Task Force report (2005); (ii) representing one of the 12 principal agro-ecological zones and farming systems (Dixon et al., 2001, in CIESIN, 2006); and (iii) located in countries with politically stable governments committed to achieving the MDGs.

There are three types of Millennium Villages:
Millennium Villages 1 (MV-1s) are those that include an additional research component to their activities, of US$50/capita/year above and beyond the standard US$1.5m budget[3] over five years as described above. These are mostly financed through the Government of Japan (through its Human Security Trust Fund) and private philanthropic donors (through The Earth Institute at Columbia University) (Millennium Villages, 2007).

Millennium Villages 2 (MV-2s) are those that are financed by private philanthropists through Millennium Promise and do not include a research component. In most cases, the MV-2s are located in 'clusters' around the MV-1s.

Millennium Villages 3 (MV-3s) are those where MVP-type interventions are financed and implemented by third parties.

The multi-country MVP was formally launched on 1 June 2006 as a five-year project.[4] The first Millennium Village, however, was established in Sauri, Kenya in 2004, followed by that in Koraro, Ethiopia, in 2005. As of early 2008, the MVP

3. The MVP contribution over five years is approximately US$1.25 m for direct investments and US$250,000 for management based on a population of 5,000.

4. The initial five-year timeline was chosen as a practical rather than conceptual choice. Five years was considered the longest appropriate time horizon to secure financial commitment of donors, especially private donors (Steve Wisman, personal communication, 30 August 2008).

covers 12 Millennium Research Villages (MV-1s) and 68 Millennium Villages (MV-2s) across 14 sites in 10 African countries.[5] The MVP is described as a 'demonstration project' designed to initially achieve 'quick wins' by implementing interventions as recommended by the UN Millennium Project to improve the wellbeing of the beneficiaries and accelerate progress towards the MDGs (see Annex 2). The quick wins of the first two years are to be complemented by building the longer-term capacities of communities over the five years of the project.

In addition to the package of interventions outlined in the project's handbooks, the MVP has a limited budget to support work on local infrastructure such as roads, connections to the electricity grid or installation of solar energy systems. Moreover, private sector partners are developing infrastructure in a variety of ways. It was reported, for example, that Ericsson is working with local private providers to introduce information and communication technology connectivity to MV sites in all MVP countries. The MVP has been working with Swiss Re to introduce new climate insurance instruments to a number of sites. New agricultural credit programmes are also being introduced throughout the project. Moreover, the MVP's approach to infrastructure is fully aligned with the global policy processes and priorities for infrastructure, including the UN Secretary-General's MDG Africa Steering Group (Steve Wisman, personal communication, 30 August 2008).

2.4 The expert network and management structure

The MVP is a complex network of experts spanning a variety of technical, scientific and operational tasks across different levels. The project's country-based staff are the key link among the community, the local and national governments, local, national and international NGOs, intergovernmental organisations and development professionals. They receive scientific backstopping from The Earth Institute.

A typical Millennium Village cluster supports three key managerial positions: (i) Team Leader; (ii) Science Coordinator; and (iii) Operations Manager, with one of the latter two positions often serving concurrently as team leader. In each cluster, the project is facilitated by a multi-sector science and development team, composed of a set of up to six sector coordinators and six sector facilitators. Some of these positions are filled by seconded government employees, such as agriculture extension officers or community health workers (CHWs) who were already performing similar tasks (The Earth Institute et al., 2008).

At a higher level in the MVP network structure sit MDG advisors, based in the country's UNDP offices. These advisors provide technical backstopping in the field and also facilitate the flow of information from operations in the cluster to national-level stakeholders. In addition, but independently of the advisor, the UNDP office provides financial management and administrative and 'procurement' services for the MVP project in eight of 10 project countries.

At the regional level, the MVP network relies on two MDG Centres (Bamako, Mali and Nairobi, Kenya). The mission of these centres is to provide scientific, technical and policy support to governments and other stakeholders to plan, budget and achieve the MDGs (MDG Centre, 2007).

A team of scientists and managers from The Earth Institute and from Millennium Promise, both in New York, coordinates respectively the technical and operational aspects of the project.

2.5 The MVP's thinking on sustainability and scalability

The project has devoted much attention to the challenges of ensuring sustainability and scale-up. This is best documented in a concept note (McArthur and Sachs, 2008) and in the handbook manual describing various implementation aspects of the project (The Earth Institute et al., 2008).

5. The sites are in Ethiopia (Koraro), Ghana (Bonsaaso), Kenya (Dertu and Sauri), Malawi (Mwandama and Gumulira), Mali (Tiby and Toya), Nigeria (Ikaram and Pampaida), Rwanda (Mayange), Senegal (Potou), Tanzania (Mbola) and Uganda (Ruhiira).

2.5.1 Sustainability

According to the MVP designers (The Earth Institute, 2007a),

> 'sustainability within the Millennium Village Project has one precise meaning: When the five-year MV funding stops as of 2012, the MVs should be able to continue their economic progress without a loss of momentum, a drop in living standards, or a decline in social services.'

It is further stated that

> 'the organisational side of this definition implies that that community and local governance and service delivery mechanisms are functioning smoothly and reliably as of 2012, coordinated as appropriate with national policy and administrative processes. On the financial side, this definition of sustainability does not mean that the villages will be self sufficient economically, nor (still less) that social services within the MVs such as health and education should be self financing. The MVs and the social sectors certainly will not be self sufficient in this sense for the foreseeable future.'

Central to achieving sustainability is the conversion of agriculture from subsistence to cash crops complemented by value-added activities with all that is needed to accompany this transformation. Sustainability will, however, be achieved through several means in addition to the boost in agricultural productivity and the commercialisation of agriculture (The Earth Institute, 2007a):

The MVP sees transforming agriculture from subsistence to cash crops accompanied by value-added activities as central to achieving sustainability, with all that is needed to accompany this transformation, such as the development of

- National and local governments will by 2011 upgrade their own community-level service provision as part of the national MDG strategies, backed by increased ODA;
- Official donors will make up part or all of the financing gap in at least some of the sites, for example when MV clusters become part of broader donor-backed scale-up programmes; and
- The MVP will work with local and international NGOs to encourage the continuation of the NGOs' US$20 per capita per year contributions to the MVs after 2011.

More recently, the MVP designers have emphasised that the project should be considered as a 10-year endeavour through to 2016. In Years 1–5 the major goal of the MVP is to achieve the non-income MDG outcomes. In Years 6–10, the focus will be on consolidating the interventions and MDG achievements from Phase 1. To sustain these achievements, the MVP role in its second phase will concentrate on advancing progress in: (i) commercialisation of agriculture; (ii) new business development (especially in agribusiness); and (iii) the expansion and consolidation of key institutions (e.g. community-based management, farmers' cooperatives and microfinance).

The project's operational sustainability is divided into two parts: (i) public service delivery; and (ii) self-sustaining private sector income generation. Each of these in turn requires consideration along two dimensions, first institution building and second financing (McArthur and Sachs, 2008).

Public service delivery

Institution building. The key organisational challenge is to identify the community governance structure that can continue to administer the multi-sectoral services introduced by the MVP. It is suggested that this will be done by: (i) a community management team; (ii) sector committees that govern community decision making and programme monitoring; (iii) mechanisms to coordinate between community administration and higher levels of government; and (iv) an emphasis on women's representation at all levels.

Sources of finance. Low-income communities are too poor to afford basic health, education and other key public services. The Gleneagles ODA promises of roughly US$100 per African per year (in current US$) are essential for providing these services. If the ODA commitments do not come to fruition, then scaling-up will not succeed. The MVP program team plays an ongoing role in

contributing to global advocacy, so failure would not be for lack of effort.

Self-sustaining income generation

Institution building. Agriculture is the dominant economic activity in rural sub-Saharan Africa. The current period (Years 3–5 of Phase I) emphasises a multi-pronged approach to supporting farmers' and private sector opportunities by means of developing a novel approach to farmer cooperatives through a so-called Millennium Farms effort that will support agricultural finance and diversification. This programme component aims to be introduced by the end of the third year of the project's life. Another crucial component of income generation is the spread of microfinance institutions in the MVs. The MVP goal is community-wide access to financial services by the end of Phase I.

Sources of finance. The first phase of MV support to agriculture emphasises subsidies – or public finance equivalents – for basic inputs. As the MVP phases out its subsidies, the aim is to replace these partly with national-level subsidies and partly with a transition from subsidies to seasonal input credits, provided by private investors, farmer cooperatives, or microfinance institutions.

2.5.2 Scaling-up

The MVP designers see good prospects for scaling up community-based investments and institutions rapidly and in an organised manner. They propose the following six scale-up pathways, but with the clear proviso that the feasibility of each one is limited by the availability of donor finance (McArthur and Sachs, 2008):

- *Expansion to new MV sites*. Based on the experience of the MVs, several governments are preparing plans for replication of the MV approach in other parts of the country.
- *Targeted support to the poorest communities*. The MV approach of cross-sectoral targeting is a practical way of reaching the poorest people in a systematic manner.
- *National expansion of specific successful interventions*. Often, a country's policy environment is ripe for the expansion of a specific MV-piloted intervention before it is ready for broader scale-up of multi-sectoral community approaches. The proliferation of global sector-specific funding mechanisms will amplify 'vertical' sector support.
- *Rounding out service delivery among existing community development programmes to 'MDG-ise' them*. The MVs can be used as a concept, not only as a project, to help other organisations identify opportunities for sectoral expansion in their initiatives, and to partner with complementary organisations.
- *Expansion of existing clusters to larger administrative scales, such as Millennium Districts*. The incremental administrative challenge is to deliver services at a higher administrative level, such as a district or province. This implies replicating village-level service delivery, and also adding the region-level service delivery (such as roads, electricity grids and health referral systems).
- *Private-sector collaborations*. There is clear readiness of the private sector to participate in the local scale-up of the MVs. Many private businesses are participating in the MV initiative, looking for opportunities to engage in corporate social responsibility and to advance the MDGs in areas where they are operating.

The MVP approach provides an operational framework for ensuring that national-level sector programmes, backed by increased ODA, are coherently administered at the community level. The local implementation of these efforts requires increased capacity in the villages (such as skilled community health workers or community agriculture workers). The MVP acknowledges that it is only with this adequate human resource stock that the community will support and absorb effectively the increased financing. In order to promote community management skills, the MVP places special emphasis on professional training of the multi-sector management team as well as on on-the-job training of community-based staff (e.g. in health, agriculture and infrastructure). The 'professionalisation' of community-based expertise features among the project's key recommendations, for example by putting

community health workers on a proper payroll and in-service training programmes.

Scaling-up is also to be facilitated by other initiatives associated with The Earth Institute network. For example, the Millennium Cities Initiative (MCI) attempts to create synergies with the MVP by identifying commercially viable investment opportunities in and around Millennium Cities (secondary urban centres, often regional capitals located near MVs) (MCI, 2008). In particular in identifying investment opportunities and building entrepreneurial capacity, the MCI seeks to establish and strengthen agriculture-based value chains. For example, by improving market links to reach out to cocoa producing areas in the Ghanaian MVs, the MCI intends to provide better opportunities for commercial production of cocoa by linking producers on more favourable terms with processing/exporting opportunities in Kumasi.

3. Task, approach and scope of the review

3.1 The task

The ODI was commissioned by the OSI to conduct a formative review of the political sustainability and scalability of the MVP. The OSI seeks to ensure the success of the project, yet its concern with this review did not regard whether or not the bundle of interventions and investments was effective or efficient in achieving the project's stated goals. Rather, the aim was to provide an informed account of what a sustainable and scaled-up MVP might look like given the project achievements since its inception in 2006. The broad objectives of the exercise were to: (i) identify and assess the achievements, strengths and challenges associated with sustaining the delivery of an integrated package of interventions in rural Africa to achieve the MDGs; and (ii) acquire a clearer understanding of those factors that would enhance the prospects of sustainability within and scalability beyond the project sites. The OSI, therefore, did not task the ODI to assess effectiveness and efficiency or impact of individual interventions, as this was considered premature.

3.2 Conceptual framework of the review

The Evaluation Quality Standards, published by the Development Assistance Committee of the Organisation for Economic Co-operation and Development, (OECD/DAC) (DAC, 2006) proposes the application of five criteria to the evaluation of development assistance: relevance; effectiveness; efficiency; impact (intended and unintended); and sustainability.

For this review, the DAC standards concerning on effectiveness and efficiency are less relevant. There is little doubt that, under a range of conditions, the MVP interventions will be effective and efficient and will contribute to attaining the MDGs in its targeted communities. For example, the application of fertiliser will increase agricultural yields, the provision of school meals will improve school attendance and child nutritional outcomes and the provision of long-lasting insecticide-treated bed nets to families will reduce the incidence of malaria – and do so in a manner which is cost-effective. The MVP has developed an elaborate M&E framework with a series of sector-specific causal pathways, and has collected baseline data to subsequently undertake rigorous analysis of the impact of the set of MVP interventions as the project evolves. An evaluation along those lines was beyond the scope and outside the terms of reference of this review.

The remaining DAC criteria are pertinent to the review. These are: (i) relevance; (ii) impact; and (iii) sustainability. The concept of relevance is broken down into ownership and alignment. Two years after the project started, it was too early to assess impacts of project interventions. However, we focused on necessary second-order investments which we consider essential for the interventions to have sustained impacts, termed linkages. Each of these concepts (see Annex 3.1) in turn has implications for the sustainability of the MVP within MVs and, consequently, for the widespread scaling-up of MVP-type interventions.

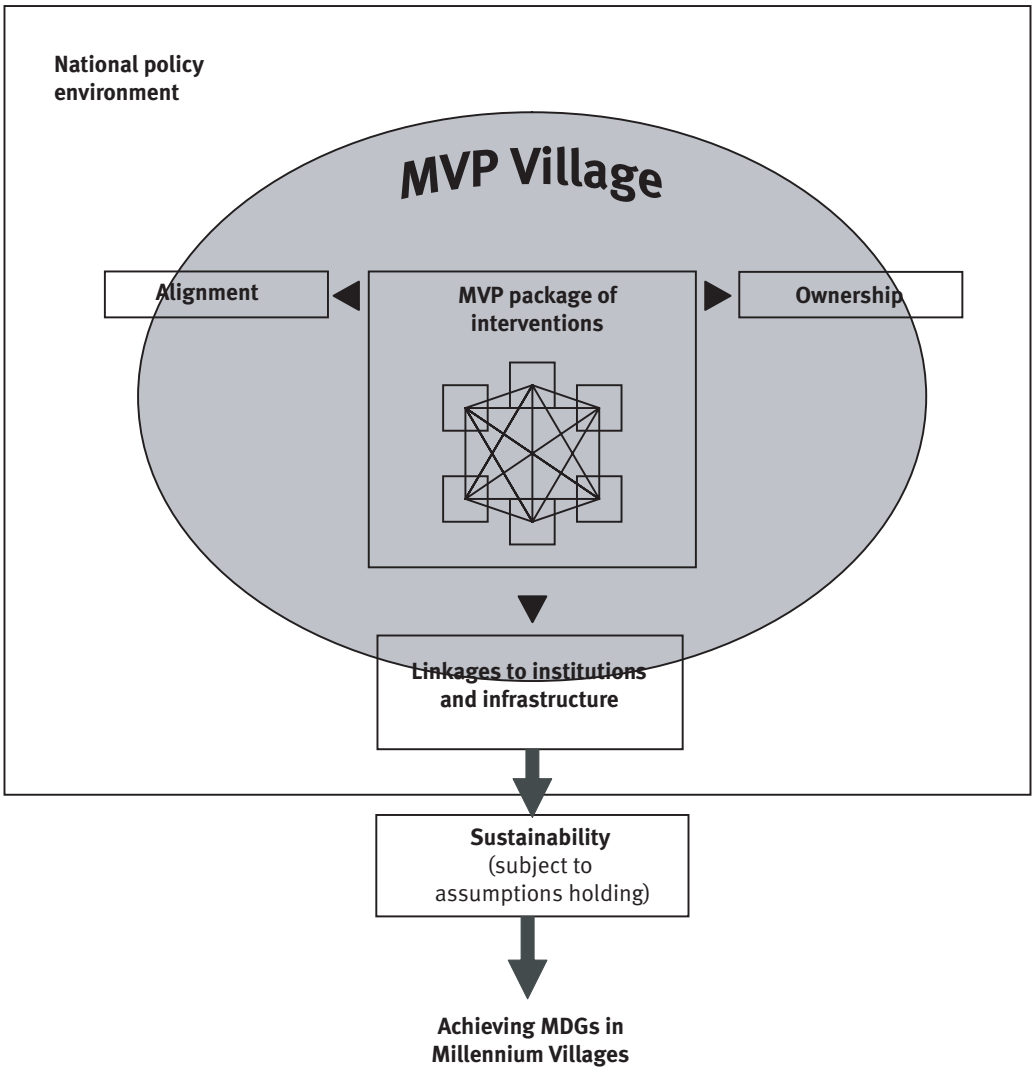
The conceptual model for the review is presented in Figure 3.1. At the heart of the MVP model is a set of mutually reinforcing science-based village-level interventions. These interventions fall within, and are well-aligned to, the national policy framework, at least insofar as both the MVP and national authorities strive to achieve the MDGs (although the MVP does so in an accelerated manner). Given the consultative and participatory development approach of the MVP, the interventions and processes engender a high degree of ownership at all levels. Less explicit in the MVP documentation, but of key importance to our conceptual framework, the interventions are embedded within and supported by a series of horizontal and vertical linkages to a range of institutions (not only at the village level) which are critical to their successful implementation. In our conceptualisation of the MVP model, ownership, alignment and linkages lead to sustainability (as long as a series of conditions are met). In the MVP model, district and national stakeholders will come to see the model

as a proof of concept in the MVs and will decide if and how to take it to scale.

3.3 Review design

The analysis presented in this report has been developed through a collaborative process involving researchers from ODI, researchers from the countries that were studied, researchers and staff from the MVP network and representatives from OSI. A broad approach to the review was developed by ODI and discussed with OSI and MVP representatives. A refined approach was presented, discussed and modified at an Inception Workshop involving ODI and country researchers and representatives of The Earth Institute, Millennium Promise and OSI, held in March 2008 in London before the start of the fieldwork. Based on inputs received during and after the Inception Workshop, and on comments provided by an external peer reviewer, the ODI core team prepared an Inception Report (Buse, Ludi and Vigneri, 2008). This document provided an overview of the aims and objectives, of the scope and conceptual framework and of the methods employed for the review, as well as background information on the MVP. The Inception Report proposed a set of data collection methods

Figure 3.1: The MVP model[6]



6. The model focuses during the first five years mainly on the village/community-level institutions and infrastructure within decentralised political and administrative systems of the government linked to devolved decision-making, planning and resource allocation.

and elaborated detailed question guides for interviewing key stakeholders.

3.3.1 Country selection

The review was carried out in four countries: Ethiopia, Ghana, Malawi and Uganda. The choice of countries was made on a number of grounds: the chosen countries cover different regions of the continent as well as four different agro-ecological zones: tree crops (Ghana), highland perennial (Uganda), highland mixed (Ethiopia) and maize mixed (Malawi). They therefore, offer a rich and variable context for the analysis; they show differences in project implementation and mixed results in relation to progress, hinting at different challenges and opportunities ahead.

Originally, Kenya was among the selected countries, as the MVP started there first and, consequently, progress with implementation would be most advanced. Given the political turmoil after the presidential elections in January 2008, the review team, together with OSI, decided to replace Kenya with Uganda.

3.3.2 Sectors

The review focused specifically on the agricultural and health sectors, without losing sight of the multi-sectoral and integrated design of the initiative. Agriculture and health were selected as representing productive and social sectors, respectively, and it was assumed that challenges and opportunities in relation to sustainability and scaling-up were markedly different in these different spheres.

The MVP invests considerable energy in supporting community participation and in supporting and strengthening community leadership and organisations on management, governance and leadership capacities. Consequently, the review also looked at aspects related to institutional development at the village level.[7]

3.3.3 Research team

An international research team was gathered, spanning a range of backgrounds, skills and expertise. The core team comprises two senior national researchers for each country and three ODI researchers (Annex 3.2). Close interaction with the researchers responsible for the design and implementation of the MVP was established and sustained throughout the process, so as to ensure the credibility of the review findings and its forward-looking recommendations. The MVP's response to this review can be found in Annex 1. A small team of advisors from ODI with long-term experience in rural development provided guidance and comments throughout the review process. Howard White, Director of the newly founded International Initiative for Impact Evaluation, or 3IE ('Triple I E'), was appointed to review the methods, results and interpretation arising from the review.

3.3.4 Methodological approach

A qualitative approach was preferred to a quantitative approach, as this provided the opportunity to explore issues, understand phenomena and raise probing questions. A set of different qualitative methods (Annex 3.3) were chosen to provide the information necessary to assess whether and how the MVP interventions, both those implemented and those planned, could be sustained and scaled up by African governments, development partners (in the public, private and NGO sectors) and local communities. Based on the material provided in the Inception Report, the country teams developed country-specific instruments for data collection.

3.4 Caveats

There are a number of limitations to the analysis in relation to the design of the review and to the country fieldwork.

7. According to the MVP, institutional strengthening is slated for Year 3 and beyond in the project, once appropriate institutions are identified. Nonetheless, the review looked at those institutions with which the MVP was working and those that might be considered essential to sustained development (e.g. district councils, village committees, etc.) and scaling-up.

With regard to the review design, the small number of countries and the focus on two tracer sectors represent the most important limitations. The limited number and the distinct and heterogeneous sample of countries necessitate a degree of caution in drawing lessons from one country and transferring them to others. Owing to the small number and the inclusion of only Anglophone countries in the sample,[8] distilling lessons that have the potential to be valid at a more general level, as opposed to those messages that are very location-specific, needs careful attention. Indeed, we observed a number of variations between countries and sectors in relation to the implementation of the MVP 'model' (e.g. regarding sequencing of activities, investment emphasis, etc.) and starting points or progress in selected sectors (e.g. the village in Malawi as a pilot for the government of Malawi's 'model village approach' focusing on food security, empowerment and social transformation,[9] in contrast with the challenges confronting the remote and isolated 'science village' of Koraro in Ethiopia). This led to further caution in relation to generalisability.[10]

An additional limitation of the review concerns its timing. We are aware that the MVP is still in its early stage of project implementation – project activities in most countries started in earnest in mid-2006. Moreover, our cross-sectional and retrospective snapshot of the initiative may not have adequately captured the true direction of travel of this fluid and evolving initiative. The MVP is developing along its way as lessons are learned and shared. MVP has established links only with a limited number of development partners at this stage and this might influence findings, especially those related to knowledge about the MVP at various levels.

Although the national research teams did their best to include as many stakeholders from village, district and national levels in interviews and focus group discussions as possible, the findings nevertheless rely on a limited number of people having had the chance to share their experience and perceptions on the successes, challenges and future prospects of the MVP (for detailed lists of stakeholders interviewed, please refer to country reports: Adjei and Asuming-Brempong, 2008; Chinsinga, 2008; Muwanga and Sserunkuuma, 2008; Banteyerga and Teshome, 2008).

Data collection and observations for the review were carried out only in MVP science and cluster villages. Interpretations would have greatly benefited from findings and observations from non-MVP villages. Unfortunately, given the limited time available for fieldwork, it was felt that adequate coverage of what would constitute a 'control group' would not be possible.

The review team was not tasked and not well placed to assess rigorously the effectiveness and efficiency of individual interventions in the selected sectors as it was premature and beyond the means of the review. Instead, a number of findings rely on: (i) the MVP's assertions that the selected interventions represent proven science- and evidence-based technologies and practices, recommended by the UN Millennium Project and are thus assumed to be the most cost-effective means of achieving the MDGs (Sanchez et al, 2007); (ii) MVP documentation of project effectiveness (e.g. annual reports); (iii) statements by key stakeholders or beneficiaries (community members); and (iv) observations made by the review team when assessing achievements and impacts of interventions.

8. Ethiopia cannot be considered an Anglophone country, as it was never under British colonial rule as were Ghana, Malawi and Uganda. We use the term here to indicate a context (administration, trade links, etc.) that is distinctively different from Francophone or Lusophone countries.

9. The MVP in Mwandama has effectively built on and harnessed the existing capacity of the village for soil conservation. Despite the positive performance in the agricultural/natural resource sector, the village had serious problems linked to, among others, high malnutrition, malaria, child mortality and prevalence of HIV infections, which were among the main reasons for selecting it to be an MV (Steve Wisman, personal communication, 30 August 2008).

10. Generalisability beyond the MVP countries is further limited by the selection of well-governed countries for project implementation.

Although most of the interventions are implemented on their own merit for the inherent value in achieving specific development outcomes, the MVP postulates that a multi-sector approach is necessary to achieve the various MDGs, and that a particular added value of such an approach lies in fostering synergies between activities and investments made in different sectors simultaneously, in order to achieve the MDGs more efficiently. The review team was not in a position to assess whether or not these synergies have materialised, as it was too early to evaluate the impacts of individual interventions and their interactions.

4. Achievements of the MVP

Observers of the MVP cannot fail to be impressed by the successes achieved since its launch in early 2006, with the establishment, staffing and implementation of a complex and integrated demonstration project, with an elaborate and detailed M&E system, in largely remote and difficult villages across 10 vastly different African countries. The MVP successfully demonstrates that it is possible to achieve rural development outcomes across a whole range of sectors, even in remote rural villages, with a committed team, the necessary political will and sufficient donor funding, that is well within the boundaries of international donor commitments of up to US$100 per capita per year by 2015 and consistent not only with the recommendations of the UN Millennium Project but also with those of the MDG Africa Steering Group headed by the UN Secretary-General (and comprising the leaders of all the relevant multilateral development organisations).

This section reports, in a necessarily selective manner, on the project's achievements in meeting its objectives of advancing progress towards the MDGs in the MVs. The findings discussed below were generated from the fieldwork carried out by the review team (for further details on achievements in the four countries reviewed – Ethiopia, Ghana, Malawi and Uganda – refer to Annexes 4.1–4.4 and to the country reports: Adjei and Asuming-Brempong, 2008; Chinsinga, 2008; Muwanga and Sserunkuuma, 2008; Banteyerga and Teshome, 2008). They were complemented by the analysis of background material provided by the MVP expert network.

4.1 Impressive achievements at the village level

The MVP model shares a unique feature with most successful development projects in that the lion's share of the budget is injected directly into community investments. This approach - like that of social funds (see Box 5.4) - represents a substantial improvement on past development projects' practice partly because it supports substantial spending at grassroots level rather than in the capital.

The review found considerable evidence of significant improvements at household and village levels in both tracer sectors (health and agriculture) as well as in a number of crosscutting domains.

Among the most visible achievements in the agricultural sector are the dramatic increases in yields between 85% and 350% in the four countries reviewed (see Box 4.1 and Annex 4.4) resulting from the distribution of subsidised fertilisers and improved seeds and from an intensified agricultural extension service system supported by improvements in natural resource management. Crop diversification, contributing to improvements in nutrition and income (see Table 4.1.1 in Annex 4.1), all of which were attributed to the interventions carried out under the MVP.

Similar improvements were found in the health sector in all four countries – although with some variation in approaches across them (see Box 4.1 and Table 4.1.2 in Annex 4.1). The intensive use of community health workers, a common feature observed in all four countries reviewed, highlighted the project efforts in professionalising and task-shifting to this cadre of staff. Likewise, improved community-based prevention and treatment of some common illnesses were found in all MVs. Improved malaria control was a central feature of the project, involving the distribution of free long-lasting insecticide-treated bed-nets to households in all cluster villages; as well as the training of health workers in hanging bed-nets and malaria prevention; the distribution of free anti-malaria medicine to clinics; and improved malaria diagnosis in clinics. The results of these in terms of drop in the incidence of malaria were found to be dramatic. In Koraro, Ethiopia, for example, in September and October (the two months with the highest malaria transmission) 2005, 461 clinically suspected malaria cases were seen in the clinic; during the same period in 2006, there were only 275 cases – a reduction of almost 50% (Millennium Villages Project, 2006). The project also contributed to the upgrading and strengthening of clinics and referral services through in-service training of and support (salaries, incentives, supervision)

to additional staff and through the upgrading of physical infrastructure and provision of supplies.

The MVP interventions were highly valued in the communities, as reported in Box 4.2 (and further details provided in Annex 4.2), which presents a number of testimonials from fieldwork interviews (more of these can be found in the country reports).

One of the principles of the MVP, and a significant achievement in the view of the review team, is its endeavour to provide universal entitlement and access to some basic services (e.g. giving households one bed-net for every sleeping site, not charging user fees at health facilities, handing out fertilisers and improved seeds to all households with land, being as gender-aware as possible, etc.). In all four countries reviewed, examples of the above were visible. In the agricultural sector, for instance, even when some inputs favour better-off households, efforts have been made for universal coverage. For example, in Ethiopia, 92.8% of households in the science

Box 4.1: Selected early MVP achievements

Agriculture sector

Koraro, Ethiopia: During the 2006/2007 season, crop production of main cereal crops increased from 0.9 to 2.0 tons per hectare (t/ha) (+122%) from pre-MVP levels.

Bonsaaso, Ghana: Production of high-protein maize was 2.2 t/ha prior to the MVP. During the 2006/2007 season, crop production increased to 4.1 t/ha (+85%).

Mwandama, Malawi: Production of maize increased from 0.8 t/ha prior to the MVP to 3.6 tons per hectare in 2006/2007, (+350%)

Ruhiira, Uganda: During the 2006/2007 season, crop production increased from a pre-project 1.9 t/ha to 3.9 t/ha (+108%). 6,843 farmers were trained in improved agricultural techniques.

Health sector

Koraro, Ethiopia: 182 village health workers (VHWs) distributed 27,000 long-lasting insecticide-treated bednets (LLIN); the District Health Office conducted indoor residual spraying at all malarious villages. More than 2,800 cluster residents were treated for malaria in 2007. Deliveries attended by health professionals or trained birth attendants (TBA) increased from 35% in 2006 to 51% in 2007. 91% of children under five have received Vitamin A supplements, 89% of children under five are fully immunised. A cluster-wide de-worming campaign reaching 46,435 residents, and 98.2% of children six to 59 months were de-wormed. The MVP initiated voluntary counselling and testing (VCT) services; in 2007, 3,221 received testing, during which period 40 patients began antiretroviral therapy (ART). Utilisation of the Koraro health care facilities has increased by 528%, from 113/month in 2005 to 710/month in 2007.

Bonsaaso, Ghana: 25,854 LLINs were distributed inside the cluster and 6,000 outside the cluster by 32 trained CHWs. 4,080 households were visited to ensure the proper use of bed-nets. 6,349 cluster residents received malaria treatment in 2007. In 2007, the number of women giving birth in health facilities increased by 146%, from 116 in 2006 to 286, and they now comprise 67% of deliveries (with the other 33% using TBAs at home). The number of new women seeking antenatal care increased 129% during that time, from 344 to 787. The number of residents using modern family planning techniques increased 670%, from 296 through the first half of 2007 to 2,278 during the same period in 2008

Mwandama, Malawi: 21,664 LLIN were distributed in the cluster, 4,620 outside the cluster. 78 VHWs were trained to distribute and train communities in their use. 14,155 cluster residents were treated for malaria in 2007.

Ruhiira, Uganda: Of 33,000 LLINs distributed within the cluster at the project outset, an estimated 96% are still in use. During 2007, 22,616 cluster residents were treated for malaria. Reported malaria episodes reduced from 2.47/household/month prior to distribution to 0.51/household/month now. Prior to the project, 8% of deliveries were supervised by a skilled health worker, now 70% are. 80% of pregnant mothers access antenatal care from health facilities at least once during their pregnancy. MVP staff initiated 'health market services' (also referred to as 'health days', bringing interventions to isolated communities. These reached 55,507 people (including 6,164 children under five) and identified 3,408 HIV-positive residents for follow-up treatment. Utilisation rates at cluster health care facilities increased from 324 patient consultations per month in 2006 to 1,073 per month in Q1 and Q2 in 2008.

Source: MVP (2008f). Data presented reflect best available indicators to date and are subject to further refinement and review.

village benefited from fertilisers and improved seeds in 2007.

A number of cases were found where the MVP approach of investing in different and complementary sectors creates positive synergies and spill-over effects which mutually reinforce the benefits of across interventions. One key example of these cross-sector activities is the school feeding programme, which enables the provision of free meals to pupils by means of farmers' contributions. For these, in turn, the payoff is the provision of fertilisers and seeds either free of charge or heavily subsidised. The introduction of school meals programmes leads to enrolment boosts in MVs and improved attendance (typically 20% or more, see Annex 4.4). Equally powerful are the spill-over effects generated by the provision of rural microcredit schemes which have enabled households or groups of individuals to start up new business (see testimonial on Ghana) or to access credit on favourable terms for the purchase of inputs. In Uganda, for example, the newly opened bank supported through the MVP has reduced the cost of borrowing from as high as 60% annual interest (5% per month) charged by the Savings and Credit Cooperative Organisation (SACCO) to a more affordable 18%.

Box 4.2: Testimonials

Village level

They [the project] told us that malaria would be destroyed. They gave us bed-nets and treated our sick people. Now we do not have problems of malaria. We are healthy. God bless [the project]. (Woman in Koraro, Ethiopia)

Before the MVP began, my food production was very low but now things have improved and I can now have surplus production (Man in Mwandama, Malawi)

Before the project this place was always dry. The river just passes by. Now with the help of the project, I am able to divert the river, store the water here (showing a pond) and pump it to my field. I grow a variety of fruits. (Man in Koraro, Ethiopia)

The project introduced her to the local bank which asked her to save with them and promised to multiply whatever she saved by four. She saved GHC10 a week and in two months was able to save GHC80. She got a loan of GHC320 from the bank and was able to open a small supermarket. (Man in Bonsaaso, Ghana)

District level

The MVP has put Zomba on the map of the country as we are always hosting delegations of farmers from all over the country who want to learn more about the MVP success. (District-level official of the Ministry of Agriculture, Malawi)

National level

Based on the significant positive results and benefits to the community demonstrated by the pilot project in Ruhiira, the government of Uganda would like to scale up this effort in the country, giving first priority to Northern Uganda in view of the socioeconomic needs of the people in this region caused by over 20 years of conflict. (Ministry of Finance, Planning and Economic Development official, Uganda)

As a result of the early achievements and synergies, the MVP team anticipates that all of the non-income MDG outcomes can be achieved by the end of Year 5 and that, across all MVs, it will be possible to quantify dramatic improvements over the baseline indicators recorded in 2006. Sections 5 and 6 below discuss the conditions under which this review believes this to be feasible.

4.2 Early evidence of scaling-up

There is early evidence that a number of low-cost interventions are being adopted by districts and scaled up. In Uganda, for example, the school meals programme is being promoted by the district in non-MVP villages. In Ethiopia, the success of the pot irrigation system has attracted considerable interest from officials from other wereda- (district) and zone-level agricultural offices, who are considering replicating this intervention in other areas outside the MV site. The technology is specifically suited to perennial crops. It is a low-cost investment – pots cost around ETB7 (US$0.7), with the additional advantage that it has created jobs for women potters in the vicinity. Malawi's Fertiliser Subsidy Programme (FSP) is seen by the MVP as scale-up success (see Box 4.3). By many accounts, members of the MVP expert network were key advocates of the FSP, despite the scepticism of many donors. After the

government introduced the programme, the MVP was launched and, therefore, in a position to pilot an adapted version of the programme and demonstrate its success in MVs, thereby supporting the rollout of the programme. Where the MVP has not introduced interventions for the first time, it has aimed to play an active and constructive role in supporting their scale-up.

4.3 Alignment with national policy

Alignment was broadly found between the MVP interventions and government poverty reduction policies. In some instances, the MVP has also enabled governments to implement stated policies by providing the missing resources (financial, human, training and support, material, etc.)

Goal alignment notwithstanding, the MVP implementation strategies have sometimes differed from government approaches, and this might have substantial implications for sustainability and scalability (e.g. curative services in Ethiopia provided by MVP-trained and supported government health extension workers, subsidised agricultural inputs, the price of piped drinking water below national recommendation in Uganda, etc.)

The first and most obvious difference lies in the level of financial resources available to the MVP, which contrasts with district budgets in all four countries. The second difference is that the MVP was able to post highly qualified experts as sector coordinators. In all four countries, the project cluster employs a team consisting on average of just over 30 staff. Often, this is beyond both the government policy and capacity. With regard to staffing policy, most countries have an implicit hierarchy in postings. In Ethiopia, for example, the implicit government rule is that, at community level, staff have a diploma. Staff at wereda level in most cases are Bachelors degree holders, whereas usually only Masters degree holders are considered for jobs at the zonal level. The Ghanaian MVP cluster management includes at least one doctorate holder. The highly qualified teams are viewed by the MVP as an integral part of the model. Enthusiastic reports were gathered in all four countries about the highly qualified and motivated staff posted under the MVP,[11] but it was also noted that government agencies were unlikely to be in a position to pay the salaries for such highly trained personnel.[12] It is well understood that the MVP model was intentionally designed to operate through large and highly qualified teams, which was beyond the human resource capacity and budget envelope prevailing under present conditions within these countries.

4.4 Ownership at different administrative levels

A strong sense of ownership of interventions was found at the village level. As the focus of the review moved to the national level, the evidence on ownership was progressively less visible. The intentionally lower engagement of the project with central government institutions during the first few years is understood to be part of the MVP approach; operating within a limited budget the MVP aimed first to show the feasibility of its integrated approach through 'quick win' interventions at the local level before engaging with national-level stakeholders (but it will need to raise additional funds to do so effectively through the remainder of the project).

4.5 Training and capacity building

The MVP invests in community development, mainly through on-the-job training and capacity building, something that is noted very positively by beneficiaries. We consider this a main ingredient for sustainability and even more so for scalability.

At the individual/household level, a broad range of training activities are provided in both the agricultural and health sectors. In the agricultural sector, just to name a few, farmers receive training in the use of inputs, in adapting their farm management

11. All MVP staff are national experts and that cluster-based staff were recruited locally.

12. This provokes an intriguing question: if most of the masters degree and doctorate holders were paid to work in the rural areas would countries not develop more equitably?

Box 4.3: Malawi's Fertiliser Subsidy Programme

In Malawi, as in other countries, the structural reform programme of the 1990s led to the removal of agricultural subsidies. Following a number of bad harvests in the early years of the 21st century, the 2004/2005 maize harvest (planted October–December 2004 and harvested April–June 2005) was the worst in a decade. On average, smallholder rain-fed production was only 0.73 t/ha, 34% below the long-term average, Total maize production for 2004/2005 was 1.22 million tons, or 57% of the estimated national maize food requirement of 2.1 million tons. By November 2005, an estimated 38% of the population was in need of food aid.

During the election campaigns in 2004, subsidies climbed up the political agenda. The new president announced in June 2005 the introduction of a fertiliser subsidy programme targeted at resource-constrained, but productive, maize farmers to get agriculture moving and to reduce dependence on food imports. In August 2005, the UN issued an appeal to support the immediate humanitarian response and, with the support of the UN Millennium Project, to support an improved seed and fertiliser programme for 2005/2006. Response was positive, but few donors committed to support the seeds and fertiliser appeal.

The 2005/2006 input subsidy programme, consistent with the recommendations of the UN Millennium Project Task Force on Hunger, built on the experience of the Starter Pack programme that was at its peak during the 1998/1999 and 1999/2000 seasons, and included the free distribution of 2kg of hybrid maize seed, 1kg of legumes seeds and 15kg of fertilisers. In 2005/2006, a universal fertiliser subsidy was agreed with a budget of MWK4.7 billion (about US$35 million), using a coupon-based distribution system through state-owned organisations and overseen by local government officials and traditional leaders nationwide. Fertiliser coupons allowed farmers to purchase sufficient fertiliser for 0.4ha with a subsidy of approximately 70%. Seed coupons allowed farmers to purchase 3kg of maize (for 0.4ha 10kg would be necessary) with a subsidy of approximately 30%.

No donors supported the 2005/2006 FSP and the full cost was borne by government. Donor reactions to the programme varied from outright dismissive (International Monetary Fund – IMF, United States Agency for International Development – USAID, on the basis that subsidies would undermine private sector development) to sceptical (European Union – EU, Department for International Development – DFID, questioning the government's capacity and highlighting the challenges of targeting) to supportive on the basis that fertiliser is critical to boosting production and assuring food security (some UN agencies, Scandinavian donors). This latter view was given a major boost by the high publicity and successful launch of the MVP in Malawi during this period.

The MVP in Malawi was established in August 2005. Consultations with the inhabitants of the Mwandama community revealed major concerns about food security and the ability to recover from the 2004/2005 crop failure. It is reported that farmers expressed an urgent need for seed and fertiliser over food aid. The MVP recognised that most farmers in Mwandama did not have the financial resources even to take advantage of the fertiliser subsidy, and thus decided to provide, at no initial cost, 10kg of hybrid maize seed and 100kg of fertilisers, the recommended inputs for a typical smallholder farm of 0.4ha. Farmers were also trained in refined planting methods. The main difference with the national FSP was that the MVP: (i) provided enough seed and fertiliser to plant 0.4ha maize; and (ii) farmers were not required to pay upfront for the inputs, but would pay later in-kind to support the school meals programme. The results from the MVP showed that, in a year with good rainfalls and in combination with refined planting methods, a subsidy of US$60 to provide seeds and fertilisers for free can result in an extra maize yield valued at between US$140 and US$210, depending on maize prices and yields obtained.

The 2005/2006 FSP was fairly successful despite a number of serious problems, including logistical difficulties and allegations of corruption in the distribution of coupons. Nevertheless, the subsidy appeared to have an unprecedented impact on maize yield. In 2006, Malawi enjoyed its biggest-ever maize harvest, with at least half a million tons more than the country's annual requirement. In combination with good rains, the programme is said to have boosted maize production by about 15–22% during 2005/2006. The subsidy also reportedly had a positive impact on livelihoods, because of lower maize prices benefiting net consumers and substantially increased wage rates for casual labour. However, the FSP is thought to have negatively affected the development of the nascent agro-dealer network.

In 2006, a group of donors, including DFID, USAID and the World Bank, commissioned studies to learn from lessons from the 2005/2006 experience. Among others, an important conclusion of the studies was that the strict anti-subsidy line was not justified. In its place, a set of conditions for donor support for the subsidy programme was suggested, including the involvement of the private sector in procurement and distribution, the promotion of choice among farmers of the range of fertilisers and the source of their purchase, an extension to other crops to encourage diversification and plans for marketing and storage in times of excess production.

The FSP in 2006/2007 led to even greater maize production, about 30% above the record harvest of 2005/2006, generating a surplus of about 1.34 million tons above the national requirements. Despite this success, a number of issues were raised in relation to the affordability of the programme. A number of factors are beyond the control of the government of Malawi (e.g. high fertiliser prices, maize prices, weather factors) and these can each have a significant impact on the costs and benefits, and thus on the government's ability to sustain the FSP in future. Assuming surpluses can be maintained, greater attention needs to be paid to price stabilisation mechanisms, improved post-harvest management and incentives to diversify beyond maize.

A recent study on Malawi's FSP (Chinsinga, 2008) concludes that, no matter what the technical or economic arguments for or against any particular policy position, it is ultimately the configuration of political interests that influence agricultural policy outcomes on the ground.

Sources: Chinsinga (2008); Denning et al. [in review]; Dorward et al. (2008).

strategies, in diversifying their crop portfolio, in managing livestock and in using organic forms of soil fertility improvement and resource conservation. In the health sector, training of community members was provided in the use of bed-nets and antenatal and postnatal care. Particular attention was placed in all four countries on training and skill development of CHWs in identifying and treating diseases such as malaria, tuberculosis (TB) and diarrhoea.

A number of capacity development activities and training workshops are provided to village-level extension staff, local NGOs and community-based organisations (CBOs). Whenever specific training is offered to agriculture or health sector facilitators, for example, both MVP-paid and government-seconded staff are involved. In Uganda, training is provided to CHWs and other district- and sub-district-level personnel in counselling and testing for HIV. Collaboration with local research institutions, for example to provide counselling services, training, screening and treatment of sexually transmitted diseases (STDs) and provision of family planning services, strengthens government capacity in skills essential in meeting the MDGs. By entering into a partnership with the Uganda Youth Anti-AIDS Association (UYAAS) to reduce the spread of HIV/AIDS, the MVP has built the capacity of CHWs in HIV/AIDS and provided training for peer educators and change agents.

An important component, on which the success of the MVP model depends, are village-level sector committees that are able to contribute to planning, implementing, monitoring and evaluating project interventions. Capacity of these committees is built or strengthened in various fields: community mobilisation, leadership, gender mainstreaming, participatory planning or managing group dynamics. Committee members mentioned in Uganda, for example, that this kind of capacity development had empowered and enabled them to manage their own development process. They also noted that, in contrast with government-initiated committees, under the MVP they had had the chance to discuss issues and change proposals instead of being merely passive recipients of ideas presented to them.

4.6 Adaptation of the model

The findings reveal that there are similarities across countries, which is not surprising given that the purpose of the MVP is to test a model as 'proof of concept' of an integrated package of low-cost interventions. Nonetheless we also found some important differences across the four countries in terms of:

- Sequencing of interventions (e.g. in Malawi, the health interventions followed significantly after the agricultural ones);
- Emphasis on different sector investments (for example in Uganda, there was greater attention to water development and natural resource conservation and less spending on education, as there is a strong government focus with donor support on primary schooling); and
- A series of innovations to policy which were planned with the intention of testing different approaches/strategies to achieve various MDGs (such as the use of volunteer health workers in Ethiopia to provide curative services for pneumonia and malaria).

The fact that the MVP is implemented differently in different countries and sectors demonstrates the willingness of project implementers to adapt the model to requirements in the different countries and to some extent to different administrative and political realities as well as to test alternative strategies to achieving the MDGs. Adaptation took place in response to: (i) the needs identified by beneficiaries (e.g. water in Uganda); (ii) the availability of alternative funding for MVP-type interventions (e.g. Uganda primary education or a school feeding programme in Malawi targeted at early childhood development centres instead of schools as the World Food Programme (WFP) had programmes in primary schools); and/or (iii) national policy preferences (e.g. concern about the potential recurrent costs implications of surpassing the national norms for clinics per capita in Malawi as well as concerns about skewing access to MV beneficiaries). The review findings suggest that the MVP has an adaptive and responsive approach, which was found recurrently in the local team efforts to ensure that activities carried out were facilitating

the process of meeting the MDGs. From this angle, the adaptation of the model is viewed as a positive project achievement; by taking local conditions into consideration the MVP contributes to the sustainability of activities over the long run.

5. Sustaining the MVs: What is the challenge and what needs to be done?

5.1 The exigency of rural development

Given the magnitude of rural poverty across Africa, on the one hand, and the 2000 UN Millennium Declaration signed by 189 heads of states (which sets the foundation for the MDGs) on the other hand, there is an indisputable need for the international development community to live up to its promises and provide, among others, the necessary ODA to achieve the MDGs. One way of doing this is to invest in agriculture and rural development, in other words, in MVP-type interventions.

The 2008 World Development Report (WDR) (World Bank, 2007) concludes that, in agriculture-based countries, which include most of sub-Saharan Africa, agriculture and its associated industries are essential to growth and to reducing mass poverty and food insecurity. Using agriculture as the basis for economic growth requires a productivity revolution in smallholder farming. The authors of the report conclude that, for this to happen, local, national and global governance for agriculture needs to be improved, among other things. The state will need greater capacity to coordinate across sectors and to form partnerships with private and civil society actors. Agriculture can be the lead sector for overall growth if farmers have increased access to assets and can improve the competitiveness and sustainability of their enterprise and diversify income sources by engaging in labour markets and in the rural non-farm economy. To engender these determinants of the agricultural revolution, the 2008 WDR argues that

> 'a multi-sectoral approach is needed that is able to capture the synergies between technologies (seeds, fertilizer, livestock breeds), sustainable water and soil management, institutional services (extension, insurance, financial services), and human capital development (education, health)'.

Such an approach must be decentralised and tailored to local conditions and, at the same time, coordinated across countries to provide an expanded market and achieve economies of scale in services such as research and development (R&D). It needs to emphasise conservation of natural resources and adaptation to climate change. Lastly, it requires macroeconomic stability, policies to improve producer incentives and trade and sharply increased public investment – especially in infrastructure, roads and communications to improve market access and research.

The MVP lies squarely within the renewed focus on agriculture and rural development; indeed, the MVP leadership has played a substantive role in advocating for increased attention to agriculture and rural development and is continuing to do so. Yet, given the financial resources at its disposal, the MVP cannot address all the above-mentioned requirements, which are considered essential at different levels for agricultural growth and rural development. The MVP focuses on community-level development through a process of integrated multi-sector investment seen as vital for attaining the MDGs, which also includes village-level investments in key infrastructure (e.g. construction or improvement of access roads, providing energy connectivity where feasible, etc.), which are considered essential for the envisaged transition from subsistence agriculture to market economies. What is still needed in order to make the individual interventions and the MVP sustainable in the long run is a set of complementary investments, not substitute investments, for example in infrastructure linking villages to urban areas and markets, institutional development, training facilities to produce the necessary staff to delivery services and support, among other things (see Section 6 on scalability, which refers to linkages to a range of institutions).

5.2 Applying sustainability to the MVP model

With respect to the MVP, sustainability carries different implications in relation to the individual interventions and the project model as a whole that sustains these interventions. The discussion that follows focuses only on suggestions on how to

sustain the project activities within the current MV clusters of MVs, yet the aspects mentioned are relevant and necessary for scaling up interventions as well. A range of additional and complementary conditions to the ones mentioned below are essential. These are deemed essential for scaling-up and will be further discussed in Section 6.

Box 5.1 The concept of sustainability

Key elements of sustainable development are:

Connectivity: embracing ecological, social and economic interdependence;

Equity: suggesting fairness, within and across generations and species;

Prudence: relating to taking care and prevention, technologically, scientifically and politically;

Security: demanding safety from chronic threats and protection from harmful disruption.

The dimensions of sustainable development goals are broken down into:

Social: enhanced health and wellbeing, social equity and human rights protection and promotion;

Environmental: environmental management and technology diffusion;

Economic: economic performance and enhanced intra and intergenerational equity with respect to economic welfare.

With regard to development projects, sustainability is considered along the following dimensions: (i) economic; (ii) environmental; (iii) social; (iv) financial; (v) operational; and (vi) political.

Source: Warhurst (2002)

5.2.1 Sustainability of individual interventions

A number of MVP interventions have been considered 'sustainable' by beneficiaries and key stakeholders. These interventions are also those which are more likely to be replicated elsewhere (outside the MVP sites).

Some of the more sustainable interventions are those that carry lower-cost requirements – both for beneficiaries and for the government – and do not require extra efforts by government extension agents. It is worth considering, though, two aspects of these sustainable interventions. First, what are the poverty reduction implications of a model uniquely characterised by the integrated delivery of a set of interventions if only a subset is maintained[13] (as illustrated in Figure 5.1 by the reduced number of interventions in the MV)? Second, how critical to attaining the MDGs are those interventions of the MVP package deemed as sustainable?

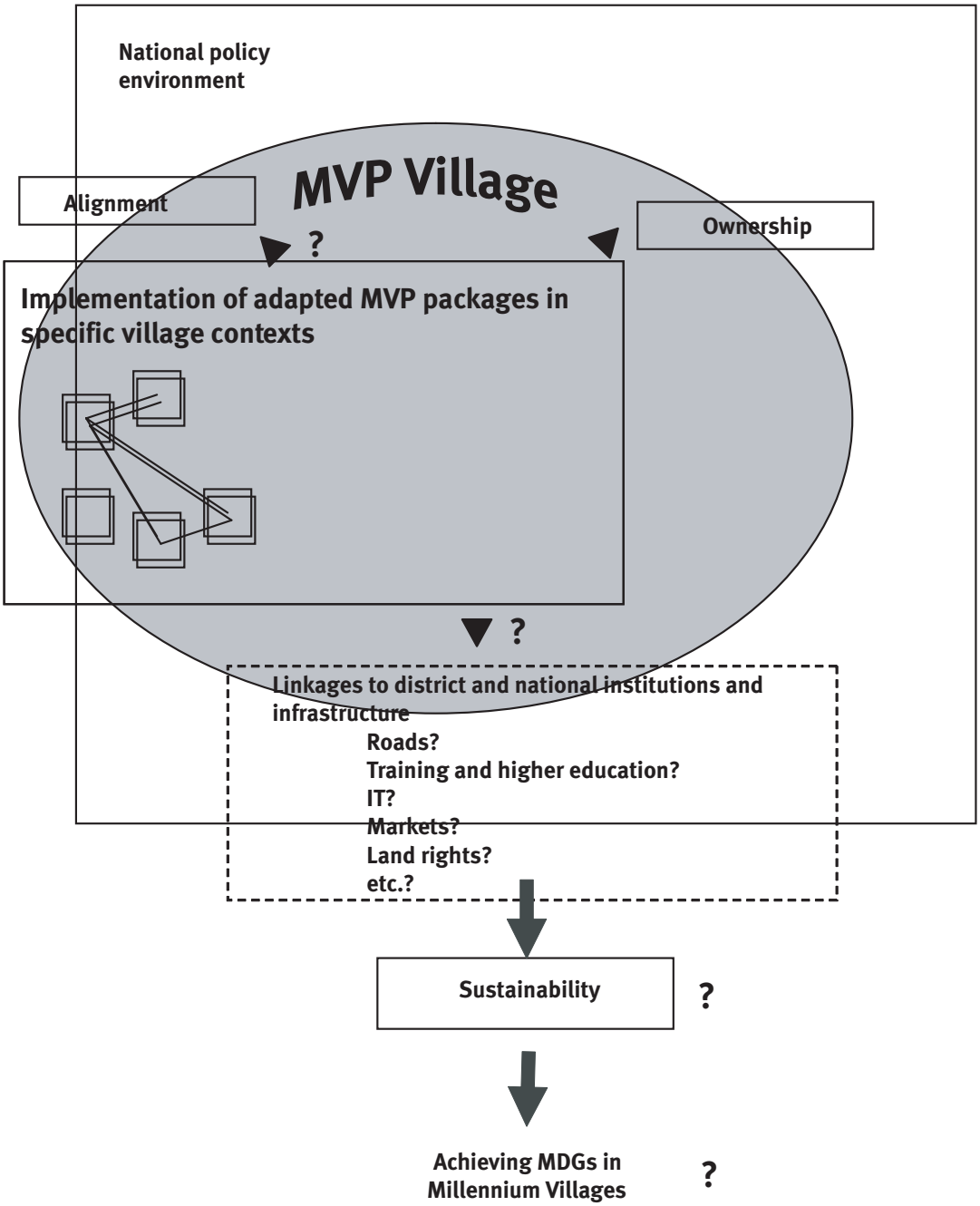
The cost-effectiveness of the MVP interventions – one pre-condition for sustainability – needs to be assessed against both private and social perspectives. Private enterprises invest in – or maintain – a project if the revenues from that project exceed the costs over the lifetime of the project. The question is more complicated when considering 'society's' welfare. Although society faces budget restrictions and ought to invest available funds in the most cost-effective enterprises, other criteria such as intra and intergenerational equity or equitable distribution of resources across different regions need to be taken into account as well. This point was brought up to the reviewers' attention in many discussions with district-level staff who come under pressure from residents of non-MVP villages to deliver similar services to the areas outside the project sites.

Careful consideration needs to be given to a number of direct and indirect costs, both monetary and non-monetary. In order to assess whether or not interventions are efficient, direct and indirect costs should be considered. Often, the indirect costs that the beneficiaries have to bear are high enough to make the intervention unsustainable. Examples are increasing labour demand for field operations after arable land has been treated with soil conservation structures. The indirect/opportunity costs of accessing health services in rural areas arising from work foregone, transportation, gender norms, social

13. The MVP suggests that the prospects for sustainability in the absence of finance are limited – but this is because the project is opposed to any approach in which some interventions are sustained as others are not, as it would undermine the prospects of achieving all the MDGs and would undercut the philosophy of an integrated rural programme and the potential for synergies.

barriers including age, stigma and discrimination (if incorrectly diagnosed with a stigmatising condition – such as an STD), and under-the-table payments have been well documented (Parkhurst et al., 2006; James et al., 2007). Costs and benefits are usually not distributed equally within a society, leading to social exclusion, and therefore social tension.

Figure 5.1 The MVP in June 2008[14]



14. The figure below represents the state of affairs prevailing at the time of the review in June 2008. It highlights, for example, that not all interventions in all sectors are fully implemented and not all synergies realised yet. Question marks refer to unknowns and are a focus of our review, e.g. to what extent are interventions at village level aligned with national policies? In how far are village-level interventions linked to district and national institutions and infrastructure? What are opportunities and challenges for sustainability?

5.2.2 Sustainability at the project level

Three conditions were identified as necessary for ensuring the sustainability of the MVP model beyond its current first five years phase:

- Donors are willing to underwrite US$50 per capita once the MVP is withdrawing its funding;
- Governments are willing and able to continue supporting the project with levels and qualifications of staff and financial contributions that are higher than those currently prevailing in other villages. In so doing, stakeholders would need to accept that this represents another form of inequality across the country which is tolerated because the government considers the interventions started by the MVP as an experiment from which important lessons can be drawn and applied to national development strategies; and
- The MVP is able to raise an additional US$10-20 for management activities planned beyond 2011 over and above the initial US$ 50 identified for donor commitments to (see Section 2 on sustainability and scaling-up plans of the MVP).

5.3 Findings and discussion

5.3.1 Early success in sustaining interventions

As noted above, the MVP has enabled the implementation of a range of interventions that are consistent with stated government policies within the MVs across all four countries, which the government previously either had not implemented or was capable of implementing only partially. This was achieved as a result of the targeted financial, technical and management resources that the MVP could make available.

Our findings suggest that some of these interventions are more likely to be sustained than others, with implications for the attainment of the MDGs in the MVs as well as for prospects that the populations in these villages of escaping the poverty trap. A few obvious examples in the agricultural sector include: (i) pot irrigation in Ethiopia; (ii) single stem planting and subsidised fertilisers (see Box 4.3) in Malawi; (iii) commodity marketing groups in Uganda (once the initial investments in setting them up are made); and (iv) diversification to horticultural crops in Ghana. Some examples from the health sector include: (i) the development of community health action plans; (ii) antenatal clinics as outreach services (in Ghana); (iii) health education and sensitisation campaigns conducted by village medical assistants; and (iv) the services to be provided by nurses trained with MVP scholarships[15] in Malawi.

Many of the project interventions in the villages could be sustained by the governments and their development partners by allocating resources to maintain the levels of services, staff (and staff salaries and incentives) or subsidies. In the absence of scaling-up the experiment across the countries, this raises the issue of inequity. The resulting inequity could, however, be accepted by the government on the grounds that these villages provide special development experiments that yield lessons for future scaling-up. Indeed, the literature on integrated rural development (IRD) argues for much longer timeframes of piloting and experimentation in limited spatial units if sustainable success is to be achieved (see Annex 5). If, however, interventions are to be scaled up, the question relating to sustainability transforms itself into much broader questions in relation to government budgets, staffing, etc. – or, overall, the political sustainability – to which we return later.

5.3.2 Ownership

As noted above, MVP interventions are generally well aligned with government policy. We focus here on ownership, as this can be viewed as an indicator of relevance (see Conceptual Framework, Section 3). We hypothesise that interventions that are owned by beneficiaries, but also at higher levels, are more likely to be sustained. Ownership of project activities was found to be

15. This is dependent on these villagers returning to their villages and the government putting them on the payroll as promised.

strong at the village level in all four countries – a commendable reflection of the tangible and relevant benefits provided by the project (including higher agricultural yields, provision of bed-nets and anti-malarial tablets, access to clean water and so on).

Fieldwork suggests that this strong sense of ownership arose as a result of a number of factors. In addition to individual and household benefits, the opportunities provided by the various sector committees at the village level were mentioned as giving community members and leaders a sense of participation and inclusion in the implementation of the interventions. Community leaders were consulted in the planning stage of project interventions to assess the best format for engaging village beneficiaries in the implementation of different MVP activities. Ownership was also achieved through the inclusion of beneficiaries in cost-sharing arrangements, particularly through in-kind contributions. See Box 5.2 which presents some evidence on community ownership.

At the district level, the evidence gathered on perceptions of ownership was mixed, as reflected in district-level officials: (i) involvement in the planning of MVP interventions; (ii) familiarity with the details of the model; and (iii) participation in MVP implementation. Box 5.3 presents examples of different dynamics and challenges in relation to fostering district ownership in the review countries.

A greater degree of variation in the sense of MVP ownership was found at the national level. Whereas in line ministries, we found limited knowledge – hence ownership – of the project, a number of high-ranking officials and heads of state have expressed their strong support for the MVP. There are numerous accounts of requests made to the MVP staff to provide additional technical support and help in securing additional donor funding for scaling-up to districts and/or replicating MVP-like activities in other districts of the country; this bodes well for sustaining the initiative in the present clusters. It is recognised that this level of knowledge and enthusiasm for the project improves the prospects of ownership and has come about as a result of the continuous interactions between representatives of The Earth Institute and Millennium Promise, especially Jeffrey Sachs, and high-ranking government officials. Nonetheless, it is understood that the limited sense of ownership of the MVP found in various line ministries is explained by the project designers' initial efforts to prioritise the implementation of activities in the villages, by delivering on quick and visible results before engaging more systematically with national-level stakeholders. This could have implications for sustainability, as

Box 5.2 Individual and community ownership of project interventions

In Ethiopia, both community members and leaders expressed pride in being able to contribute communal labour for the construction of extra rooms for clinics and schools and other public goods, such as environmental protection structures – although participation appeared to be largely limited to such involvement. In Malawi, over 300,000 bricks have been moulded for various construction projects, despite reports of limited community involvement in village action planning. In Ruhiira people mentioned that the training they received had empowered and enabled them to manage their own development process. Because the MVP is perceived to be responsive to the needs of beneficiaries, the interventions are considered relevant and, hence, worthy of being owned and sustained.

In the agricultural sector the MVP was able to demonstrate the beneficial impact of chemical fertilisers and improved seeds. In the focus group discussions held in Ethiopia and Uganda, farmers mentioned their willingness to continue using inputs such as fertilisers, or improved seeds, even when subsidies are reduced. No conclusive information is available, however, on the level of willingness to pay (or ability to pay) for such inputs. In Ethiopia, no evidence was found that diminishing input subsidies for fertilisers resulted in a reduction in their use by farmers. In Ghana, on the other hand, increasing the level of co-payments from 10–20% for cocoa seedlings has been mentioned as a significant barrier to poor households buying seedlings. In one village, Esienkyem, key informants indicated that the number of households purchasing cocoa seedlings had dropped as a result of the increase in co-payment. A clear example of successful ownership in the health sector was found in the use of bed-nets, which was consistently high across all countries. People were proud of their protected sleeping places, and many declared their unconditional willingness to buy bed-nets if they were not distributed for free in the future.

Box 5.3 Ownership of project interventions at district level

In Uganda, district leaders (political and technical) and MVP sector coordinators hold joint planning and review meetings through which they collaboratively review the progress of interventions. Moreover, district officials have received training in action planning and community mobilisation. In Malawi we found limited involvement of the district planning machinery (i.e., the Development Executive Committee) – which was reportedly sidelined by the MVP. In Malawi, it was reported that the engagement process was limited to bilateral interactions between sector coordinators and their counterparts in the district administration. Yet, it was mentioned that, while this sectoral-technical engagement was high, it did not involve joint planning and decision making: plans were drawn up mainly by the MVP and district-level officials were subsequently invited to comment. In one instance, the purchase by the MVP of 20 bike ambulances occurred without prior consultation with the District Health Officer. Had the officer been consulted, it was reported, district officials would have suggested fewer supplies owing to maintenance and recurrent cost requirements.

In Ethiopia, the MVP staff at the district level had met formally with district officials on only two occasions through an advisory committee, and lack of information on the MVP budget at the district level was reported as a major source of contention. District officials in Ghana and Ethiopia felt the need for greater consultation and joint planning. In Uganda, although joint planning and review sessions are held regularly, district officials complained that they were not aware of the details of the MVP budget for each sector. They felt disempowered by this lack of transparency from the MVP. In the countries reviewed, different factors have contributed to enhanced ownership – or the lack thereof. Lessons should be learned and applied elsewhere. For example, the joint planning and review meetings held in Uganda seem a very promising way of sharing information and fostering the integration of MVP interventions into government procedures and of harmonising processes.

these same ministries must allocate extraordinary resources and staffing to sustain the interventions in both sectors reviewed.

The review also found in all four countries that the successes, challenges and issues concerning the MVP are not debated in national level fora. To partly address this problem, the MVP and its main executing partner (UNDP) have created an 'MDG advisor' post within each country's UNDP office. This post (as explained in Section 2) is meant to link the MVP with national ministries and donor agencies. The evidence gathered from the review suggests, however, that the individual MDG advisors engage with government officials on an ad hoc and largely bilateral basis due their multiple responsibilities, making the task of feeding the MVP's experiences into national-level deliberative processes on development pathways a considerable challenge.

The involvement of non-state actors (including national and international civil society organisations, the private sector and donors) was also varied. In Ethiopia, little evidence was found of the involvement of the private sector in the MV cluster or in the procurement of supplies in the health sector, for example. In Uganda, a number of potential partner organisations have expressed their frustration with the modality of their engagement with the MVP. They wanted to collaborate with the MVP at the outset as they expected to receive financing from the MVP. The clarification that partners required their own financing disappointed many suitors who did not pursue further collaboration.

Mixed results were found in relation to collaboration with government research agencies. In Ghana, partnerships have been forged with a number of research institutes in the agricultural and food sectors, such as the Crop Research Institute, the Forest Research Institute and the Cocoa Research Institute. In Uganda, although participation in a stakeholder workshop had taken place, there seem to be different perceptions on the nature of terms of collaboration. The MVP team encourages research partners to collaborate and to contribute financially to the MVP but partner organisations, and particularly under-funded government agencies such as the Zonal Agricultural Research and Development Institute, were expecting financial support from the MVP to underwrite their initial contribution to the project.

5.3.3 Capacity development

One mechanism which arguably fosters and enables ownership is the capacity development of government staff and the institutions and structures in which they work. The MVP actively includes government staff in training activities whenever possible. Capacity development and training workshops are also provided for local NGOs and CBOs in various fields and has enhanced their capacity in planning, implementing activities and providing services. At the household level, a broad range of capacity development and training activities are provided in both the agricultural and health sectors. We are convinced that these skills, knowledge and expertise developed through the project are tangible results that will persist. We also conclude that this knowledge, if applied, will make significant contributions towards achieving the MDGs in these villages.

5.3.4 Monetary and non-monetary costs

The findings patently demonstrate the numerous benefits delivered by the MVP at the individual, household and village levels. All stakeholders were clearly appreciative of the MVP and its interventions. The MVP interventions are based on UN Millennium Project's recommendations, which proposed those interventions that are generally considered cost-effective. Despite their cost effectiveness and overwhelmingly positive reception, a number of stakeholders pointed to the direct and indirect (opportunity) costs associated with the implementation of MVP interventions. The cost most recurrently reported was time, particularly in relation to participating in the many community-level committee meetings. In Malawi, one farmer remarked:

> 'These days some people are no longer enthusiastic to attend meetings convened by the MVP. [...] Moreover we just waste our time quarrelling and discussing things that will not help us.'

Although a personal complaint and not necessarily representative of the whole population in Mwandama, it highlights a problem often observed with community committees outside official government structures, related to a certain fatigue after initial enthusiasm wears out or expectations are not met.

Others reported persisting in attending meetings for fear of losing out on possible resources provided by the project.

In other instances, village residents mentioned that the modality in which project inputs have been provided has, in some instances, perpetuated (if not exacerbated) social divisions and disharmony. In Ethiopia, for example, this was mentioned in the context of lack of transparency over the payment for, use of and revenues derived from journeys made with the project-financed Isuzu truck. In Malawi, disharmony and social tensions were reported in relation to the use of grain banks. In Uganda, although the village bank was seen by most informants as a major achievement in modernising the agricultural sector, some women felt that they had lost out. This was explained on the grounds that the new MVP-established village bank had replaced their informal savings club. A requirement for opening an account with the MVP-inspired village bank is an ability to read and, specifically, to fill in the application forms, which is often a problem for women (although one would hope not insurmountable). Although the MVP's philosophy and intention is one of universal access to project services, some individuals pointed out that not necessarily all households can benefit as a result of various obstacles. In Ghana, for example, one woman mentioned that not all households were able to benefit from project interventions equally, mainly because poor households cannot afford the financial contributions required:

> '... the MVP is also turning to be like all the other interventions – they have only served the interest of the rich among us to the exclusion of us, the poor people. How can they expect me to get money to pay that much for the cocoa seedlings and still think that I can have enough to feed my children?'

In an understandable desire to implement project activities in a timely manner so as to accelerate the attainment of the MDGs in the MVs, concerns were expressed that a number of opportunities may be lost. In particular, the perceived 'rush' to

move from one activity to the next was not allowing sufficient time to enable interventions and associated processes to be embedded and to learn from the experiment. It was also suggested that ownership and, in some cases, goodwill, was at stake as a result of perceived inadequacies with regard to consultation with stakeholders, both at village and district levels. In some instances, inadequate consultation resulted in a considerable degree of misunderstandings and acrimony, which will take some time and effort to correct.

5.3.5 Operation modus – the MVP as an independently executed project

With its cluster management characterised by a considerable number of highly qualified staff, reporting lines to UNDP at country level and to The Earth Institute and Millennium Promise in New York and, above all, considerable additional funds that are not disbursed through existing channels in central, regional or local government, the MVP has created additional and parallel organisations to implement the programme.

Nonetheless, the extent of these parallel arrangements is limited in comparison with some of the grander designs of IRD projects. In particular, the MVP does not operate with expatriate technical advisors, but with national administrators and technical staff resident in, or close to, the sites. Moreover, in some cases, close working relations have been developed with decision-making bodies and with public implementing agencies at the district level. Lessons from successful rural development projects have demonstrated that high staffing is fully justified in the first stage of project implementation (Korten, 1980). During this stage, the main concern is with developing a working programme in the setting of a village learning laboratory that has a high degree of fit with beneficiaries' needs. This phase is resource-intensive, particularly as it requires a great deal of intellectual input and freedom from normal administrative constraints, given that it is mainly concerned with generation and deepening of knowledge and capacity development. The next stage – learning to be efficient – is concerned with reducing the input requirements per unit of output. This is the crucial phase in view of attaining sustainability. For the MVP, the implications with regard to sustainability will be whether or not the reduced funding, foreseen in the order of US$10 per capita/year (approximately US$500,000 per year for a cluster), which will be used mainly for maintaining the management structure in Years 6–10, will be sufficient to facilitate this transition.

5.4 Recommendations relating to sustainability

5.4.1 Long-term commitment

The MVP has to be lauded for its bold attempt to support communities to reach the non-income MDGs within five years and to contribute to creating or securing cluster-based institutions for long-term economic development within a period of 10 years in a series of different countries across Africa. Similarly, the initiative needs to be recognised for the related and persistent calls to OECD governments to make the necessary funds available, not just to run a few dozen demonstration sites in 10 countries but also to scale up rural investments across the continent.

A number of non-income MDGs will require reforms of fundamental institutions. For example, it will be difficult to change deep-rooted and often religiously motivated taboos in a few years. Despite the MDG3 call for gender equality and empowerment of women, abolishing the prohibition of women's ploughing in Ethiopia in the next five years appears unlikely. Similarly, it is one thing to change government policy and to integrate new technologies into government service delivery (e.g. ART) but it is altogether more challenging to change the cultural acceptance of them. In a number of countries, surprisingly few members of high risk groups in high prevalence areas are aware of their HIV status despite the relatively easy access to testing facilities and the availability of free ART (Heald, 2006; Hawkes et al., 2008). The review team believes that institutions, which are difficult to change overnight, should not be taken as a pretext for delaying investments, but is convinced that, in a number of cases, a longer timeframe than the five or 10 years will be necessary to bring about sustainable change.

Korten (1980) observed in a number of successful grassroots programmes started by NGOs and later scaled up that, in addition to these programmes having been driven by champions, individuals who committed most of their careers to seeing the programmes succeed (see below), they were supported – financially, technically and personally – often considerably longer than the typical donor funding span (or political cycle).

Recently, the designers of the MVP have made it clear that the MVP should be considered a 10-year project through to 2016 (the first phase of five years was mainly a technical limitation related to committed donor funding). The lengthened timeframe is welcome, as it will permit the deepening of efforts made in institutional development to allow sufficient time for the predominantly subsistence-oriented agricultural sector to transform to a more market-oriented sector,[16] including a significant income generation component, for national governments to learn lessons from the MVP and adjust policies and service delivery mechanisms and for donors to provide the necessary aid.

We see long-term commitment also as a means of engaging in capacity building beyond the village level. Committed and well-trained district officials are highly relevant when it comes to sustaining the investments after the first phase of the project, to make the necessary staff available or to lobby government or donors to provide additional support. Their feeling of ownership of the project, and thus the prospects for sustaining the investments, can be greatly enhanced by providing them with the necessary capacities in technical but also in organisational and managerial terms.

5.4.2 Integration – and the need for a champion

The problem of running the MVP as a standalone project using project-dedicated management (as well as a considerable number of project staff) and operational procedures raises questions about the ability of government to sustain and scale up project activities (see Section 6). We understand that the current organisational and management arrangements of the MVP are not meant to be sustainable, but rather transitional. Stronger integration of project management – including planning, budgeting, executing, monitoring and evaluating – into government systems is one of the key ingredients of sustainability.

The MVP should, even as a pilot project, rely as far as possible on government systems and procedures, or at least provide the government with full information on project budgets and expenditure, in line with the budget cycle and format. It could learn lessons from the Zambian social fund experience (see Box 5.4). The European Commission (EC) guidelines (see Box 6.2) should be seen as sine qua non conditions to sustainability and scalability of the project.

Box 5.4 Zambia Social Funds

Zambia's social funds represent one of the most successful examples of community-based demand driven models. Established in 1990, the funds have operated with proposals coming from and managed directly by communities. As the scale of operations expanded, the funds became more decentralised, with the creation of regional offices, but also relying increasingly on local government officials to oversee the sub-project cycle. Like most social funds, those in Zambia worked more and more closely with local government as they evolved, eventually becoming a system of district block grants, though this process took over a decade. Through the social funds, Zambia has reinvigorated its local government, by giving officials both resources and activities to supervise their development plans.

Source: Vajja and White (2006)

In order to maximise gains from potential synergies arising from the integrated package of interventions, the MVP should consider systematic cross-sectoral learning and communication among sector specialists – including non-MVP specialists from the lowest administrative tier of government.

16. Without implying that the current farming systems in the different MVs were not already to a certain degree integrated in larger market systems – for example Bonsaaso in the international cocoa market or Ruhiira in the national Matooke market.

Ensuring that achievements are lasting requires a recognition that inter-sectoral collaboration and coordination are not simply a technical challenge but also a political one, requiring strong interest from the district leadership.

Institution building can be seen as part of this integrated agenda. The MVP emphasises community-based management teams, producer organisations and, notably, farmer cooperatives and microfinance institutions as three kinds of long-term institutions which help sustain the achievements (McArthur and Sachs, 2008). We see additional need to collaborate closely with district officials to support and enable communities to develop and strengthen rules and procedures, and the associated village institutions, that govern the use of MVP-supported investments (such as flour mills, water points, trucks, ambulances, etc.) to minimise and guard against elite capture of benefits. Correspondingly, less emphasis should go on sector-specific committees, which often have no official government status and recognition and do little to promote local structures of accountability, despite being valued positively by community members. Alternatively, sector committees should be integrated into formal government structures, and efforts should be made to ensure downward accountability and widespread ownership of project inputs. Officialising community committees can also be a way of giving them more weight and status and can help to overcome the fatigue in participating in time-consuming, but financially unrewarded, committees that can be often observed after several years.

The challenge in making the transition from a standalone project to a government-executed one will be in channelling funds through government in the expectation that, given the choice, local decision makers will use the funds to pursue achievement of the MDGs and the funds will be deployed as budgeted, without leakage or corrupt appropriations. Earmarking international funds and adequate auditing should help transition, but experience suggests that neither of these measures can guard completely against the dangers of misdirection and misappropriation of funds. For this, there has to be political determination to continue implementation, and to protect the funds against the many competing claims on them. This determination may best be manifested through a champion.

A number of successful projects that started as relatively limited area-based or NGO-driven initiatives were successful mainly because they were driven by champions, who devoted a considerable portion of their career to seeing the project to success. Currently, the MVP is managed by a team that is highly qualified and committed to implementing activities to the highest standards. Staff engagement with stakeholders from among the donor community, government or the private sector beyond the district level is, given the tasks to fulfil, necessarily limited. A champion who can take the MVP agenda forward over the longer term (possibly 10 years and beyond) will likely enhance the opportunity to sustain the MVP (see Section 6.3.2).

5.4.3 Assessing and integrating direct and indirect costs and benefits

Despite the low cost of interventions, beneficiaries have raised a number of concerns regarding indirect costs related to MVP interventions. A careful assessment of indirect costs might contribute to devising location-specific mitigation measures. This is also a measure to help prevent elite capture of specific interventions, especially capital investments – the Isuzu community truck in Koraro, Ethiopia and the debates about transparency over the payment for, use of and revenues derived from journeys may serve as an example.

5.4.4 Adaptation of the model

In Section 4, we noted that we consider the adaptations made to the investment model in order to reflect local conditions a positive aspect of the project. Flexibility in budget allocation between sectors to accommodate site-specific needs should be maintained over the remaining three years of the first phase and be a guiding principle for the second phase as well.

Above, we argued that sustainability will require a closer integration of MVP processes into normal

government structures and processes. For this to happen, the balance of interventions and investments: (i) in village-level inputs and services; and (ii) those made in district administrations, vertical linkages, infrastructure (e.g. roads beyond the cluster) and higher-level institutions (e.g. by supporting training of village level extension staff), need to be reconsidered. In our view, investments in the latter are spread too thin and leave present investments vulnerable to limited sustainability once the MVP pulls out.

It is useful to make the distinction between substitution and complementary investments. While the MVP is opposed to substitutions, we see this as something worth considering if funds or other resources do not materialise or if the context changes. Sustainability in specific sectors may likely require a shift in emphasis. In the agricultural sector, for example, dependency on external inputs has recently proven difficult, given the high prices for chemical fertilisers and seeds, even for the MVP which, in Uganda has found it difficult to maintain the current level of subsidies without compromising funding for other planned activities. More experimentation with alternative approaches to raise production and productivity could contribute to reducing costs and ensuring sustainability once outside support – financial and technical – is reduced or even stopped.

The project has witnessed early success in using private input dealers, on which the sustainability of the agricultural revolution depends. The review, therefore, recommends that ongoing and concerted efforts are made in building and replicating these partnerships between the private and the public sectors in existing MVs (accelerating plans for Years 4–5).

As the project is implemented in 10 countries, we could imagine greater experimentation with different modes of implementation. In all countries, a similar number of managerial and technical staff are employed by the MVP. Would alternatives exist that are cheaper and thus more within the reach of what governments will likely be in a position to afford in the short run, given the shortage of qualified personnel? This seems relevant for ensuring not only sustainability but also (even more so) scaling-up. We would encourage the MVP to continue exploring minimum conditions for sustaining MVP investments and service delivery in terms of staffing, qualification of staff (i.e., task shifting), levels of subsidising inputs, etc.

As part of this experimentation and exploration of minimum conditions for sustaining the MVP, a small set of indicators could be developed to track progress in creating the conditions for sustainability. Such indicators could emerge from the recommendations made above: Is there a champion in each country? How far are MVP plans integrated into government district plans? If they are not integrated, what are the bottlenecks and how is the MVP addressing these? What evidence is there that the project is responding to different – and changing – needs of a variety of stakeholders? What evidence is there of investment in complementary second order institutions and infrastructure linking the MVs to other areas

5.4.5 National buy-in and ownership

A second set of recommendations relating to the sustainability of the MVP concerns engagement and support from national governments. These should be encouraged to continue to progressively increase the allocation of extraordinary resources in: (i) government personnel, such as the already allocated or seconded staff for service delivery in the health or education sector; and (ii) the required vertical linkages (e.g. roads, markets, electricity) to complement the village-level investments by the MVP, but within a publicly justified framework that balances equity considerations with the public interests of sustaining this policy experiment.

6. Scaling-up the MVP interventions: What next?

6.1 The imperative to scale up

The World Bank associates scaling up with 'increasing the socioeconomic impact from a small to a large scale of coverage' (World Bank, 2003). In this review, we distinguish between sustaining the MVP package of interventions within the MVs ('adapted MVs') and extending the benefits offered by MVP-type interventions to a wider geographical area beyond the MV-1 and MV-2s, taking into account a number of essential linkages to, and investments in, second-order institutions ('enhanced MVP').

The MVP demonstrates that a modest donor contribution of US$60 per capita, complementing other funding sources from NGOs, governments and beneficiaries amounting to US$60 per capita and year, can contribute to attain the MDGs at the local level. Given donor commitments that amount to approximately US$62 billion by 2010 (at average 2007 rates) (MDG Africa Steering Group, 2008), it should thus be possible to cover the basic MVP interventions of US$60 per capita and year, amounting to approximately US$32 billion for all of rural Africa, across the continent.

The MVP recognises that the real value of the project in relation to the MDGs can only be realised if each rural village has access to the integrated package of interventions. Currently, the MVs are 'islands of relative prosperity in a sea of poverty' (McArthur and Sachs, 2008) and meeting the MDGs across the African continent entails MVP-type investments in all of its approximately 110,000 villages.[17] The project designers conceptualise the scaling-up as involving three challenges (Jeffrey Sachs, personal communication, 31 July 2008):

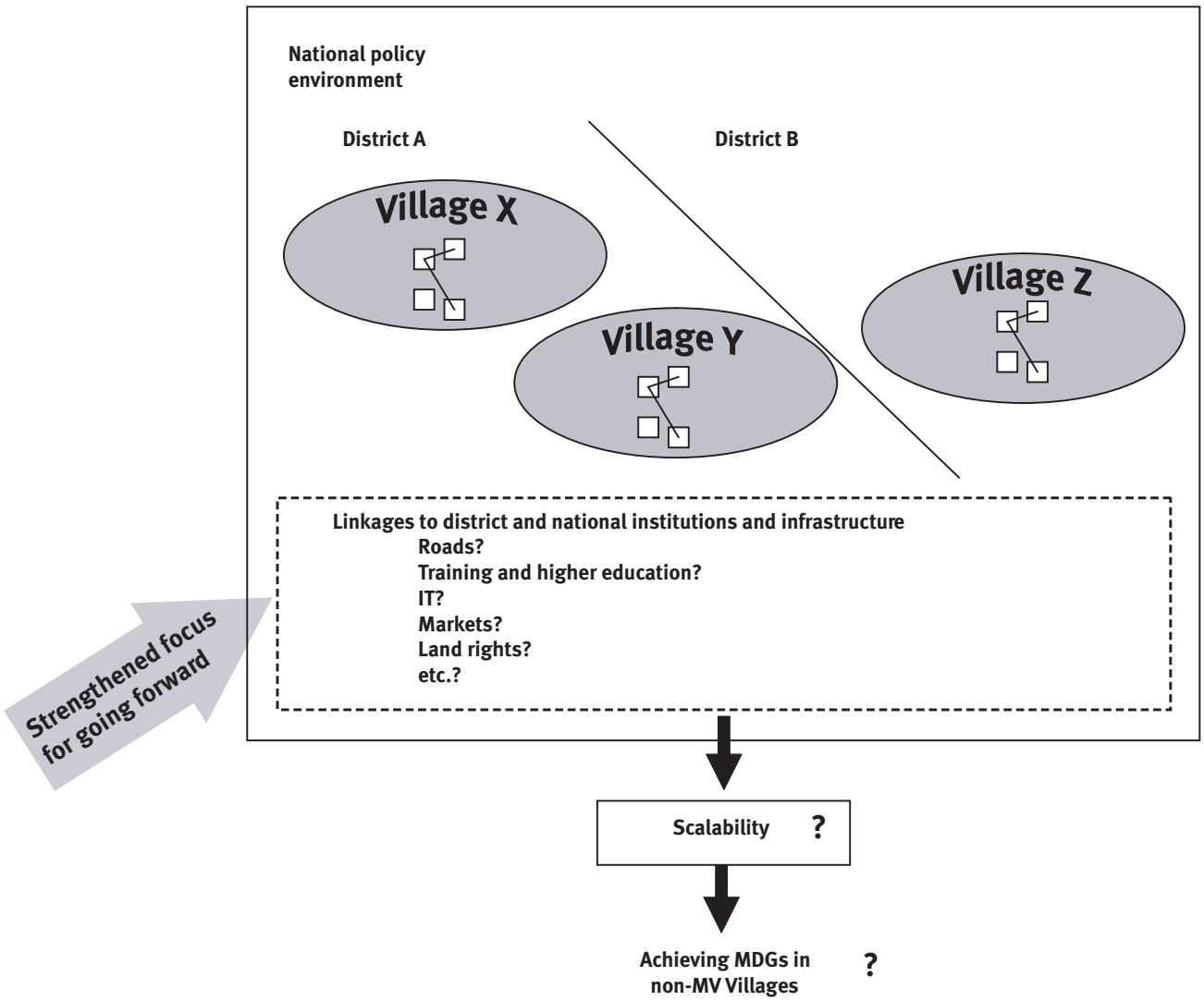
- Increased funding, as aid is the binding constraint to rolling out interventions. 'They [the MVs] also clearly show us that without the actual delivery of increased donor flows, the MDGs are likely to be missed by a wide margin in most of rural Africa. If the ODA commitments do not come to fruition and the resources are not available for mass scale-up then scaling up will not succeed' (McArthur and Sachs, 2008);
- An appropriate national policy framework which: (a) supports the development of appropriate and adequate skills for the delivery of the package; (b) involves robust government ownership of MVP-type investments; (c) involves improved management capacity of decentralised development efforts; and (d) entails improved oversight and accountability for rural development; and
- Learning from the MVP experiment and adapting the model as required.

The review team sees an additional challenge for scaling-up relating to the political situation and security, as scaling-up may be more challenging in less well-governed countries or in the face of political instability, as the case of Kenya illustrates. Although originally a country selected for this review, the team had to drop Kenya because of the post-election violence, which also affected local MVP staff in early 2008 (John McArthur, personal communication, 10 January 2008).

As posited in our conceptual framework (Figure 6.1), we concur with the MVP that scaling-up will entail increased funding, changes to the national policy framework and learning from experience with the implementation of the project in pilot villages so as to adapt the model. Replicating MVP-type interventions horizontally across a wider geographic area entails, in other words, attention to factors on which success depends that are external to the target villages. In our conceptual framework, we have characterised these as ownership at all administrative levels and by a broad

17. Current population in sub-Saharan Africa is about 770 million. Of these, 70% live in rural areas = 540 million people/5,000 = 108,000 'villages/units', which would need similar investments to the current MVs.

Figure 6.1 Scaling-up of selected MVP-type interventions by governments to other areas beyond the MVs



range of stakeholders, a good fit between project goals and the priorities of the aforementioned stakeholders (alignment), adequate linkages to, and investments in second-order institutions (e.g. access to roads, credit markets, training facilities, social norms, property rights, rule of law, etc.) and the factors that determine sustainability. In other words, scaling-up, as the MVP acknowledges, depends on doing many things that the MVP, as a village-level demonstration project, has not focused a great deal of attention on to-date.

This section asks what needs to be done to ensure scaling-up, and whether or not the project, with its almost exclusive attention on village-level investments,[18] can inform us of what would need to be done beyond the villages to support and make the horizontal replication of investments effective and efficient. In other words, could more have been learned about achieving the MDGs by investing in a more vertically integrated package in fewer countries?

6.2 Meeting first-order scaling-up requirements

In this section, we report on and discuss two of the critical issues concerning scaling-up MVP-

18. The MVP provides some investments in roads and other infrastructure within or close to the cluster and there are attempts to develop and strengthen some rural–urban linkages (e.g. local roads, ITC, etc.)

type rural investments, namely, donor and government commitments and intentions.

6.2.1 Aid

The MVP scale-up is predicated on improvements in the quantity and quality of aid and the ability of government to absorb it. In relation to the quantity, the success of the MVP is based on a doubling of aid to Africa between 2005 and 2010 (i.e., the G7 committed to mobilising an additional US$25 billion for Africa by 2010).[19] The data on which to assess progress are problematic, and interpreting recent developments difficult. Overall, preliminary data for 2007 suggest net ODA to Africa was around US$36 billion (in 2005 dollars), an increase so far of about 8% per annum at the half way point of the Gleneagles commitment. It is estimated that progress needs to accelerate to a 15% increase per annum if the US$25 billion increase is to be achieved. Donor commitments were reaffirmed at the G8 meeting in June 2008 in Japan:[20] some donors, such as DFID, appear to be on track and other commitments are materialising. For example, in July 2008, the US Congress committed US$48 billion for African health support over five years – which represents nearly a tripling of total US ODA financing for Africa, entirely outside of the Gleneagles commitments (Steve Wisman, personal communication, 30 August 2008). The Africa MDG Steering Group, bringing together the leaders of the most important multilateral development organisations under the UN Secretary-General, points out that domestic resources and private sector contributions will not be sufficient to achieve sustained economic growth and the MDGs, but that external public financing for development in Africa needs to rise to US$72 billion per year to support the achievement of the MDGs. The Steering Group thus calls on development partners to fulfil the ODA commitments made at Monterrey (i.e., making concrete efforts towards the target of annual ODA equivalent to 0.7% of gross national income – GNI) and in the run-up to the UN World Summit in 2005, including at Gleneagles (MDG Africa Steering Group, 2008).

The point is that most donors will have to redouble their efforts if commitments are to be met – even in the countries in which the MVP is active – as ODA (in 2005) in the countries we reviewed range from US$49 in Ghana to US$24 in Ethiopia far below the US$60 target for the package of village-level interventions. While no fault of the MVP, and indeed the MVP is a key player in advocacy efforts to ensure that aid commitments are met, the recent history of aid suggests that full scale-up of MVP-type investments may not be feasible by 2011.

Irrespective of whether or not the promised increases in aid are only partially met, a number of development economists are concerned that, based on past experience in Africa, it would not be possible to put large volumes of aid to good use owing to limitations to absorptive capacity (Killick, 2005; de Renzio, 2005). In Ethiopia, for example, of the total multilateral and bilateral donor loans and grants provided to the water sector, only about 38% could be absorbed in 2005/2006 (MoWR, 2008), owing to challenges related to shortages of the necessary capital equipment and spare parts, as well as the limited availability of skilled artisans and technicians to implement the necessary construction activities. The lack of skilled managers and service providers limit absorptive capacity (see Box 6.1). Moreover, weak fiduciary management within governments and the concomitant propensity to manage external funds through the project modality further constrains absorptive capacity, thereby further diminishing the returns to aid (see Box 6.2).

The quality of aid has yet another implication for realisation of the MVP scaling-up ambitions,

19. Following the Gleneagles Summit, ODA to Africa in 2004 was confirmed at US$29.3 billion; so the target level of ODA to Africa by 2010 corresponds to US$54.3billion in constant 2004 prices (MDG African Steering Group, 2008). In current 2007 dollars, the commitment amounts to more than US$60 billion. Yet as a result of various clarifications, however, the original increase has been revised downwards from US$29.3 to US$21.8 billion.

20. Statement of the G8 Finance Ministers Meeting, Osaka Japan, 14 June 2008, see http://www.mof.go.jp/english/if/su080614.pdf (accessed 1 September 2008.)

Box 6.1 Absorptive capacity challenges

The MVP proposes a big push in investments, supported by aid, to overcome poverty traps and the vicious circle of low savings and investment in rural Africa. The project's underlying assumptions are that aid to Africa will double between 2005 and 2011 and that a large part of it will need to be allocated to MVP-type activities in rural areas.

Research indicates that the impact of aid on development and growth depends on the strength of institutions and the quality of policies and also that an 'aid saturation point' could be reached anywhere between 15% and 45% of gross domestic product (GDP),[1] beyond which the marginal benefits of additional aid inflows become negative (de Renzio, 2005). Limited absorptive capacity might be the cause for such declining marginal returns of increasing aid flows (White, 2005).

A country's absorptive capacity is likely to be constrained by:

Weak macroeconomic management – if poorly managed, large and sudden increases in aid inflows in the form of foreign currency could cause a 'Dutch disease' effect in the economy;[2]

Paradoxically, an excessive level of aid dependency, which is often accompanied by significant fragmentation of donor-funded development interventions and consequently high transaction costs for governments in managing development assistance, which take resources and time away from core public sector activities;

Fragile institutional and political structures, with poor planning and financial management and with high risk of corruption, wastage and leakage; and

Operational limitations, such as scarcity of human (shortage of qualified staff) and physical capital (basic infrastructure and equipment) to support and sustain aid-funded investments.

The first type of constraint is particularly relevant when talking about country-wide scalability of the project. The other types of constraints are likely to be especially important at the local level, particularly in rural Africa where the MVP is being implemented, and represent a challenge to both project sustainability and scalability.

1. The figures of ODA as a % of GNI for 2005 are: Ethiopia: 17%, Ghana: 11%, Malawi: 28%, Uganda: 15% (Source: UNData, data.un.org, accessed 30 August 2008).
2. Dutch disease is an economic phenomenon originated by a large and sudden increase of foreign exchange into the country which leads to the appreciation of the foreign exchange rate thereby harming the competitiveness of the export sector.

namely, what the aid finances. The MVP requires that the investment package is guided by the allocation formula set out in Section 2 – and, in particular, in village-level investments in goods and services of direct benefit to the rural poor. Yet, the development industry has been beset with the problem of low-quality or 'junk' aid for a long time. According to White (2005), pro-poor spending is not an area in which donors have excelled; indeed, dated data suggest that less than one-fifth of aid was spent in a way that directly benefits the poor. According to some reports, there is evidence to suggest that things have not improved. ActionAid estimates that of the aid delivered in 2004, almost half of it (47%) was 'phantom aid' – spent on activities not targeted at poverty alleviation (i.e., allocated to middle-income countries), provided as overpriced and largely ineffective technical assistance and immigration-related activities in the donor counters – or was 'aid' double-counted as debt relief etc. (ActionAid, 2006). While the MVP is premised on the reduction of junk aid – a state of affairs which is both highly desirable and to which the MVP aims to contribute by demonstrating a model of aid delivery that directly targets the poor – it is not likely that it is politically feasible to eliminate it completely in the short run up to 2011, leaving a considerable, if hopefully diminishing, gap in the funding available for scaling-up.

6.2.2 Evidence of government intentions regarding scaling-up

Scaling-up is strongly conditioned by the intentions of the national government as it will need to request aid for MVP-type investments and make the necessary resource allocation. At the outset of the review, the project designers cautioned the research team against relying on what they thought would be only partially reflective statements from national authorities if asked about their ex-ante intentions to allocate increased resources to any particular intervention if funds (say from donors) were made available to them to do so. It was

Box 6.2 The limits of project assistance

The MVP is being funded through a conventional project modality, whereby aid is earmarked to specific activities defined by the project and funds flow to project-specific bank accounts and are managed according to project-specific financial rules and procedures, in compliance with the requirements of the funding agencies.

Project funding has for a long time been the dominant and almost exclusive modality of development assistance. Project aid tends to be focused on concrete deliverables over a specific timeframe rather than on building capacity and sustainability of domestic institutions. Aid provided in this fashion prioritises ends over means. Funding is often managed by the donor or an intermediary agency (typically UNDP in the MVP case), according to a specifically designed plan and the donor's (or standard international) financial management rules, rather than the country's own public financial management systems and procedures.

The project modality has been an effective form of aid delivery in humanitarian interventions and post-conflict or post-emergency reconstruction, as well as in fragile states where domestic institutions are not sufficiently robust or reliable to manage development assistance. However, with a few exceptions, the effectiveness of project aid to support public sector development and services has been questioned when applied in more stable contexts where there is a degree of institutional capacity in place, sufficient to ensure direct management and control over development assistance resources. Evidence suggests (e.g. Dollar and Pritchett, 1998; Harrold and Associates, 1995) that the project approach tends to undermine ownership by domestic agencies, harm the comprehensiveness and allocative efficiency of the state budget, undermine the domestic structures of democratic accountability and produce high transaction costs for governments.

There are cases, however, where the nature of the assistance requires specific arrangements to be put in place for delivering aid outside the domestic planning and financial management systems, i.e., through the conventional project modality. Daima Associates and ODI (2005) identify the following examples:

- For mutually agreed activities where a development partner is better placed, technically or administratively, to manage the project on behalf of government, for example:
  - technical assistance support, where very specific earmarking is required and where specific procurement rules to recruit advisers may be needed,
  - large-scale infrastructure investments, where the transaction costs for managing procurement through the public financial management system might be too high, and
  - pilot projects, where particular service delivery innovations need to be tested before their mainstreaming by government.
- As an ad hoc response to a narrowly specified, perhaps transitory, need – such as change management processes associated with government reform, emergency relief interventions, etc.
- To support entities outside of the public sector, such as NGOs and private sector associations, to undertake actions that would not normally be funded by government.

As long as it remains a pilot, the use of the project modality to manage MVP funds is justifiable. However, even where projects modalities are used, certain basic operating conditions should be adopted. The EC (2003) suggests the following:

- There is a need to ensure that the project is consistent with government policy objectives (not a problem with the MVP);
- Project implementation should rely as far as possible on the use of government planning, budgeting and financial management structures (planned to be the main modality for scaled-up MVP activities (MV-3), but currently of concern for the MVP because of inadequate capacity at the national, district and local levels);
- Project planning should take into account other expenditures within the relevant sectors by government and other donors, so as to maximise complementarities wherever possible (this appears to be done) and minimise future recurrent cost implications (the evidence is mixed on this – on the one hand, the MVP advocates for an expanded resource envelope as it considers the current recurrent spending too low and, yet, on the other, the MVP is sensitive to the need to keep the recurrent cost implications as low as possible and has, for example, decreased the number of planned clinics in Malawi to more closely to government norms);
- It is necessary for governments at all levels to be provided with full information on project budgets and expenditures, ideally in the same format and timetable utilised for reporting on government expenditures (this has yet to be done);
- Transaction costs (such as those resulting from additional specific conditions and reporting requirements) should be minimised through coordination with government and other donors and, if appropriate, through co-financing of projects (MVP scores well on this criterion as it manages all aspects of the project, requires no additional reporting from government and operates in a co-financed manner).

explained that this was the case because these decision makers are operating under the long-term constraints imposed by present resource scarcity (Jeffrey Sachs, personal communication, 18 June 2008).

Our findings in this regard were rather meagre and likely not very meaningful, in part because experience with the initiative is relatively nascent and in part because of the MVP focus on the village as opposed to national level. In some of the countries, such as Malawi, national and district policymakers argued that they would indeed implement MVP-type activities were funds made available. The MVP reports that it has received specific requests from the governments of Ethiopia and Uganda to scale up from the present MVP villages. In Uganda, for example, MDG-interested members of parliament discussed the idea of 'every Ugandan village a Millennium Village' and expressed in writing their interest in expanding the MV initiative to their constituencies (John McArthur, personal communication, 14 August 2008). Some countries have developed concrete scaling-up plans: (i) Kenya for eight 'Millennium Districts' across the country, each with a population of roughly 500,000 people; (ii) Mali within the 166 poorest communes (of some 700 communes) that require targeted cross-sectoral support, following on the MV lessons in Tiby; and (iii) Rwanda with plans to scale-up the model MVs in all districts as part of its Vision 2020 Umurenge national strategy (McArthur and Sachs, 2008). We have not examined the Kenyan and Rwandan plans in any detail, but it is worth pointing out that, while the Malian plan, for which the government is presently fund-raising, costs out village-level investments (the 'adapted MVs'), it does not plan for or cost out the second-order investments required for an 'enhanced MVP' (see below). Consequently, this plan represents an intention to replicate but not necessarily to scale up. Moreover, it is a plan, and even plans are not necessarily the best predictors of action; as stated above, implementation will rely on financing provided by donors, which implies financing both the MVP package and the second-order investments. In the case of Mali, the government is probably in a position to allocate the required frontline staff to the 166 communes – if necessary, by reassigning teachers, nurses, etc. from other parts of the country – but the 'production' of staff to achieve a more broad-based scale-up would require medium- to long-term investment in training facilities, etc.

6.3 Recommendations relating to scaling-up

6.3.1 Building upon the MVP model

The MVP has been remarkably successful in rapidly delivering investments in rural African communities. In Section 5.3.1, we identified a number of interventions implemented in the MV that the governments had previously not implemented or were only capable of implementing partially – staffing and supplying rural health posts and clinics, deploying CHWs to villages, providing adequate coverage with agricultural extension agents or providing agricultural inputs. We also identified a number of low-cost interventions in the agricultural and health sectors that are easier to sustain and scale up than others, even without additional government or donor funding. All these interventions could – and should – be scaled up.

Start with interventions that need limited adaptation to local contexts

The review team proposes that interventions be scaled up in a sequenced manner. In a first phase, interventions that need little adaptation to local conditions, thus few or minor reforms to institutions, should be scaled up. Most prominent are those that are already replicated elsewhere, even without additional funding (e.g. pot irrigation in Ethiopia, school feeding in Uganda once surplus yields are achieved, etc.), as these seem to produce desirable results for beneficiaries and to pose no major institutional, technical or managerial challenges. Other interventions that depend on additional donor funding but that could be scaled up in a first phase include providing and distributing – whether for free or for a nominal fee – bed-nets to all households. Mass vaccination campaigns and regular presumptive mass de-worming of children and adults are other examples assumed to have significant positive short-term impacts.

Yet, these interventions do place not insignificant demands on community staff and their supervisors as well as the logistics chain. Posting sufficient numbers of extension agents or providing knowledge and simple technologies for small-scale irrigation or information on possibilities for crop diversification are potential fast-track interventions in the agricultural sector. Providing subsidised inputs – if in line with government policies – represents another potential intervention for scaling-up for this first phase. Yet, the lack of rural roads can be anticipated to limit the reach of inputs to very remote areas. Additionally, local farming systems, market conditions, soils and climate conditions need to be factored in carefully, but it can be assumed that, in most countries, national agricultural research organisations have already developed a range of options for farming system diversification and intensification for different agro-ecological conditions for the MVP to further consider. By initially scaling up only select interventions, access to the package of services will be sacrificed and some potential synergies are likely to be compromised. While the MVP is rightly concerned about the implications of this approach, we see it as reflecting both experience with the adaptation of the MVP model in practice and likely social and political realities.

Improve working/living conditions for frontline service providers

A second set of interventions that should be initiated is the provision of more competitive salaries to frontline government staff, as compensation for working in remote and difficult environments. This might not be a quick process, however, owing to the politics involved – as central government personnel may wish to limit allocation to the periphery or may wish to get a slice of the action. Moreover, it may entail lengthy reforms to government staffing regulations. Paying decent salaries is also a means of filling empty posts and, as the case of Ghana shows, where the government has recently decided to increase salaries for health staff, can result in immediate positive results. Having the necessary staff in position is a precondition for scaling up a number of interventions: if bed-nets are made available widely, CHWs need to be trained and working in the villages supervising their proper use; if increased fertiliser and improved seeds can be funded and distributed to farmers, agricultural extension agents must be available to explain to farmers how to use the inputs properly.

Posting frontline staff in numbers as demonstrated by the MVP to be necessary to deliver the services adequately depends not only on paying decent salaries and top-ups. A range of other provisions might be necessary, such as providing village-level government staff with decent housing and working conditions, transport, etc. These additional investments can quickly become expensive and it is not clear whether or not donors are willing to underwrite a massive expansion of government employees.

Scaling up fast-track interventions needs to be well aligned with government policies and procedures so as to secure sustainability. In Ethiopia, for example, the review team was informed by the MVP team in Addis Ababa that when the Prime Minister visited Koraro he was very much impressed by the achievements in a short period of time, but that he also hoped that if MVP-type investments were scaled-up it would be done with the level of staff the government had on the ground. This might impact on staffing of facilities (e.g. clinical nurses at the community level) or subsidising inputs (e.g. the current Ethiopian policy is to provide fertilisers and improved seeds on a credit basis).

6.3.2 Include more outward oriented learning and policy engagement

Further embrace the learning and adaptive model: The adapted MVs

Box 6.3 summarises the observations made by Korten (1980) on how successful rural development programmes progress through different stages and the factors that make these programmes successful in moving from the experimental stage to being delivered at scale. One central lesson drawn from this is that, as a project progresses through different stages, different demands and

managerial approaches are required: stage one is concerned with learning to be effective; stage two is concerned with learning to be efficient; and stage three deals with learning to expand. Applying this learning process to the MVP would translate as follows:

- The MVP is currently in stage one. It is characterised by a great number of interventions which are similar across the 10 countries. Yet, these countries differ considerably in ecological, social, economic and political terms, and thus have different poverty profiles and different cultural norms. Different interventions might be emphasised in the different contexts. The project should devote a considerable portion of its expert time to experiment and learn which of the interventions are specifically responsive to beneficiaries' needs and which are less so, and which of the interventions contribute most to reaching the MDGs in different contexts. Examples, some of which are already included in the MVP implementation strategy, could include: (i) supporting the investments with fewer or less qualified staff; (ii) providing more options to farmers from which they can choose (e.g. in addition to improved maize, other crops, perennials, livestock, etc.); (iii) organic approaches to improving soil productivity (while yield increases might be less than with chemical fertilisers, so too are risks); or (iv) different income sources – agriculture and non-agriculture alike. The MVP can do so as it operates at the moment with a large and highly qualified staff who possess the intellectual capacity and the local knowledge to experiment with different interventions and implementation approaches.
- In stage two, which could start towards the end of the first phase of the MVP, the focus should be on simplifying the programme to those components identified in stage one that are seemingly most cost-effective in a particular locality. This might involve an assessment of the relative costs to beneficiaries and government of attaining specific outcomes – be they agricultural or health or other. It might also involve an assessment of alternative means of achieving those goals. Farmers may not wish to subsidise the school feeding programme, preferring a more private approach to feeding their children lunch once they have achieved certain income production levels. Or, after the initial gains from health education provided by CHWs, greater disability life years may be averted from the interventions provided by more highly qualified health personnel – calling for greater investment in training facilities, for example. Those interventions and programme components that have marginal benefits compared with their costs should be removed from the package.
- Stage three should focus on identifying ways to reduce operating procedures to those strictly necessary and to simplify as far as possible those procedures so that they can be operated by the staff likely to be available in sufficient numbers in the short and medium terms. In most rural areas of most developing countries, field staff will have qualifications no higher than diploma level and, indeed, many may be only secondary school leavers – albeit in both cases they may have received additional training specific to their jobs.

Adapted MVs

In an ideal world, funding should be available from donors and governments to fund MVP-type interventions in rural areas to achieve the sorts of goals sought by the MVP. Efforts should continue to be made by all concerned stakeholders to advocate for the realisation of the 2005 Gleneagles aid commitments to make these investments possible. Under less than ideal circumstances, where not all donor commitments come to fruition, efforts to further adapt the MVP should be encouraged.

Given the considerable variation across and within countries, the findings reveal that the model has been adapted in its implementation. We consider the further adaptation as a necessity if the project is to be effective, efficient and rolled out across larger areas. This learning and adaptation process not only should be considered in the light that: (i) ODA promises may not be fully met by the year 2011; (ii) donors may not allocate all ODA to MVP-type rural investments; (iii) governments may

Box 6.3 Rural development as a learning process[21]

Korten (1980) observed a number of successful rural development programmes in Asia through different stages over lengthy periods of time and identified the processes that made these programmes successful in moving from the experimental stage to widespread implementation. The learning process through which they went recognised that the demands upon successful development programmes would change over time and that, thus, there were correspondingly different implications for implementing agencies over time. In successful programmes – whether private or public, multi-purpose or single-purpose, broadly or narrowly defined target groups – Korten found a high degree of fit between programme design, beneficiary needs (which are a product of the political, economic and social context in which they live) and the capacities of the assisting organisations.

Korten identified three phases in programmes that had been successfully scaled. During the first phase, 'learning to be effective', programs search for ways to achieve their goals through processes of experimentation, acceptance of error, flexibility and adaptation. False starts may be made, but what matters is that these are detected early and new ideas tried, so that by trial and error an effective programme can be devised. Once effective, the second stage, 'making the programme efficient' involves identifying the means to use the minimum resources necessary to achieve the results required.

Typically, this involves eliminating procedures that are not critical and adapting others so that they can be operated by less skilled and qualified staff. In the third stage, 'scaling-up', the programme is expanded and replicated to cover a larger area, going from district to national level. This depends largely on there being sufficient capacity to manage the expanded programme.

During the first phase, small teams of highly qualified professionals may operate informally with much interaction with beneficiaries in a stimulating and creative process – precisely the kinds of operations that NGOs, unencumbered by civil service procedures, can run. By the time the third stage is reached, the programme may be quite formal, with hierarchies of staff operating procedures set down in manuals.

Other elements Korten identified as contributing to the success of grassroots programmes started in a limited area but later successfully scaled up were: (i) the programmes were driven by champions, individuals who committed most of their career to seeing the programme succeed; and (ii) often the time devoted was considerably longer than the typical donor funding span (or political cycle).

not wish to allocate resources along the lines envisioned by the model; or (iv) other stakeholders may block resource reallocation or implementation of stated government policy (all of which are likely to a certain degree), but also should be an integral part of the evolution of the project, as suggested by considerable experience with IRD programmes (see Box 6.4). An extensive M&E system is being developed for the project and a large amount of information on process and performance indicators is being already collected. Additionally, experimentation with how to deliver the MVP with fewer and less qualified staff needs to be considered. Lastly, part of the learning process should be concerned with identifying which of the second-order investments and institutions (e.g. roads, markets, electricity, crop insurance, microcredit, transport, market information, legal reforms to improve the business environment, etc.)[22] pose the most serious bottlenecks to successful implementation or the greatest risk to sustainability and scalability. All this will eventually lead to 'adapted MVs' focusing on a different set of interventions in different contexts and using different implementation procedures that can potentially be scaled up under different countr contexts, more limited staffing or more modest resource scenarios.

Systematic documentation

An important component of the learning process is the systematic documentation (and dissemination) of country-specific: (i) change management processes; (ii) successful interventions (including,

21. See Annex 5 for further details and detailed references.

22. The MVP's present budget supports building of local roads, connection of the MVs to the electricity grid, installation of solar energy and other infrastructure investments in the villages, but the need for much more ambitious investments is patent. For example, if all villages were connected to the electricity grid, would a country be in a position to deliver the electricity to all? Or would it need large investments for the construction of dams/power plants first?

Box 6.4: Lessons on scaling up from area-based rural development approaches

During the past 60 years, there have been several experiences of development driven from the village or district level – community development (CD), IRD and rural development led by NGOs (see Annex 5 for more details, including references). A number of lessons can be drawn:

- Rapid scale-up of locally successful area-based pilots often led to elite capture, as elites were able to monopolise the additional resources provided by the programmes. Existing power structures were accepted as a given and no attempts were made to change them.
- The rapid scale-up of CD led to resources being spread thinly while political expectations were inflated. Success at pilot scale was rarely seen in replication.
- CD programmes often failed to generate sufficient additional income to make any impact on poverty and hunger.
- Conflicts were common within both national and donor administrations between the CD staff with their processes and generalist approaches and the more specialised staff of the line ministries and donors who focused on achieving technical outcomes rather than process.
- IRD was administratively highly demanding, since it was often not only planned as multi-sectoral investments but was also meant to be implemented in close coordination across ministries and agencies.
- Because of insufficient government capacity to implement multi-sectoral programmes, special implementation units were set up. These units were often well-financed by donors, staffed by expatriates and used financial channels that were outside and parallel to those of the rest of the government, making them unsustainable in the long run.
- The technical focus of the IRD programmes marginalised considerations of political and administrative feasibility. Planning and implementation were decentralised, not to local government or local organisations, but to the dedicated project units. Participation by the clientele of the rural poor was minimal.
- As with CD, there was too little evidence that the IRD programmes were effective in reducing poverty and hunger.
- Integration in search of synergy makes sense; operationally, this need not imply integrated implementation of service delivery with heavy demands on scarce administrative capacity, but rather that plans are integrated.
- It is necessary to consider the overall context, not just the local: village-level programmes can be stymied if the national context is adverse.
- Developing local capabilities and institutions requires time and plenty of adjustment.
- It helps to have technical innovations that are effective and yield tangible benefits in the short run (i.e., quick wins).
- Donors should stick to approaches for longer than their programming cycles normally permit for innovations to bed down.
- There is a need for sustained political support and for a national champion (See Box 6.2) for any particular programme, something that is more likely to be forthcoming if there are clear early gains.

Experience suggests that, in the long run, rural development will only be sustained and deliver lasting value if local capacity to decide and act is enhanced and if the benefits are shared broadly and equitably. Developing those capacities and reforming institutions and structures to reach these goals will require change over decades, not years.

In the short run, the history of IRD suggests that it is necessary to make advances with tangible results, and above all to raise incomes, education and health levels. The question then is how to make the investments, deliver the services and otherwise create the conditions for early successes, when local social and institutional capacity is low, and to do so with sufficient intensity to make a recognisable difference. A big push from outside can make a difference in the short run and in limited areas, but how to replicate and sustain those gains has proved illusive to-date.

for example, training materials or experience with responsive village action planning); and (iii) the cost implications of individual interventions as an input for the planning of scaling up specific interventions (i.e., road maps).

Enhanced MVP

An 'enhanced MVP' would be one that is different from just an MVP, making a number of adaptations at the village level (e.g. the 'adapted MVs'). An enhanced MVP would address those second-order investments and institutions that are essential for the MVP to be rolled out. Such an 'enhanced MVP' is not simply a matter of making technical decisions, but also a matter of managing the political consequences of financing and rolling out interventions that affect the lives of different stakeholders, both positively and negatively. We argue that its feasibility would be facilitated by

a clearer understanding of the politics of who is likely to oppose and support scaling-up on the basis of their underlying interests. This would enable the project to craft political strategies to deal with possible opposition and enlist required support. The review team was not in a position to do such a planning and stakeholder analysis as part of its task, but this sort of analysis should be ongoing and conducted in collaboration with key supportive stakeholders – government ministries, donors, NGOs, civil society organisations and the private sector.

Champions and longer-term timeframes

Based on the lessons learned from IRD programmes of the past (see Box 6.4, Annex 5), we argued that sustaining the achievements made so far will require longer timeframes and national champions, who, based on personal conviction and possibly experience, believe in the project's philosophy and the need for the institutional and structural reforms upon which its sustained success rests, and can take the MVP agenda forward over the longer term (possibly 10 years and beyond). The champion should have the required links, charisma and gravitas to lobby for the political will necessary to allocate funds to pro-poor sectors and rural areas and to continue implementation, and will guard against the misappropriation of funds allocated to MVP-type activities. Scaling the interventions beyond the MV clusters will require the identification of someone along these lines in each of the countries who can take the MVP agenda forward over the longer term. As part of the role of the champion, we consider it important that the project raises the visibility of the initiative through any number of nationally appropriate means, not just through discussions in development forums as mentioned below, but also potentially through establishing information desks and launching advocacy campaigns. Public affairs and ongoing engagement with policymakers at various levels should not wait until the results of the 'proof of concept' experiment are available, but should receive immediate and ongoing attention by cluster managers, science coordinators and MDG advisors, as appropriate and in close collaboration with the 'champion'. This is arguably the case given what the literature tells us about how and why policymakers adopt evidence-based interventions – usually, it is enhanced with policymaker involvement in research on pilot activities (Nutley et al., 2007).

Integration with national development processes

As part of the agenda for enhancing the sustainability of this challenging initiative, we suggested that the MVP seeks ways to make the transition from a standalone project using project-dedicated management (as well as a considerable number of project staff) and operational procedures for MV-1 and MV-2, to one that relies much more on government systems for its management – including planning, budgeting, executing, monitoring and evaluating. This becomes even more pronounced once the MVP is taken to scale (with future prospective resources for MV-2, future MV-3[23] resources or through other modes).

As long as the project focuses mainly at the local level, integration in district systems is especially relevant. As soon as interventions are to be scaled up, much stronger integration into processes at district, regional and national levels is recommended.[24] There are a number of national development and sector platforms (e.g. joint sector reviews, sector-wide approaches – SWAps) where we would see more proactive participation of representatives or champions of the MVP. Other national platforms, preferably with involvement of private sector representatives, should also be considered. If there are limited fora for the MVP to participate, project-specific steering committees

23. The MVP has already promoted MV-3 programming and financing to be channelled through government systems (e.g. in Mali and Mozambique).

24. For example, with the Development Executive Committee in Malawi. The MVP has successfully facilitated this setup in Ethiopia, where the project-specific advisory committees established at regional and wereda levels have encouraged discussions over the nature of MVP interventions.

could be considered as a second-best and transitional option – and indeed these exist in some countries already. Despite the considerable costs involved in participating in a number of different platforms, this could contribute not only to enhancing the visibility of MVP interventions but, more importantly, it would provide a platform for critical reflection on emerging lessons, issues and experiences in implementation and especially in relation to scaling.

Stronger integration into existing government structures provides a way of ensuring ownership within line ministries. It was argued by informants that, as a direct result of the limited input line ministry personnel have had (or were asked to provide) in the design and planning stages of the MVP, ownership among line ministry staff has been quite limited. The rationale behind integration with existing platforms is not only to provide information and to enable government staff to learn about the project, but also to convince policymakers to take the results of the experiment seriously. If they are to do this, they need to be involved in the experiment itself, or so the mainstream evidence-to-policy-to-practice research tells us (Nutley et al., 2007). This would help reverse some perceptions relating to the programme's scalability. In Uganda, for example, there is the feeling among line ministry officials that the MVP is a successful 'proof of concept' and a central player in achieving the MDGs at the local level, but that it is not scalable in its current form at the national level primarily because it is a donor-initiated and donor-funded project lacking government involvement in its design and implementation.

As part of the learning and transition process, even stronger collaboration should be undertaken with additional potential state and non-state partners and allies, particularly those with a stake in scaling-up. This might entail making additional resources available in establishing and cultivating functional working relationships with them. This will most likely have implications for staffing and allocation of the MVP budget between investments in: (i) interventions at the village level; and (ii) investments (particularly of time) in national/district-level management, and in learning, coordination and public affairs. We consider that such re-orientation of investment is likely essential if scalability is to be realised.[25]

6.3.3 Moving beyond the model: Addressing the conditions for an enhanced MVP

In the view of the review team, the scaling-up of MVP interventions will require moving beyond the focus of the present project on village interventions to making major upstream investments in the expansion of human resources and in a series of vertical linkages, as well as expending considerable effort in reforming and strengthening a range of institutions. The MVP designers are well aware that complementary investments are required to successfully scale up the MVP model and have included some upstream elements in their strategy. Yet, given the priority of demonstrating the integrated package of interventions at the village level, are not themselves able to invest heavily in such complementary investments. Consequently, the MVP has encouraged other donors and especially the private sector to get actively involved and to deal with these detailed requirements of scaling-up.[26] It is arguably the case that the MVP could have elected not to invest all of its resources in the 10 countries and could instead have tested a more comprehensive, vertically integrated and enhanced model in a smaller number of countries over a longer period of time to demonstrate the scalability of the MVP proposition. It may not be too late to take this enhanced MVP approach –

25. Budget reallocations might impact on the amount and type of village-level interventions, which at this point in time will be difficult to change, as investment plans at village and cluster level have been made and local communities are rightly likely to hold the MVP accountable for delivering. Yet this reorientation could be financed by possible savings elsewhere or from additional funding.

26. Ericsson, for example, is providing the mobile phone antennas in most of the MVs and the MVP together with Swiss Re is discussing the introduction of innovative climate insurance instruments (Steve Wisman, personal communication, 30 August 2008).

not by cutting funding to existing MVs but through additional investments. Here, we identify what we think are the pre-conditions for scaling up an enhanced model.

Human resource development

As noted above, the success of the MVP hinges on the increased intensity of human resource deployment – particularly frontline and village-based staff such as agricultural extension agents, CHWs, nurses and midwives or primary school teachers, but also better-qualified sector specialists at district levels such as agronomists, engineers, hydrologists or medical doctors, as well as planning and managerial personnel. There are differences in staffing levels and qualifications between the MVP and government norms. In Uganda, for example, the government recommends five clinical staff at sub-county level health clinics (serving each a population of about 30,000 to 50,000 people) (Muwanga and Sserunkuuma, 2008).[27] The MVP has the capacity to support 26 health workers in six health units for a comparable population (two medical doctors, four clinical officers, nine midwives, five enrolled nurses, three laboratory technicians and three health facilitators), of whom six are serving in the Ruhiira clinic. In addition, as part of the MVP task shifting approach, the MVP has recruited 47 community health workers, who carry out some clinical duties such as dispensing anti-malarial tablets. The MVP recognises present capacity limits and the time lines required to increase supply but has not quantified what full (or scaled down) MVP-level human resource coverage would entail or cost to train; understandably, the financing of this training is not within the costing of the US$120/capita/year model – although the project does train community health workers and, as stated elsewhere, has made some limited investments in the production of nurses.[28] It was beyond the scope of the present review to assess these costs, but one can speculate that they would be considerable indeed. In Ghana, for example, the posting of midwives to clinics was considered an excellent intervention worth scaling up for its likely contribution to MDG5. Yet, there are clear challenges. To attain the coverage level established by the MVP (i.e., one midwife per 1,500 households), the number of midwives would have to be increased from the present number of 2,500 to 8,000. A rough calculation suggested that this training intervention alone would cost US$18,000 per midwife over three years (Senior informant, Ghana Ministry of Health, personal communication, July 2008)[29] – amounting to close to US$100 million. While the project may elect to focus on large-scale training and deployment of CHWs instead (i.e., the adapted MV), the rolling out of CHWs would still have serious cost implications. It is arguably the case that substantial savings could be expected, with the focus on prevention and early detection and care delivered at the household level by these CHWs; every effort would need to be made to ensure that these were reprogrammed for training. Malawi's six-year Emergency Human Resources Programme[30] (2004–2010) was costed at around US$198.8 million – limited mainly by what donors were able to commit – but additional funding has since grown to around US$270 million over the six years (GHWA, 2008). According to the World Health Organization (WHO), 57 countries, most of them in Africa and Asia, face a severe health workforce crisis. WHO estimates that at least 2,360,000 health service providers and 1,890,000 management support workers, or a total of 4,250,000 health workers, are needed to fill the gap (WHO, 2006). An enhanced MVP would

27. Isingiro district has a population of approximately 360,000 in 11 sub-counties. Sub-counties have a population of between 30,000 and 50,000 inhabitants on average. The Ruhiira MVP cluster includes eight villages in two sub-counties with a population of approximately 43,000.

28. The MVP planners contend that their cluster--level management team could conceivably cover a much larger population.

29. Calculated as follows: it costs roughly US$3,000 to train a midwife/nurse over one semester. There are two such semesters per year and training takes three years – hence US$18,000 to train one staff person.

30. It should be noted that this figure include pre-training and top ups and various incentives.

need to engage with initiatives at the country and global levels to address the workforce constraints to scaling up the MVP-type interventions (e.g. with the Global Health Workforce Alliance).

Vertical linkages sustaining rural investments

A number of secondary investments have been identified throughout the review, such as electricity grids, roads, transport facilities and services, market links, referral health facilities and credit and insurance schemes, to name a few, considered critical for the scalability of the MVP model. Additionally, as we pointed out above in relation to human resource requirements for scaling-up the investments, a considerable focus on training both frontline village-level staff and professionals at district level is required and, consequently, so too are financing professional training facilities (ranging from vocational training institutes to universities).

The review team endorses the MVP designers' stance that such investments are required but not part of the project's remit, both owing to financial constraints and because of the time involved in their implementation. The review also acknowledges initiatives related to and supported by the designers of the MVP that are meant to address some of these rural–urban linkages. The MCI was mentioned above; its early efforts have focused on research and policy analysis to develop briefs on select investment opportunities. Making the complementary investments required, for example in roads, is beyond the scope of the initiative.

However, a number of strategic steps ought to be undertaken to facilitate the development of the necessary vertical linkages to foster scaling-up. Three of these steps, which the MVP could take in partnership with other stakeholders, include:

- Identify and prioritise in each country context which potential bottlenecks and vertical linkages will be critical to successful scaling-up and realistic to implement, and reflect on how these can be included in the national development plans for take-up;
- Conduct a detailed costing plan of such investments to be discussed in the context of poverty reduction strategy paper (PRSP) revisions and national MDG costing exercises, so as to clearly mark on the map of governments' poverty reduction agendas the benefits and costs needed to carry out such interventions; and
- Undertake some form of stakeholder analysis to identify winners and losers arising from these investments so as to craft political strategies to deal with them.

Another set of linkages concerns partnerships and collaboration with institutions at higher levels, such as agricultural research institutes, national technical advisory services, universities, etc. Concern has been voiced by a number of stakeholders that the MVP is focusing too much on implementing planned activities in an isolated manner and is investing insufficient time and resources in collaborating with such institutions – which are considered important for scaling-up, contributing context-specific knowledge and information or disseminating lessons learned within the MVP.

Scaling-up the MVP depends on additional donor funding for village-level interventions and complementary investments in second-order institutions and infrastructure. As we discussed above, if the ODA commitments are not met by 2011, resulting in a funding shortfall, investments in second-order institutions and particularly infrastructure beyond the village, may be hampered. Moreover, national governments may not be able – or willing – to provide the required vertical linkages (e.g. roads, electricity) over and above what the MVP has budgeted to link the MVs to larger systems and/or the private sector may not provide the required linkages (e.g. crop insurance, microcredit, transport, market information, etc.) Consequently, the MVP should consider developing contingency plans to facilitate the sustainability and scalability of selected interventions, should these eventualities arise.

The strategies suggested above should be seen as a long-term investment that the project should consider to 'probe and prove' the potential of the

enhanced MVP model in its overarching objective of making a sustainable and scalable dent on rural poverty.

Institutional strengthening and reform

Institutions in rural contexts are particularly difficult to change as they are strongly interlinked with customary, non-written but universally accepted social norms set out in each community, which markedly define and dictate the way of rural life, over and above the opportunities and limitations created by outside investments.

The MVP has put considerable emphasis on setting up sector-specific committees in villages where they did not previously exist and in strengthening existing village-level governance structures. Sector-specific committees are entrusted with contributing to planning, implementing and monitoring of sector-specific activities in close collaboration with MVP staff. They are also meant to devise bylaws governing the use and management of capital investments made by the MVP. Committees in Ethiopia, for example, were set up to oversee the use of a project-funded truck and grain mills and to decide how to use the income generated through user fees. For the MVP investments to be sustainable and to be successfully rolled out, existing village-level committees need to be more strongly embedded in government systems and much greater emphasis placed on enhancing their representativeness, transparency and accountability. Institutional strengthening of existing village-level government bodies in assuring that funds and capital investments are used in an equitable and transparent way will most likely also be necessary.

There are many institutions which are outside the control of the MVP but which will potentially impact on the success of MVP interventions. Rules governing access to land provide one such example. Improving land productivity is likely to change the value of land. Larger landowners might find it easier to make use of modern inputs and squeeze out poor households with little holdings. A whole set of new social relations in the MVs might be created which need to be carefully managed in light of sharing the costs and benefits of MVP interventions as equitably and transparently as possible. Strengthening government institutions at village or district level which deal with conflicts, for example, is likely necessary.

Gender-sensitive interventions (such as advising women's groups on best practices and modalities for accessing formal credit services); training and demonstration projects for youth (to demonstrate with concrete examples what the alternatives and prospects for their future could be, both in the rural communities or in the wider – vertically integrated – district or regional areas); or identifying opportunities for the landless in the non-rural farming sector are three areas out of a range of options where the MVP's investment in the institutional reform process is seen as pivotal for the longer-term sustainability and scalability of the project.

Capacity building

Once the project moves from a concern with sustaining the interventions within MVs to scaling beyond, the use of government systems is required which, in many cases, will require considerable capacity building (see also Box 6.1). Project deliverables are important but so too are the processes through which those deliverables are generated, particularly over the longer term. To ensure sustainability and to allow for scale-up, more attention needs to be paid to government institutional capacity development, particularly in terms of planning and budgeting, financial management and M&E. Capacity in these areas is often very thin at district levels. Appropriate technical skills are scarce and difficult to retain over a long period of time. The location of these skills is important, as the MVP package requires good coordination across a number of sectoral domains at the district level. Where this capacity is most appropriately built will have to be assessed on a case-by-case basis, but planning and finance departments at local level are usually the government agencies with intra-government coordination responsibilities.

Capacity development is likely also necessary among sector staff in the process of the adaptation

of the model, as beneficiaries needs change in response to the benefits brought by the project beginning to take root.

It will not be feasible for the MVP to build sufficient capacity for scaling-up given its limited resources, however the project should endeavour to initiate the necessary steps to identify the capacity needs inherent in the pathways to scaling-up based on its experience in MVs, undertake costing of capacity training needs and multiply these nationally.
Recognising that capacity building is difficult task, if sufficient resources are made available by the international community to address the MDGs, then there is nothing in theory to prevent: (i) some aid being used to strengthen government capacities to handle large amounts of money; and (ii) local, regional and central governments from staffing and operating the programme at current sites, but also scaled across nations as a whole.
Capacity building and training need to be offered to beneficiaries as well. As the transition of the farming system from a predominantly subsistence-oriented one towards a more commercially oriented one occurs, farmers need a range of additional knowledge and skills (e.g. related to improved farming practices, marketing, etc.) New skills and knowledge will be even more important as the local economy is increasingly characterised by the emergence of a rural non-farm sector. Again, a whole set of new skills, for example in running a business enterprise, will become necessary.

7. Conclusions

Key Messages

The Millennium Villages Project (MVP) has demonstrated the impact of greater investment in evidence-based, low-cost interventions at the village level to make progress on the Millennium Development Goals.

The MVP points to, but cannot address given its limited budget, the many upstream investments, rural–urban linkages, infrastructure and institutions required to scale up village-level investments.

Countries need to situate MVP-scaling up in the context of a national development strategy. Donors should give special support to at least one country, which, having successfully implemented the MVP, now wants to take it to national scale.

Scaling-up rural investment depends on donors living up to their commitments. When plans are vertically linked and adequately embedded, donors should support them and the MVP to provide facilitation.

The MVP embarked on an important experiment in demonstrating that meeting the MDGs is possible, across a range of disadvantaged remote rural communities across Africa,[31] within the present aid commitments and well within the established timeframe.

In a short period, the MVP has recorded remarkable achievements on the ground. MVP-type interventions in rural economies in Africa are patently and urgently necessary and the efforts of the MVP are to be highly commended – not least for enabling governments to implement stated policy and for piloting different strategies to enable them to do so more efficiently. As a testament to its early achievements, a number of governments have requested support to replicate such rural investments outside the present MVs. Moreover, additional countries have requested support to launch their own MVs.

The project leadership's continuous advocacy that rich countries live up to the commitments that they made on aid, so as to finance such interventions more widely to attain the MDGs, as well as the project's global and national policy dialogue on the art of the possible in relation to difficult reforms, is also highly admirable. The continued and scaled-up success of interventions, as piloted by the MVP, depends on donors meeting their commitments, and it is only right that they do so.

Yet, despite the tremendous efforts of the MVP network, such rural investments are insufficient to sustain and substantially scale up for poverty reduction progress unless a number of further actions are taken. An array of complementary rural–urban linkages and second-order institutions and infrastructures require investment. The MVP architects acknowledge that village-level investments are just one piece of the larger development puzzle and support auxiliary efforts and champion other development partners to invest more heavily in these areas. It is unrealistic to expect equal and simultaneous progress on these in the current global aid policy environment. Indeed, there are plenty of gains that can be made – as the MVP shows – despite shortcomings in these aspects. But, at some point in implementing Phase I of the MVP, more attention will need to be paid to encouraging changes in social norms and institutions if efforts are to be sustained and scaled up.

While recognising that the MVP's strategy includes some upstream elements, scaling-up will require moving beyond the present focus on village interventions towards making upstream investments in the expansion of human resources, strengthening vertical rural–urban linkages and reforming and strengthening institutions. The following complementary investments are important deter-

31. Albeit in relatively well-governed countries.

minants of the sustainability of MVP interventions and their successful scaling-up:

i. Production, training and deployment of front-line staff at the intensity and skill level the project demonstrates is required;
ii. Infrastructure and institutions linking rural and urban areas (e.g. roads beyond the village level, communication and information, power generation and distribution, banking and insurance systems, training and research facilities ranging from vocational training institutes to universities, etc.); and
iii. Support for institutional reforms related to:
(a) progress in effective participatory, equitable and decentralised planning, implementation and monitoring of multi-sector public programmes at the district and village levels;
(b) improvements of the business environment so as to support the emergence of a vibrant private sector necessary to drive economic growth;
(c) the development and strengthening of commodity, financial and labour markets; and
(d) longer-term challenges such as clarification of property rights so as to support pro-poor growth and provide the necessary security for small-scale farmers; or addressing inequality and adverse gender relations.

The MVP has elected to concentrate its efforts at the village level to demonstrate that the MDGs can be reached in rural communities in a short period of time. Testing the viability of a vertically integrated model to deliver sustainable development outcomes is outside the current financial envelope of the MVP. We recommend that OSI, other private philanthropists, donors and the private sector consider funding these complementary investments in a number of the present MVP countries over the medium term.

When governments want to emulate the MVP by making increased investments in basic development interventions at the village level, donors should support them. Moreover, both governments and donors should consider how such investments can be sustained and scaled up. This will involve consideration of the adaptation of MVP interventions and the complementary investments. Deliberation on scaling-up should take place in wider policy debates, including PRSP dialogues and linked to relevant pan-African initiatives.[32] There is also a role for civil society to hold governments to account for progress on MDGs and to monitor the scaling up plans. An analytical plan that sets out both direct investments at village level plus complementary investments in infrastructure, enhanced public sector capacity at district and field level and institutional reform would be useful to identify the obstacles, resources and policy reforms needed – in the context of MDG road-maps. The same plan, implemented through government mechanisms but with private sector participation, can help set targets and milestones to allow stakeholders – including civil society – to monitor progress. The UN Secretary-General's MDG Steering Group calls on multilateral organisations to assist African governments to prepare 'Gleneagles/MDG scenarios' in coordination with development partners at country level. Work on these scenarios is underway in a number of MVP and non-MVP countries and they provide an excellent entry point for integration of MVP scaling-up.

Just as the village-level interventions need some adaptation to context, so too do complementary investments and reforms, given that bottlenecks will be specific, as will the political feasibility of policy alternatives. Delivering an appropriate package will require continuing monitoring and dialogue on results, preferably involving a range of stakeholders, including emerging donors not yet part of the OECD network and the private sector. A willingness to make changes in light of emerging evidence and in response to the comparative advantage of different actors will also be

32. Relevant Africa-wide initiatives include NEPAD, the Comprehensive Africa Agriculture Development Programme (CAADP), the Alliance for a Green Revolution in Africa (AGRA), the Road Map for the Attainment of the MDGs Related to Maternal and Newborn Health in Africa, the Rural Water Supply and Sanitation Initiative or the African Union NEPAD Infrastructure Short-term Action Plan, among others.

necessary. There are no blueprints for developing such programmes.

In this context, a specifically important role for the MVP, alongside its support to the ongoing implementation and demonstration of the integrated package of investments in the current MVs, is in continued engagement in national and global policy dialogues, to share the experience that it has gained through the village-level interventions to-date as well as in advocating the merits not only of MVP-type investments but of the complementary ones as well. It would be unrealistic to expect the MVP to engage at the level required within the context of its present budget and hence further funding is merited.

In conclusion, the MVP has demonstrated the impact of greater investments in evidence-based, low-cost interventions at the village level to make progress on the MDGs. Efforts need to be made to sustain these pilots as national policy experiments and to adapt them as required. The MVP points to, but cannot address under the current ODA regime, the many complementary upstream investments required to sustain and scale village-level investments. We advocate that, in those sites where governments have expressed their intention to introduce or scale up MVP-type investments, development partners support them with additional finance. Such efforts should be located within national development strategies, such as PRSPs and national development plans, and indeed should be key components of them. While we are not advocating more talk and less action, we think that these plans need to be developed, implemented and monitored on the basis of on ongoing dialogue. There is much that can be learned from piloting a more vertically integrated model in keeping with the ambitions of the architects of the MVP.

Recommendations at a glance

For the MVP:

- Invest time in communicating more at national level. Look for local champions who can take the idea forward as a personal commitment;
- Engage in national discussions and planning that will help adapt and embed science-based, low-cost rural interventions as a key part of national MDG and poverty reduction strategies; and
- Provide, at least in some pilot countries, support to help governments and development partners plan for scaling-up.

For governments:

- Learn from the MVP. Governments should be ambitious and plan to scale up the things that work in their countries – including the vertical linkages and institutional reforms required to sustain rural investments;
- Request development partners to supply the additional funds required for scaling-up MVP-type rural investments.

For donors:

- Engage with and support governments that want to introduce or scale up MVP-type rural investments. Mali's plan for scaling up to 166 communes provides a promising candidate that donors should consider for early action;
- In scaling up the village-based interventions, place considerable emphasis on the vertical linkages and institutional strengthening that are required to support village-level investments;
- Support governments that want to join or emulate the MVP by providing financing, engaging in policy dialogue to identify necessary complementary investments to be embedded in PRSP dialogues and linked to relevant pan-African initiatives;
- Live up to overall aid commitments, on which the recipient countries must rely to achieve the MDGs;
- Recognise that, while all innovations imply risks, the risks of not acting – in terms of the continuing costs of poverty to individuals and nations – are unacceptable in the 21st century.

Bibliography

Country reports

Adjei, S., Asuming-Brempong S., de-Graft Aikins, A. (2008) 'Sustaining and scaling up the Millennium Villages – Ghana Country Report. Background Case Study for the ODI/OSI Formative Review of the Millennium Villages Project.

Banteyerga, H., Teshome, A. (2008) 'Sustaining and scaling up the Millennium Villages –Ethiopia Country Report. Background Case Study for the ODI/OSI Formative Review of the Millennium Villages Project.

Chinsinga B. (2008) 'Sustaining and scaling up the Millennium Villages – Malawi Country Report. Background Case Study for the ODI/OSI Formative Review of the Millennium Villages Project.

Muwanga, N.K., Sserunkuuma, D. (2008) 'Sustaining and scaling up the Millennium Villages – Uganda Country Report. Background Case Study for the ODI/OSI Formative Review of the Millennium Villages Project.

Secondary Literature

ActionAid International (2006) *Real Aid 2. Making Technical Assistance Work*. Johannesburg: Action Aid International. www.actionaid.org.uk/doc_lib/real_aid2.pdf.

Birgegård, L.-E. (1987) *A Review of Experiences with Integrated Rural Development*, Issue Paper No. 3 (March), International Rural Development Centre. Uppsala: Swedish University of Agricultural Sciences.

Blackwood, J. (1988) 'World Bank Experience with Rural Development', Finance and Development 25(4): 12–15.

Braunholtz-Speight (2007) 'Chronic poverty and the MDGs.' Policy Brief No 6. Chronic Poverty Research Centre.

Buse, K., E. Ludi, M. Vigneri (2008) 'Inception Report – Millennium Villages Project'. OSI/ODI Review of Political Sustainability. London, ODI.

Chambers, R. (1974) 'Managing Rural Development'. Scandinavian Institute of African Studies, Uppsala, Sweden.

Chinsinga, B. (2008) 'The Malawi Fertiliser Subsidy Programme: Politics and Pragmatism', Future Agricultures Briefing. www.future-agricultures.org.

CIESIN [Center for International Earth Science Information Network] (2006) Where the Poor Are: An Atlas of Poverty. Palisades, NY: Columbia University. sedac.ciesin.columbia.edu/povmap/downloads/maps/atlas/atlas.pdf.

DAC (2006) 'Quality Evaluation Standards'. siteresources.worlbank.org/EXTGLOREGPARPRO/Resources/DACEvaluationQualityStandards.pdf.

Daima Associates Ltd and ODI (2005) 'Joint Evaluation of General Budget Support. Tanzania 1995–2004'. Report to the Government of Tanzania and to the poverty reduction budget support development partners. Dar es Salaam and London.

Denning, G., Kabambe, P., Malik, A., Flor, R., Sanchez, P., Harawa, R., Nkhoma, P., Zamba, C., Banda, C., Magombo, C., Keating, M., Wangila, J., Sachs, J. [in review] 'Improving Smallholder Maize Productivity in Malawi: The Foundation of an African Green Revolution'.

de Renzio, P. (2005) Scaling-up Versus Absorptive Capacity: Challenges and Opportunities for Reaching the MDGs in Africa, Briefing Paper, May. London: ODI.

Dollar, D., Pritchett, L. (1998) *Assessing Aid: What Works, What Doesn't and Why?*, Policy Research Working Paper No. 2772. Washington, DC: World Bank.

Dorward A., Hazell, P., Poulton, C. (2008) 'Rethinking Agricultural Input Subsidies in Poor Rural Economies', Future Agricultures Briefing. www.future-agricultures.org.

Dube, S.C. (1958) *India's Changing Villages*, republished 2003. London: Routledge.

EC (2003) 'Guidelines for European Commission Support to Sector Programmes. February 2003 – Version 1.0'. Brussels.

Ellis, F., Biggs, S. (2001) 'Evolving Themes in Rural Development 1950s–2000s', *Development Policy Review* 19(4): 437–48.

Falcon, W.P. (1972) 'The Green Revolution: Generations of Problems', *American Journal of Agricultural Economics* 52(5): 698–710.

Global Health Workforce Alliance (2008) *Malawi's Emergency Human Resource Programme*. Country Case Study. Geneva: GHWA. http://www.who.int/workforcealliance/documents/GHWA%20Malawi%20Case%20Study_FINAL_30May08.pdf.

Harrold and Associates (1995) *The Broad Sector Approach to Investment Lending: Sector Investment Programs*, Discussion Paper No. 302, Africa Technical Department Series. Washington, DC: World Bank.

Hawkes, S., Paz Bailey, G., Sternberg, M., Lewis, D., Puren, A. (2008) 'High HIV Incidence among Men with Genital Ulcers in South Africa', Abstract MOAX0503. International AIDS Conference Mexico City, 3–8 August.

Hazell, P.B., Ramasamy, R.C. with eight others (1991) *The Green Revolution Reconsidered: The Impact of High-yielding Rice Varieties in South India*. Baltimore and London: Johns Hopkins University Press for IFPRI.

Heald, S. (2006) 'Abstain or Die: The Development of HIV Policy in Botswana', *Journal of Biosocial Science* 38(1): 29–41

Holdcroft, L.E. (1976) 'The Rise and Fall of Community Development', Thesis, Department of Agricultural Economics, Michigan State University.

Howell, J. (1987) 'Integrated Rural Development Projects and External Donors' in P. Mosley and D. Conyers (eds) [book apparently never published].

James, C.D., Hanson, K., McPake, B. et al. (2007) 'To Retain or Remove User Fees?: Reflections on the Current Debate in Low- and Middle-income Countries', *Applied Health Economics and Health Policy* 5(3): 137–53.

Killick T. (2005) 'Don't Throw Money at Africa', *IDS Bulleti*n 36(3): 14–19.

Korten, D.C. (1980) 'Community Organisation and Rural Development: A Learning Process Approach', *Public Administration Review* 40(5): 480–511.

Krueger, A, Schiff, M., Valdés, A. (1991) *The Political Economy of Agricultural Pricing Policy*. Baltimore and London: Johns Hopkins University Press [especially Chapter 1, Vol. 1].

Leonard, D.K. (1984) 'Disintegrating Agricultural Development', *Food Research Institute Studies* 19(2): 177–85.

Livingstone, I. (1979) 'On the Concept of "Integrated Rural Development Planning" in Less-Developed Countries' *Journal of Agricultural Economics* 30(1): 49–53.

McArthur, J., Sachs, J. (2008) 'Concept Note on the Millennium Village Project: Scalability, Sustainability, and Early Lessons'. Draft update.

MCI [Millennium Cities Initiative] (2008) 'Strategic Relationship between Millennium Cities Initiative and the Millennium Villages Project in the Area of Investment'. The Earth Institute, Columbia University, New York.

Millennium Development Goals Africa Steering Group (2008) 'Achieving the Millennium Development Goals in Africa. Recommendations of the MDG Africa Steering Group, June 2008'. UN, New York.

Millennium Development Goals Centre (2007) 'Inaugural Report: Bridging Global Commitments with Local Action'. MDG Centre, Nairobi.

Millennium Promise (2005) 'Millennium Villages: A Powerful Partnership to Achieve the Millennium Development Goals'. Millennium Promise, New York.

Millennium Villages (2007). 'FAQ on the Millennium Villages'. http://www.millenniumvillages.org/resources/index.htm.

Millennium Villages Project (2006) 'Annual Report for Koraro, Ethiopia MILLENNIUM RESEARCH VILLAGE. July 2005 to June 2006'. Centre for National Health Development in Ethiopia and The Earth Institute.

Millennium Villages Project (2007a) 'Annual Report for Ruhiira, Uganda MILLENNIUM VILLAGE. Year 1: February 2006 to February 2007'. UNDP.

Millennium Villages Project (2007b) 'Annual Report for Mwandama, Malawi MILLENNIUM VILLAGE. Year 1: February 2006 to February 2007'. UNDP.

Millennium Villages Project (2007c) 'Annual Report for Ghana, Bonsaaso MILLENNIUM VILLAGE. Year 1: February 2006 to February 2007'.

Millennium Villages Project (2007d) 'Year One Internal Report'. Draft.

Millennium Villages Project (2008a) 'Annual Report for Ruhiira, Uganda MILLENNIUM VILLAGE. Year 2: February 2007 to February 2008'. UNDP.

Millennium Villages Project (2008b, forthcoming) 'Draft Baseline Report for Ruhiira, Uganda MILLENNIUM VILLAGE'. UNDP.

Millennium Villages Project (2008c, forthcoming) 'Draft Baseline Report for Mwandama, Malawi MILLENNIUM VILLAGE'. UNDP.

Millennium Villages Project (2008d, forthcoming) 'Draft Baseline Report for Bonsaaso, Ghana MILLENNIUM VILLAGE'. UNDP.

Millennium Villages Project (2008e, forthcoming) 'Draft Baseline Health Survey Report for Koraro, Ethiopia'. Centre for National Health Development in Ethiopia and The Earth Institute.

Millennium Villages Project (2008f) 'MVP Year One Report and Report on Selected Early MVP Achievements', MVP Team. New York, 27 August.

Ministry of Finance and Economic Development (2006) *A Plan for Accelerated and Sustained Development to End Poverty* (PASDEP) (2005/06-2009/10). Volume I: Main Text. MoFED.

MoWR (2008) Joint Budget Aid Review 2008. Review of Financial and Performance Data for the Water and Sanitation Sector. Addis Ababa, Ministry of Water Resources.

Nutley, S., Walter, I. and Davies, H.T.O. (2007) 'Using Evidence: How Research can Inform Public Services. Bristol: The Policy Press.

Parkhurst J.O., Rahman, S.A., Ssengooba, F. (2006) 'Overcoming Access Barriers for Facility-based Delivery in Low-income Settings: Insights from Bangladesh and Uganda', *Journal of Health, Population and Nutrition* 24(4): 438–45.

Republic of Mali (2008) 'Initiative for Achievement of the Millennium Goals in the 166 most Vulnerable Councils of the National Food Security Programme'. Bamako.

Rondinelli, D.A. (1979) 'Administration of Integrated Rural Development Policy: The Politics of Agrarian Reform in Developing Countries', *World Politics* 31(3): 389–416.

Ruttan, V.W. (1975) 'Integrated Rural Development Programs: A Sceptical Perspective', *International Development Review* 17(4): 9–16.

Ruttan, V.W. (1984) 'Integrated Rural Development Programmes: A Historical Perspective', *World Development* 12(4): 393–401.

Sanchez, P. et al. (2007) 'The African Millennium Villages', *Proceedings of the National Academy of Sciences* 104(43): 16,775–80.

Shepherd, A. (2008) The Millennium Development Goals. ODI: *Annual Report 2008*. London: ODI: 6–7.

The Earth Institute (2007a) 'Millennium Villages: Concepts, Sustainability, and Scalability'. MDG Team, Draft.

The Earth Institute (2007b) 'African Millennium Cities Initiative (MCI)', The Earth Institute, Columbia University, under the leadership of J.D. Sachs, Director, The Earth Institute, in cooperation with the Columbia Program on International Investment and the MDG Support Team in the Poverty Group (UNDP).

The Earth Institute, Millennium Promise and UNDP (2008) 'Millennium Villages Handbook: A Practitioner's Guide to the Millennium Villages Model. Version 1, June 2008'. Millennium Villages, New York.

United Nations Millennium Project Task Force on Hunger (2005) *Halving Hunger: It Can be Done*. UN Report to the Secretary-General. New York: UNDP.

United Nations Millennium Project (2005) 'Investing in Development: A Practical Plan to Achieve the Millennium Development Goals. Overview'. UN Report to the Secretary-General. New York: UNDP.

Vajja A., and White, H. (2006) 'Community Participation in Social Funds in Malawi and Zambia'. Q-Squared Working Paper No. 20. Centre for International Studies. Toronto: University of Toronto.

Warhurst, A. (2002) *Sustainability Indicators and Sustainability Performance Management*. London: IIED and World Business Council for Sustainable Development.

White, H. (2005) 'The Case for Doubling Aid', *IDS Bulletin* 36(3): 8–13.

World Health Organization (2006) *The Global Shortage of Health Workers and its Impact*, Fact Sheet 302. Geneva: WHO. http://www.who.int/mediacentre/factsheets/fs302/en/index.html.

World Bank (2003). Scaling-up the impact of good practices in rural development: a working paper to support implementation of the World Bank's rural development strategy. Report Number 26031. Washington DC: World Bank.

World Bank (2007) *World Development Report 2008: Agriculture for Development*. Washington DC, World Bank.

Annex 1. MVP response to the ODI review of the MVP

We thank the ODI team for their careful and thoughtful review of the Millennium Villages project. The ODI team made an enormous investment of time and consultations in the research and preparation of this report. We appreciate ODI's recognition of the Millennium Village project's "remarkable results," and strongly concur with ODI that "MVP-type interventions are patently and urgently necessary to achieve the MDGs." We also agree with ODI that the Millennium Villages should be implemented as part of a broader scale-up process, and that donors should commit funding to expand MVP-type programs and complementary investments at a broader scale.

Several current MVP countries have already put forward national plans to scale-up the village approach to the national level, perhaps most notably in Mali and Rwanda. The national plans are exciting and bold and have been presented to the international community. Properly, in our view, these plans incorporate the MVP-type interventions directly into core government operations at the community level, with higher-level government planning and supervision. We underscore that, fully consistent with ODI's recommendations, we view the MVP as a strategy that should be part of a government's national efforts (albeit in partnership with NGOs and the private sector) rather than a stand-alone project outside of government (or still less, as a way to circumvent government, as in some NGO approaches).

Recently, the President of Malawi has also called for "every village a Millennium Village," as have a large number of Ugandan Members of Parliament. Nigeria has initiated an effort to expand Millennium Villages to many more states. Meanwhile, more than a dozen other African countries have also asked to join the Millennium Villages project. All of these governments are prepared to put in their own resources, but they all need considerable help from donors as well.

The MVP has therefore created a powerful pressure to expand as a result of its notable successes. African governments are calling on donors for needed support, either to join the project or to expand from the existing small scale. There is no shortfall of demand to implement Millennium Villages in the context of broader national programs and strategies. The limiting factor, we emphasize again, is the supply of donor resources needed to implement those processes. In this context, therefore, the review team's recommendation that donors should support governments that want to join, emulate, or scale-up the MVP is crucial. We also underscore the finding that the continued and scaled-up success of MVP-inspired programs depends on donors meeting their existing commitments, which have still not been fulfilled despite many promises. If there are no added financial resources with which national and local officials can scale up, the commitment to scaling up will remain a dead letter.

There are two areas where we differ slightly with the review team's findings. The first pertains to human resources. At times the report suggests that the MVP relies too heavily on highly trained staff, to an extent that cannot be scaled up to national level in the near future. This is contrary to our experience and analysis. Skilled workers in key areas – for example in agriculture, health, hydrology, and civil engineering – are often available but underemployed because of the lack of real projects which would benefit from their skills. For example, we have found that there are many effective agricultural extension officials in government ministries, but these skilled workers often have too little to do if local communities lack the tools (e.g. improved seed varieties) that the extension officers can help to deploy. Similarly, many countries have unemployed or underemployed nurses, because national and local budgets have not been able to keep these health workers on the payroll or to dissuade them from temporary or permanent migration to other countries.

There are several other effective responses to the scarcity of human skills. First, there are new and clever ways to economize on high-skilled labor. In the health sector, for example, there are important new programs underway for one-year in-service mass training of community-based health workers, who will work under the supervision of trained doctors and nurses. Second, new information technologies are facilitating large-scale distance training of thousands of skilled workers. Third, clever applications of the new information technologies also allow for the cross-border deployment of skills, for example through telemedicine or the provision of off-site technical support for the operations and maintenance of infrastructure. Fourth, some new technologies (e.g. rapid diagnostic kits for malaria testing, replacing traditional skilled microscopy) can economize on the need for on-the-ground skilled workers. Fifth, and finally, many of the key interventions of the Millennium Villages project can be sufficiently standardized to be documented in handbook form and scaled up in a rapid manner with common shared protocols.

Our second modest disagreement involves ODI's recommendation for "adapted MVs" which aim to economize on the costs of MVs by focusing on the lowest-cost interventions. We believe that such an approach represents a "false economy," in fact a scaling back of vital interventions because donors have not yet met their long-promised commitments. "Adapted MVs" would not provide the investments needed to enable impoverished villages to escape from extreme poverty, and thus run counter to the philosophy and core strategy of the Millennium Villages project. Scaling up only single interventions or only a subset of low-cost interventions will not meet the integrated real challenges of disease, education, agricultural productivity, environmental management and infrastructure that are essential to meeting the MDGs.

We think that donors will come around to this view, and will, with sufficient advocacy by the development community and backing by the general public, fulfill their long-standing aid commitments. In this spirit, we draw hope and inspiration from Gordon Brown's recent four-step challenge delivered during the United Nations' High-Level Event held to mark the midpoint of the Millennium Development Goals on 25 September 2008. He asked for an urgent and integrated set of priorities for achieving the MDGs, very much along the lines of the Millennium Villages approach. Specifically, he asked:

> 'First, on health, that we recruit and train a million health workers, saving the lives of three million mothers and seven million children; second, on malaria, we agree that we will stop all malaria deaths by 2015, to ensure everyone has a bed net by 2010, to fund the research for the vaccine that can prevent the loss of life; and then on education, to get 24 million more children into school by 2010, to get us back on track to universal education by 2015; and fourth, on famine, to prevent today's starvation in the Horn of Africa, to fund and deliver seeds and fertilizers to 30 countries in time for the planting season, to invest tens [of] billions in Africa so it can feed not just Africa but feed beyond Africa with its exports.'

In the same event, Bill Gates laid forth a forceful diagnosis of the MDGs and the necessary focus they prompt on large-scale results.

> 'The Millennium Development Goals can guide the search for new discoveries by showing us where innovation can bring the biggest returns. This is their genius, and I am optimistic about what they can help us accomplish. They can bring together new partnerships with the private sector, the philanthropic sector and government and UN agencies working in new ways. [...] So I disagree with those who focus only on the disappointments and try to spread around blame. People aren't motivated by blame and guilt. People are motivated by success. And we have many successes and opportunities for many more.'

We are highly gratified by the vision of these global leaders, their commitment to the MDGs, and their recognition of their feasibility through practical, scalable approaches and innovative partnerships.

In conclusion, we are grateful for ODI's report and for its central message of the need to scale up the Millennium Villages. We believe that such scaling up is not only feasible, but on the verge of a takeoff. The interest of host countries is clear and urgent. The technical feasibility is clear and being demonstrated in the villages. The innovative partnerships – bridging government, business, academia, philanthropy and non-profit sectors – are forming rapidly. Now is the time for action.

John W McArthur and Jeffrey D Sachs
On behalf of MVP
8 October 2008

Annex 2. UN Millennium Project quick wins

- Eliminating school and uniform fees to ensure that all children are not out of school because of their families' poverty.
- Providing impoverished farmers in sub-Saharan Africa with affordable replenishments of soil nitrogen and other soil nutrients.
- Providing free school meals for all children using locally produced foods with take-home rations.
- Designing community nutrition programmes for pregnant and lactating women and children under five that support breastfeeding.
- Providing regular annual de-worming to all schoolchildren in affected areas to improve health and educational outcomes.
- Training large numbers of village workers in health, farming and infrastructure (in one-year programmes) to ensure basic expertise and services in rural communities.
- Distributing free, long-lasting, insecticide-treated bed-nets to all children in malaria-endemic zones to cut decisively the burden of malaria.
- Eliminating user fees for basic health services in all developing countries.
- Expanding access to sexual and reproductive health information and services.
- Expanding the use of proven effective drug combinations for AIDS, tuberculosis, and malaria.
- Setting up funding to finance community-based slum upgrading and earmarking idle public land for low-cost housing.*
- Providing access to electricity, water, sanitation and the internet for all hospitals, schools, and other social service institutions.
- Reforming and enforcing legislation guaranteeing women property and inheritance rights.*
- Launching national campaigns to reduce violence against women.*
- Establishing, in each country, an office of science advisor to the president or prime minister to consolidate the role of science in national policymaking.*
- Empowering women to play a central role in formulating and monitoring MDG-based poverty reduction strategies.
- Providing community-level support to plant trees to provide soil nutrients, fuelwood, shade, fodder, watershed protection, windbreak, and timber.

* These quick wins were not part of the first-year MVP package (Steve Wisman, personal communication, August 2008).

Source: UNMP (2005)

Annex 3. Concepts, researchers and methods

Annex 3.1 Concepts informing the conceptual framework

The core concepts presented below, like most social science constructs, cannot be taken as wholly independent or mutually exclusive. A central challenge of the methodology of the review was the interdependence and complementary among these concepts. A further challenge was the need to adapt these concepts to structured and semi-structured questionnaires to allow for the collection of various types of data. The data collected were used to assess both the MVP as it is currently implemented, but also to identify and comment on possible approaches to improve the prospects for sustainability and scaling-up.

Relevance: The review sought to establish the extent to which the interventions prioritised by the MVP (and the corresponding budgetary allocations) are considered relevant to the receiving communities, district and national planners and policymakers, the private sector and representatives of international donors.

Ownership: The concept of relevance was explored by asking about perceived priorities of the afore-mentioned stakeholders, by assessing their perceived willingness to endorse and take 'ownership' of the initiative and their intentions to sustain the interventions and to take these to scale, beyond the external financing provided by the MVP during the initial phase of the project. The Paris Declaration on Aid Effectiveness defines ownership as: 'partner countries exercise effective leadership over their development policies and strategies and co-ordinate development actions'. Too much emphasis has probably been placed on government (and central government) leadership within the Paris discourse; but the principles draw attention to the importance of national (broadly and inclusively defined) leadership in developing and implementing national and sectoral development strategies and medium-term expenditure frameworks and budgets. Intrinsic to ownership is the idea of a meaningful participation in development planning. This should reflect those interventions considered relevant to beneficiaries and policymakers at different levels.

Ownership was considered relevant at three levels of engagement and analysis: beneficiary; village institutions; and district/national tiers of government. At the community level, we were interested in the extent to which community beneficiaries and stakeholders endorsed the prescriptions and requirements of the MVP activities and included all social strata in the village population. We were equally interested in the extent to which the MVP works through and strengthens existing community governance structures and their perceived legitimacy, transparency and accountability and the quality of their interactions with the MVP management. The endorsement of district and national administrations, including line ministries, of the bundle of interventions and related resource allocations was considered essential to both sustainability and commitment to scalability. We looked at such endorsement in terms of the leadership and political support, engagement (coordination, institutional linkages, lesson learning, etc.) and stated willingness to allocate domestic resources to MVP-type activities.

Alignment: Related to the aspect of relevance is the question of alignment, which has two dimensions: (i) basing external support on national priorities, strategies and plans (and reflecting such support in the budget); and (ii) using national systems for the management and reporting of external support (e.g. for procurement, budget execution, financial reporting and auditing). Our review assessed whether the project is responsive to community articulated needs and the extent to which MVP interventions, and their delivery, correspond to national plans and sector strategies

and priorities. Where differences were found to exist, we sought to understand the rationale (e.g. a policy innovation to accelerate the achievement of the MDGs) and the possible implications in relation to sustainability and scalability. We also sought to understand the implications of using government machinery for sustaining and scaling-up the MVP, including project plans and achievements in building the required systems and institutions.

Linkages (impact): Although we did not assess the impact of the project or of specific interventions, we looked at a number of horizontal (i.e., across different sectors within the MVs) and vertical (i.e., across different geographical layers) linkages considered particularly important for influencing the impact, but particularly the potential for scaling-up, of the MVP. In other words, the success in terms of attaining the MDGs is a function not only of the implementation of the package of interventions, but also of all that might be required to implement those interventions. In the words of Jeffrey Sachs 'everything that is needed to achieve the MDGs is part of the MDGs' (personal communication, 17 June 2008).

The review sought to reveal progress in the development of such linkages. Moreover, it sought to consider both the positive and negative implications of these linkages, including where a failure to establish such linkages might lead to reduced impact or might have repercussions for sustainability and scalability.

The MVP documentation draws attention to the importance of a number of horizontal linkages. Indeed, an important component of the model's proof of concept arises from the synergistic effect of the integrated package of interventions, although the spillover effects between sectors do not form the sole rationale for an integrated approach in the MVP. Interventions in the selected sectors are necessary on their own merit, especially in poor rural areas in order to escape the poverty trap and to achieve the MDGs. Progress across sectors is typically mutually reinforcing, but project-level evidence for synergies is not necessary to validate this point. Among some of the obvious linkages highlighted by the MVP are the school meals programmes and the empowerment and participation of women in managing higher agricultural income. Others that we consider important concern linkages to markets (assuming that production increases can be maintained at current levels); coordination between MVP technical specialists (coordinators); and government technical staff at district level.

The MVP documentation was less explicit about the required vertical linkages to ensure success and in relation to their importance for sustainability and scalability. Nonetheless, we thought that a number of vertical linkages would be critical to both sustainability and scalability:

- Engagement with national-level forums for development planning and cooperation to ensuring MVP identified best practices find their way into national and sector plans;
- Partnerships and collaboration with institutions at higher levels (e.g. agricultural research institutes, national technical advisory services, etc.);
- Training institutions for the skilled staff required to deliver the package of interventions (e.g. teachers, nurses, agricultural extension agents, etc.);
- Upgrading of infrastructure (such as roads) to facilitate referrals, access to markets, etc.

Sustainability: The concept of sustainability is concerned with ensuring that the benefits of an activity continue after the initial (often external) support for the scheme is withdrawn. One can distinguish between environmental, social, financial, operational and political sustainability. The designers of the MVP outlined a variety of means to ensure the sustainability of the initiative as well

as a number of key assumptions, as outlined in Section 2 above (McArthur and Sachs, 2008). The review sought to elucidate whether or not these activities are being implemented as planned within the MVs and to assess whether or not the assumptions made in 2005 hold in 2008 and beyond. For example, the willingness, ability or constraints:

- Of governments to maintain fertiliser subsidies and provide improved high-yielding seeds – at least for an initial period until production levels enable farmers to purchase them (i.e., political will);
- To increase significantly allocations to the health budget;
- Of line ministries to: (i) reallocate resources in conformity with MVP activities (which, for example, might imply significant shifts in the case of health from tertiary to primary care); (ii) upgrade community-level service infrastructure and post personnel to the levels envisioned under the MVP; (iii) incentivise their staff to serve in rural areas;
- Facing the international community (for example as perceived by its country-based representatives) to maintain current levels of support to the initiative and increase aid to Africa over the course of five years to 2011 (i.e., to US$75–100/capita and year) and, if so, allocate to MVP-like activities.

Scaling-up: The pathways for scaling-up the MVs are described in Section 2 (Background). We sought to establish the conditions for scaling up mainly in terms of: (i) expansion of specific successful interventions to country-wide programmes; (ii) launching new MV clusters across different regions of countries where MV are already underway; and (iii) expansion of coverage of existing activities from existing clusters to larger administrative scales.

We understand the success of scaling-up to be a function of: (i) strong ownership at all levels (not just by those who will take the decision to scale up but also by those at lower administrative levels, such as district administrators, who witness success and challenges of MVP interventions on a regular basis and who will send signals as to whether or not activities are worth scaling); (ii) the degree of alignment of project interventions with domestic priorities (to promote ownership); (iii) the development and strengthening of a series of critical horizontal and vertical linkages to enable the synergies of the bundle of interventions to materialise but also serve as the prerequisites for delivering the bundle at scale; and (iv) meeting the variety of requirements that foster the prospects for sustainability.

Annex 3.2 Researchers

Core team – National researchers
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Samuel Asuming-Brempong, University of Ghana, Legon (Ghana, Agriculture)
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Martha Kwataine, Malawi Health Equity Network (Malawi, Health)
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Core team – Overseas Development Institute
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John McArthur, Policy Director, The Earth Institute at Columbia University/CEO Millennium Promise
Cheryl Palm, Senior Research Scientist, The Earth Institute at Columbia University
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Peer review
Howard White, Director, Initiative for Impact Evaluation, 3IE

Annex 3.3 Methods used and approaches to data management, quality control and analysis

Methods for data collection

A set of different, though mainly qualitative, methods were chosen to provide the information necessary to assessing whether and how the MVP interventions, both those implemented and those planned, can be sustained and scaled up by African governments, development partners (in the public, private and NGO sectors) and local communities. A qualitative approach was preferred to a quantitative approach as it provided the opportunity to explore issues, understand phenomena and raise probing questions. The research teams applied two main methods for data collection:

Document analysis

A number of national-level policy documents were reviewed so as to provide background information on the development priorities and pathway of the countries and sectors considered. These national-level policy documents (e.g. the Ethiopian Plan for Accelerated and Sustained Development to End Poverty (PASDEP) or the Ugandan Presidential Initiative 'Prosperity for All' (PfA)) also describe how the countries involved propose to achieve the MDGs. In addition to these national development plans, country researchers analysed sector-specific development plans and strategies related to agriculture and health (see country reports for a detailed list of analysed documents). A comparison of national priorities and plans with the MVP activities and processes enabled a partial assessment of alignment.

A second important source of documentation was in the various plans, documents and reports on the MV prepared by the MVP network (e.g. baseline reports, annual reports and quarterly reports, a document entitled 'Millennium Villages: Concepts, Sustainability, and Scalability' (The Earth Institute, 2007a), as well as selected chapters from the 'Millennium Villages Handbook: A Practitioner's Guide to the Millennium Villages Model' (The Earth Institute et al., 2008).

Interviews and focus group discussions

a) Non-MVP key stakeholders

A number of (semi-structured) key informant interviews (KII), consultations and informal discussions were conducted at various administrative levels with representatives from government and civil society related to the sectors considered. The research teams also conducted interviews with representatives of those ministries responsible for budgeting and planning, and eventually for politically sustaining and scaling up the project. We approached this issue indirectly by asking if governments were willing to maintain the investment levels, reallocate staff etc. and if there was a general support for the project as it is implemented.

A tentative list of key informants was developed for each country during the Inception Workshop. On return to their countries, the country research teams contacted the MVP team for further information in relation to key stakeholders from the government and development partners at national, district and local levels. Broadly speaking, key informants were selected purposefully based on:

- Their knowledge of the MVP either institutionally or personally;
- Their role in health, agriculture and rural development policies, planning, programming and implementation.

Generally, the following key informants from the different administrative levels and institutions were interviewed (for details see country reports) using semi-structured interview guides specifically tailored according to the nature of the interviewee:

- Representatives from national/federal government: sector ministries for agriculture, health, finance and economic development; non-government institutions, bilateral and multilateral agencies working in the two key sectors (e.g. UNDP, the UN Children's Fund – UNICEF, WFP, the International Livestock Research Institute, USAID, etc.);
- Representatives of regional governments;
- Representatives of district governments;
- Village level: whenever possible, project beneficiaries and government representatives from the 'research village' and 'cluster villages' were interviewed. These included political leaders, health officers, health extension workers, agricultural development agents, teachers, representatives of various community committees and MVP facilitators.

A number of focus group discussions (FGDs) were conducted in the MVP village in the four countries. Whenever possible, FDGs were conducted separately with men and women. FDGs were also conducted with members of the various community committees. The FDG participants were selected from the locality in order to understand what they (i) knew about; (ii) think about; and (iii) expect from the MVP, and to elicit the successes and challenges that are associated with the MVP as seen from their perspectives.[33]

The research teams paid special attention to household visits because households provide a unique opportunity to understand the integration and impact of various MVP interventions. At household level, a number of parameters, such as sanitation in and around the house, the use of bed-nets, latrines, ponds, farms or storage facilities, were observed, and the research team was able to cross-check whether or not the household is sending children to school.

The research teams made extensive travel around the MVP villages, both the science village and a number of cluster villages. They visited MVP supported facilities such as health clinics, schools, irrigation schemes, stores and village banks. The research teams also visited farm households to conduct in-depth interviews.

b) In-country MVP team

Usually, the start of the field work was marked by an initial meeting between the research and the national MVP team (MVP team leader, cluster manager and/or science coordinator). The research team was provided with an overview of the concept of MVP and the specific interventions carried out so far and planned in the villages. The research team shared their plans for fieldwork with the MVP team and logistics were discussed.

The engagement with the MVP team was crucial to gain a clearer understanding of the institutional design and the operational procedures of the MVP, both at country and at local level. Interviews were also conducted with the MDG advisors based at UNDP (except in the case of Ethiopia, which has a different management structure at national level closely linked to the Centre for National Health Development for Ethiopia (CNHDE)). At the district level, interviews were carried out with the MVP science coordinator and the MVP cluster manager as well as with sector coordinators (agriculture, health and, where already posted, gender, community development and business enterprise). At the village level, interviews were conducted with MVP facilitators in the considered sectors who work side by side with government staff such as agricultural extension agents, health officers, etc.

Interviews were also conducted with the Directors of the two regional MDG Centres, Dr Glenn Denning in Nairobi, Kenya, representing East and Southern Africa, and Dr Amadou Niang in Bamako, Mali, representing Western Africa, by ODI researchers. Topics addressed included the function and role of the MDG Centres in designing and implementing the MVP in the countries and aspects related to sustainability and scaling-up.

Data management, quality control and analysis

Findings from interviews and FGDs were written down and transcribed, in a few cases first taped and then transcribed, whenever possible the same day, for preliminary analysis and to identify emerging issues that needed follow-up in later interviews. This enabled the researchers to identify issues for further exploration and triangulation. Information provided by informants was validated through discussions with other informants at different levels. Preliminary findings were also discussed with MVP staff at the end of the fieldwork period to seek further clarification.

33. In the different countries, different approaches were used to identify FGD participants. In Malawi, for example, participants for FDGs were identified through a wellbeing analysis categorising households in relation to food security (food secure, food insecure and extremely food insecure). In Ghana, FDGs were segmented along gender, age and main economic activity.

The approach to the study was participatory and highly interactive. The use of different methods for data collection as well as interviewing different stakeholders provided the opportunity for triangulation and improving the quality of data. Whenever possible, themes emerging from key informant interviews, group discussions, observations or informal discussions were crosschecked for consistency and validity. Observed variations in policy and practice between MVP and the national health and agriculture policies were discussed with government representatives at different levels in the ministries of health and agriculture as well as with staff of the MVP to understand the rationale and explore possible implications for sustaining and scaling up the interventions.

Debriefing sessions with representatives from the MVP team were held at the end of the data collection phase. The research teams presented their findings and interpretations and invited the MVP team to comment on these. The debriefing sessions were also used to clarify and correct factual inaccuracies and rectify any misinterpretation or incorrect assumptions. They also provided a valuable platform for discussing preliminary recommendations in view of sustainability and scaling-up.

Additional quality control measures included:

- A small panel of ODI experts was consulted on issues as they arose and has commented on the draft Inception and Synthesis Reports;
- An external expert peer reviewer, Howard White, Director of the International Initiative for Impact Evaluation, was contracted directly by the review's sponsor to comment on the Inception and Synthesis Reports;
- There was ongoing and fruitful exchange with staff from The Earth Institute and Millennium Promise over the course of the review. This included: (i) face-to-face discussions and written comments on the conceptual framework and Inception Report; (ii) an ad hoc discussion with Jeffrey Sachs, John McArthur and, linked in by phone, Steve Wisman, held immediately before the Synthesis Workshop in June 2008, where the ODI researchers shared their impressions of the MVP based on their brief field visits and where ideas developed by the MVP team on sustainability and scalability were discussed; and (iii) discussion of draft versions of this report.
- All national researchers commented on the draft of this report.

Ethical considerations and independence of the study

The research teams received full cooperation from the MVP teams (at different levels), government and representatives of the community. The MVP teams were very open with the researchers and supported the fieldwork in every possible way, both content-wise and logistically. The review proceeded independently and without obstruction. MVP staff were usually not present during interviews or FGDs. The review teams were provided with all the necessary information and documentation. In the case of Ethiopia, the review team was also able to attend a Consultative Group Meeting involving MVP staff and government representatives at the MVP Office in Hawsen.

Generally, the research teams first approached village leaders to explain the purpose of the review and to obtain consent for carrying out interviews in the villages. Respondents' consent was sought prior to interviews. Interviewees were also assured about anonymity of information disclosed.

In all four countries, key informants both from government and the civil society sectors and FGD participants openly discussed issues and responded frankly to questions. In general, informants were enthusiastic to learn more about the MVP.

Annex 4. MVP achievements

Annex 4.1 Selection of MVP sector-specific achievements

Table A4.1.1 Selected agricultural sector achievements

	Ethiopia	Ghana	Malawi	Uganda
Increase production – distribution of fertiliser and improved seeds	92.8% of HH in the science village benefited from fertilisers and improved seeds in 2007. In 2007, yields with inputs (fertilisers, seeds) were on average 54% higher than those without inputs. In 2006 this was 126%.[34]	500,000 hybrid cocoa seedlings distributed benefiting 2,848 farm HH. Improved seeds and fertilisers distributed leading to an increase in land devoted to maize (by 241%) and a related increase in total maize production (by 327%).	50kg basal and 50kg top dressing per HH/year. 10 kg maize seed and 1kg legume seed per HH/year. Maize yield increased by almost 350%.	Increased fertiliser use and improved maize seeds increased yields in research village from 1.8 t/ha to 4.2 t/ha, and to 3.5 t/ha in cluster villages; bean yields tripled. Food requirement index[35] increased from about 0.5 to 2.8 for maize and 1.8 for beans. Ruhiira village was able to sell 50 metric tons of maize at a price 60% higher than local maize prices.
Extension and training	Trained in use of high-value crops and fruit trees to diversify income.	6 AEA seconded to MVP cluster. AEA have access to motorbikes and are able to reach farmers. Cooperative group development training for vegetable farmers. Farmer field schools established.	Farmers taught single stem planting technology. Post-harvest training on construction of drying cribs.	Training in appropriate practices (agronomy, disease and pest control, soil fertility management). All 30 households interviewed during the review said they had adopted at least one of the agricultural production technology packages introduced in the village by MVP, particularly maize and beans packages (agronomy, seed and fertiliser), suggesting a very high uptake of the improved seed of maize and beans as well as fertilisers to improve soil fertility. The majority of sampled households (76.7%) said they would pay for the currently subsidised inputs under the MVP at the current market price, especially for improved seed of maize (87% of households) and beans (87% of households) and fertilisers (83% of households). This suggests an effective delivery of agricultural extension services to demonstrate the use of these inputs and the associated benefits, otherwise the uptake rate and willingness to pay for these inputs would not be as high.

Irrigation	Construction of three irrigation schemes. Maintenance of irrigation canals. Introduction of pot drip system.	N/A	Promotion of limited small-scale irrigation.	The MVP is supporting fruit production (mangoes, citrus and avocado) using drip irrigation as a longer-term strategy for improving nutrition.
Crop Diversification	Introduction and promotion of high-value and improved legume and oil crop seeds. Approximately 20% of HHs started planting fruit trees.	High-value fruit tree seedlings distributed. School gardens established. Development of alternative livelihoods initiatives – beekeeping, grass-cutter rearing, soap making, agro-processing, etc. are in progress.	Hybrid and high-value seed distribution. 12,000 tree seedlings. Promotion of livestock production groups.	73% of interviewed households reported that they were able to feed themselves better as a result of a greater variety of crops.
Natural resource conservation	Gully protection by stone bunds and gabions. 215,000 multi-purpose trees planted on 850 hectares of degraded hillsides.	N/A	Legume planting. Compost making.	Ruhiira MVP has planted nearly 1,000,000 seedlings. However, an investment in Soil Conservation on sloping lands was reportedly limited.

Source: MVP (2008f); Adjei, Asuming-Brempong, and de-Graft Aikins (2008); Banteyerga and Teshome (2008); Chinsinga (2008); Muwanga and Sserunkuuma (2008)

34. Not all the differences in yield may be attributable to MVP interventions, but to other factors such as climate, diseases and pests – or their absence, etc.

35. Defined as total production divided by consumption requirement.

Table A4.1.2 Selected health sector achievements

	Ethiopia	Ghana	Malawi	Uganda
Community-based prevention and treatment of illness	Use of voluntary CHWs and government health extension workers (HEWs) to provide health education. Mass de-worming. Nutrition supplementation.	Introduction of community health extension worker (CHEW) as a model for primary health care.	Mobile clinics visit villages. Treatment of water sources. Deployment of 35 government health surveillance assistants (HSAs), whose salaries are covered by MVP, provide community-based health sensitisation and referrals. Programme to support the training of 6 students as medical assistants and nurses to run MVP clinics at end of training. Piloting introduction of coartem for treatment of malaria and use of HSA in dispensing it.	47 of the newly recruited health staff are CHWs. Awareness creation through training, drama shows, health community talk shows, etc. Outreach services (health days) targeted at hard-to-reach communities simultaneously addressing knowledge gaps, service provision and awareness raising on key health issues such as immunisation, de-worming, family planning, STD treatment or personal hygiene and sanitation. HIV VCT. Laboratory diagnosis at health centres, follow-up of TB cases by trained CHWs.
Malaria control	Distribution of free long-lasting insecticide-treated bed-nets to households in all cluster villages; training of health workers in hanging bed-nets and malaria prevention; distribution of free anti-malaria medicine to clinics; improved malaria diagnosis in clinics.			
Strengthen clinics and referral services – facilities, equipment and staffing	Strengthened clinics in 3 villages and upgrading 2 health centres to referral facilities.	3 health centres completed, 7 planned. Health infrastructure is considered a community asset. Introduction of CHEW as a model for primary health care; CHEWs are working at the village level instead of the facility level. Antenatal clinics as part of the outreach programme. Deployment of midwives at community locations outside health centres.	Introduction of mobile clinics owing to delays in clinic construction. Introduction of bicycle ambulances.	Infrastructure improvements in all 6 health units, construction of several outpatient department (OPD) blocks, staff housing and 1 operation theatre. Free referral system (project ambulance) resulted in significant increase in number of out-patient visits.

Source: Adjei, Asuming-Brempong, and de-Graft Aikins (2008); Banteyerga and Teshome (2008); Chinsinga (2008); Muwanga and Sserunkuuma (2008)

Table A4.1.3: Cross-sectoral achievements

	Ethiopia	Ghana	Malawi	Uganda
School meals programme	In all four countries, a school meals programme has been launched, available for a varying number of pupils in the cluster. With the exception of Malawi, this programme is supported by contributions (usually in the order of 10% of the harvest) from farmers receiving free (or subsidised) fertilisers and seeds.			
Village bank	None	MVP negotiated with the Amansie West Rural Bank (AWARB) to extend microcredit to the cluster. AWRB has advanced an amount of GHC72,000,000 (approx US$7,500) to 3 women's groups.	Almost 900 MV inhabitants have opened accounts with the Opportunity International Bank of Malawi after MVP signed a MoU with the bank.	Establishment of a community owned village bank as a SACCO through mobilisation of existing women' savings groups. Currently, the bank has 700 members and a savings portfolio of over UShs 50 million (about US$30,000). The bank has reduced the cost of borrowing from as high as 60% annual interest (5% per month) charged by SACCOs to a more affordable 18%.
Committees	A number of community committees were either strengthened or newly established where they were not available to take responsibility for managing social services put in place by the project (e.g. flour mills, truck).	Promotion of farmer-based organisations (FBOs) in the form of sectoral committees at the community level, and initiation of farmer field schools (FFSs) through which the communities are sensitised about development programmes.	Revitalising the moribund sub-district participatory committees which existed only on paper in Malawi (i.e., the area development committee and the village development committee).	Community committees were elected at village and parish levels which deal with crosscutting issues and community action plans were developed. Committee members see their capacity strengthened through training in mobilisation, leadership, gender mainstreaming skills, participatory planning or managing group dynamics.

Source: Adjei, Asuming-Brempong, and de-Graft Aikins (2008); Banteyerga and Teshome (2008); Chinsinga (2008); Muwanga and Sserunkuuma (2008)

Annex 4.2: Testimonials from MV inhabitants

Ethiopia

Malaria was a killer disease here. Many women, children and men used to die of malaria. Then [the project] came and gathered us. They told us that malaria would be destroyed. They gave us bed-nets and treated our sick people. Now we do not have problems of malaria. We are healthy. God bless [the project]. (Koraro women's FGD)

Thanks to [the project], the health of women and children has improved. There is good care for children and mothers at the clinic. The health extension workers and the community health workers visit us and teach us to feed our children, take them to the clinic for vaccination and check-up. We get family planning commodities free of charge. We get vaccination and there is nothing that we can complain in health. We are keeping our houses clean and have learnt how to keep ourselves and children healthy. (Women's FGD)

Before [the MVP] came to Koraro there was a small clinic. But many people used to die from different illnesses. We had intestinal parasites and many other diseases. [The project] made things easy for us. It hired a doctor who was very good. We were treated from many illnesses. We give blood, stool and urine test. Other people from far areas come to Koraro and get cured, too. We are getting excellent treatment in the clinic. The doctor left and we are hoping we will have another one. Doctor Meresa was excellent. We do not want referral. We want surgery to be done here. Dr Meresa was giving such services. (Koraro men's FGD)

We are proud of the school feeding programme because we contribute from our own production. We can see that enrolment has increased; students stay in school and perform better. We are concerned that if production fails owing to loss of fertiliser, we may not be able to contribute to the programme. (Men's FGD)

Before the project [came], this place was always dry. The river just passes by. Now with the help of the project, I am able to divert the river, store the water here (showing a pond) and pump it to my field. I grow a variety of fruits. I have one here given to me by [the project]. He said he will give prize if I grow this. I am waiting for my prize. I was selected because I have this land and also I can work and my children help me. I have three children. Two go to school and one looks after the field (pointing to the boy!) (Model farmer)

I cultivate six timad of land (0.75ha). Four timad are my own and I rent in two timad. I grow teff (three timad), maize (two timad) and millet (one timad). I also intercrop pepper and pumpkin with maize. I have no irrigation because I don't have time to work on it because I also guard the clinic. I took fertiliser and increased my produce. Before the project I used to get two quintal/ha but now five quintal/ha; maize increased from three quintal/ha to six quintal/ha. There is no change with millet because I don't add fertiliser. It is not only me. All those who took fertiliser have benefited from increased production. (Village key informant)

Malawi

Benefits of the MVP interventions at the village level (as reported by different farming households in Mwandama Village).
Previously I was unable to feed my family very well but since the introduction of the MVP I am able to do so without any problems. I am able to harvest enough food.

In the past my harvest lasted less than five months but now I can comfortably feed my family for close to two years.

Before the MVP began, my food production was very low but now things have improved and I can now have surplus production.

I am managing my family without any difficulty since the introduction of the MVP. I used to be food insecure but I have never been since the MVP was introduced.

District-level official of the Ministry of Agriculture:
The MVP has put Zomba on the map of the country as we are always hosting delegations of farmers from all over the country who want to learn more about the MVP success.

Uganda

Stakeholders' awareness of the MVP initiative
Based on the significant positive results and benefits to the community demonstrated by the pilot project in Ruhiira, the government of Uganda would like to scale up this effort in the country, giving first priority to northern Uganda in view of the socioeconomic needs of the people in this region caused by over 20 years of conflict. (Government of Uganda official)

Ghana

A success story in community ownership of the agricultural project
The MVP has been of tremendous help to her. She was hard up financially. She got some money from the free corn she received. That freed some money to enable her hire farm hands. She sold the corn she produced. They were taught how to plant and because they used fertilisers, they had high yields. She made kenkey [a staple meal made from fermented corn dough] and sold that as well. She was introduced to the local bank which asked them to save with them and promised to multiply whatever they save by four. She saved GHC10 a week and in two months was able to save GHC80. She got a loan of GHC320 from the banks and was able to open a small supermarket. She was able to repay the loan in six months and has an extra savings of GHC200. The bank has promised to multiply that by four and give her GHC800. She is looking for a bigger shop. Already she has acquired a plot to start building a house of her own. Now she is free of the financial difficulties she was experiencing pre-MVP. (Woman, aged 32, with six children)

Source: Adjei, Asuming-Brempong, and de-Graft Aikins (2008); Banteyerga and Teshome (2008); Chinsinga (2008); Muwanga and Sserunkuuma (2008)

Annex 4.3 Selected differences between MVP and government approaches

	Ethiopia	Ghana	Malawi	Uganda
Staffing levels and qualifications	Deployment of clinical nurses for community-level supervision.	Government does not have the staff capacity of MVP. Only one agricultural extension agent (AEA) was appointed in the cluster before the MVP commenced in the district, and now the MVP has 6 AEAs working in the cluster. Government staff does not have the tools to work with, and there are usually no deliverables and deadlines to challenge them. MVP has well-qualified staff at all levels of their operations.	Six nurses employed by MVP have higher qualifications than government counterparts. Deployment of health facilitators and nurses at the community level.	The government recommends five clinical staff at sub-county level health clinics (serving each a population of about 30,000 to 50,000 people) whereas the MVP has the capacity to support 26 health workers in six health units for a comparable population.
Incentives for staff and field workers	Top-ups of around 100% on salaries of 10 clinical nurses, laboratory technicians. Financial incentives for government voluntary CHWs. Motorcycles for agricultural extension workers (facilitators).	MVP provides regular training sessions for staff and also provides logistic support (bicycles, motorcycles). MVP provides substantial top-up on salaries.	Ministry of Agriculture officials commented that government staff cannot draw extra allowances from their respective department budgets because of budgetary constraints.	Significant top-up for health staff and transport incentive for CHWs.
Approaches to subsidies on inputs and services	Free medicines and diagnostic services for MV inhabitants. Access of ambulance. Highly subsidised fertiliser.	Free health care for MV inhabitants in context of government policy of promoting the National Health Insurance System (NHIS). Government policy was no subsidies for fertilisers, but that resulted in very low uptake.	Provision by project of bicycle ambulances to facilitate referrals. Transport subsidy for farmers to collect fertiliser. In-kind post-harvest repayment of fertiliser input as opposed to pre-planting subsidised purchase with cash.	In 2006 input subsidies for agriculture 80% of costs. In 2007 seeds subsidised to 50% of cost. Free health services at point of use despite government policy. Comprehensive outreach through community 'health days'. Free referral service.

Orientation/ targeting	Task shifting of curative services from nurses and HEW to CHW who now provide select services at health posts – including dispensing of antibiotics as well as drugs for TB, malaria, intestinal worms.	Strong emphasis on maize promotion as cash crop in an otherwise cocoa-dominant area.	Coartem dispensed by HSAs.	The government MSDP (Model Sub-county Development Programme) and Prosperity for All (PfA) programmes target sub-counties and not parishes like the MVP does. The government chose sub-county to be the lowest unit of planning and implementation of its programmes, as the population at parish level would be too small. According to the government, the MSDP is the best way forward to attain the MDGs.
Financial resources	The government strategy is to introduce technological innovations and practices with less financial input and more community participation.	Free medical system contrasts with Ministry of Health policy on health financing. MVP provides substantial top-ups on salary for staff. This strategy is important, as health and agricultural workers are grossly underrepresented in poor rural areas such as Amansie West. However, this strategy is the least likely to be sustained post-MVP, according to district and national officials, because it may put more pressure on the wage bill.	The MVP spent US$519,159.42 on eliminating hunger alone in the MV-2 villages and US$104,747.70 on improving access to medical services. The Ministry of Agriculture budgetary allocations for the district office are about US$84,000 per annum. This amount also includes overhead expenses.	Government budget for health increased between 2001/02 and 2006/07 significantly from US$5/ capita + US$3 from donor sources, to around US$9 to US$11, whereas the MVP spends approximately US$25/ capita. The MVP agriculture and environment budget is approximately 2.5 times bigger than the government agriculture and environment budget for the entire district. Per capita spending on agriculture an environment by MVP is approximately 20 times that of the government (US$14 and US$0.7, respectively).
Process	The government strategy is to introduce technological innovations and practices with less financial input and more community participation and ownership through the transfer of skills and knowledge to beneficiaries.		Sector-specific village-level committees established as opposed to using generic existing village development committees – these act as a link between MVP staff and beneficiaries. Inclusion of women on MVP committees.	MVP community action planning while government uses nationally determined budget ceilings without needs assessment. MVP integrates training and input delivery in agriculture in contrast with the National Agricultural Advisory Service (NAADS), which provides training but rarely supplies inputs.

Source: Adjei, Asuming-Brempong, and de-Graft Aikins (2008); Banteyerga and Teshome (2008); Chinsinga (2008); Muwanga and Sserunkuuma (2008)

Annex 4.4: Key facts about MVP achievements in the agricultural and health sectors

	Ethiopia	Ghana	Malawi	Uganda
AGRICULTURE **(Results of increased and improved agricultural inputs by cluster)**	Production of the main cereal crops was approximately 0.9 t/ha prior to the MVP. During the 2006/07 season, crop production increased to 2.0 tons per hectare, an increase of 122% from pre-MVP levels. 11,657 farmers received agricultural inputs for 2006. 18,891 farmers in the cluster were trained in improved agricultural techniques. Rainfall insurance went into place in September 2007 for the Koraro cluster with payouts for the two tiers set at US$254,700 and US$765,310.	Owing to high protein malnutrition in the cluster, high-protein maize was introduced in 2006. Production was approximately 2.2 t/ha prior to the MVP. During the 2006/07 season, crop production increased to 4.1 t/ha, an increase of 85% from pre-MVP levels. Additionally, 17,049 farmers were trained in improved agricultural techniques and practices.	Production of maize, was approximately 0.8 t/ha prior to the MVP. During the 2006/07 season, crop production increased to 3.6 t/ha (+ 350%). Although the 2006/07 planting season increased yields over pre-MVP levels, these yields were significantly less than the 5.6 t/ha yields in 2005/06. The shortages owed to poor seed germination. 7,066 farmers were trained in improved agricultural techniques. The Mwandama cluster has nearly completed a cereal bank, which will serve as a critical storage facility to the Mwandama farmers and for the school meals programme.	Production of the main cereal crop, maize, was approximately 1.9 t/ha prior to the MVP. During the 2006/07 season, crop production increased to 3.9 t/ha, an increase of 108% from pre-MVP levels. Additionally, 6,843 farmers were trained in improved agricultural techniques. Bananas are also an important cash and subsistence crop in the Ruhiira cluster. In the first year of the MVP, the Ruhiira team created linkages between banana farmers in the cluster and local buyers, to connect Ruhiira farmers to bigger markets in Mbarara and Kampala.
HEALTH **Malaria reduction**	Before the MVP started 461 clinically suspected malaria cases were reported in the clinic with 60.8% of slide positivity rate for malaria parasites. In 2006 only 275 cases were reported, with only 52% slide positivity rate for malaria parasites. This indicates almost a 50% reduction in the burden of malaria.	N/A	N/A	Since distribution of bed-nets, community members have reported malaria episodes reduced from 2.47/HH/month to 0.51/HH/month.
Long-lasting insecticide-treated bed-nets	182 VHWs distributed 27,000 LLINs and the district health office conducted indoor residual spraying at all malarious villages. More than 2,800 cluster residents treated for malaria in 2007.	25,854 LLINs distributed inside the cluster, and 6,000 outside the cluster. 32 CHWs were hired and trained to distribute the nets; 4,080 households visited to ensure the proper use of bed-nets. 6,349 cluster residents received malaria treatment in 2007.	21,664 LLINs were distributed in cluster, 4,620 outside the cluster. 78 VHWs were trained to distribute and train communities in their use. 14,155 cluster residents were treated for malaria in 2007.	Of 33,000 LLINs distributed within the cluster at the project outset, an estimated 96% are still in use. During 2007, 22,616 cluster residents were treated for malaria.

Maternal, infant and child Health	Percentage of deliveries attended by health professionals or trained birth attendants increased from 35% in 2006 to 51% in 2007. In addition, 91% of children under-5 have received Vitamin A supplements, while 98.2% of children 6–59 months old received Albendazole (de-worming); 89% of children under-5 are fully immunised (against TB, diphtheria, pertussis, tetanus, polio, haemophilus influenza b and measles).	In 2007, the number of women giving birth in health facilities increased by 146%, from 116 in 2006 to 286, and now comprise 67% of deliveries (with the other 33% using TBAs at home). In addition, the number of new women seeking antenatal care increased 129% during that time, from 344 to 787.	Forty-five community health workers provide child health services and antenatal care, which is now provided to all mothers.	Prior to the project, only 8% of deliveries were supervised by a skilled health worker; now 70% are. In addition, 80% of pregnant mothers access antenatal care from health facilities at least once during their pregnancy.
Health services	To help control intestinal parasites, staff held a cluster-wide de-worming campaign, reaching 46,435 residents. In addition the project initiated VCT services. In 2007 3,221 received testing, during which period 40 patients began ART. Finally, utilisation of the Koraro health care facilities increased 528%, from 113/month in 2005 to 710/month in 2007.	The number of residents using modern family planning techniques increased 670%, from 296 through the first half of 2007 to 2,278 during the same period in 2008.	Screening of HIV and TB has been introduced. More than 550 patients started on HIV/AIDS treatment in during the first half of 2008.	In order to increase health coverage, staff initiated 'health market services', bringing interventions to isolated communities. These reached 55,507 people (including 6,164 children under-5), and identified 3,408 HIV-positive residents for follow-up treatment. Utilisation rates at cluster health care facilities increased from 324 patient consultations per month in 2006 to 1,073 per month in Q1 and Q2 in 2008.
Education	N/A	Enrolment increased 28%, from a pre-project level of 5,571 students to the current 7,130.	Enrolment in the Mwandama MV1 schools jumped from initial level of 1052 students to 1,327 in 2007, an increase of more than 25%.	Enrolment increased 48%, from a pre-project level of 6,922 to the current 10,285.
School meals	At the start of project interventions, the WFP managed 4 local school meals programmes. The project has since set up 20 additional programmes, bringing meals to 100% of enrolled students.	No school meals programs existed prior to the project's arrival. Currently, meals are offered in 3 of the 22 schools in the cluster (14%).	At the start of project interventions, the WFP managed 9 school meals programmes. The project has set up 4 additional programmes, bringing meals to 100% of enrolled students.	No school meals programmes existed prior to the project's arrival. Currently, meals are offered in 18 of the 24 schools in the cluster.

Source: MVP (2008f)

Annex 5: Lessons from rural development: A brief review[36]

During the past 60 years, there have been several experiences of development driven from the village or district level. Although there is great diversity between countries, and between the many agencies involved, three major sets of experiences can be identified: (i) community development approaches whose heyday was the 1950s; (ii) IRD in the 1970s; and (iii) bottom-up participatory development efforts promoted by NGOs since the 1980s.

Community development[37]

Community development (CD) has multiple roots, including Gandhi's ideas about village self-development (swa-deshi) and the social mobilisation in rural America that accompanied federal investments in the New Deal programmes to revive the US economy in the 1930s. From the late 1940s onwards, CD was seen as a way to stimulate development in the newly independent countries of Asia, in Latin America and in an Africa that was preparing for independence. For the US, CD promised local democracy and non-revolutionary progress that would head off discontent and potential support for communism.

CD was intended to create and stimulate processes at village level that would change attitudes, mobilise local resources and lead to action, thereby generating both tangible gains in construction of roads, schools, wells, promotion of improved farming, literacy and better health, as well as intangible benefits in building capacity to tackle problems through local government and participatory democracy at village level. Advocates of CD stressed the need to adapt programmes to local context, to be flexible and to work with local organisations and norms.

In practice, CD was implemented through village workers; secondary school leavers trained in social process and with some knowledge about literacy, health and agriculture. Employed by government, their mission was to work with local leaders, gathered in village councils, to identify felt needs and subsequently plan ways to meet these. In addition to whatever the community could contribute, mainly in labour and kind, government would provide additional resources through matching grants, plus the technical expertise of specialists in line ministries. The CD agents were usually recruited by a specialist agency outside of the regular ministries, often with high-level political backing. In many countries, CD efforts were promoted and funded by the US, the UN or the colonial regimes of France and the UK in the case of Africa.

CD was promoted with optimism – understandably so: if rural America could be rescued from the unemployment and poverty seen in the years following the 1929 crash, then surely the same could be done in other countries. A Community Development Division was established in Washington and staffed with visionary sociologists, anthropologists, educationalists, etc., while CD advisors were recruited to guide national programmes. Conferences were held, bulletins and journals published and training courses run both in-country and in the US and the UK.

CD had its early successes as well: most notably in Etawah District, Uttar Pradesh, India, where the programme became a showcase to which political leaders were invited to see what could be achieved.

36. This section was written by Steve Wiggins (ODI).

37. This section draws primarily on Holdcroft (1976).

By the early 1960s, CD declined as the US and the UK sharply reduced their funding and host governments failed to make up the gap and let the programmes die out. Why the sudden decline in interest? By the late 1950s the following problems had emerged. In India, where the initial experiences of Etawah were rapidly scaled up and spread across the country,[38] it was clear that CD, far from working with the poor in a participatory fashion, had often been captured by local elites who monopolised the additional resources that the programmes provided.[39]

Meanwhile, the rapid scale-up of CD led to resources being spread thinly while political expectations were inflated. Success at pilot scale was rarely seen in replication. In addition, CD programmes often failed to generate sufficient additional income to make any impact on poverty and hunger. For India towards the end of the 1950s, it was clear the CD was not leading to the agricultural growth necessary to feed the population.

Finally, this fuelled conflicts within both national and donor administrations between the CD staff with their processes and generalist approaches, and the more specialised staff of the line ministries who focused on achieving technical outcomes rather than process. Since ultimately the latter group were more firmly embedded within the overall public service than the newcomer CD units, and as it became clear that CD was not making significant progress across the various sectors, CD lost the battle to the established ministries.

Community development thus was dropped, often remarkably quickly, as the emphasis in rural development shifted to agriculture where, by the early 1960s, the promise of the technical advances of the green revolution were just beginning to excite the imagination of policymakers.

Integrated rural development[40]

By the early 1970s, there was a major reassessment of development efforts in response to the perceived failure of economic growth, based on industrialisation during the 1950s and 1960s, to make an impact on poverty and inequality. Those reassessments led to ideas such as 'redistribution with growth' (World Bank), 'basic human needs' and 'employment first' (International Labour Organization – ILO), 'new directions' (USAID) and 'appropriate technology' (NGOs). These ideas stressed directing development efforts at target groups of the poor and at trying to meet their needs across sectors. This, it was thought, would not only be equitable but also would increase rates of growth.

Since most of the poor lived in the countryside, rural development became central to development ideas and programmes. Although the green revolution was under way, there was no confidence that this would reduce poverty.[41] Instead, donors enthusiastically backed area-based programmes with actions across all the main sectors – from infrastructure, to production to social services – including primary health care. These activities were integrated so as to generate synergies. For

38. In 1948 a CD programme was started in Etawah District, Uttar Pradesh, northern India. This was successful in promoting the use of improve seed, fertiliser and green manure, as well as advances in health and education. It became one of the inspirations for the 1952 replication of pilot projects across India that was rapidly overtaken by a national programme (Dube 1958 [2003])

39. The CD workers had not been prepared to deal with the social stratification they encountered. Unable to change social structures locally, the village workers tended to blame the poor for their inability to participate in the programmes, citing fatalism and backwardness and among the poor. To make any progress the workers then had to work with the local elites.

40. Main references for this include: Birgegård (1987); Blackwood (1988); Howell (1987); Livingstone (1979); Rondinelli (1979); Ruttan (1975 and 1984)

example, better education was expected to help farmers to adopt new techniques and health workers spread messages to more receptive populations; better health was expected to allow farmers to work more days. Thus were born the IRD programmes that were a favoured way to promote rural development in the 1970s.

Although IRD shared with CD a focus on the local level and on working across sectors, it differed in that it paid more attention to economic gains and, above all, to agricultural development. There was much less of an emphasis on stimulating local processes: the key modality was not so much local mobilisation as heavy and concentrated public investments across the board. The initiative was very much 'top-down', centred on the activities of central government agencies, although they were decentralised to the district level and funded in large part by donors.

Planned in the early 1970s, most IRD programmes had barely reached their full scale before the late 1970s, by which time they were falling out of favour, most of them subsequently abandoned in the first half of the 1980s. Enthusiasm for IRD had proved even briefer than that for CD. Three problems dogged the programmes.

They were administratively highly demanding and unwieldy, since they were often not only planned as multi-sectoral investments but also meant to be implemented in close coordination across ministries and agencies. Central government capacity was usually inadequate to plan and implement them, let alone the even lesser capacity of local government. The response was to set up new organisations created specifically to implement the programmes. These units were often well-financed by donors, staffed by expatriates and used financial channels that were outside and parallel to those of the rest of the government. Neither the level of finance required to operate across sectors with the intensity planned, nor the special organisations could be replicated nationally for lack of finance and staff, so the IRD programmes were restricted to small areas — often just one or two districts. It was never clear just how the experience could ever be replicated beyond what became, in effect, a set of pilot programmes.

The technical focus of the IRD programmes[42] marginalised considerations of political and administrative feasibility. Planning and implementation were decentralised, not to local government or local organisations, but to the special units. Participation by the clientele of the rural poor was minimal, replaced by exercises in targeting conducted by the professionals recruited. In some cases, IRD programmes may also have tried to implement their packages through blueprint plans, with too little recognition of both the need to adapt technical solutions to local conditions and of the many contingencies that can apply when working in rural systems that are imperfectly understood.

As with CD, in many cases the results were meagre compared with the resources spent and the expectations created: above all, there was too little evidence that the programmes were effective in reducing poverty and hunger.

41. Indeed, social scientists reviewing the experience of the green revolution in the early 1970s, less than 10ten years after programmes began, were often highly critical, seeing is as increasing divisions in rural areas, since it appeared that only larger farmers were able to benefit from the new technology. Subsequently, the evidence shows that the GR packages were adopted by medium- and small-scale farmers and that rural poverty could be reduced considerably. (See Falcon, 1972 for an early critique and Hazell and Ramasamy, 1991 for later more positive assessment.)

42. Twenty years after the era of CD, there was some confidence that proven technical packages existed that could deliver early success, including most prominently, green revolution packages for favourable agricultural areas.

This was far from being the fault of the programme staff. In many countries, the IRD programmes were operating against a national background of deepening economic malaise, marked by rampant inflation, heavy fiscal and trade deficits and slow overall economic growth. Exchange rate and industrial protection policies, moreover, often resulted in agriculture, the mainstay of the rural economy, suffering from 'negative protection' – that is, output prices were below and input prices above the levels that would have applied in the absence of distorting policies, thereby in effect taxing agriculture – that repressed private enterprise and in particular deprived farmers of incentives to invest and produce more (Krueger et al., 1991).

Some programmes, in addition, had targeted not just the rural poor, but also marginal and remote areas for which technical advances to stimulate the economy were lacking. It was hardly surprising in such circumstances that outcomes were disappointing.

By the early 1980s, evaluations reported these problems and IRD was rapidly dropped by the donors. National governments could not and did not sustain them. Quite apart from these shortcomings, very different ideas about development in general had been taken up by the main donors: the Washington Consensus with its stress on macroeconomic stability, economic liberalisation and a reduced role for the state. The focus of development efforts returned to the centre: it was thought that if national economic conditions could be stabilised and an enabling investment climate created, then the rural economy would benefit without any necessary special measures – especially since such central measures would largely eliminate negative protection of agriculture. As for social services and investments, sector programmes could deliver these as needed.

The rise of the NGOs

From small beginnings, often in humanitarian relief, after the Second World War, Northern-based NGOs grew to a point that by the 1980s they had significant resources to invest in development. At the same time, developing country NGOs were growing in size and capacity, funded in some cases in large part by donations from their Northern counterparts.[43]

Donors who, influenced by ideas of government failure that were central to the Washington Consensus, distrusted governments on the grounds of incompetence and corruption saw the NGOs as an alternative way to invest and deliver services that would more effectively reach the poor. The NGOs were perceived as being less bureaucratic and more flexible than government, as well as incorruptible thanks in large part to their values and the sense of purpose that infused these organisations.

Assessing the performance of the NGOs is not easy. In part, this is because there were so many different NGOs, with varying mandates and modes of operation, so generalisation is difficult. But in part this owes much to the lack of evaluation of NGO efforts. Unlike donors and national governments that had to account to legislative scrutiny, the NGOs had only to convince their trustees and the individuals who contributed voluntary donations. Often, all that was necessary to meet these demands was to assert the importance of the work being done, and to show success at the level of a particular village or even a household. Rigorous evaluations of effectiveness were usually not required.

43. Oxfam, for example, disbursed much of its development budget in the early 1980s through partner NGOs in developing countries: only in humanitarian operations did the organisation generally implement directly.

Although some NGOs had specialised remits – such as those promoting appropriate technology – or were focused on emergency relief, there have been many examples of the NGOs implementing multi-sectoral rural development programmes. Their mode of operation has usually been to work at the village level, and to strive to change attitudes and behaviours through processes, in much the same way as CD attempted. But by the 1980s there were differences to that earlier experience. Many NGOs were acutely aware of social differentiation. Indeed, some worked exclusively with the poor to raise their awareness and stimulate direct action to remedy inequality and injustice. One version of this was 'concientisation', based on the ideas of Paolo Freire, where raising awareness among the poor and disadvantaged was the principal mode of operation.

Another variant was the 'learning process', a codification of observed NGO practice made most influentially by David Korten (1980). The learning process recognised that the demands of successful development programmes would change through time and that there were thus quite different implications for implementing agencies.

Three phases were identified. During the first, learning to be effective, programme participants search for ways to achieve their goals through processes of experimentation, acceptance of error, flexibility and adaptation. False starts may be made, but what matters is that these are detected early and new ideas tried, so that by trial and error an effective programme can be devised. Once effective, the second stage is to make the programme efficient, using the minimum resources necessary to achieve the results required. Typically, this involves eliminating procedures that are not critical, and adapting others so that they can be operated by less skilled and qualified staff. In the third stage, the programme is expanded and replicated to cover a larger area, perhaps going from district to national level. This depends largely on there being sufficient capacity to handle the expanded programme.

Management implications are clear. During the first phase, small teams of highly qualified professionals may operate informally with much interaction with locals in a stimulating and creative process – precisely the kinds of operations that the NGOs, unencumbered by civil service procedures, could run. By the time the third stage is reached, the programme may be quite formal with hierarchies of staff operating procedures set down in manuals.

Korten based his ideas on observations of six experiences from Asia where grassroots programmes started by NGOs in limited areas had proposed and been nationally replicated, in some cases by government. Two other elements are clear from his analysis: (i) the programmes were driven by champions, individuals who committed most of their career to seeing the programme succeed; and (ii) often the time devoted was considerably longer than the typical donor funding span (or political cycle). For example, India's 'Operation Flood' grew from the pioneering experiences achieved in Kaira District, Gujarat in the late 1940s, when a milk producers' cooperative was established to ship milk from smallholder herds to Bombay. Started by S. V. Patel, in 1950 the young Verghese Kurien was appointed General Manager and it was he who was to champion the model from district cooperative to national programme by the time he retired in 1998. By 1955, the cooperative set up a dairy at Anand to process the winter flush of milk into butter, ghee and milk powder, to be followed by a second dairy in 1965. The 'Anand model' was eventually, almost 20 years after it began, recognised and hailed as a solution for India's faltering dairy sector. The Grameen Bank in Bangladesh is another case of a grassroots initiative championed by a strong leader with a vision, Muhammed Yunus, and that evolved over decades.

Ideas about the potential for non-governmental initiatives developed from the village level have been reinforced through the 1980s and 1990s by a search for effective participatory development in which the writings of Robert Chambers have been influential. For Chambers, a central concern is getting professionals to reverse their roles when working with the poor, learning as much from and with them, rather than trying to instruct.

Have the various NGO approaches been effective? For the reasons already stated, it is hard to judge. Meanwhile, the donor agencies, ever impatient to try something new, have in many cases moved on. While relatively small matching grants to NGOs remain, presumably in the hope that some of the experiments will yield replicable ideas (or to serve in advocacy/watchdog/accountability roles), donors have switched most of their funding back to governments in recognition that, for key services that have to reach most if not all the population, government is the only practical provider (or purchaser) in the long run. For most donors, the current challenge is to encourage improved performance of government agencies.

Lessons from these experiences

Some of the lessons are clear, although their implications do not necessarily produce immediately useful guidance on improved practice. For example, reviews (Birgegård, 1987; Blackwood, 1988; Howell, 1987; Ruttan, 1975 and 1984) repeatedly stress the following points.

Special units and administrative arrangements rarely succeed beyond the short term; transitions to more sustainable modalities are at best difficult and often fail completely as the programme is simply abandoned.

Integration in search of synergy makes sense, but operationally this need not imply integrated implementation of service delivery with heavy demands on scarce administrative capacity, but rather that plans are integrated (Leonard, 1984).[44]

It is necessary to consider the overall context, not just the local: village-level programmes can be stymied if the national context is adverse.

Developing local capabilities and institutions requires time and plenty of adjustment. NGO experiences suggest that successful programmes need the sustained support and direction of committed champions, and that a decade or more of such leadership may be necessary before a programme can be replicated widely.

Other lessons are rather obvious: for example, it helps to have technical innovations that are effective and yield tangible benefits in the short run (i.e., quick wins). It might also help if donors would stick to approaches for longer than their programming cycles normally permit for innovations to bed down. To this may be added the need for sustained political support for any particular programme, something that is more likely to be forthcoming if there are clear early gains (hence the importance of quick wins).

There may be widespread agreements on these points and, while the pitfalls may be obvious, ways to avoid them are not.

44. Not that making government actions across sectors compatible is ever that easy. The UK government's search for 'joined-up thinking' in the late 1990s suggests as much.

The overall impression from this review is that rural development confronts some daunting challenges, of which one is central. In the long run, rural development will only be sustained and have any lasting value if local capacity to decide and act is enhanced, and if the benefits are broadly and equitably shared. Developing those capacities and changing structures to reach these goals will require change over decades, not years.

But in the short run, it is necessary to make advances with tangible results and, above all, to raise incomes, education and health levels. The question then is how to make the investments, deliver the services and otherwise create the conditions for early successes, when local social, political and institutional capacity is low; and to do so with sufficient intensity to make a recognisable difference, when local resources are very limited. A big push from outside can make a difference in the short run and in limited areas, but how to replicate and sustain those gains has proved illusive to date.