

**COMMUNITY PARTICIPATION IN SUSTAINABILITY OF
HEALTHCARE AND WATER SUPPLY PROJECTS IN BAUCHI
LOCAL GOVERNMENT AREA BAUCHI STATE, NIGERIA**

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ZARIA, NIGERIA**

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**A DISSERTATION SUBMITTED TO THE SCHOOL OF
POSTGRADUATE STUDIES, AHMADU BELLO UNIVERSITY ZARIA,
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**DEPARTMENT OF LOCAL GOVERNMENT AND DEVELOPMENT
STUDIES,**

FACULTY OF ADMINISTRATION,

AHMADU BELLO UNIVERSITY,

ZARIA, NIGERIA

JANUARY, 2020

Declaration

I, hereby declare that dissertation entitled “**Community Participation in Sustainability of Healthcare and Water Supply Projects**”: A Study of selected Communities of Bauchi Local Government Area Bauchi State has been carried out by me in the Department of Local Government and Development Studies. The information derived from the literature has been duly acknowledged in the text and a list of references provided. However, any error(s) in the script are entirely mine.

Name of Student

Signature

Date

Certification

This Dissertation, entitled “**COMMUNITY PARTICIPATION IN SUSTAINABILITY OF HEALTHCARE AND WATER SUPPLY PROJECTS**” a study of selected communities Bauchi Local Government Area, Bauchi State, Nigeriaby Yunusa, Idris meets the regulations governing the award of degree, ‘Masters of Public Administration’ (Local Government) Ahmadu Bello University, Zaria and is approved for its contribution to knowledge and literary presentation.

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Dedication

This dissertation is dedicated to my beloved first son Muhammad Al-Ameen.

Acknowledgement

We believed in the wise saying that throughout human evolution, no nation has achieved a substantial measure of success without the necessary contributions of the pride number of the society. This study is made possible through the efforts of great personalities. I first of all thank the Almighty God for His grace and Blessing in my life. This part of the study should recognize the help and guidance received in undertaking the study namely Dr. Dalhatu Jumare and Prof. Bashir Jumare, supervisors for their pain in reading and re-reading of draft copies of the study materials. In fact, I must mention my deepest appreciation to them. I thank them most especially for their help, advice and guidance which were the pillar in shaping this study to its successful conclusion.

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ABSTRACT

The study examine the causes of development projects failure and abandonment and the relationship between community participation in sustainability of health & water supply projects in the selected ten(10) communities of Bauchi local government Areas, Bauchi State- Nigeria. The study ascertain whether community participation in development projects engender their sustainability. The major assumption of this study is that community participation and ownership of development projects do significantly impact on their sustainability. The study adapted "System Theory popularized by Ludwing von Bertalanffy. The data collected both from primary and secondary sources using structured questionnaires, interviews and observation of the both healthcare and water supply projects. On the other hand, secondary data collected from the council minute of meetings, projects reports, projects estimates and community minutes. Data collected from structured questionnaire were analysed using both descriptive and inferential statistics tools (frequency, tables and percentage) whereas Chi-square non-parametric test was used to test hypotheses. The study conducted in ten (10) communities and sampled drawn from both male and female of the communities including their leaders and officials of the Local Government. The result from ten selected communities shows that the local government has failed to provide opportunities for people to participate in their development process. The problems of un-sustainable situation of facilities as identified by the study is largely attributed to the failure of local government to provide opportunity for beneficiaries to be partners in the provisions of facilities. The study therefore, revealed that local government officials do not respect community inputs in development process and do not consider them as partners in providing community solution. The results of the two hypotheses show that local government officials and communities members had no significant differences on their view about community participation lead to projects sustainability and projects reflected on community felt-needs lead to higher projects achievement. The study therefore, recommended that to attain sustainability, development projects must be stepped down to the basic level of understanding of local communities and they must be deeply involved in the entire projects cycle; they must be made to comprehend and appreciate the project, its dynamics and dimensions including intended benefits as well as impacts of the projects so that communities can willing to accept and own the project. This can also stimulate benefiting communities to sort and utilise available resources whether local knowledge, know-how, experiences, materials and finances to keep the project going and functional for both intra-generational benefits even without continue support from outside.

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LIST OF ABBREVIATIONS AND ACRONYMS

CBOs=Community Based Organisations
CSO=Community & Social Organisation
CBDP=Community Based Development Project
CDA=Community Development Associations
CD=Community Development
CPMC=Community Project Management Committee
CSD=Community & Social Development
CSDP=Community & Social Development Project
DETR=Department of the Environment Transport & the Regional
CHO Community Health Officers
CHEW=Community Health Education Workers
DHS=District Health System
DHC=District Health Committee
DHP=District Health Project
GB=Grameen Bank
INEC=Independent National Electoral Commission
LEAD=Leadership Advocacy & Development
LEED=Leadership in Energy & Environmental Design
LGA=Local Government Area
MOA=Ministry of Agriculture
MDGs=Millennium Development Goals
MNGO=Mother Non-Governmental Organisation
NEPA=National Electric Power Authority
NGO=Non-Governmental Organisation
NHP=National Health Policies
PHC=Primary Health Care
PS=Projects Sustainability
REDA= Rehu Development Association

SDP=Sustainable Development Projects

SDGs=Sustainable Development Goals

SFDP=Small Farmers Development Programme

SPSS=Statistical Package for Social Sciences

UNICEF=United Nations International Children Education Fund

USAID=United States of America for International Development

USGBC=United States Green Building Councils

URC=Urban Residents Committee

UNESCO=United Nations Education, Scientific & Cultural Organisation

UNMD=United Nations Millennium Development

UNCSD=United Nations Conference on Sustainable Development

CHAPTER ONE

Introduction

1.1 Background to the Study

Community participation is an indispensable part of development programmes and projects encouraged by the national governments, the World Bank, United Nation Agencies, Non-governmental Organisations (NGOs), and Community Based Organisations (CBOs). In spite of multi-dimensional perspectives of these agencies, all agree that community participation should be encouraged. Actions by the poor or the target beneficiaries to influence decision making through direct or informal means have emerged as an alternative way by which they can gain access to decision-making process and to resources, and thereby improving their wellbeing.

Participation and Sustainability are concepts that occupy a central place in the world of development process. Not so many programmes and/or projects can succeed without applying the principles of participation. Today, some government development programmes and projects are beginning to apply participatory approaches which have not only increased interdisciplinary interest but have also exerted influence in social development policy and planning circles, both at micro and macro levels (Mulwa, 2008). Beside participation occupying a central role in development thinking and practice, all major development organisations including multi-lateral agencies like the World Bank and the International Monetary Fund have arrived at a near consensus that development cannot be sustainable and long-lasting unless people's participation is make central to the development process (Kumar, 2002:23).

The “international Conference on Popular Participation in the recovery and Development Process in Africa” a rare collaborative effort between African people's organisations, the African government, non-governmental organisations and the United Nations agencies, in the

search for a collaborative understanding of the role of popular participation in the development and transformation of the region was held in Arusha, Tanzania in 1990. One of the high points of the conference was the promulgation of “African Charter for popular participation in Development and Transformation” with the cardinal objective to identify obstacles to people’s participation in development and define appropriate approaches to the promotion of popular participation in policy formulation, planning, implementation, monitoring and Evaluation of development programmes and projects, noting that people’s participation in development and transformation has not been a priority to many African countries. One could have expected that this Charter will be domesticated in Nigeria; however, it is observed that Nigeria does not have a peculiar policy aimed at facilitating community participation, obetta and Okide 2012.

Generally, Community Participation concerns the engagement of individuals and communities in decisions about things that affect their lives, (Burns et al, 2000). Community participation process includes an identification of stakeholders, establishing systems that allow for engagement with stakeholders by public officials, and development of a wide range of participatory mechanisms, (Herbert 2011, cited in Laura 2000). Stakeholders are individuals who belong to various identified communities; and whose lives are affected by specific policies and programmes and/or those who have basic right as citizens to express their views on public issues and actions. Chambers 2002 highlights the value of engagement with stakeholders in terms of greater local ownership of public actions or development projects. Citizens can exert their collective voice (which occurs in the relations between citizens and policy-makers) to influence policy, strategies and expenditure priorities at different level of policy making (national and local) according to their wishes and preferences. Strengthening the citizen’s voice, enhance accountability of policy makers,

motivating them to be responsive to the needs of communities and stimulates demand for better public service providers.

Community participation is highly critical to achieve benefits of projects efficiency; it may be used to enhance the understanding and agreement of cost sharing (both financial and physical contribution). It can be used to prevent conflict and stimulate cooperation and agreement between different sections (Herbert 2011, cited in Laura 2000).

In the Western literature, community participation has emerged as one of the main policy issues during the last two decades, (Laura 2000). Although, there was little herd evidence about the impact of community participation upon outcomes, it has been accepted as good practice beyond 1980 in the West, at the end of 19 century. Discussion focuses on how to effectively engage community representatives and local residents in project design and implementation (Ball, 2004; Burton, 2003). Local communities are regarded as being intended beneficiaries having the greatest stake in the future of the area and knowing “from experience the range of issues that need to be tackled (cited in Chanan, 2003).

In Britain, community participation was considered as a way to speed processes and generate more acceptable proposals but the concept has grown quickly to be regarded as a right in participatory democracy(DETR,2000),and being Central to the process of empowerment and a necessary condition for overcoming social exclusion(Wood,2000). While at European Union level, active citizenship participation” was put forward to promote active cooperation of local residents in public schemes designed for the improvement of disadvantaged or underdeveloped localities (Chanan 1997).

In developing countries, community participation is largely associated with the emergence of development project partnership schemes as well as the implementation of participatory

approach in urban and social development (Anja W. 2006). The concept of development partnership has evolved from a partnership between central and local governments to deliver services that promote locally-driven initiatives which involve local communities (Southern, 2002).

The inclusion of local communities is advocated in various policy documents by international agencies. For instance, in 1993, UN-Habitat stressed the importance of setting up multi-sectoral partnerships between the public sector, the private sector and the third sector (residents and their organisations) to establish roles that are complementary and mutually-supportive (UN-Habitat, 1993).

In India, community participation takes place more through involvement of Non-Governmental Organisations (NGOs) in programme implementation. NGOs are thought to be closer to the beneficiaries in all kinds of Interventions they are used for service delivery in many healthcare Projects and other programmes. The government established a three-tier system of small NGOs at the village level which are assisted by Mother NGOs (MNGOs), which have substantial resources and are located at the District, State or National level. Four National NGOs in turn assessed the performance of Mother NGOs (Kishore 2002). The challenge of participation in India, the participation is influenced by the political, social, economic and cultural environment (Kpiririet ET al. 2003; 206, Anja W. 2006:19).

In China however, community participation takes place through urban neighbourhood communities and the transformation of Urban Residents Committees (URCs; Xu, 2007), The URC is a neighbourhood-level quasi-governmental organisation present in all cities and town across China. According to the PRU Urban Residents Committees, Organizing Law (1989), these Committees, whose employees are civil servants, are autonomous, though they often work closely with and carry out the local government's administrative tasks (Derleth &

Koldyk, 2004), such as monitoring family-planning compliance and maintaining household registry rolls. Community participation in China, improve their wellbeing and public acceptance (Xinhua News 2007).

In Nigeria therefore, Obeta and Okide (2012) in their work “Rural Development Trends in Nigeria: Problems and Prospects” observed that though there were no specific government policies on community participation in Nigeria, programmes such as National Accelerated Food Production Project(NAFPP), Operation Feed the Nation, Agricultural Development Projects(ADP), River-Basin Development Authority (RBDA), Green Revolution, Directorate for Food, Roads and Rural Infrastructure (DFRRI), National Directorate of Employment (NDE), National Directorate for Social Mobilization, and Better Life for Rural Women; were designed to accelerate and encourage community participation as well as to facilitate rapid rural/community development in Nigeria. Obeta and Okide (2012) also found that the following among other factors responsible for lack of rapid rural development and sustainability of government projects in Nigeria;(i), Lack of Core Project Leadership where the failure of project leadership to come from within communities to sustain the development projects has led to the falling apart of things in rural development. The tendency has been to rely on official leadership for carrying out rural projects rather than local communities; (ii), Inadequate Community Participation where the top-bottom approach to rural development employed by government functionaries whip up enthusiasm among the people, as there is absence of total community participation. Due to the approach adopted, people evoke unwilling response as they are regarded as being incapable of standing on their feet; and (iii), Lack of Grassroots Planning where there was little or no attempt to allow the rural community to identify the problems and goals, analyse their own needs, and commit themselves to the achievement of targets. Local experts, Chiefs and community leaders, were taken for granted in deciding what projects to embark upon, and where and how to execute

them. The planners at the Federal level rarely consult even interest groups, cooperatives and professional organisations. At the local government level, community participation is articulated in the 1976 Reforms of Local Government whose principal objective was to provide opportunities for people to participate in their own development process. This is particularly so in the light of the fact that development policies and programmes are formulated at the Local Government level to create the opportunity for community participation in sustainable development process, (Omar Massoud1999).

However, Adebayo (2014) in an article “Local Government and the Challenges of Rural Development in Nigeria (1999 to date)” found that local government were faced with such challenges like inadequate finance, corruption, poor implementation of projects, lack of competent manpower, high level of illiteracy, lack of due consultation and non-involvement of local dwellers in policy decisions and implementation of development projects and hijack of local government allocation by the state government which drastically affect initiation and implementation of community development projects, promoting community participation, and sustainability of rural development efforts at the local government level in Nigeria. This is corroborated by Nnamani and Chilaka (2012) who asserted that community involvement in the provision and management of social services should be encouraged through support in personnel development, financial resources and dissemination of information (advocacy) otherwise social services even when delivered to rural communities may hardly continue to benefit them. It is in view of these that, the study assessed the effect of Community Participation on Sustainability Health and Water Supply Projects in the ten (10) selected communities in Bauchi Local Government Areas of Bauchi State.

1.2 Statement of Research Problem

Community participation in development projects at the local government level has been limited and in some occasions confined to receiving information and some sort of consultation signaling low level of community involvement and by implication impede community ownership and sustainability of the projects; while democracy at local government level has not changed the attitude of local government top functionaries toward resource management (it is business as usual), service delivery (always handled with levity) and people's participation in local governance (is never taking seriously) (laah, Adefila and Yusuf, 2013; Ohioni 2006, cited in Doma 2016). This means in spite of increasing emphasis on community participation as a means for project sustainability, participation which also calls for making communities an integral and active part of the process of project delivery is not taking serious at the community level.

In a World Bank (1999) work on "Community participation in Education: What do we know? It opines that ensuring sustainability is dependent on the degree of self-reliance developed in target communities and on the social and political commitment in the wider society to development programmes that support the continuation of newly self-reliance communities. Community members are expected to be actively involved in the process of interventions through planning, implementation and evaluation. Furthermore they are expected to acquire skills and knowledge that will later enable them to take over the project or programme to avoid pitfalls of other programmes and projects that were abandoned after formal funding and the experts have left.

Local Governments are essentially set up to effect delivery of services to the people at the grassroots and to provide opportunities for people to participate in their own development

process. These services are articulated in the local government Reforms of 1976 and constitutions of the 1979 and 1999 as amended respectively. According to National Health Policy (NHP) the specific roles of Local government or the Health Department of local government among others are;

Motivating the community and devising local strategy for health in terms of the best approach for implementation of each element of the PHC, the activities involved, the support system, involvement of the communities, mobilizing resources, ensuring the involvement and availability of essential infrastructures for health delivery and collection of relevant data on community health(National Health Policy 1999 p4). The Local Government play greater role in preventive aspect than curative. The local government achieve all these through enlightenment campaign, educating local communities on the need to accept and participate in the provisions of local facilities in their areas. Education and enlightenment campaign for community participation should be obtained in the local government strategies through; organizing communities' town hall meetings, sensitization and mobilization of communities for social change.

(1) In addition to the mobilization tactics the NHP has provided for the development and adoption of the Districts Health Committee System as a strategy for community engagement in Health Care delivery. The system provide for partnership and collaboration between community and government in the area of Health promotion, redemptory and development. Each primary health care facility is expected to form District Health Centre (DHC) with members drawn from the community to monitor and manage the activity of that primary health care facility.

Also in the area of Water Supply, the Donor agencies and even the local government have adopted the bottom-up approach by consulting and engaging local community in design,

sitting and supply of pipe borne water, sinking of borehole location refuge dump and waste disposal facilities.

Despite these measures put in place to ensure the promotion of community participation and sustainability in Health care delivery and water supply projects, the goals and or the targets of the projects between 2012-2017 not achieved especially in the ten selected communities; Council Minute 2014 and Field Survey 2017.

In almost all rural and semi-urban areas understudy, the problems of non-community participation attributed to the wrong perception of these communities that provisions and maintenance of local facilities, are the sole responsibilities of governments and their officials (focus group interviewed 2017). As a result of these, local health care facilities and water facilities are either closed down, non-functioning or over-utilized and thus, non-sustainable in most of these facilities. The role of Bauchi local government generally for community participation and project-sustainability in {2012-2017} has not been satisfactory.

It is against this background that this study intended to assess the extent to which communities involved in Health care and Water Supply Projects that ensure the development and sustainability of these projects in the ten (10) selected communities of Bauchi Local Government Area, Bauchi State.

1.3 Research Questions

On the basis of the problems stated above, our research questions are:

1. What is the effect of community participation on Healthcare projects and programmes?

2. To what extent has community participation affects the sustainability of the Healthcare projects and programmes?
3. What is the effect of community participation in water supply projects?
4. To what extend has community participation affects the sustainability of the water supply projects?

1.4 Objectives of the Study

- Broad Objective:

The study assesses the effect of community participation on sustainability of healthcare and water supply projects in some selected communities of Bauchi Local Government Area.

- Specific Objectives are to:

1. Examine the effects of community participation on healthcare projects in the selected communities of Bauchi Local Government.
2. Establish the extent to which the community participation has affected the sustainability of Healthcare projects and facilities in these communities.
3. Find out the effects of community participation on water supply projects and facilities in the selected communities of Bauchi Local Government.
4. Ascertain the extent to which the community participation has affected the sustainability of the water supply projects and facilities in these communities.
5. Highlights the Problems of Community Participation in Water Supply and Healthcare Projects in the Selected Communities.

6. Proffers workable Solutions towards Sustainable Water Supply and Healthcare Projects through Community Participation.

1.5 Research Hypotheses

The hypotheses to be tested in the study are that:-

1. HO₁Community participation has no significant effects on the sustainability of Healthcare projects and facilities in Bauchi Local Government.
2. HO₂Community participation has no significant effects on the sustainability of water supply projects and facilities in Bauchi Local Government.

Since hypothesis operates at the level of variables, it is a statement that relates two or more variables dependent and independent variables. A hypothesis is a speculation, a hunch, a conjectural statement, a tentative guess, an assumption, which the researcher is not too sure of its credibility but is aware that such a relationship exists (Odoh 1995).

For the purpose of this study, two hypotheses were developed thus; HO₁ and HO₂. In testing these hypotheses, we generated data from using interviews, questionnaires and observation in which chi-square non-parametric test was used to test the hypotheses using SPSS version 16. In the two hypotheses however, we measured relationship between Community Participation and Sustainability of Healthcare projects and its Facilities as well as Community Participation and Sustainability of Water Supply Projects and it Facilities in the selected ten (10) communities of Bauchi Local Government Areas, Bauchi State.

Community Participation in the two hypotheses, are independent variables while the 'Sustainability' that appeared in the two hypotheses are dependent variables respectively. This is because sustainability of projects and facilities of both health and water supply

depend on community participation and community support to them. Therefore, an increased of community participation and support will lead to an increased of sustainability of both projects and facilities of Health and Water Supply in the communities.

1.6 Significance of the Study

In a situation where the local governments have failed to meet their obligation to the communities, especially in creating opportunities for people to participate in their development programmes as contained in local government reform 1976, steps need to be taken to know where the problems are and the proper measures to deal with them should also be identified. In line with the above notion, this study tries to provide measures to address the short fall.

The significance of this study is also to trigger policy debate on participation-sustainability relation and add to the literature on the subject of community participation and project implementation in Bauchi Local Government. Thus, community participation in project implementation leads to low cost of projects as community may provide unskilled labour, water needed for a given project, Sand, etc. Financial accountability of all spending to the beneficiaries by the service providers and more importantly community, if included may influence the outcome of projects for general acceptability by the community themselves. The findings of the study are therefore of great significance for enhancing and improving community participation in Community Based Development Projects (CBDP).

The study is also significant to the community and the civil society in that it sheds light on the relationship between community participation and project sustainability. For the researchers with interest on community participation and sustainability, the results of studies

shows factors affecting community participation and identify the relationship between community participation and sustainability of Projects.

1.7 Scope and Limitations of the Study

This study covers a period of five years that is 2012-2017. The choice of the period was made based on the consideration of the differences in tenure of the elected Chairman and appointed caretaker Chairman of the local government under study. The period of five (5) years is however considered enough to assess any development projects and their sustainability (if any). The study is therefore, limited to ten communities of Bauchi Local Council thus; -Bishi, Gidirgi, Miri, Buzaye, Zungur, Wuro Jamail Village, Durum, Kusi, Kobi, and Inkil. The choice of ten (10) communities was based on systematic sampling where all the 10 communities in the Local Government were arranged alphabetically and the odd numbers were selected. The study in these communities covers healthcare delivery and Water Supply and examines the relationship between participation and sustainability on projects mentioned above. The choice of these projects is out of the considerations of the importance of healthcare and water supply for the survival of each community, group(s) and individual(s).

The study for community participation in development process in local Health care projects, refers to involvement of the local communities in the following:

- a. Formation of District Health for communities of various levels of Primary Health care i.e. PHC centres, Primary Health care clinic and PHC posts.
- b. Involvement of the communities in the activities of the DHC through research meetings, management of the Health facilities Drugs, revolving funds, scheme and other activities of the communities.

- c. Monitoring the activities of the PHC facilities in their locality
- d. Participation in the Health Sanitation and mobilization campaign organized by government and donor agencies
- e. Patronising the Health care services provided by the Health facilities
- f. Support to Health services and programmes

2. Whereas community involvement in water supply relate to:-

- a. Formation of community based development association to address social issues bothering on the community including Water Supply problems.
- b. Participation in community development activities through town hall meetings to discuss water supply issues and community mobilization on water supply programmes
- c. Contributing financially and physically toward community development effort generally and water supply programmes.
- d. General support to water supply projects

3. Sustainability of Health care Projects:-

Sustainability is the ability of the project to stand the test of time in terms of quality, duration and utility as well as in the future. It relates to the project meeting the needs and demands of the present generation without compromising the needs and demand of the future generation.

Thus, sustainability of Health care projects refers to:-

- a. Utility of the Healthcare facilities which is measure by their physical numbers
- b. Utility of the Health facility, indicated by the level of patronage

- c. Quality and condition of health services which is measure by the calibre of health workers, working-condition, frequency of supervision and the condition of the Health facilities
- d. Support to health care facilities (maintenance and security).

Whereas sustainability in water supply; indicated by

- a. Acceptability of the water project indicated by degree of patronage
- b. Quality and condition of the water supply projects measured by it level of functionality
- c. Equitable distribution of the projects indicated by the sitting and location of the water supply projects
- d. Availability of the water measures of the number of water supply projects located in the community

1.8 Operational Definition of Key Concepts

The following concepts operationally defined thus:

Community participation: is the process by which individuals, families, or communities assume responsibility for their own welfare and develop a capacity to contribute to their own and the community's development by being involved in the decision-making processes in determining goals and pursuing issues of importance to them. The indicators of community participation include:

- a. Financial contribution;
- b. Labour contribution;
- c. Material contribution;
- d. Involvement in decision-making process;

Advocacy: According to Singh (2015), advocacy is the pursuit of influencing outcome including policy and resource allocation decisions within political, economic and social system and institutions that directly affect people's lives. We therefore look at advocacy as the process of mobilizing community members to participate in decision-making and actions that are capable of influencing government and non-government policies, programmes and projects. Indicators of advocacy include the following:

- a. Organizing community town hall meetings;
- b. Sensitization of communities on the rights issues;
- c. Mobilizing communities for social change;

Capacity Building: United Nation Development Programme (2006) defined capacity building as the development and strengthening of human and institutional resources. It sees capacity as "the ability to perform functions, solve problems, and achieve objectives" at three levels: individual, institutional and social. We define capacity building as increase in the knowledge output rate, management skills, competence and othe capabilities of local communities to initiate, plan, implement, monitor and evaluate community projects and programmes.

- a. Regular training;
- b. Increase in knowledge;
- c. Increase in management and operational skills;

Empowerment: According to kabeer (1998), empowerment is a process of change that focuses on expanding the range of choices that people can make. As such, it cannot be understood as a single dimensional formula for change, either as process or outcome. It must be understood in particular contexts taking into account the specific needs of the people

intended to be empowered. Empowerment is a process of creating awareness and capacity building leading to greater participation, to greater decision-making power and control, and to transformative action.

- a. Awareness, ability to reflect and take action;
- b. Capacity to exercise own abilities;
- c. Gaining control over one lives;

Community Ownership: Community ownership simply means the ability of benefiting communities to accept any development project and treat it as their own asset rather than the goodwill of an outsider. This means increased responsiveness of the project to the needs of that community and the community valuing the project more highly.

- a. Increased community confidence and trust in the project;
- b. Acceptability of the project;
- c. Increased community valuing and responsibility on the project;

Project Sustainability: According to Kids (2001), project sustainability is “the process of ensuring that development projects continue to survive and generate enough activities that produce benefits for target communities or groups.” We therefore define project sustainability as the capacity and ability of benefiting communities to maintain projects so as to continue to drive benefits from such projects not only by the present beneficiaries but also by the future beneficiaries or Project-Sustainability: Is the ability of an implemented project of any kind to endure longer and be healthy beyond expectation. Indicators of project sustainability include:

- a. Benefit sharing;
- b. Continue protection of the project;
- c. Continue flow of funding;
- d. Continue material servicing of the project.

CHAPTER TWO

Literature Review and Theoretical framework

2.1 Introduction

Participation and Sustainability are the concepts that occupy a central place in the world of development initiative that people's needs and priorities should be the primary purpose for any development planning and intervention and other developmental concerns should be secondary. To have an-in-depth clarity for understanding of the issues in this chapter, we reviewed literatures on community participation, the concept of advocacy, capacity building, empowerment, community ownership, and project-sustainability; we therefore, reviewed empirical studies as well as adopted a theoretical framework for the studies.

2.2 Conceptual Framework

2.2.1 Community Participation:

Participation approaches to rural development fundamentally involve a painful process of change and calls for a change of attitudes and structures which were treasured and cherished by those in power (Mulwa, 2008: 14). The new popularity of participatory approach has several origins; it is a concept that has been popularized in community development since the 1970s. The Integrated Rural Development (IRD) that dominated the development scene was its precursor and operated on the assumption that sectoral integration was imperative to check on the phenomenal dismal impact experienced then with community development initiatives. It was believed that this new thinking was as a result of the recognition that most development projects and programmes failure originated in attempts to impose standard top-down programmes and projects on diverse local realities where they do not fit or meet the needs of the local people. The top-down approach believed that people were too ignorant and

perhaps to effectively discern and decide what was good and appropriate for them and as much were not expected to set up their development priorities, rank them and identify the most felt need (Mulwa, 2008: 15). Due to the top-down approach that had been adopted by most governments in developing countries for most of the priorities they had initiated for its Communities, sustainability as a key component for ensuring that communities owned the programme will continue to suffer as long as development specialists keep doing things for the people (Mulwa, 2008).

Participation is an important concept in development and because of its wide application; it means different things to different people (Regional Partnership for Resource Development, 2009:6). As a matter of fact, participation include people's involvement in the entire decision making process, in implementation in efforts to evaluate such programmes.

Furthermore, community participation stands for partnership which is built upon the basis of dialogue among the various actors during which the agenda is jointly set, and the local views and indigenous knowledge are deliberately sought and respected. This implies negotiation rather than the dominance of a set agenda (Relational Partnership for Resource Development, 2009.6).

It is the involvement by local population in the creation of the content and conduct of the programme, capacities. By the foregoing, we are saying that it also avoid the imposition of priorities from outside. Participation is driven by a belief in the importance of entrusting citizens with the responsibility to shape their own future. The people have to be involved in the needs identification, they must involved in prioritizing and ranking of the needs and building a consensus around what they believe amounts to the problems facing the community. We are also saying communities should not be influenced to accept a need as a problem affecting them because it amounts to imposing a priority from outside; it should be what they want.

An examination of the literature on community participation suggests that it leads to development projects that are more responsive to the needs of the poor, more responsive government and better delivery of public goods and services, better maintained community assets, and a more informed and involved citizenry (Mansuri and Rao 2003). An obvious aspect highlighted in this conceptualization is the benefits of participation as a means of providing and accessing information. When a community participates, it both provides information about its preferences and gains information that may influence its optimal choice. Both types of information are likely to lead to increased welfare for the community, and in our case of interest, better development projects and their sustainability.

From the available experiences it is observed that the community may be involved in a variety of ways as noted by Somnath Roy and B.B.L. Sharma 1986; A, the services may be organized on a community basis with wide and easy access of the people to the services provided. B, the community may contribute to the operation and maintenance of services. Thirdly, the community may participate in planning and managing the services. C, the community may make inputs into overall policies, strategies, and work plan of the programme. D, the community may help in overcoming factionalism and interest conflicts in the community and promote emergence of a cohesive group capable of engaging in cooperative efforts for the benefit of all.

However, the sense one obtains from the field is that this notion of participation is incomplete as it misses the role participation plays as a means of affecting the distribution of power and ownership. Case studies emphasized that participation is key for communities to have control over project initiatives, decisions, (financial) resources, and upstream planning (World Bank 1996; Narayan 1995 in Samson, Doma 2016).

Participatory development programme through community participation therefore is meant to correct the inadequacies encapsulated in the top-down, modernization and social welfare dispositions and practices that do not allow participation of stakeholders (Mulwa, 2004). In this regard, stakeholders such as opinion leaders, beneficiaries, women, youths, local leaders and the general local community all have a stake in whatever is invested in the locality.

Barasa and Jelagat (2013) contended that participation of community members in local projects therefore, has the potential to influence challenge, change and modify local village economy for development as a method of helping local communities to become aware of their needs to assess their resources more realistically, to organize themselves and their resources in such a way as to satisfy their needs and in so doing, acquire the attitude, experiences and cooperative skills for repeating this process again and again on their own initiative. This is however contrary to the view expressed by Olson (1973) that without coercion or some other special device to make individuals act in their own interest, rational self-interested individuals will not act to achieve their common or group interests. His view is however debunked by Olukotun (2008) who opines that experience has shown that given clear rules of the game, access to information and appropriate support, poor men women (community members) can effectively organize themselves to provide goods and services that meet the immediate priorities. This is because communities have considerable capacity and are willing and able to plan and implement programmes when empowered i.e. given power to decide and negotiate (Tade, 2001).

However, most often elected representatives do not always take care of the interest of the poor, local council seems to lack the capacities to articulate people development agenda, ownership and sustainability are ephemeral-case not based on the interest the people.

Therefore, community must be empowered through active participation for project sustainability to be achieved (Stanley, 2003).

Reid (2000) viewed participation in terms of power-sharing and organized effort to increased control over resources and regulative institutions. Raniga and Simpson (2002) remarked that community participation might mean that communities are allowed direct and ultimate control in taking decision concerning their affairs. The involvement of people in electing people of their choice into political power, attending public meetings, and contributing money to community development projects-form parts of community participation. Community participation is one of the key ingredients of an empowered community (Reid, 2000:1). Community participation occurs when a community organizes itself and takes full responsibility or collaborates with outsiders for managing its problems. Theron (2005:12) pointed out that community participation has to do with the process of giving people more opportunities to participate effectively in development activities by empowering them to mobilize their own creative potentials, manage the resources, make decisions and control the activities that affect their lives. UN (2005) on the other hand viewed community participation as the creation of opportunities to enable all members of a community to actively to contribute to and influence the development process and to share equitably in the fruits of development. This simply means that people's participation is essential in order to establish economic and political relationship within the wider society and it is not just a matter of involvement in project activities but rather the process by which rural people are able to organize themselves, have the ability to identify their own needs, share in design, implement and evaluate participatory action (Kumar, 2002:24).

Oakley and Marsden (1987) defined community participation as the process by which individuals, families, or communities assume responsibility for their own welfare and

develop a capacity to contribute to their own and the community's development. In the context of development, community participation refers to an active process whereby beneficiaries influence the direction and execution of development projects rather than merely received a share of project benefits (paul, in Bamberger, 1986:4-5). Paul's five objectives to which community participation might contribute to are:

Sharing Project Costs: Participants are asked to contribute money or labour (and occasionally goods) during the project's implementation or operational stages;

Increasing Project Efficiency: Beneficiary consultation during project planning or beneficiary involvement in the management of project implementation or operation;

Increasing Project Effectiveness: greater beneficiary involvement to help ensure that the project achieves its objectives and that benefits go to the intended groups;

Building beneficiary Capacity: Either through ensuring that participants are actively involved in project planning and implementation or through formal or informal training and consciousness-raising activities; and

Increasing Empowerment: Defined as seeking to increase the control of the underprivileged sectors of society over the resources and decisions affecting their lives and their participation in the benefits produced by the society in which they live

According to Bamberger (1986), the objectives and organization of project-level activities are different from those of programmes at the national or regional levels. The level or scope of the activity must be taken into consideration when defining objectives.

According to Bamberger, three distinct kinds of local participation included: (i) beneficiary involvement in the planning and implementation of externally initiated projects or community Participation; (ii) external help to strengthen or create local organizations, but without reference to a particular project, or local organizational development, and (iii) spontaneous activities of local organizations that have resulted from outside assistance or

indigenous local participation. The first two are externally promoted participatory development approaches used by governments, donors, or NGOs, while the third is the kind of social organization that has evolved independently of (or despite) outside interventions (Bamberger, 1986). At a community level, there is a separation of community participation into two distinct approaches: the community development movement; and community involvement through conscientization (Freire, 1985)

The impetus for development should therefore come from the bottom or rather it is important to feel the pulse of the average person in the community and in that spirit, elicit from him, his/her vision of development and how the development can be sustained. Put differently, it is not only enough to identify their vision of development; it is also important to get their views and plans to achieve their dreams or vision. This is because people will change only if they participate in the decision about the change (Olukutun, 2008_.

The primary concern is how development endeavours to improve people's lives in developing their inherent potential (Capacity building) for self-actualization to enable them assume responsibilities that go with it (Mulwa, 2004). As a matter of fact, material development can no longer be seen as the primary motivation for development endeavours although it is a necessary 'dividend of participatory development (Mulwa, 2004). He further contended that based on the experiences from many development projects that have failed in parts of many countries of the world, unless people are central actors in activities and programmes that affect their lives, the impact of such interventions would either be negative, irrelevant or insignificant as far as transforming people's lives is concerned.

2.2.2 The Concept of Advocacy, capacity Building, Empowerment and Ownership The Concept of Advocacy

Advocacy originates from advocate, 'call to one's aid' or speak out on behalf of someone, as a legal counsellor. Conceptually, advocacy fits into a range of activities that include

organizing, lobbying and campaigning. According to Hilfswerk der Evangelischen Kirchen Schweiz (2011), advocacy refers to organized efforts by citizens to influence the formulation and implementation of legislation and programmes by persuading and pressuring state authorities, international financial institutions, and other influential figures in politics, business and civil society. Advocacy can be understood as a tool for real participation by citizens in decision-making by government and other powerful bodies. It is one of the ways in which different sectors of civil society can put forward their agendas and have an impact on public policies, by participating in a democratic and systematic way in decision-making processes about matters that affect their lives.

United Nations Children's Fund (2010) asserts that advocacy is the deliberate process, based on demonstrated evidence, to directly and indirectly influence decision makers, stakeholders and relevant audiences to support and implement actions that contribute to the fulfilment of the needs, dreams and aspirations of communities. Elaborating on this, UNICEF (2010) further posits that advocacy involves delivering evidence-based recommendations to decision makers, stakeholder and/or those who influence them. Advocacy is a means of seeking change in governance, attitudes, power social relations and institutional functional functions. It supports actions which are taken at scale, and which address deeper, underlying barriers to the fulfilment of people's participation in decision that affect their lives (guarantee of children's rights inclusive). The goal of advocacy can be to address imbalances, inequity and disparities, promote human rights, social justice, a healthy environment, or to further the opportunities for democracy by promoting participation (children's and women's inclusive). Advocacy requires organizing and organization. It represents a set of strategic actions and, at its most vibrant, will influence the decisions, practices and policies of other.

According to David Cohen (cited in Singh, 2015:2), the working definition of advocacy is:

Organized efforts and actions that use the instruments of democracy to strengthen democratic process; these instruments can include elections, civil disobedience, negotiations, bargaining, and court actions. Effort and actions are designed to persuade and influence those who hold governmental, political and economic power so that they will formulate, adopt and implement public policy in ways that lives with less conventional political power and fewer economic resources. Advocacy has a purposeful result: to change society's institutions as well as the power relationships within and among the institutions such that those with less conventional political power and fewer economic resources acquire a greater share of each.

Right-based advocacy requires both the achievement of desirable outcomes and achieving them through a process that reflects human rights values. A human Rights Based Approach to advocacy starts with an understanding of people's situations as based on the identification of shortfalls in realization of their rights, as well as those who's those actions or inactions contribute to such shortfalls. It promotes participation, based on the belief that all people, including children and young people, are entitled to a say in the decisions that affect them. We can say that right-based advocacy highlights patterns in the non-fulfilment of rights that reveal underlying conditions of marginalization and exclusion of community members in decisions that affect their lives, and addresses these issues. Its focus is also to bring a more equitable power distribution in the society (between governments, non-governments and communities), thereby improving the condition and position of the rights holders by addressing causes of right violations at all levels-immediate, underlying and root.

Advocacy is made up of two components: self-advocacy and representative advocacy. Self-advocacy occurs when a group or an individual are capable of speaking up for themselves whereas representative advocacy involves an advocate speaking up on behalf of a group or

individual. Both of these components are reiterated in the following three definitions below in McNamara (2009:8)

“Advocacy is actively supporting a cause or issue; speaking up in favour of; recommending’ supporting or defending; arguing on behalf of oneself on behalf of another” (Birmingham, 2001:5).

“Advocacy is a means of supporting or speaking up for someone, their needs and rights. It can involve pleading their case on behalf of the person with a disability, or supporting them to speak up for themselves” (Comhairle (2004:2).

“Advocacy is about making sure that everyone has an equal voice. Advocacy is also about speaking up and getting someone to listen to you” (NDA, 2001:12).

The importance of advocacy in terms of having a voice and creating the opportunity to speak up whether people are self-advocates or representative advocates are emphasized in the above conceptualizations.

Advocacy involves: i) delivering persuasive, evidence-based and solution-oriented messages to the public, decision-makers, stakeholders and those who influence them; ii) creating enabling environment for effective implementation of policy changes to protect the rights of community members and stakeholders in development, as well as to allow their voices to be heard at the highest level; iii) generating organizational support and momentum behind issues, connect messengers with decision-makers, and utilize diversity to influence them to change policy, practice or behaviour towards development project beneficiaries or stakeholders; v) creating and mobilizing the public around the advocacy issue, change perceptions, and build support to influence decision-makers and stakeholders; vi) illustrating the underlying causes and solution to a problem, and draw recommendations which can be addressed by decision-makers and stakeholders; vii) facilitating the creation of a platform for children and young people’s voices to be heard and acted-on by decision-makers and

stakeholders; viii) engaging multiple levels of society, including those who are marginalized, as allies and partners in overcoming barriers to implementation of programmes that benefit communities; and ix) bring together a variety of stakeholders and decision-makers to highlight the causes and identify the solutions to the issue, with follow-up that includes concrete and immediate action (UNICEF, 2010:10). In a nutshell, creating an advocacy plan helps to understand the situation, stakeholders and their relative power, and how change happens; identify target audiences, the right messages, and the right messenger to deliver the message; identify processes, opportunities and entry points; recognize capacity and gaps; and finally set goals and interim outcomes, develop an action plan, and monitor they can help transform the relationship between government and civil society from distrust and power struggle to partnership and cooperation. By making the voices of civil society heard in an open and transparent manner, advocacy can ensure that policy dialogue and decision-making is informed by the perspectives, concerns and voices of children, women and men, including those who are often forgotten and marginalized.

The Concept of Capacity Building

The terms ‘**capacity building**’ and ‘**capacity development**’ are used in numerous contexts to describe a wide array of activities. In the most general terms, capacity consists of a party’s ability to solve its problems and achieve its objectives. Capacity building aims to strengthen parties’ ability to work together for their mutual benefit by providing them with the skills and tools they need to define problems and issues and formulate solutions.

Maiese (2005) argues that, at some basic level, building capacity for effective government and management of resources for development rests on the availability of fundamental human needs: food, clean drinking water, health care, basic education, and economic opportunities within a society. Societies also need to have some sort of basic infrastructure in place that includes roads, electricity, hospitals, schools, and rule of law. If no such

infrastructures in place, it is unlikely that institutions, governments, and organizations will be very effective at solving the problems that society faces.

However, capacity building goes well beyond provision of basic needs. It is matter of development at all levels of society and includes institutional development, community development, and economic development. Some of the central assets that individuals, organizations, communities, and governments need in order to achieve their full potential include knowledge and technical skills, institutional and organizational capacity, and the ability to plan, implement and manage any development project or programme.

Maiese (2005) further contended that capacity building is grounded in efforts expand and support people's ability to participate in decisions affecting them, their families and communities. The goal of many Non-governmental organizations (NGOs) and development organizations, for example, is to create empowered individuals and active citizens who will take responsibility for their own welfare and that of their families and communities. This means funding social programmes to foster human development and organizing training sessions to develop people's knowledge and skills.

At the political level, one central component of the capacity building of individuals at the local level is popular education. Popular education also helps to strengthen local citizen's awareness of their rights and responsibilities and to keep them informed. Literacy, in particular, helps to build awareness, raise political consciousness, and give people the information they need to think critically and become independent. When individuals have the ability to read, write, and access information, they can make decisions and articulate their demands for social change (Maiese, 2005).

Building capacity involves skills transfer, training, human resource management, organizational development, and the strengthening of communities and social networks. It is important to train individuals to serve in local, national or international technical assistance

programmes; and also to train policy makers and practitioners to implement sustainable development strategies. Those for civil society who should receive training and improve their skills include government workers, community leaders, members of women's groups, and other civil society actors. In other words, all major stakeholders (particularly at the community level) in any development process should be trained to handle both technical and managerial aspects of the development process.

Indeed, many theorists believe that there is a need for more local ownership of national development. It is important that local people do not become dependent on donors but instead play a key role in policy formation and implementation. Thus, one of donors' central goals should be to build capacity for genuine community based self-determination. When local development initiatives involve widespread participation, it will help to build a strong civil society, an empowered community and a responsible government. It also generates "experience, ownership, empowerment, skill and pride in the population" and paves the way for trusting relationships and sustainability of the development initiatives.

According to Atkinson and Willis (2007), the issue of community capacity development has to do with the desire to boost the capacity and/or ability of excluded and disadvantaged communities to help tackle their problems. When we talk of community capacity building, we are basically referring to 'local solutions to local problems' which enable communities to deal with problems, ultimately without relying on external resources. To take a simple but flexible conceptualization of community capacity building, we can see it as a series of grassroots process by which communities' capacity is built to: i) organize and plan development together as a community or in partnership with outsiders; ii) develop healthy lifestyle options; iii) empower themselves or are empowered; iv) reduce poverty and suffering; v) create employment and economic opportunities; and vi) achieve social, economic, cultural and environmental goals together.

Atkinson and Willis (2007) further argue that the idea of community capacity building is to bring together and enhance the existing skills and abilities of communities which are already on the ground to make them relevant to any intended development project or programme. To this end, they defined community capacity building as “the networks, organization, attitudes, leadership and skills that allow communities to develop according to their own priorities and needs.”

This means communities are therefore able to see what skills they have and to identify the kind of problems they want to resolve through common action, independently or supported by outsiders, which may have the capacity to bring these skills together and enable them further.

The ethos behind community capacity building is one meant to ensure that the kind of development priorities and activities should come from the community themselves. Atkinson and Willis (2007) suggested that who precisely that community is may be difficult to define and this calls for the widest possible engagement at the outset of any development project or program to ensure that the process of target setting and assessing local skills is as inclusive a process as possible. They further argue that the process needs to be seen as long-term and organizations working with or setting up programmes within communities need to be there for the long haul and work in a context that may not be easy. Conflicts over agenda setting are common and resources required ensuring that initial hopes raised are not dashed by the withdrawal of what are often relatively small financial commitments by supporting agencies should be secured through capacity building.

They gave illustrations of how capacity building has been used to facilitate development at the community level. They argue that community capacity building has been effectively used to identify and address community health problems (such as high local rates of smoking) in Australia where a set of youth were trained to engage in creating smokers awareness of both

short and long term effects of smoking. It was also used to promote greater community safety (such as car accident rates) through building the capacity of community members to engage drivers in sensitization regarding the dangers of rough driving. Community capacity building through training of local youth to police their communities and alert police in an event of breach of law has also been linked to effectively programmes that have reduced local crime rates (such as housebreaking); all these programmes have been yielding long term results and/or benefits to benefiting community (Atkinson and Willis, 2007).

The above is a succinct demonstration that for community participation to make any meaningful impact, there is the need to build the capacity of the various stakeholders who will work together with outsider(s) in order to acquire both technical and managerial skills and competence relevant and adequate enough to continue to maintain the project or programme when outsider's support is withdrawn or to replicate the processes.

This is corroborated by the conceptualization of capacity by the Capacity Development Results Framework that posits that capacity building is driven primarily by changes in how knowledge and information are acquired and applied at various levels of a society-that is, by learning. It defines capacity building as a locally driven process of learning by leaders, coalitions and other agents of change that brings about changes in socio-political, policy-related, and organizational factors to enhance local ownership for and the effectiveness and efficiency of efforts to achieve a development goal. Through the acquisition of new knowledge and information-that is, through learning-agents of change and communities can enhance the conduciveness of the socio-political environment, the efficiency of policy instruments, and the effectiveness of organizational arrangements and so contribute to the achievement of development goals (North, 2005). New knowledge and information can shift the power balance and relationship among elements of society (state, civil society, community, etc.), possibly leading to alteration of the society's decision-making framework

or belief systems that make capacity building through acquisition of new knowledge, competence and skills relevant to project or programme sustenance.

The Concept of Empowerment

Most literature associates empowerment with personal control. Rappaport (1987:119) points out that “by empowerment I mean our aim should be to enhance the possibilities for people to control their own lives”. Cochran (1986) believes that people understand their own needs far better than anyone else and as a result should have the power both to define and act upon them.

Increasingly, empowerment is being understood as a process of change (Cornell Empowerment group, 1989). McClelland (1975) has suggested that in order for people to take power, they need to gain information about themselves and their environment and be willing to identify and work with others for change. In a similar vein, Whitmore (1988:13) defines empowerment as:

an interactive process through which people experience personal and social change, enabling them to take action to achieve influence over the organizations and institutions which affect their lives and the communities in which they live.

According to Wallerstein (1992), empowerment is a social-action process that promotes participation of people, organizations, and communities towards the goals of increased individual and community control, political efficacy, improved quality of community life, and social justice. While Whitmore (1988) feels the concept of empowerment needs to be more clearly defined, she states that there are some common underlying assumptions: i) individuals are assumed to understand their own needs better than anyone else and therefore should have the power both to define and act upon them; ii) all people possess strengths upon which can build; iii) empowerment is a lifelong endeavour; and iv) personal knowledge and experience are valid and useful in coping effectively.

Rappaport's (1987) concept of empowerment "conveys both a psychological sense of personal control or influence and a concern with actual social influence, political power and legal rights." In this sense, empowerment can exist at three levels: at the personal level, where empowerment is the experience of gaining increasing control and influence in daily life and community participation; at the small group level, where empowerment involves the shared experience,

Analysis and influence of groups on their own efforts; and at the community level, where empowerment revolves around the utilization of resources and strategies to enhance community control (Lord and Hutchison, 1993). Empowerment, in its most general sense, refers to the ability of people to gain understanding and control over personal, social, economic, and political forces in order to take action to improve their life situations and that of their communities.

Empowerment is often conceptualized for different levels of analysis and practice-for example, individual, organizational, and community. Linkages among these levels are a topic of considerable debate and are briefly discussed below:

Individual or Psychological Empowerment: Individual or psychological empowerment refers to an individual's ability to make decisions and have control over his or her personal life. It is similar to other constructs such as self-efficacy and self-esteem...in its emphasis on the development of a positive self-concept or personal competence. In addition, psychological empowerment incorporates the establishment of a critical or analytical understanding of the social and political context, and the cultivation of both individual and collective resources and skills for social action. Thus, empowerment at the individual level combines personal efficacy and competence, a sense of mastery and control, and a process of participation to influence institutions and decisions (Israel et al, 1990). Empowerment at the individual level is linked with the organizational and community levels through the

development of personal control and competence to act, social support, and the development of interpersonal, social, and political skills.

Organizational Empowerment: The literature on organizational empowerment draws heavily from democratic management theory. Empowering organizations are democratically managed, in which members share information and power, utilize cooperative decision-making processes, and are involved in the design, implementation, and control of efforts toward mutually defined goals. Consequently, they empower individuals as part of the organizational process. Empowering organizations recognize and incorporate cross-cutting linkages among members; such has influence within the larger system of which it is apart. Thus, empowerment at the organizational level incorporates both processes that enable individuals to increase their control within the organization, and the organization to influence policies and decisions in the larger community (Israel et al, 1990). This conception of organizations as both empowered and empowering helps provide the link between the organization level and the individual and community levels of empowerment.

Community Empowerment: An empowerment community is one in which individuals and local and/or groups and organizations apply their skills and resources in collective efforts to meet their respective needs. Through such participation, individuals and local groups and/or organizations within an empowered community provide enhanced support for each other, address conflicts within the community, and gain increased influence and control over the quality of life in their community. Similar to an empowered organization, an empowered community has the ability to influence decisions and changes within the community and in the larger social system. Hence, empowerment at the community level is connected with empowerment at the individual and organization levels. This conceptualization is similar to the definition of neighbourhood empowerment as composed of capacity and equality; where capacity is defined as the use of power to solve problems and equity is defined as getting a

fair share of resources and these put together empowers communities to take actions that will develop communities (Israel et al, 1990).

We therefore see empowerment as a process that achievable through participation, awareness and capacity building to greater participation, to greater decision-making power and control, and transformative action in the lives of individual, group, community and organization.

Therefore, for development process (either project or programme) to make any sense particularly at the community level, for such effort to be delivered, functional and last long after the withdrawal of the out sider's support, individuals, local groups and/or organizations as well the entire community must be empowered through active participation in the entire project cycle and/or programme life span.

The Concept of Community Ownership

While there is increasing use of the terms ownership or sense of ownership, there is a paucity of appropriate context regarding what these term mean, how this body of knowledge influences community development, and the various approaches that can be applied in contemporary community development. A sense of ownership in community development is described as a concept through which to access whose voice is heard, who has influence over decisions, and who is affected by the process and outcome. Applying the concept of ownership can determine how the strategic interests and actions of individuals or organizations contribute to community development efforts. In addition, the potential for ownership can understand in part by examining the capacity for and quality of trust.

The concept of ownership is predicated on the assumption that if individuals or stakeholders are intimately and authentically engaged, dedication to the process and outcome of the development project or programme will be created, leading to greater chances of community support and implementation as well as sustainability of the development project or programme.

According to Lachapelle (2008), a sense of ownership is proposed and applied to community development based on three essential characteristics and related questions: i) a sense of ownership in process (who has a voice and whose voice is heard?); ii) a sense of ownership in outcome in process (who has influence over decisions and what results from the effort?); and iii) a sense of ownership distribution (who is affected by the process and outcome?).

This first characteristic involves the processes by which voices are heard and considered legitimate or valid. Through a focus on ownership in process, community development research and practice can construct methods that explicitly examine who has a voice in a development process and, more importantly, whose voice is heard. Whose voice is heard in any development effort often determines who defines the problem or situation. Consequently, the framing of problems drives underlying assumptions, guides strategies taken, and ultimately influences the quality and acceptability of a plan (Gray, 2003).

Problems can be defined or framed so as to either benefit or harm individuals and communities in terms of claims, meanings, legitimacy and feasibility. The privileging of particular ideas, forms of knowledge and definition of problems influence interactions between individuals and the choices they make to address a situation. How a problem is viewed (i.e., the lens used to analyze the situation) influences the strategies taken toward addressing the problem. Situations viewed through conflicting lenses will tend to be antagonistic. The lens used by those with technical/expert/scientific skills can operate at cross-purposes to those with traditional/experiential/lay knowledge and can serve to form a divide in many development efforts (Fischer, 2000; Watts, 2000; Ferguson and Derman, 2005).

Lachapelle (2008) argues that a sense of ownership would tend to challenge the notion of what Yankelovich (1991:9) has called the “culture of technical control,” by analyzing the myriad voices in a community development process, particularly those that are suppressed. A

sense of ownership places the process of gathering information and the privileging of who has a voice and whose voice is heard as essential to understanding cause and effect in community development process. An ability to legitimately have one's voice heard is related to how a problem or situation is defined and whether there are avenues or forums for individuals to listen to and negotiate the definitions of others.

The second characteristic of a sense of ownership involves who has influence over the outcome through decision making (Lachapelle, 2008). The sense of ownership provides an explicit focus on the influence or direct authority over decision-making and the execution of actions. Negotiating a redistribution of influence or direct authority over decision-making is complex, particularly within the legal structures guiding community development and scales of planning that involve local, regional, state, federal, and even international jurisdictions and sovereignty. While citizens may have a desire or feel a sense of responsibility to influence or authorize decisions, they may not have opportunities to do so. Consequently, a sense of ownership is predicated on power and empowerment, two terms that have received ample discussion in theoretical and applied community development scholarship (Harley, Stebnicki, and Rollins, 2000; Craig, 2002; Pigg, 2002). This means for communities to feel the sense of ownership of any development project or programmes, they must be given the opportunity to actively participate in taking salient decisions in the development process.

In any community development effort, ownership over the decision making process, however little is conceded or allocated to citizens, will be seen as a political task fraught with both legal and social obstacles. Allowing citizens to act in a consultative role without any form of delegated power has been referred to as a gesture of "tokenism" (Lachapelle, 2008). Yet for Kemmis (2001:152), influence in outcome has been a fundamental issue since "democracy means nothing if it does not mean making decisions...that is the most strongly democratic statement a group of people can make." Similarly, Barber (1984: 234, 272) has surmised:

Give people some significant power and they will quickly appreciate the need for Knowledge, but foist knowledge upon them without giving them responsibility and They will display only indifference...people are apathetic because they are powerless,

Not powerless because they are apathetic.

While direct decision-making authority may be a practical or, in some cases, a legal impossibility, there are other more tacit forms of promoting a sense of ownership in outcome such as providing information, promotion alternative public participation processes, encouraging different forms of knowledge to be used in planning, and allowing more interaction between scientists, developers and citizens. For this reason, a sense of ownership emphasizes analysis of decision-making dynamics, i.e., those with an ability to influence outcome and the reasons why (Lachapelle, 2008).

The third characteristic of a sense of ownership concerns its distribution across various social, political and ecological scales. This last characteristic according to Lachapelle (2008) involves analysis of those who are affected by a decision as well as how the effects of a decision are distributed, accepted and “owned,” both spatially and temporally. This characteristic of a sense of ownership can involve not only the individuals in the physical place where a community development effort originates but larger scales of engaged citizens linking regional, national and even international interests. A sense of ownership will also focus on temporal dimensions. In other words, applying the concept of ownership moves the focus from present to future generations where heirs of a community development effort would reap the costs or benefits of any decisions, for example, if development efforts result in ecological impacts that must be addressed by future inhabitants of a community.

In sum, the potential for ownership in community development process can be understood in part through recognizing the need for trust. There is general agreement that trust in community development process has the potential to enhance individual or group learning, build relationships between citizens, improve relations with government, influence creative

solutions, teach citizenship, inculcate civic virtue, allow dialogue to flourish, promote fairness in procedural efforts, reduce conflict, validate multiple forms of knowledge, and facilitate effective responses to future crises (Rousseau et al, 1998). This ultimately points to the fact that to ensure project sustainability, the sense of ownership must be created in the development process through active and genuine participation in the entire development cycle.

2.3.1 Project Sustainability

A sound footing to begin the conceptualization of what constitutes project sustainability can be found in the various conceptualization of the concept as offered by the International Fund for Agricultural Development (IFAD) that has funded and supported the North Eastern Region Community Resource Management Project for Upland Areas (NERCORMP) since 1999 throughout the Asia and Pacific Division. According to IFAD (2009), some responses in relations to their Project Completion report (PCR) were conceptual in nature but more often people responded in practical terms, as paraphrased in the following paragraphs:

Community members/beneficiaries made comments to the effect that sustainability mean that their new enterprises would remain viable and that markets would be stable. In addition, some felt that sustainability meant that the opportunities made available to them would also be available to their children and that the gains that they made would not suffer setbacks if, for instance, an adult family member became ill or died. A key to sustainability for one group related to continued improvements in the education of their children. Finally, some respondents felt that sustainability meant a continuation of the assistance being received (IFAD, 2009).

The North Eastern region Community Resource Management Project for Upland Areas (NERCORMP) and partner staff had views that were often similar to those of the beneficiaries. Among the responses from this group were: income generating activities

continue and grow; infrastructure is maintained and repaired locally, based on a sense of local ownership; women retain their empowerment after project ends; and institutions continue with their prescribed/expected functions. The NERCORMP sustainability strategy contemplated whether beneficiary communities would maintain the same pace and vibrancy after project support was withdrawn. For the most part, IFAD senior managers and technical advisors placed the greatest emphasis on the sustainability of institutions, i.e. that those created or supported by the project have reached a suitable level of strength and solvency, to assure continuity of function into the future (IFAD, 2009).

Government counterparts defined sustainability as sustained funding and government takeover of the services provided by the project and a continuing flow of capital and credit into rural areas. In addition, sustainability would be marked by strong, well-prepared community groups with a sense of ownership of project outputs and a willingness to maintain the structures. Sustainability would be assured if community groups assume the functions of the project (IFAD, 2009).

IFAD uses the following criteria in its Project Completion Reports (PCRs) to denote a highly sustainable project, “A large number of supporting factors are in place that will ensure project impact remains sustainable. Ownership is established and accepted, necessary funding secured”. The IFAD PCR is designed to examine sustainability through these lenses: political, social, institutional, economic/financial and environmental sustainability, as well as the degree of ownership felt by beneficiaries.

Our deduction from IFAD views dovetails into our assertion that project sustainability mean ceaseless vibrancy, viability and stability of development projects/programmes, the capacity to handle technical issues by communities and/or project/programme beneficiaries/stakeholders; continue functioning of institutions and structures created in the course of the project/programme, unending flow of funding, community ownership and

maintenance of community assets/projects either independently or in collaboration with the service provider as well as incessant flow of impact long after the withdrawal of outsider's support. Project sustainability is "the process of ensuring that development projects continue to survive and generate enough activities that produce benefits for target communities or groups" (Kidds, 2001). This simply means sustainability is the capacity of a target group to maintain projects so as to continue to derive benefits there from, not only by the present beneficiaries but also by future generations.

According to Mulwa (2008), evidence from several cases has shown that availability of project funds alone is not a guarantee for the success of the project and by extension its sustainability. People's participation in management, monitoring and evaluation is important. The traditional community structures must be respected because they legitimize the project whether funded by the government or a Donor Agency. Their involvement in the management allows them to accept the project and hold the local leadership accountable for the funds being used and how the project quality shapes up.

Other scholars (Kumar, 2002 and Mansuri and Rao, 2003) have stated that cultural factors are important in the success and sustainability of community projects. The relevance of a project to the cultural norms and taste of the local people should be established early to avoid unnecessary losses on projects which turn out to be white elephants. In addition to creating local committees at the conception stage, it is also important to involve them in the management of the project throughout the entire project life (Mulwa, 2008). If this is not done the development interventions from the external donors may fail to sustain the required level of development activity once support is withdrawn by the funding agencies (Kumar, 2002: 28). Increased empowerment of people lead to increased capacity to manage processes, monitor, evaluate, make decisions and gain analytical ability to understand their own difficult situations and therefore increased agitation to be involved in all aspects of development

(Kumar, 2002: 28). This entails that sustainability of projects to a larger extent depends on the level at which communities participate in the entire project cycle.

In another view, Brinkehoff and Geldof (2002: 369) opines that project sustainability is the “the ability of a project or institution to earn the commitment of target groups or beneficiaries to give support to development efforts on a continuous basis”. By this definition, sustainability is viewed as an ongoing process rather than a static condition.’ In their opinion, it may be far better socially and economically to close institutions or projects that failed to achieve sustainability. What we can deduce from these definitions and views is that sustainability is futuristic which involved the ability of present generation of beneficiaries to keep and enjoy the benefits of any development project without preventing and compromising the ability of future beneficiaries from reaping equal and/or better benefits from the same development projects (Ohiani, 2006; emphasis added). In the same vein, Zaki (2002) also observes that project sustainability can be viewed from the point where “the activities, organization or technology that are introduced or encouraged become locally institutionalized, self-sustaining and continue without external support after the formal project activities ends.” A sustainable project then, is simply a successful one by most project evaluation standards. Beyond the actual project targets, roads constructed, boreholes drilled, trees planted, classroom blocks built, etc., it is imperative to ascertain whether institutions, organizations or communities are capable of continuing the project and maintain what has been done or created. This simply means that project sustainability is usually evaluated or determined within an institutional framework i.e. in the area of the capacity of benefiting communities to be able to handle and maintain the project in the absence of the project provider.

Zaki (2002:43) presenting his experience in Belize (Malaysia) observed that: “communities that have received the most development assistance are often the ones that are least capable

of autonomous and self-generating sustainable development". He cited cases where projects executed achieved their short-term goals, but donor or implementing agencies failed to build the institutions (local stakeholders' capacity building and development) that could sustain or maintain the efforts after their departure.

However, some critics in academic circles have argued that there is a contradiction involved in an institutional description of project sustainability. They argue that self-sufficiency cannot be created through intervention but only through independent community action, only and when necessary, with the 'support' of outsider. Communities or beneficiaries cannot sustain projects because they are not a product of their own creation or initiative. They argue further that, by their nature, development projects create dependency, client age, opportunism, instability and short term planning (DFID, 2002:17). The underlying assumption is that a people or community can achieve sustainability of community projects if left along and given time. Thus, an important contribution of this conceptualization is that most communities have internal capacities and capabilities to initiate, plan, implement, monitor and evaluate development projects and also ensure the sustainability of such community initiative and asset.

Rhyne and Otero (2004:66) identified four levels of self-sufficiency in project sustainability. They are: i) low sustainability-High level of grants or soft loans still required; ii) fairly low sustainability-Grants still required, but the level of subsidy is less than in (i) above; iii) high sustainability-most subsidy is eliminated, but there is still some need for 'top up' grants or soft loans; and iv) full sustainability-No grants or soft loan required.

Therefore, the ultimate objective of project sustainability is full sustainability where communities or beneficiaries take full responsibility for maintenance of community asset without any form of assistance from service provider. Project sustainability involves ownership and management of facilities that perpetuates new community initiated decisions,

projects and direction. When an independent, self-reliant community is created and developed, it becomes an essential creation for project viability and sustainability. Any community that is a passive and powerless recipient of social services is unlikely to have the necessary capacity, empowerment, sense of ownership or opportunity to grow and sustain her projects (Rhyne, 2004:23). We are also suggesting that for projects to be sustained, benefiting communities and the various stakeholders have to be active actors in the entire projects cycle.

Lending her voice on the need for external agents to be involved for project sustainability to be achieved, Kleemeier (2000) found out from an examination of a Malawian rural piped water project that half the schemes are performing poorly, with the newest ones performing best. The weak sustainability in the old ones, it was discovered stems largely from the weak institutional support from external agencies.

According to IFAD (2009), while individuals can and should have their own points of reference and areas of interest regarding project sustainability, a single project needs to have a broad, clear and well-defined concept of project sustainability to guide implementation and serve as a basis for evaluation of such projects and programmes. IFAD is of the view that project sustainability can be considered through three different lenses: sustainability of outcomes, sustainability of processes, and sustainability of resources. The paragraphs below briefly describe these elements.

Sustainability of Outcomes: Simply put, this concerns whether the improvements in quality of life or standard of living of project beneficiaries will endure beyond the project completion. In the case of NERCORMP according to IFAD, the anticipated impacts were increased income and well-being of beneficiaries. Implied therein is the resilience of household in the face of shortages or hardship. Water supply and Health outcomes were related to availability and affordability of water health while health care delivery, associated

with healthy society, hygiene, environmental conservation and market access, among others. An assessment of sustainability in this regard would measure the gains made due to the project, then predict the durability of those gains in the years following the project.

Sustainability of Process: A development project provides a set of direct and indirect services-its process-to beneficiary communities. Sustainability of the process depends on individuals and institutions to continue providing those same services after the assistance and subsidies of a project end. More often than not, and certainly in the case of NERCORMP, a project seeks and expects this type of sustainability, which depends on the viability of institutions and their capacity and potential for survival and continued function.

Sustainability of Resources: This theme refers to the extent to which activities promoted by the project will preserve/deplete the natural resource base. Obviously, a lucrative activity that gradually exhausts the resources upon which it depends will not be sustained.

Therefore, for any development project or programme to be sustainable, it must take into consideration the expected outcomes, the processes to be employed towards delivering the output and the resources to be utilized as well as community resources worth preserving in the course of project or programme delivery.

2.3.2 Issues in Project Sustainability

There are compounding issues surrounding project sustainability and a project as a scheme that can be used to organize the use of a given amount of resources in a particular way can be used to achieve specific results, all within a given period of time. All projects have fundamental parts or phases and activities from the point at which a project is conceived to the point of its execution. This also correspond with the view of IFAD (2009) that while individuals can and should have their own points of reference and areas of interest regarding project sustainability, a single project needs to have a broad, clear and well-defined concept

of sustainability to guide implementation and serve as a basis for evaluation projects and programmes.

As a matter of truism, while implementing any development projects, certain issues may arise within the project life cycle that could adversely affect the sustainability of such project; Leonard (1998: 113) identified and summarized some of these issues as thus:

Institutional Issues: This could arise if there is no proper clarification of lines of authority, responsibilities and working relationship among the project teams and organizational units. The clarification can be done with formal and properly applied lines of communication, and proper decision making authority.

Conceptual Issues: This may arise from inadequacies in project formulation and from insufficient or false background information on the proposed project site, or inadequate planning work expected to be performed.

Technical Issues: This could arise when unexpected factors are discovered during project implementation. For example, there could be a consistent shortfall in production from fish ponds, due to seasonal water quality changes or poor quality of feeds not foreseen in project formulation, or the standard of engineering design and/or construction may be poor.

Financial Issues: This can result when procedures and schedules for securing manpower, supplies and equipment etc. necessary for carrying our project activities have not been adequately organized or delays in implementation results in additional costs, or project could have been underestimated.

Social Issues: These could arise from inadequacies in the analysis of social aspects of project in formulation work, or from changes in social balances/organization during project implementation. Problems may manifest for instance in a slow adoption of project techniques by the target group which may find fish farming unattractive or difficult, or these may be an inequitable distribution of benefits as some farms are naturally more productive than others.

Political Issues: These could be as a result of changes in national or local policies or government, or sudden unexpected political events. The result could be insufficient commitment on the part of the government of the day. For example, there may be a change in government to one which is opposed to financial incentives to say, education and the removal of all or partial educational subsidies or grants, or a project may be terminated or disrupted as a result of internal crisis, such as ethnic or religious conflicts.

Environmental Issues: These often arise and affect the project or the project itself may cause unacceptable environmental damages. This may arise either from project related or external natural factors unforeseen during project formulation, for instance, there could be sudden water pollution from new industrial projects nearby, or competition for the same water resources for urban and rural development.

Leonard (1998) explains further that other issues may occur which may be related to the management and operation of the project itself. These could be referred to as the human factors where for instance, the personality of one member of the management team causes some difficulties, whether major or minor that affect project implementation. He further opined that while any of these issues could manifest itself at any stage of the project life cycle, these could be forecasted during project design. Any of these issues could constitute a challenge to project sustainability by communities. This is because a manifestation of any of the issues could make host communities to distant or dissociate them from the project. No community will want to sustain a project that has harmful effect on their members or one that serves as a conduit for the siphoning of community wealth or funds.

Community Participation plays an important role as a means of providing and accessing information. When a community participates, it both provides information about its preferences and gains information that may influence its optimal choice. Both types of

information are likely to lead to increased welfare for the community and better development projects (Wasilwa, 2015).

Participation is a means of exerting influence or bargaining power, Grossman and Hart,1986; Hart and Moore,1990 argued that the greater a community participates in an activity, the more likely it is to have a say in this activity. The basic property rights model suggests that ownership over a decision should be given to the agent whose effort/investment is more important in the decision. By giving the agent whose investment matters greater influence in the decision, he tends to have high incentives to make the investment leading to greater benefit for all.

It has become clear that outsiders cannot necessarily identify local people's priorities, nor understand how best these might be met. For example, many government bureaucracies as observed by Toulmin (1995) have considered it their job to manage land and other resources. However, this has often been impracticable producing highly inefficient systems, vulnerable to corruption, and at the same time taking responsibilities away from local people (Toulmin, 1995 in Caleb 2015).

2.4 Review of Empirical Studies

There are numerous studies that have been carried out on community participation or sustainability (some addressing advocacy, capacity building, empowerment and community ownership) which we considered relevant (though with gaps) because they shed more light on the issues under review; community participation and project sustainability. The reviewed studies will help us take different and dynamic methods and approaches to achieve the aim of this study.

Khwaja (2004) writing on the impact of community participation on outcomes of development projects, first offers a theoretical framework for participation by using the property rights literature to model how participation in an activity, in addition to involving information exchange, also result in greater influence in the activity.

The models presented by Khwaja (2004) predict that community participation may not always be desirable. He then uses primary data on development projects in northern Pakistan to provide empirical support for this prediction. It shows that while community participation improves project outcomes in nontechnical decisions, increasing community participation in technical decision actually lead to worse project outcomes. Though his study questioned the capacity of communities to participate in technical decisions, he failed to show whether there is any significant impact (negative or positive) between capacity building and project outcomes. In a study carried out the World Bank (2004) in 1968, where a community of 2000 people in Malawi started to work in novel water system to ascertain the viability of level of participation in community driven development. It was found that community members began the planning, construction and operation of their own water supply and distribution. Field staff for the project was recruited locally, traditional community groups formed the basis for water communities, and government was limited. Virtually all of the more than 6000 standpipes installed nationwide are still in working order. More than 1 million Malawians have high quality, reliable and convenient water through systems those they built, on and maintain. An analysis of rural and urban development over thirty years found high correlation between project performance and level of participation. The Bank concluded by saying that a survey of 25 World Bank agricultural projects evaluated five to ten years after completion found that participation was an important determinant in project performance and sustainability though they did not show the level of community empowerment that went into these projects. Similarly, Idu, 2006 wrote on sustainability of UNISEF-assisted projects in

selected local government areas of Kaduna state to examine the role of UNISEF and local government were expected to play in sustaining project and thus found that most community members were not consulted in the course of the project cycle, thus their felt needs were not reflected and they do not have essence of ownership of project, therefore sustainability of project by community was not guarantee. This he recommended greater participation of intended beneficiaries in the project cycle so that projects can reflect their felt needs through he did not show strongly this relationship exists between community participation and project sustainability.

In Pakistan, the Orangi Pilot Project established to address sanitation problem in Karachi, by organizing local people into committees and issuing loans to them to buy the raw materials to build their own sewage facility. Almost 100,000 households are now blessed with sewage facilities in addition to developing local management capabilities which have provided the foundation for housing, health, family planning, community-financed education, women's work centres, micro-enterprises, reforestation, and other activities (Uphoff, 1997). The project has brought the district's infant mortality down from 130 per 1,000 live births in 1980 to 37 in 1991 (Pearce, 1996).

The community-based Grameen Bank (GB) in Bangladesh is an institution that pioneered lending to the landless poor in Asia's poorest country. The GB's unparalleled success is rooted in a basic belief that its borrowers, no matter how poor they may be, understand their needs and their potential better than anyone else (Chowdhury, 1996). The Bank has turned peasants' lives around with loans for cows, chickens, irrigation pumps, and plots of land. In total, Grameen customers, whose only collateral is the sari / shirt on their backs, have now borrowed US\$1,662 million, and despite their meager incomes, repaid an astonishing 98 percent of it (Fuglesang and Chandler, 1993 cited in Caleb 2015).

The use of community participation yielded significant results in one of the community-based forestry regions in Gujarat, India. During the 1980s, an average of 18,000 offenses was recorded annually. In response, the conservator decided to form a joint management with the communities. As a result, in one year, one village harvested and sold 12 tons of firewood, 50 tons of fodder, and other forest products, while also planting and protecting teak and bamboo trees (World Bank, 1998).

Khwaja (2003) uses primary data on development projects in Northern Pakistan to provide empirical evidence to illustrate the effects of community participation on project performance. His findings do provide evidence supporting the theoretical claim, that greater community participation in non-technical decisions is associated with higher project outcomes. Katz and Sara (1997) analyze the performance of water systems in a variety of countries. They find that the performance of water systems were markedly better in communities where households were able to make informed choices about the type of system and the level of service they required, and where decision making was genuinely democratic and inclusive. In contrast, projects which were constructed without community supervision and where project management was not accountable to the community, tended to be poorly constructed by private contractors.

A study of 121 rural water supply projects in 49 countries of Africa, Asia and Latin America found that participation was the most significant factor contributing to project effectiveness and maintenance of water systems. According to the study, it was when people were involved in decision-making during all stages of the project, from design to maintenance that the best results occurred. If they were just involved in information sharing and consultations, then results were much poorer (Narayan, 1993).

Over the past three decades, many development projects and programmes have failed where activities have been designed with little or no reference neither to people's needs or priorities, nor to their knowledge and skills. An evaluation of 25 projects sponsored by the World Bank reported that 13 of them had been discontinued a few years after financial assistance had ended. Lack of attention to participation and to local organisation-building when the projects were formulated and implemented appeared to be the main cause (Zazueta, 1994).

Cleaver (1999) also examines water projects in Sub Saharan Africa and finds that even if communities are initially successful in creating the project, they may lack the material resources and the connections to sustain their efforts. Mosse (1997) comes to similar conclusions in an in depth examination of tank management in South India. He finds that maintenance of community infrastructure is often crucially dependent upon external agents. Thus, the need for a well-functioning state apparatus does not seem to disappear with active community involvement.

In Kenya, the Ministry of Agriculture (MoA) involves the community in soil and water conservation. Where there has been collaboration between professionals from various departments, combined with interactive participation with rural people, once again the impacts have been substantial (Pretty, 1995; MoA 1988-95; Eckbom 1992). Also, findings show that where there is mobilization of the community, strong local groups, committed local staff and collaboration with other departments in multi-disciplinary planning and implementation, then within two years there are clear benefits. These include increased in agricultural productivity, diversification into new enterprises, reductions in resource degradation, improvements in the activities of local groups, and independent replication to neighbouring communities. These improvements have occurred without payment or subsidy, and so are more likely to be sustained.

Health effects of joint decision making through dialogue between community members and service providers were examined in 12 areas in Kenya (across six district compared with 12 matched control areas). There were improvements in a number of indicators, including childbirth in a health facility. The study also reported improved accountability of service providers to the communities they served (Marston, Renedo, McGowan, Portela, 2013 in Wasilwa 2015).

This trend is supported by anecdotal and empirical evidence suggesting community participation is good in terms of project outcomes (Narayan 1995; Isham, Narayan, and Pritchett 1996). However, despite such interest there is much less understanding and even lesser agreement on whether community participation leads to sustainability of community based development projects (Wasilwa 2015).

The National Irrigation Authority (NIA) in Philippines ran irrigation projects which were developed with the participation component. The impact of participation on productivity, resource conservation and commitment of local groups was significant; yields were between 10-22% greater, water use was more efficient, farmers contributed seven times as much to costs, and new structures were more likely to be maintained. (De los Reyes & Jopillo, 1985; Bagadion & Korten, 1991).

In Nepal, the Small Farmer Development Programme (SFDP) also shows the benefits of working with local groups. Compared with non-project neighbouring sites, the SFDP has been successful at improving agricultural yields; diversity of production has increased; recovery rates for loans are greater than 90%; and secondary social indicators showed improvements in welfare of the poor. This approach has increased incomes, regenerated natural resources and reduced population growth rates, (Wasilwa 2015).

2.5 Theoretical Framework

For us to be properly guided in the understanding of community participation and project sustainability in the collection of relevant data, we adopted the “Systems theory” introduced by biologist Ludwing von Bertalanffy in the (1930s) and “Capacity Building Approach” by Katherine (2009), as framework for the study. The theory and Approach found relevant to the study as they captured and explained the concept of advocacy, capacity building, empowerment which are key variables that facilitates our understanding of community participation vis-à-vis project sustainability. They are discussed below:

System Theory

A system is a collection of interrelated parts that function together to achieve a common goals. The concept of system implies an identifiable set of institutions and activities in the society that function to transform demands into authoritative decisions that require the support of the whole society. System is generally relationship or better still a whole which is composed of many parts, it emphasizes relationships and individuals. The system approach represents a way of looking at reality those emphasizes “whole”, their properties and interrelationships-as contrasted with specialised parts. The central guiding principle of this approach is the assumption of equilibrium, that is, whole will need the cooperation of the parts to keep it mobile.

In relation to provision of local projects and its sustainability, it is made up of several component parts within the social environment-Input, output and feedback at the local government level.

Input; every system has input; the input can be inform of Support from human element, thus; committed & non-corrupt political officials, career staff and community-members from the

local environment. However, materials, machines, money and men are inputs (support) that need to be adequate in supply for better transformation process, while problems inform of request, demands within the social-environment are considered as inputs in which the system can only function well when the supports are greater than the demands or request in the transformation box (system). These parts perform different functions within the transformation box and the combination of these supports with the prudent human element that keep the entire system moving.

The utility of the system theory in this study is, in fact, evident in its presupposition that “provision of local projects and its sustainability” is a system transaction among various categories of people within the society. The system model provides a comprehensive framework for identifying, coping with and integrating the institutional, individual (s), groups, behavioural and managerial dimensions of projects development process. Additionally, it can be argued that the system model has a potential for resolving the allocation controversies and financial-accountability which intend to bedevil community development process. The key concepts is that as each part of the system perform its role, it enhance, the total performances role, it enhances the performance of the parts and hence, the total performance of the system. This conception holds true for all categories of people and stakeholders in community development process as the system rightly emphasized.

Systems Theory Terms:

Problem

A problem can be a question looking for an answer, a situation (such as an existing condition of health and water supply facilities) that isn't working properly and needs improving, or a new opportunity or idea that is worthy of further consideration. In other words, when we speak of a "problem" in systems analysis and design, we don't

necessarily mean that there is something wrong. We mean that there is a situation that needs to be understood and a solution to be determined.

System

From the text: A system is a set of *related components* that *work together* in a particular *environment* to perform whatever *functions* are required to achieve the system's *objective*.

Goal Seeking

A system is goal-seeking by definition. When the definition of a system says that a system's components work together to achieve a common objective it means that the system seeks to complete a goal. For example, the objective of the digestive system is ensure that food is digested, with some by products going into the related circulatory system to nurture the body and other by products being expelled. The objective of the health and water projects are likely to be to produce healthy, sound workable community, with output in the form of physical projects, good results, and updated the new policies. *It is important to be able to identify the objectives of any existing or new process to be able to understand it and evaluate its effectiveness.* In a community development process, the components include government officials, beneficiaries/the local people, and foreign personnel, (stakeholders) are part of the process.

Input

Every system has input. The input in the provision of health and water supply facilities in community development process; at the local government level, There are human element in the transformation box, these are includes; political officials' like, the chairman of the local government, deputy chairman, and supervisory councillors. And the career staff such as the secretary to the local government where the case may be, directors or Head of Department depending on a local government and other

career staff in the various departments who are suppose to be committed, non-corrupt, open-mindedness, responsible and accountable. Materials, machines, money, good suggestions, good ideas on the other hand are input needed to keep the system moving. If the above mentioned inputs are in greater supply, the transformation box for community development process will work well, but in a situation where “demands and request are greater than the support as input the system will not work well.

Output

Every system has output. It is fair to say that a system may be evaluated by determining if its output results in the achievement of its objective.

Feedback

To be effective and efficient a development process needs a feedback mechanism that can ascertain whether the outputs of the health and water supply projects are what they should be. If not. The process should have the ability to adjust its inputs or processes to improve the outputs. The ideal of development and sustainability projects is the interrelationship between separate components parts. The feedback mechanism in development process, may be acceptability, workability, sustainability and profitability of projects or otherwise.

Entropy

Entropy is a measure of the degree of disorder in a system. It is a familiar term in thermodynamics, when considering chemical systems, and is also relevant to development process. The concept of entropy says that any system will tend towards disorder. Knowing that, we can put checks in place to monitor the correctness of the output of the process.

Internal Environment

A development projects operates in an environment with both internal and external components. Its internal environment it that part of its environment over which it has some controls. If some aspect of the internal environment is causing some difficulty for the process, that aspect can be altered. For example, a particular project working in a particular community environment. If the requirement of the development process are that the service providers must receive support that has not been given previously, this new activity can be ask of them.

External Environment

A development projects external environment is that part of its environment over which it has no control, but it still affects the requirements of the process. For example, change of government and its policies, the federal and state policies affect the provision of local facilities. The new changes or policies must be reflected in the local development process, and if the policies change, the development process must change to accommodate those changes. *So the service providers must be aware of the requirements of both the internal and external environments in which the development projects will work.*

Subsystem

A system is usually composed of self-contained but interrelated systems that are called subsystems. It is important to be able to recognise these subsystems, because understanding this interdependence is vital to developing a *complete* system.

Super system

A system composed of two or more systems may be called a super system of those systems.

System Boundary

A system boundary may be thought of as the point at which data flows (perhaps as output) from one system to another (perhaps as input). The degree to which support is free to flow from one system to another is known as the permeability of the boundary. A permeable boundary allows community support to flow freely, resulting in an open system. An impermeable boundary is one which strictly controls (or even restricts) the acceptance or dispensing of community support, resulting in a closed system.

Interdependence

One of the most important concepts in Systems Theory is the notion of interdependence between systems (or subsystems). Systems rarely exist in isolation. For example, a development process has to mobilise community support in terms of ideas, suggestions, unskilled labour (if possible), financial support if any and update with new government policies or changes. It is important for the service providers to identify this interdependence early. It may be the case that changes you make to one process will affect another in ways you have not considered, or vice versa

2.6 Capacity Development Approach

Katherine (2009) in her “Capacity Development and Practice” dwells extensively on the approach to capacity development which she posits that the traditional approach of building capacity has been the transfer of knowledge from North to South using Technical Cooperation (TC), however it became increasingly criticized due to poor results in many countries and very low returns (DAC, 2006; Miwa, 2008). Many felt that it failed to enable developing countries to create their own development sustainable capacities and development (Nair, 2003). In the early 1990s UNDP and Berg (1993) led an in-depth review of TC and found that despite some successes, the sustainability of efforts has been questioned: While

technical cooperation (TC) has undoubtedly contributed to very significant development successes around the World, it also continues to perpetuate many counter-productive practices, while the supply-driven nature of TC led to poor local ownership and therefore lack of commitment and sustainability of development.

The approach to capacity development attempts to explain a shift from the donor-led knowledge transfer approach into one of development cooperation, focusing on empowerment, ownership and strengthening capacities (Khul, 2009; La Fontaine, 2000). Relationships shifted away from being donor-driven to a more collaborative partnership where benefits are mutually shared (Horton et al, 2003). In stand of donors imposing their vision of development on poor communities and countries, the focus became that of strengthening the capacity of local communities and partner NGOs to then drive their own development. Katherine (2009) posits that these principles which are embedded in the capacity development approach were echoed in the 2005 Paris Declaration and the 2008 Accra Agenda for Action, and there are now many advocates of capacity development, for example UNDP, the World Bank, JICA, and the DAC. They acknowledge that sustainability of development assistance is connected to local capacity, empowerment and ownership and that capacity development is ‘an endogenous process of change’ that strengthens these capacities. With ownership seen to be key to sustainable development, the focus is to support initiatives which are led from the within.

Basic Tenets of Capacity Development Approach

Katherine (2009) posits that capacity development has three main overarching tenets: capacity development is an *endogenous process of change* that occurs at *different levels* and requires *ownership* from those whose capacity is being developed.

Level of Capacity Development

Capacity development is now recognised as involving much more than training and knowledge transfers. It involves people as well as the organisation as a whole. It is also dependent on the surrounding environment that influences the extents to which individuals or organisation have the ability to acquire new skills and adapt to new ways. Organisation (CHF, 2008, ADC, 2006, World Bank, 2009; undp, 2009) agree that capacity development occurs at three levels.

Individual: The individuals that make up organisations and societies need the skills, knowledge and experiences to grow and transform that around them (JICA, 2006). Individual capacity is the ability of these people to learn skills and acquire knowledge that will empower and equip them to drive things forward.

Organisational: As people acquire knowledge and skills and work together over time this builds organisational capacity (DAC, 2006). Developing capacity of organisations or instructions requires instigating change, a process that must be endogenous and fully owned by those undertaking it (Bolger, 2000; Baser, 2007).

Societal: Societal capacity encompasses the overall environment that affects the ability of individuals and organisations to change (Lusthaus et al, 1999). It is the laws and policies, the system of governance as well as the broader political and cultural environment, and the civil society (CHF, 2006). This level of capacity is a long process and difficult to control, however it should be factored in the process of development.

Community Ownership

Capacity development is key to success is ownership (Bolger, 2000; Lopes and Theisohn, 2003; La fontaine, 2000). As summed up in the Commission for Africa (2005), communities

and/or developing countries must be the ones to lead the initiatives. Capacity development must be an endogenous process; it must be owned and managed by those whose capacity is being developed:

Our starting point was the recognition that Africa must drive its own development. Rich nations should support that, because it is in our common interest to make the World a more prosperous and secure place though the international community will contribute to the achievement of these objectives in different ways. But what is clear is that if Africa does not create the right conditions for development, then any amount of outside support will fail (Commission for Africa, 2005:1)

It is important that donors therefore play a supportive role allowing their partner countries to make the lead (Nair, 2003). There is need for a strong sense of ownership, even before projects are undertaken, as experience has shown many have failed because there was not much to begin with yet donors had wrongly presumed it would develop over time (UNDP, 2009).

Successful partnerships can enhance advocacy, capacity building, empowerment and ownership, however it largely depends on the extent to which ownership, and power commitment are shared. Success is also shaped and influenced by ethics and principles of a process of change which unless the leadership of that particular organisation where it is taking place supports the initiative then is destined to fail.

Critique of the Theory and Approach

Bertalanffy's idea behind systems theory is that nothing can be explained by isolating a component of system. His thought on scientific reductionism could not accurately explain a whole system because that thought pattern broke everything up into pieces instead of

studying things as a whole (Connors, 2007 p.1). In order to properly explain and gain a better understanding of something, the system and its holistic properties had to be analyzed to find the root of problem. For example, in the world of ecology now, we couldn't simply try to explain the extinction of a species by simply looking at the one type of animal; instead, we would have to look at the system the species plays a part of to better understand why it became extinct. For some, the only thing they know about Easter Island is that they have the 1 large stone heads. We know the island now mainly for tourism, but what some don't know is that the island faced extinction on several different occasions. The island faced this because of a lack of knowledge about the eco-system. The inhabitants were using the resources of the island faster than they could be replenished which forced the inhabitants to relocate (Hunt, 2006, p.3). Had the Easter Island inhabitants been able to analyze the whole system and why it was failing they might not have had to relocate. The feedback cycle in the Easter Island system was not being received by the inhabitants thus causing the adaptation cycle to fail. When a system doesn't properly adapt to the changes and feedback from its components it will inevitably fail and fall apart. A good system will seek homeostasis or balance through interchanging with its environment. The way a system interchanges with its environment is through feedback loops that inform the system on how or what to change to maintain the system homeostasis. Exploring the function of a system as well as its components can often times increase awareness of why a system will malfunction?

Critics argue that partnership is "little more than conditionality by another name" (Abrahamson, 2004: 1453). In a similar vein, partnership, a central idea of the approach of capacity development is challenged for being old practices "rebranded" and used to disguise or conceal what are essentially traditional policies. Sceptics still hold to the conclusion that partnerships simply cover up what continues to be a donor dominated playing field (Abrahamson, 2004). Again, the rebranding argument is highlighted as a way or agencies to

carry on imposing power without the criticism for going so. The new partnership for African's Development (NEPAD) was launched in 2001 as Africa's own development plan, however the extent to which it is truly owned by Africans has been questioned. It is heavily dependent on foreign aid and "adamantly endorse the neo-liberal values and policies of donors" suggesting that the power balance is much skewed.

2.7 Relevance of the theory to the Study:

The utility of system theory in this study is, in fact, evident in its presupposition that community development process that may form sustainability is a system of transactions between the service-providers and the beneficiaries whereas the service providers give technical support while the community render unskilled support. The significant areas of interactions in the opinion of Miller 2000 the service providers will give technical support while the beneficiaries will render unskilled labour like water needed, gravels, sand, and information available in the community for a particular project. The theories advocated for more community participation in development process and situate them as major stakeholders, whose participation will help them build their capacity, empower them and give them a sense of ownership and that we analysed it can give project sustainability. To background, the following assumption are made to give us proper understanding of the relevance of theory to community participation and project sustainability and which guide us in gathering relevant data in the field. We assume that:

Provisions of local projects like healthcare facilities, water supply facilities etc. are the responsibilities of; the government, community members, beneficiaries, government officials, groups, individual(s) and self. This simply means that community development projects and its sustainability should be the collective responsibilities of all.

Community participation in development process on the other hand; should however, mean sensitisation and mobilisation of community members, beneficiaries or stakeholders and improving the capacity and potentials of stakeholders to be able to make an independent decisions, identify and prioritise their felt needs, plan and implement as well as monitor and evaluate any development activity with little or no outsider's support. This simply means that communities must be active stakeholders and participate throughout the entire project cycle and for that to take place, they must be sensitised, mobilised and their capacities built to be able to actively participate in any development activity and to maintain or replicate same processes with little or no support from external bodies.

Empowerment and community participation should stimulate stakeholders to participate in decision-making to identify their felt needs through discussions which provide opportunities for the public to express their views on the project proposal initiated by the project proponent. Rigorous planning and implementation of projects proposal should be undertaken only after considerable discussion and consultation. Consultation includes education, information sharing, and negotiation, with the goal being a better decision making process through organisations consulting stakeholders which will serve to stimulate project sustainability. Community participation should give the participants full inclusion in designing, organising, implementing and monitoring activities and workshops can be organised for stakeholders in order to create consensus, ownership, and action in support of any community development project.

Empowerment and community participation should be able to promote community ownership and benefits sharing. The processes leading to the delivery of any community development project should be carried out in such a way that communities felt a strong ownership of the project as it is a veritable ingredient and prerequisite for project

sustainability. Benefits from the project should be fairly shared not just among stakeholders and beneficiaries or outsiders but between the present and future generations: we are suggesting sustainability of the development project by the present beneficiaries in such a way and manner that future generations could also have their fair share of the project. Project providers have a role to play in ensuring that any service or project provided is used in a more sustainable manner by the benefiting communities. In other words, local governments and NGOs/donor agencies are expected to involve communities in any development project that directly or indirectly affect their lives in such a way and manner that they will accept the project to ensure that before the project is delivered, benefiting communities have been sensitised, mobilised, their capacities built and are empowered to maintain the projects after donor exit.

Having power in the decision-making process, output and outcome generation as well as benefits sharing constitute the fundamental objectives and epitome of participation. To ensure genuine community participation, citizens must have power (voice) to make or influence decisions that affect their lives.

CHAPTER THREE

Research Methodology

3.1 Introduction

Research is any organised enquiry that aims at providing information for solving identified problems. This chapter therefore, deals with the methodology aspect of the study. This comprises of the research design and population of the study, the sample size and sample technique, method of data collection and analysis as well as the instrument of hypotheses testing in which Chi-square applied using Statistical Package for Social Sciences (SPSS).

3.2 Research Design and Population of the Study

The study adopted the Survey research design, this is because of the nature of the topic; community participation in development process. The topic demands the use of both primary and secondary sources of data to ascertain the relationship and effect between the two.

The population for the study are ten (10) Communities of Bauchi Local Government Area of Bauchi State. The choice of these communities was aimed at using stratify sampling technique, where the Local government was divided into five (5) strata. Namely North, West, East South and Central and from each Strata two communities were purposively selected for one reason or the other so as to give room for proper representation and comparison. Thus, the communities selected were Bishi and Gidirgi (East), Miri and Buzaye (West), Zungur and Wuro Jamil (South), Durum and Kusi (North) and lastly Kobi and Inkil (Central) communities.

The population of these communities is 254,420 based on the 2006 population census. Using a published table developed by Kish (1965) for a population size above 100,000 and 8% level of precision arrived at a sample size of 400.

3.3 Sample Size and Technique

The sample size for this study is 400 and of the sample population was quarterly distributed among the ten selected communities where each was allocated 36 and the remaining 70 % (40) was purposively distributed. Thus 36 respondents were distributed with questionnaires from each of the communities two community Development Associations were engaged in focus group discussion from each of the ten communities. Also, one opinion leader was purposively chosen for personal interview from each of these communities. Similarly ten officials and hundreds members of the Local government and state water board were also purposely selected for interviewed. These people comprises of the local government Chairman, Head of Health, Director of water board, Head of social welfare, informal officer, Director community Development, Director Environmental Protection Agency, Director water resource 2 representatives of any Donor agencies that are into healthcare and water supply in the local government.

3.4 Method of Data Collection

For the primary source three (3) method of data collection were used. These are questionnaire administration, focus group discussion/personal interview and lastly observation.

A total of 360 questionnaires were administered 36 in each community. The administration of the questionnaires was distributed accidentally to a reason that there is equal representation of the population in the sample for maximum information. Thus the respondents were accidentally pick in the nearby Healthcare centres and public water supply facilities visited in each of the community.

Two community Development Associations where purposively selected from each community and engaged in focus group discussion. The association were shown in the table 3.1 blow. Equally, one opinion leader was interviewed from each of the community. As well as Local Government functionaries and Donor-Agencies representative in the local government were interviewed.

Table; 3.1 Research Populations

Categories of interviewers	Sample size of respondents
Two Com. Dev. Associations in 5 Com.	10
LG functionaries	4
Water Officials	2
Donor Agencies Representative	3
Community-Members	100
Total	119

Source: Survey Research, 2017

In table 3.1 above shows the selected categories of respondents in an interview.

Interview conducted one opinion leader of each of the community. Interview for community members is done inform of focus group interview of not less than ten community members. Also, systematic observation was carried out to determine the condition and quality of the projects and benefit in term of utility and its measure of sustainability.

In addition, secondary sources were also employed to complement the information gathered from the primary sources. Thus table 3.2 below shown the types of secondary information collected

3.5 Sources of Secondary Data

Table; 3.2 Sources of Secondary Data

Types of Secondary Data	Sources
-Policies	Council Minutes
-Project (Estimates)	Annual Budgets
-Finance	Accounts
-Executed Projects	Project Reports
-Community Contributions	Community Minutes

Source: Survey Research, 2017.

Table 3.2 shows the sources of secondary data collected for the study viz. The council-minutes used to examine whether or not the council legislated for community involvement in projects initiation and implementation of healthcare and water supply facilities. Annual Budgets were used to ascertain whether it prepared with community input and how much

community actually need to contribute in any given water or healthcare facilities. Accounts also used to identify how much is spent in project by government and how much community contributed. The project reports however, used to ascertain a number of water and healthcare facilities provided by government in collaboration with community. Community minutes therefore, used to show the nature of community contributions.

3.6 Administration of Research Instruments

We adopted four methods of data collection through the instruments of questionnaires, interviews (including group) using interview schedule, observation using checklist of issues as well as documented data from different sources which were basically secondary.

a. Administration of Questionnaires

Questionnaires administration was carried out in the ten (10) selected communities (Bishi, Gidirgi, Miri, Buzaye, Zungur, Wuro Jamail Village, Durum, Kusi, Kobi and Inkil) among members of general public. The target populations who completed the questionnaires include all categories of people in these communities except for those below the age of eighteen (18). This is simply because the population of this study was derived from age eighteen and above from the 1991 population census (projected 2014). Where respondents lack appropriate knowledge to read, comprehend and complete the questionnaires, they were guided by the researcher.

b. Interviews

We conducted interviews with two community development associations in five of the ten (10) selected communities, four(4) local government functionaries, two water officials, three (3) Donor Agencies representatives and hundred community-members. These categories of

respondents selected were considered key in ensuring community participation and project sustainability; they are key players in the two projects (healthcare and water supply projects).

c. *Observation*

We used checklist of issues for the purpose of systematic observation in the facilities of the two projects where we we generated data on functionality, accessibility and utilization of the projects. We visited these projectsa and their facilities to observe issues raised in the checklist as often as possible. We used this to support data we generated in the course of questionnaire administration and interviews.

d. *Secondary Data*

We also generated data regarding financial, manpower and material support to the projects by the benefiting communities including council minute of meetings, Annual Budgets, Accounts, Project Reports and Community-minute of meetings

3.7 Method of Data Presentation and Analysis

Data collected for the study were analyzed using both qualitative and quqntitative methods where we employed both descriptive and inferential statistics tools. The descriptive statistics tools used include tables, frequency and percentages while the chi-squire non-parametric test was used to test hypotheses raised for the study using the Statistical Package for Social Sciences (SPSS) version 16. However, the chi-squire non-parametric test was calculated at 5% level of significance with 95% confidence leve.

Decision Rule

The decision rule on the postulated hypothesis stated that, if p-value is less than alpha (p-value $< \alpha$), we reject the null hypothesis, while if p-value is greater than alpha (p-value $> \alpha$), we accept the null hypothesis. For purpose of this study, alpha is taken at 5% level of significance.

3.8 Justification for the Research Method Used

The survey research selects a sample from or a subset of the population using some techniques of sampling. The survey method is always interested in some characteristics of the population or universe of which a sample is drawn could be used for generalization. The choice and use of this method arose from the simple fact that this study cannot cover the entire population of the study areas.

Questionnaires were used in order to solicit responses from the respondents as their responses served as a vital input into this work for analysis. In the final analysis, the chi-square non-parametric test was used to test the hypotheses. This is because the questionnaire is structured in such a way that it uses the likert scale which was convenient to use the chi-square.

Interview was used because it permitted the researcher to obtain firsthand information concerning the respondent's views, perceptions, experiences, attitude and beliefs on the research subject. We used this method because it is particularly useful as an explanatory device for supplement of existing literatures and questionnaires or disprove them because data derived using questionnaires may fail to provide insight on how to approach the research problem. The explanatory interview conducted gave us a wealth of details which enriched the whole research, considering the strategic nature of issues under review. We employed interviews to lead the study because it will permit follow-up questions which will provide

clarifications that the questionnaire may not allow and because face to face interaction with project participants is a particularly useful method for gaining an in-depth understanding of communities given the fact that most people in our communities are not educated enough to read, understand and provide insightful response to questionnaire which is considered too elitist.

We adopted simple random sampling techniques to select questionnaire respondents because it will give equal opportunity to community members to be part of the research while purposive sampling technique was used because it allows us to select interview respondents based on their relevance and ability to provide invaluable information on issues under investigation.

CHAPTER FOUR

Socio-Economic Profile of Bauchi Local Government Areas and Community Participation in Development in Other Countries

4.1 Introduction

In this chapter, we discussed the socio-economic profile of Bauchi local government, the place for local government and NGOs in promoting community participation in development process, community development in Bauchi State, community development associations in some selected towns and villages of the local government as well as participation in development process in other countries especially India and China and lesson for Nigeria.

4.2 Socio-economic Profile of Bauchi Local Government

The Local Government Area is made up of twenty (20) Wards as recognized by State INEC.

The local government area has thirty six (36) village areas six hundred and forty five (645) hamlets. These are the important towns, Villages and Hamlets in the area. Bauchi Local Government is the most populated among the twenty (20) Local Governments in the state.

Bauchi Town the headquarters of the Local Government Area serves as the State Capital as well as Bauchi Emirate Head-quarters;

The area is predominantly inhabited by Gerawa, Fulani, Hausa, Bankalawa and lots of others. Most of these tribes celebrate their cultural festivals annually.

The mainstay of the Local Government Area economy is Agriculture, Handcraft and Trade.

Geographically, Bauchi Local Government is located between latitude 9° 18'N and longitude 8° 50'. It has an altitude of 785.2 meters. The hottest months are April and May with the highest Temperature of 40.56°C, while the coldest are December and January (that is, during the Hama tan season) with the minimum of 06.11°C and 07.22°C respectively.

Usually, August records the highest rainfall of 340mm. The total mean annual rainfall stands at 1,091.4mm.

Mineral Deposit: The Local Government area is endowed with abundant natural resources such as Quarts, Aquamarines, Chlorines, Garnets, Mic Schist, Amethyst, Tin, Clay and Quarry Stones. These resources are untapped.

4.3 Community Development in Bauchi State

The study has shown that majority communities in Bauchi State suffered and continuing to be suffering from poor service delivery, {austerity} local services been cut, local facilities been closed and the people been poorer all because of the low participation of people in the development process which at the long run affected the sustainability of available facilities. The resources at the government disposal are really scarce and the sources for the state and the local governments are potentially dangerous. This is because all the sources for the governments' state and local governments are geometrically diminishing compared to the local needs and demands on the institutions to provide more facilities.

In Bauchi Local Government for example, despite a number of sources of revenue the local government has in both internal and external sources the developmental functions carry out by the local government remain minimal. This is because the maintenance charges, took more than 70% of all the sources. The charges like payment of NEPA Bills, rent payment of houses of its officials, maintenance of bicycles and equipment.

The internal sources are however not viable at all especially the property tax because of the problem associated with it. For example the study show that there three problems associated with it thus; Political problem, Technical problem and Administrative problem.

The political problem associated with the property tax is that, majority of property owners are big political leaders who are bigger enough for the local tax collector to confront them to collect tax. These are Governors and deputies, Senators, commissioners, members of the House of Representatives, chairmen directors and so on.

The second problem is the technical problem in which experts of all kinds do not want to work with the local government. This technical staffs likes Quantity surveyors, Valuers, engineers of all kinds and so on. These experts prepared to work with state and Federal government.

Administrative problem; this problem has to with the low performance of tax collectors and some of them divert the little resources collected to their personal account. Some of these people do not even want to be promoted so that they will not be transfer. These problems and many other put Bauchi local government financially weak.

4.4 The District Health System in Bauchi Local Government Area

In Bauchi Local Government, each District has two to five Health centres depending on the number of population and villages in a given District which serve as a first aider for the pregnant women. For example in Miri District, there are Health Centres located in the following: There are two (2) Maternities, one is provided by the local government while another one provided by MDGs, one Maternity also located in Guru at the same district, another one located in Buzaye in the same district, there is one Maternity also located in Geji of miri Ward. These maternities provided to carter with health needs of pregnant women in the District.

There are a number of villages in each District and in all villages where there is village head; there is Dispensary in the selected communities. In Miri District, there are about 10-15

dispensaries. Almost all villages have dispensary and in some cases even hamlets do have dispensary in them like Gonli, Hakayafi, Banshi, all in Miri District.

In each of the existing District there are not less than five dispensaries no matter the District.

In inkil there are two Maternities MDGs Maternity and private Maternity and Dispensary. The closest the community to the urban centre the more they rely on Teaching Hospitals and Specialist and the less the existing government Maternities and Dispensaries.

The District Health System: Each District has a number of Wards and in each Ward there should be at least one Maternity. However in each Ward there are a number of Villages and in each Village there should be at least Dispensary.

4.5 The place of Local Government and Non-Governmental Organizations in Promoting Community Participation

Local Government and (NGOs) are seen as frontiers expected to stimulate community participation in development projects and programmes. As posit by Odoh Adejo (2014:69);

Following from the theory of decentralization, devolution of powers (autonomy) engenders greater capacity for delivery while deconcentration (control) lead to lesser capacity for delivery. Devolution helps to build capacity and stimulate local initiative and decision making especially with democratized structures. Local communities would be properly drawn into the decision making and planning process as well as implementation, monitoring and evaluation of community development programmes and projects where local energies and resources would be properly mobilized and utilised (emphasis added).

Invariably, this view emphasizes the need to see local communities as potential development agents and partners where there is a need to sensitise and mobilize them, build their capacities, give them the opportunity to decide which development project attends to their felt-need as well as making them active participant in the process of planning, implementation and monitoring and evaluation of projects. This entails genuine empowerment and participation in action which will engender community ownership of the project and by implication its sustainability.

This position is supported by Obietan (2008) who opines that local government must be representative, autonomous to a reasonable degree; must be functional. It must also be technically and economically viable. It has to be representative in the sense that the policies by it must reflect the wishes of the people; and to mobilise the local populace for self and community driven-development. He quoted Adamolekun as saying:

Local government in the communal sense means people's political instrument to participate in resource allocation, distributions and power acquisition. This notion converges with the broad objectives of local government which are: political participation; efficient service delivery; and resource mobilization. Political participation concerns the desire to involve local citizens in the management of their local affairs. Efficient service delivery which is closely knitted with the above factor is to ensure that the basic needs of the local citizens are met as speedily and as efficiently as possible. While resource mobilization is to provide a framework within which local resources, both human and material are effectively mobilized (Obietan, 2008:26).

In addition, Akande (2014) also posits that local governments are conferred with certain functions to perform outlined in the Fourth Schedule of the 1999 Constitution of the Federal

Republic of Nigeria and which are also domesticated in Kaduna State local government administration law, 2003. She further observed that apart from these functions of local government which could be classified as statutory functions; local governments in addition, perform certain socio-political roles to their various communities which could also be referred to as strategic roles which includes closeness to the people; presence of traditional rulers and community leaders; sufficient use of security operatives; good governance; food security; effective resource mobilization, communication and feedback with diverse interest groups; integrity; dialogue; objectivity in conflict management; understanding the terrain of crises; self-help programmes for development at the local government level; adult literacy; initiating youth development programmes; and teaching social studies in schools. These functions and roles relate to community development as well as service delivery to the local populace.

These positions are instrumental in understanding the place of local government in promoting community participation. It therefore follows that local governments are expected to ensure community sensitization, mobilization, build their capacities and empower them to participate in its affairs to the extent that local government policies, programmes and projects are turned to the diverse needs of local communities who should themselves be vanguards of development in their localities either independently or in concert with local authorities. However, whether local government have been discharging their functions and roles holistically and objectively including involvement of local communities in development projects and programmes remain an area of inquiry and scholarly as well as empirical investigation.

Non-governmental Organizations on the other hand are seen as vanguards of community participation as most NGOs and international donors such as UNDP, World Bank, UNICEF,

the national and Regional NGOs like T. Y. Danjuma Foundation, RAHAMA etc, whose major objectives are development of local communities through participatory approaches.

There are various reasons why community participation is deemed desirable from the point of view of development agencies and governments. These include the fact that: community participation has become important ingredient in poverty reduction strategies espoused by governments, in the context of decentralization policies adopted in the post-structural adjustment programmes of the 80s and early 90s, and through the good governance policies encouraged by multilateral aid agencies such as the World Bank; people have the right to participate in decision making which directly affects their living conditions; social development can be promoted by increasing local or community self-reliance. Since people themselves know best what they need, what they want, what is most suitable for their needs and what they can afford, only close cooperation between project implementers and the community can lead to project effectiveness and sustainability-this gives communities a sense of ownership over their projects and maintains mobilization; it also demonstrates that people can form partnership with governments, development agencies, private-sector organisations and NGOs to bring about development and poverty reduction in their communities; and it enhances accountabilities and transparency in developmental projects at the grassroots (Brett, 2003).

Thus, with the comprehensiveness of the aforementioned views of community participation from the perspective of NGOs and development agencies, the need to involve local communities in any development programmes or project that affects their lives becomes even more imperative at the level of NGOs and donor agencies while onlookers pulses are fixed to see community project demonstrating high tendency of sustainability owing to community

involvement. Thus, whether NGOs projects are more likely to be sustained as a result of community participation forms another area of investigation.

4.6 Existing Development Associations in the Towns and the Villages of the Local Government Areas

There are many Community Development Associations in both the towns and the villages of Bauchi local Government Area. Ten (10) development associations presented below. The selection of these associations was made based on those recognized by the local government council interns of their existence and operations within the local areas. Some of these associations are:-

1. Adamu-Jumba Youth Development Association; this is one of the popular youth development association operating in the urban centre. The main objectives of this association are; to initiate and implement developmental projects like water supply, culverts, waste disposal management and given support to the governments or non-governmental organisations in development process, to create political awareness and empower the Youth with training small scale business of Bauchi local government. And it also located in the capital of Bauchi Town.

2. Rehu Development Association (REDA): This association is the rural development association which drawn it membership from all the community-members. Objective of this Association is to initiate, implement and complement the effort of service providers (governments &NGOs) in providing the basic amenities in the area, these include: water supply, road constructions, and so on. It located in Durum village and the carry out their activities through self-help effort by the community-members. They initiate what to do and ask community members to contribute financially and in labour where necessary. This is a

rural development association and made up of a very small numbers of people operating in a scale in the community.

3. Miri/Buzaye Development Association; this is a very large Development Association which draw it members from two big communities comprises of semi-urban and rural wards of the same Miri District. The objective of this association is to create unity among themselves and pursue development activities in the two communities for their local areas. It located in Miri district, it hardly participate in Local Government activities rather they present their demands and issues to local government for assistance when the need arises.

4. Bauchi Youth Mobilization and Sensitization; This Association is with main objective of creating awareness among the Youth of Bauchi city and located in Bauchi town. They are not been given opportunity to participate in local government activities except when the local government intended to carry out project, and then some members will go there to sale out their labour (field survey/ inspection 2013).

5. Egede community Development Association Bauchi; this is a tribal development association with the objective of complementing of development activities of the government especially in areas of provisions and maintenance of basic amenities in the area. They assist government officials when the project is on-going but they do not been given opportunity to participate in projects-initiation or design at the local government level because the system is not open for them. The association generally promote the tribal unity, tackle tribal problems its members in any corner of the local government areas.

6. Mutunci Women Multi-purpose Cooperative Society LTD. This association draw its membership from all interested women in the local government. The association is with the objective of women empowerment in the local government areas. It located in both urban

centre and its branches located in many areas of the local government. All women are allowed to be the member of the association. The association is with main objectives of creating awareness among the women of its members in the local government areas. And it also empower its members with providing hand craft materials and financial loans for them in almost all the areas. It generates revenue from many sources; which includes donor agencies, its members, groups and individual (s). They are not been given opportunities to participate in the projects- initiation and implementation in the local government council.

7. Luda Women Multi-purpose; This association has similar objective with the 'Mutunci' in terms of activities and prospect, it located in Zungur district and all women are qualified to be the members of the association. No any indication that has shown this association participate in projects-initiation and implementation in the local government council.

8. Zungur/Galambi Multi-purpose Association; This Association are two districts that come together to form union with the common purpose of providing development activities in their areas and unity among themselves. The members of the association are drawn from the two districts, (Zungur and Galambi). They do not actively been given opportunity to participate in projects-initiation and implementation in local government council rather the association present their demand collectively to the local government for its administrative action. It is the largest of all associations presented in this study.

9. Polshi'Mutane' Development Association Bauchi; this is a tribal association with the objective of promoting the tribal and developmental activities in their areas. All the tribes are members of the association. They do not participate in policy-initiation policy-implementation in the local government projects. It located at the south-west of Bauchi local government.

10. Gidirgi Development Association; this association was formed with the objective of carry out development activities in the community. With the coming/ intervention of USAID under LEAD (Leadership Advocacy and Development) in the community, the association has given way to CPMC (Community Project Management Committee Maintenance and sustainability plan). The CPMC conducted new election for the leadership of the committee in the community in which the leader of former Gidirgi Development Association emerged as a new leader to the community. One of the aim and objective of the community and social development agency or project is for community themselves to implement micro-project and maintain it with little or support from the outsiders. The stakeholders therefore, have to fully realize the responsibility of their members and elders have to assure the operations and maintenance of development projects in the area.

For example, in community like Gidirgi of Bauchi local government made reasonable degree of participation recently with the help of community and social development World Bank Assisted (CSD), (field survey 2013). The community succeeded in constructions of high bridge and maternity for the community in collaboration with Community and Social Development Project: ‘World Bank Assisted’ (CSDP Desk Office, Bauchi Local Government, 2013). Community participation/contributions to high bridge and maternity projects, thus; 1 million out of 10% financially, all trips of Sand required, 70% of hard core, Land, un-skilled labour throughout project implementation, flanks, water supply for the all projects and so on, (focused group interviewed 2013). The study has shown that the full participation of this community reduced the cost of projects and the entire community serve as police for the utilization of these projects.

4.7 Community-Participation in Development a comparative study of India and China

4.7.1 Community-Participation in India:-

In India, Participation takes place in the form of involvement of NGOs in programme implementation. Since NGOs are thought to be closer to the beneficiaries of health interventions, they are used for service delivery in several health programmes like Family Planning, Reproductive and Child Health, AIDS Control and Integrated Child Development Services. The government established a three-tier system of Small NGOs at the village level, which are assisted by Mother NGOs (MNGOs), which have substantial resources and are located at the district, state or national level. Four National NGOs in turn assess the performance of Mother NGOs (Kishore 2002: 24). Implementation of programmes, training and service delivery lies in the hands of the Small NGOs. The lack of systematic documentation of NGO contributions makes it difficult to evaluate their achievements. Higher immunization rates of 11-12 % in areas where NGOs are present were revealed in an empirical analysis and could be one of the indicators for their influence on quality of health care (Misra et al. 2003). The second form of decentralization in India is delegation of administrative and financial powers to facility levels. Some states like Kerala, Madhya Pradesh, Andhra Pradesh, and Rajasthan have introduced hospital societies to facilitate autonomy and a sense of ownership (Misra et al. 2003). The society members come from local stakeholder Community Participation and Primary Health Care centres in India and are mostly groups or representatives of political parties. The hospital society is authorised to collect fees for e.g. parking, diagnostics or visitors and save the amount for the development of the facility. This community participation in hospital management was successful in some

states, since they were able to generate own revenue and improve the facilities infrastructure (Ibid 2003).

4.7.2 Objectives of Community Participation in India

Objectives of community participation in India is considered as a process in which individuals and communities collaborate in development process of a country to ensure efficiency, effectiveness and low cost of projects implementation (Marilee 2000). The objective of community participation as identified in other literature in India is therefore, for sustainability and coverage of projects and promoting stakeholder's capacity, relevance and empowerment. Greater awareness of community in Indian society in terms of needs of them to involve in development process is better up in terms of coming together as a team to work for the progress and development of the country and society in general.

4.7.3 Results of Community Participation in India

Community participation in India has resulted in the empowerment of community members to demand greater accountability from the leaders by making them responsive to the need of the people and also addresses quality services, (Atkinson et al, 2000). In India, community participation resulted in uniting the Indian society through the formation of three tiers NGOs at the district level, regional level, and Mother Nongovernmental Organisations at the national level charge with responsibilities of coordinating the activities of NGOs at districts level and the ones at regional levels. Indian people come together to discuss the progress and development of the country. It is as a result of these community participation efforts that India is now a second fastest growing economy in the World.

4.7.4 Challenges of Community Participation in India

In India, people with high political profile and government officials have better chances than those who are not. Some people or groups are in a very strong class and they have all opportunities to participate and influence decision or projects of government than others who are not because of the existing of cast social system in the country. Thus, participation is open to those who are well to do in the society than the poor once among them. The participation in Indian society is somehow control by the social system in which some class of people or group is given more opportunities than the others (Kapiririet al (2003) Anja W. (2006).

4.7.5 Community Participation in China

In China, the term ‘community’, has a specific spatial definition for administrative purposes, territorially defined to include residential areas within the jurisdiction of an urban grassroots organization called residents’ committee (in Chinese, jumin weiyuanhui) (Bray, 2006). The main function of a residents’ committee is to facilitate government-community communication, maintain local public order and provide social service delivery (Mok, 1988). Until the 1990s, it had been a useful vehicle of welfare provision especially for those vulnerable groups who were left out of the employment-based social welfare system. Day-to-day operation of a residents’ committee relies heavily on a few salaried members (who are usually elderly retired women) and volunteers from local communities. It is necessary to note that the territorial definition of a community in urban China for administrative purposes does not diminish its diverse nature. Work-unit compounds and municipal housing estates built in the planned economy period were known to have homogeneous characteristics in their social composition. Residents, however, had different sets of interests and experiences based on

their individual characteristics (e.g. educational attainment, positions in their work places, etc.), which led to differential access to community resources (Logan and Bian, 1993). The differing degree of housing space consumption among residents turned out to raise serious complaints especially when redevelopment compensation was monetised in 1998 (Shin, 2007) Although residents could be divided into ‘multiple communities’ based on individual engagement in various activities within and beyond a locality, they are to be treated as ‘a community’ based on the fact that there is no distinction in the way they are treated in urban redevelopment processes.

Guangzhou (1993) suggested that about four per cent (4%) of local residents voluntarily undertook activities organised by residents’ committees. With the assistance of residents’ committees, local authorities as well as local branches of the Communist Party often launch collective neighbourhood mobilization programmes that range from free consultation with professionals to moral education. These may “facilitate the cultivation of a sense of neighbourliness” by bringing communities together, but they place “strong moral sanctions of collective participation” with less respect to individual privacy Community participation in neighbourhood affairs is therefore largely associated with residents’ participation in state organized space. This poses problems for the promotion of community participation in a western sense. It is cited as one of the main obstacles to carrying out poverty alleviation programmes in rural China. As Janelle Plummer (2004) argues that for many Chinese farmers the idea of working together is associated with the days of the collective economy. During the planned economy era, most urban residents were also mobilized through their work place, which became the main locus of citizens’ participation in urban political, social and economic affairs (Lü and Perry, 1997). In return, they were promised an egalitarian, redistributive order that provided job security, basic living standards, and social opportunities for those from disadvantaged backgrounds (Tang and Parish, 2000).

Over the last decade, there has been increasing attention to the way in which urban communities engage and become part of a new form of neighbourhood governance (Bray, 2006; He, 2003; Zhang, 2003). This reflects the emphasis given by China's central and local governments to reconfiguring residents' committees around the concept of 'community building' (or shequ jianshe in Chinese). A residents' committee was usually staffed mostly by elderly volunteers (usually retired women) appointed by local authorities. The new community building relies on employing professional community workers (or shequ cadres), who are younger and come from a trade-union. The implementation of 'community building' was officially endorsed by the announcement of the Opinion of the Ministry of Civil Affairs on promoting community building nationwide in December 2000 (Kojima and Kokubun, 2002). These cadres are to represent the interests of residents and mediate their relationship with local bureaucrats. To encourage residents' participation in this new urban governance arrangement, these cadres are selected by direct election. From 1998, the direct election of residents' representatives has spread in many cities, mostly located in coastal provinces (Trott, 2006). Some critics welcome these changes in neighbourhood governance, as they have the potential for further autonomy (Jones and Xu, 2002) and may open up space for residents' democratic participation in decision-making processes (He, 2003).

Indeed, other new organizations have emerged, enjoying a greater degree of independence and creating possibilities for increased participation by Chinese people in decisions affecting their daily lives (Taylor, 2004). These social organizations include traditional ones such as the Women's Federation that has adapted to the changing environment and expanded its local coverage. They also include private enterprise associations, specialist organizations (in areas such as trade and commerce) and welfare associations, all of which enjoy greater involvement in decision-making within their respective areas (Taylor, 2004: 26). It is argued that the emergence of these organizations constitutes important progress towards involving

people in decisions at the local level that affect their lives. These social organizations are increasingly employing strategies of negotiation and circumvention to influence policy making and implementation (Saich, 2000). However, they take place within a context of strong social control by the state. Despite the voluntary participation of active residents in community affairs, getting involved in decision-making is still an uneasy affair for most urban residents. Public participation is not readily discussed in public discourse, and its promotion in regulatory, decision-making and rulemaking processes is still at its infancy (Wang, X., 2003). One example is the previously cited direct election to select shequ cadres. In most cases, candidates are nominated by party officials, endorsed by indirect election in which only heads of families or residents' representatives cast their votes (Trott, 2006). Community building as a new means of building a self-managed grassroots organization in contemporary Chinese cities cannot be separated from the administrative hierarchy and from the influence of the Communist Party. This erodes the very foundation of shequ offices as self-governing autonomous entities (Kojima and Kokubun, 2002).

In China, participation is done through urban neighbourhood communities and the transformation of Urban Residents Committees (URCs; Xu, 2007). The URC is a neighbourhood-level, quasi-governmental organization present in all cities and town across China. According to the Permanent Residents Union; Urban Residents Committees, Organizing Law(1989), these Committees, whose employees are civil servants, are autonomous, though they often work closely with and carry out the local government's administrative tasks (Derleth & Koldyk, 2004), such as monitoring family-planning compliance and maintaining household registry rolls.

They have also been used to translate government initiatives to the local context, such as implementing community programmes like English and computer classes and organizing

programmes, celebrations, and events for children and the elderly (Xu, Geo, & Yan, 2002).

4.7.6 Objectives of Community Participation in China

Community Participation in China is meant to translate government initiatives to the local context for overall national development objectives. However, it also means to facilitate the cultivation of a sense of neighbourliness by bringing communities together to achieve government policies and programmes. Community participation in China used to achieve efficiency, effectiveness, sustainability and large coverage of government projects provisions. In China community participation is therefore a mean through which government ensures that citizens participate and contribute to the progress and development of the country.

4.7.7 Results of Community Participation in China

In China, community participation has been a useful vehicle for the provision of welfare services especially for those vulnerable groups who were left out of the employment based on social welfare system. The participation of citizens in development process has help well in putting the country as one of the first growing economy in the World, (BBC Economic Report 2013).

4.7.8 Challenges of Community Participation in China

The Challenges of the participation in China are that participation take place within a context of strong social control by the state. Community participation in neighbourhood affairs is therefore largely associated with residents' participation in state organized space (Zhu, 2007).

In China, however, public participation is not readily discussed in public discourse and its promotion in regulatory decision making and rule making process is still at its infancy. In most cases, candidates are nominated by party officials, endorsed by indirect election in which only heads of families or residents' representations cast their votes.

A recent survey conducted in Wuhan (one of the biggest cities in central China) found that only about 11% migrant workers had participated in urban communities, and about 72% had not participated in their villages since they started to work in cities (Yang & Zhu,2007).

Barriers or factors that affect China's migrant workers' participation have been identified at both individual and policy/structural levels, including level of education, economic situation, awareness of participation, unequal access to services and education, and rural bias and discrimination (Huo,2007;Yang & Zhu, 2007). Zhao, (2008) indicated that the lack of community participation can be attributed to the characteristics of migrant workers' social capital: migrant workers rely largely on social networks rooted in their villages; though these networks may provide close social bounds, and migrant workers do benefit from such networks. For example, in employment and housing Lee (1998) noted that the network may provide few resources and opportunities for participation in either the rural or urban context.

4.8 Lessons for Nigeria

Nigeria as one of the developing countries like India should recognise the fact that community development and sustainability are properly achieved when the government deliberately collaborate with communities in her development process. As the way it happened in India, participation ensured efficiency, effectiveness and low cost of project implementation. Nigeria been a country with high demand of services at all levels of government getting communities involved in the development process will go a long way in helping government providing services at a low cost and in a more sustainable way. This community participation should be institutionalised at all levels.

The greater lesson learnt in China with community participation, the government policies and programmes are simpler, easier and chipper disseminated among the community members. However, policies and programmes are collectively respected and maintained by the entire community members. It also used to translate government initiatives to the local context for the overall national development objectives. As China been the most populated country in the World, succeeded in providing with needs of its people, if Nigeria would do the same it would be more functional looking at the potentials in our people and the potentials in our land.

CHAPTER FIVE

Data Presentation and Analysis

5.1 Introduction

In this chapter, data collected from both primary and secondary sources were subjected to in-depth qualitative and quantitative analyses. Specially, the data collected using instrument of interviews, observation and questionnaires were analysed using tables and descriptive statistics such as frequency, distribution tables and simple percentages, while hypotheses were tested using the chi-square which is basically quantitative methods.

5.2 Data Presentation and Analysis

A sum total of 360 questionnaires were developed and administered to ten (10) communities out of which 280 were filled and returned representing 77.8% of the total questionnaires administered which we find them adequate and thus, formed the basis of analysis.

However, the questionnaires presented and analyzed were administered among members of these ten selected communities who are within the age of eighteen years and above while the interviews presented include those conducted with In-charge of Local Government, especially Education and Social Development, planning and budget and Works departments include liaising officer who overseeing the activities of non-governmental activities in the communities. It is also important to acknowledge that, this study is largely qualitative and therefore interview-driven.

Note; to make this study neat and less voluminous, we presented the data together collected on both Water Supply and Healthcare projects from the ten (10) selected communities and officials of Bauchi Local Government Area.

5.2.1 Section A: Bio Data of Respondents

Based on the distribution of respondents as shown in table 5.1, below, 208 which is (74.3%) are male while 72 (25.7) are female in the ten communities. This simply means majority of the respondents in the selected communities are males.

Table 5.1: Bio Data of Respondents

Respondents	Frequency	Percentage
Male	208	74.3%
Female	72	25.7%
Total	280	100%

Sources: Survey Research, 2017

For major occupation of the respondents as indicated in table 5.2, 46 (16.4%) are civil servants, 124 (44.3%) are farmers, 55 (19.6%) traders, and 55 (19.6%) are students. This simply means that majority of the respondents are farmers and most of them are in rural areas while the least respondents are civil servants whom majority located in urban and semi-urban areas. Traders also located in both urban and rural areas.

Table 5.2: Occupational Distribution of respondents

Respondent	Frequency	Percentage
Civil Servants	46	16.4
Farmers	124	44.3
Traders	55	19.6
Students	55	19.6
Total	280	100

Source: Survey Research, 2017

On age distribution of respondents as can be seen in table 5.3, 23 (8.2%) are within the age bracket of 18-30 years, 123 (47.1) 31-45 years 95 (33.9%) 46-55 years while 30 (10.7%) are

56 years above respectively. The majority are within the age bracket of 31-45 years old. This also shows that majority of our respondents are adults who are in a good position to respond to our questions because most of the community development activities are performed by them.

Table 5.3: Age Distribution of Respondents

Respondents	Frequency	Percentage
18 - 30 years	23	8.2
31 - 45 years	123	47.1
41 – 55 years	95	33.9
56 and above	30	10.7
Total	280	100

Source: Survey Research, 2017

Regarding the educational qualification of respondents, 80 (28.6%) have primary school certificates, 128 (45.7%) are with post-primary certificates, while 72 (25.7%) had post-secondary certificates. This simply means that majority of our respondents are educated enough to fill out questionnaires without the help of an interpreter.

Table 5.4 Education Qualification of Respondents

Respondents	Frequency	Percentage
Primary Certificate	80	28.6
Secondary Certificate	128	45.7
Post-Secondary Certificate	72	25.7
Total	128	100

Sources: Survey Research, 2017

Table 5.5: Are you aware of the District Health system?

Item	Frequency	Per cent
Yes	204	72.9
No	76	27.1
Total	280	100

Source: Survey Research, 2017

The table above show that only 75 respondents representing 27.1% were not aware of the DHS while the bulk of the responded (72.9%) are very much aware of the DHS. A system that define the framework for community participation in Healthcare activity through the formation of District Health Committee (DHC), comprising of 16 members mostly drawn from the community to monitor the activity of the health centres, manage the drugs and removing funds scheme of the Health Facility. This system has an in-build mechanism for community participation in Primary Health Care Programme.

Table 5.6 Does your Health Facility ensure the formation of DHC?

Item	Frequency	Percent
Yes	180	64.3%
No	100	35.7%
Total	280	100%

Source: Survey Research, 2017

As shown from the table 5.6, 180 respondents representing 64.3% held the view that DHC were formed in their respective Health Facilities while 35.7% held contrary opinion. These DHC are responsible for monitoring and managing the activities of the health care facility. They serve as link between the DHC facility and the community on the one hand and between community and the local government on the other hand.

Table 5.7: How effective is the DHC?

Item	Frequency	Percent
Effective	19	6.8
Fairly effective	94	33.6
Not Effective	164	58.6
Total	280	100

Source: Survey Research, 2017

With respect to the level of effectiveness of the DHC in terms of organizing regular meetings to discuss matters, affecting the Health care facility or health care issues bothering the people, 19 respondents, representing 6.8% are of the view that the DHC is effective in that regard, whereas 33.6% of the respondents maintained that the DHC are fairly effective in the discharge of their responsibilities. The bulk of the respondents 58.6% held contrary opinion. This means that the DHC are not been effective in the discharge of their responsibilities. Further corroborate this view a section of the opinion leaders interview who some of them are member of the DHC lamented that the in-charge (Health officer) doesn't call for meetings they only brief them on any activity of the DHC facility only when they need their intervention or this normally happened when one of their staff is transferred out of the situation and they don't want him/her to go. It is only then they seek for our intervention lamented the members.

Table 5.8: How often do you participate in the activities of your Health care facility?

Item	Frequency	Percent
Very often	16	5.7
Often	64	22.9
Not at all	200	71.4
Total	280	100

Source: Survey Research, 2017

Table 5.8 shows this frequency of community participation in primary health care activities of their health facilities. 5.7% and 22.9% of the respondents shows very high and high frequency of participation while 71.4% of the respondents do not participate in Health care activities in their respective Health care facilities. This indicate a very low frequency of community participation in Health care activities

The reason for the low frequency is not unconnected to the low level of community mobilization in the study area coupled with the ineffective working of the DHC system in most PHC facility as discussed earlier. Thus, people had no ease and obligation to participate in the activities of a programme or services they know little or nothing about.

Table 5.9: Did your community participate in the planning and implementation of Health care project?

Item	Frequency	Percent
Yes	46	16.4
No	234	83.6
Total	280	100

Source: Survey Research, 2017

Table 5.9 further affirmed that community did not participate in health care activity, 234 respondents representing 83.6% maintained that they as a community were not involve in the initiation, planning and implementation of PHC project or programme meant for the community. Only an insignificant 16.4% were consulted. This shows that most of the PHC projects did not carry the seal and concert of the community.

To further confirm the above position, the responses of the Miri ward women leader in our personnel interview maintained that the factors that affect the participation of people in this community are the attitude of local government officials on the people. In most of the cases

the officials sees people as ignorant and illiterate who cannot contribute in any way in developmental initiatives. Sometimes people in the community want to take part in service provisions but knowing full well that their participation will not add anything to the service providers as they perceived totally discouraged them. Comparatively, people in this community participate in the delivery of service more with donor agencies because they do needs, accept and respect the contributions of the community. Because the factor that affect positively or otherwise community participation in development process, are the attitude of the officials concerned in the service provisions.

The participation can also affect the outcome of projects if the less privilege are involve in the planning and implementation of projects. This is because their involvement will take into cognisance the needs, belief, values and differences of community which will affect the outcome or long term results of project.

The participation can affect the sustainability, when some people in the community are given a leadership role. They can easily mobilise the community members for protection of the projects when the needs arises. And these will lead to projects sustainability.

Table 5.10: How often are community mobilize on the importance of community participation in Health care?

Item	Frequency	Percent
Regularly	20	7.2
Some time	76	27.1
Not at all	184	65.7
Total	280	100

Source: Survey Research, 2017

Table 5.10 indicate the extend of community mobilization efforts and campaign programmes

Organized by the local government to sensitize and mobilize local communities on the important of the community participation in health care projects and programmes. The results show that 7.2% of the respondents believed that the local government regularly organized community mobilization campaigns while 27.1% feel that the campaigns are often organized where as 65.7% maintained that the mobilization campaigns were not organized at all. This implies that the local government has failed to sensitize and mobilize local community on the importance of community participation in health care programs.

However, some of the officials of the local government interviewed maintained that the local government information unit do undertake community sensation campaign from time to time. The information officer said that the unit had three working vehicles equipped with all the modern information facilities like loud speakers, projectors and wireless radio gadget. The only challenge they are facing is that some of the local communities are not memorable thus, limit access to the services the unit provides.

Observation has shown that the activities of the information are confined to the urban centres of the local government. Even their activities are limited by the amount of petrol allocation which is only once a week and often half nor full tank (i.e. 25 instead of 50 litres)

Table 5.11: How do you assess the degree of community participants in health care generally?

Item	Frequency	Percent
Great Extend	38	13.6
Some Extend	62	22.1
Zero	180	64.3
Total	280	100

Source: Survey Research, 2017

From the table 5.11 above, 13.6% of the respondents assess the level of community participation in Bauchi local government as great while 62 respondents (22.1%) rated it fair where as 64.3% of the total response assess the degree of community participate in health at zero percent. This means that community participation in the study area is generally very low if not completely absent.

5.3 Sustainability of Health Care Projects

Here we will present and analyse data on the sustainability of health care projects using variable, like availability, utility, quantity, condition of health and services as well as frequency of support to health services as measures of sustainability in health care services.

Table 5.12: Types and numbers of health facility via the population of the 10 Communities

Types	Number	Population	Ratio
PHC Centres	3	254,420	1:85,000
PHC Clinics	5		1:51,000
PHC Post	7		1:36,000
Total	15		

Source: PHC Dept. Bauchi LGA. 2017

Table 5.12 identified the types and physical number of PHC facilities available in the 10 communities under study. There are only 3 PHC centres in these communities to cater for the population of 254,420 people on the ratio of 1:85,000 which is below the minimum set standard for PHC in Nigeria that maintained that PHC centre should serve a population of between 10,000 – 20,000 people and at worst be physically located in each political ward within a local government.

Also the table indicate that there are only 5 PHC clinics and 7 PHC post present in these communities in a ratio of 1:51,000 and 1:36,000 respectively, these too are grossly

inadequate going by the minimum PHC standard with the approved ratio of 1:2,000/5,000 and 1:500 for PHC clinic and post respectively. Thus, going by the minimum standards for PHC in Nigeria what is considered available for these 10 communities are 13 PHC centres, 51 PHC clinics and 509 PHC post meaning that these communities have a short fall of 10 PHC centres, 46 PHC clinics and most seriously 503 PHC post.

To further compound the matter basic medical equipment were not available in these PHC facilities. Observation has shown that items like dressing forceps, injection safety box, kidney dish, thermometer, weighing scale, and stethoscope were not available nor to talk of solar refrigerator and ice packs that are supposed to be present in each PHC post for the storage of injection and immunization drugs.

Similarly, toilet facilities are grossly inadequate in most of the PHC facility visited and the flow available were in bad conditions, can also, and noticed that there is no separate toilet facility for Female in all the PHC facility visited.

Table 5.13: How often do you patronize the PHC services provided?

Item	Frequency	Percent
Regularly	81	28.9
Occasionally	107	38.2
Not at all	92	32.9
Total	280	100

Source: Survey Research, 2017

Table 5.13 show the level of patronage of PHC services by the local communities as a measure of acceptability of the Health care services. The response indicate that 28.9% regularly patronize the PHC services offered in the PHC facilities located in their locality while 38.2% of the respondents occasionally visit the PHC facilities in their area. Where as a reasonable 32.9% of the respondents do not patronize the PHC facilities at all.

Although, the greater percentage of the response indicates regular and often occasional patronage is not a good reason enough to suggest that these PHC facilities provide efficient and free PHC services to the people. This is because when the respondents were asked to give reasons for their answer to the question on table 5.13 some of the reasons were that of proximity and poverty not because of efficiency and quality of the services. For the remaining 32.9% that do not patronize the PHC facility their reasons was that of poor services, overcrowdings and poor condition of the PHC facilities thus they prepare private health care providers to the free government services. This depicts the sorry state of the PHC facilities and services in the selected communities under study.

Table 5.14: How do you rate the quality of PHC services provided?

Item	Frequency	Percent
High	14	5.0
Low	62	22.1
Very low	204	72.9
Total	280	100

Source: Survey Research, 2017

Table 5.14 shows the responses on the quality of health care services provided which is low and very low as ascertain by 22.1% and 72.9% of the total responses respectively. Only an insignificant 5% of the responses rate the quality of PHC services provided as high.

Table 5.15: The number and Calibri of PHC staff

Type	Number	Percent
Doctor	–	–
Nurses	6	1.8
CHO	6	1.8
Chew/Jehew	32	9.4
	106	

EHO/ Nutritionist	12	3.5
Attendant	284	83.5
Total	340	100

Source: PHC Bauchi LGA, 2017

The table 5.15 shows the number and qualification of the health staff in the communities under study. The table show that there are 6 numbers of nurses and CHO each representing 1.8% each of the total health staff. There were 32 CHEW and JEHEW representing 9.4% of the total health workforce. EHO and nutritionist are only 3.5% of the total health workforce whereas the bulk of the workforces are unskilled health attendant who are 284 in number representing 83.5% of the overall health workforce. This implies that 83.5% of the workforce are unqualified going by PHC minimum standards for health personals which stipulated that, Doctor, Nurses, CHEW/JCHEW, CHO and EHO/Nutritionist were the staff allow to operate in PHC facility.

Table 5.16: How do you assess the level of community support to PHC facilities generally?

Item	Frequency	Percent
High	68	24.2
Low	92	32.9
Very Low	120	42.9
Total	280	100

Source: Survey Research, 2017

Table 5.16 assesses the level of community support to PHC facilities and services generally. 24.2% of the respondents rate the level high where as 32.9% and 42.9% rate the level of community support low and very low respectively. This means that generally, the level and

degree of community support to PHC facilities and services as a measure of sustainability of health care services is low and often very low.

However, Responses of Gidirgi Community Development Association Leader;

Our community generally participated in implementation of Maternity and Bridge projects in Gidirgi Community through the World Bank Assisted Projects under Community and Social Development Project (CSDP) programme. Bridge project cost 10 million naira in all and my Community contributed one (1) million naira. The community however, contributed with sand, water needed, gravels and 70% of unskilled labour during implementation. In the Maternity project, the community also contributed 1% financially and water, sand, gravels, as well as 80% unskilled labour needed in the implementation process. The same things have done to the provision of water facilities by the community. The full participation the community was a result of mobilisation by the Officials of Community and Social Development Project (CSDP). But in projects initiated and implemented by the Local Government, the community do not participated because they have not been mobilised to do so, he said. The factors generally affect community participation to him, largely attributed to openness or closeness of the service providers to the communities/beneficiaries in the process. The (CSDP) succeeded with community because they were opened, courageous and respectfull to the community effort as well as taken them as equal partners in development process.

The participations affect the project-sustainability more especially when community fully involved in projects initiation and planning, will make community to have sense of ownership and power on the project there by making it to have full acceptability, workability, and sustainability of the projects by the beneficiaries.

Participation affect sustainability of government projects especially in local health and water supply when participated and been thought conflict resolutions, trained capacity building which will be used to maintain facilities of these projects longer or beyond expected through the skills and knowledge acquired as a result of their participation.

Table 5.17: Extends to community participation to sustainability in Health Care Services

Item	Frequency	Percent
General extend	42	15
Little extend	140	50
None	98	35
Total	280	100

Source: Survey Research, 2017

Table 5.17 above show the extend of community participation to the sustainability of health care services in the study area. The result show that only 15% of the responses share the opinion that the extend of relationship between community participation and par and project sustainability of health care service is high. 50% of the responses feel that the extend of relationship is very little where as 35% beloved that there is no relationship atoll. This therefore mean that although there is some evidence of community participation in health care services in the selected local communities in Bauchi Local Government Area the participation does not translate into project sustainability of the Health care services they are part in health in the local communities under study.

5.4 Testing of Hypothesis ‘I’ Using Chi-squire on Community Participation and Sustainable Health Care Projects

H₀: There is no significant relationship between community participation and sustainable health care projects.

	Case Processing Summary					
	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
How do you assess the degree of community participation in Health care generally? * How do you assess the level of community support to PHC facilities generally?	280	100.0%	0	0.0%	280	100.0%

Source: SPSS Output, 2017.

How do you assess the degree of community participation in Health care generally? * How do you assess the level of community support to PHC facilities generally?

Cross Tabulation

			How do you assess the level of community support to PHC facilities generally?			Total	
			High	Low	Very Low		
How do you assess the degree of community participation in Health care generally?	Great Extent	Count	38	0	0	38	
		Expected Count	9.2	12.5	16.3	38.0	
	Some Extent	Count	30	32	0	62	
		Expected Count	15.1	20.4	26.6	62.0	
	Zero	Count	0	60	120	180	
		Expected Count	43.7	59.1	77.1	180.0	
			Count	68	92	120	280
	Total		Expected Count	68.0	92.0	120.0	280.0

Source: SPSS Output 2017.

Chi-Square Tests

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	234.046	4	.000
Likelihood Ratio	285.591	4	.000
Linear-by-Linear Association	185.669	1	.000
N of Valid Cases	280		

Source: SPSS Output 2017.

Symmetric Measures

		Value	Asymp. Std. Error	Approx. T	Approx. Sig.
Interval by Interval	Pearson's R	.816	.014	23.517	.000
Ordinal by Ordinal	Spearman Correlation	.810	.019	23.013	.000
N of Valid Cases		280			

Source: SPSS Output 2017.

Hypothesis:

H₀: There is no significant relationship between community participation and sustainable health care project.

H₁: There is significant relationship between community participation and sustainable health care project.

Decision

Reject the null hypothesis if the calculated value is greater than the tabulated value and accept otherwise.

At 5% level, the critical value corresponding to the sample size is 0.305.

At 5% level of significance, $\chi^2_{\alpha, V} = \chi^2_{0.05, 4} = 9.488$

Major Findings

Since the calculated value (0.810) is greater than the tabulated (0.305), we reject the null hypothesis and conclude that there is significant relationship (P = 0.000) between community participation, support and sustainable health care project. The relationship is strong and positive. By positive relationship, we mean an increase in one variable will lead to the increase in the other variable. That is to say, an increase in the community participation and support will lead to the sustainability of the project.

From the chi – square, the calculated value (234.046) is greater than the tabulated value (9.488) and therefore concluding that the sustainability of health care project depends on the community participation and support. That is to say, the project will not be sustained without community participation. And not only participation, but active participation and support.

5.5 Data Presentation and Analysis on Community Participation in Water Supply Projects.

This section present and analyses the data generated on community participation in water supply in the areas under study, using number and nature of community development association, frequency of meeting, nature and continuous involvement in water supply projects, as proxy for community participation in water supply projects.

Table 5.18: Number of Registered CBO/CDAs

Communities	Number of Registered CBO/CDAs
Gidiri	2
Bishi	2
Miri	4
Buzaye	3
Zungur	3
Wuro Jamil	1
Durum	2
Kushi	1
Kobi	6
Inkil	5

Source: Bauchi, LGA 2017

Table 5.18 shows the 10 communities selected for the study and the number of registered Community Based Organisations or Community Development Associations in community. The study shows that the more urban the community the more CBO/CDAs registered in a given community. For example, Kobi and Inkil are communities selected within the urban centre with highest registered CBO/CDAs 6, 5 respectively. In each of these communities, there is women association, Educational Development Association and so on. However, Miri is semi-urban because it urban influence with 4 registered CBO/CDAs. Buzaye and Zungur are more populated communities with 3 registered CBO/CDAs one women association and farmer's cooperative association each. Gidirgi community for example, the donor agency has taken their development association and made the entire community more participative in development process.

Table 5.19: How Member do these CBO/CDAs Held Meeting to Discuss Water Supply Matter?

Item	Frequency	Percentage
Regularly	68	24.2
Often	120	42.9
Never	92	32.9
Total	280	100

Source: Survey Research, 2017

When the respondents were asked on the frequency of meeting held by the CBO/CDAs to discuss water supply, the result show that 24.2% of the total responses held the view that the meetings of the CBO/CDAs was regular whereas 42.9% opined that the meetings of the CBO/CDAs were not regular but often. The remaining 32.9% are of the opinion that the CBO, CDAs never even call for meeting to discuss water supply matter affecting the communities. This implies that CBO/CBAs often held meeting, to discuss water related matters.

Table 5.20: How Supporting is the Local Government to Community Development Association?

Items	Frequency	Percentage
Very supportive	30	10.7
Fairly supportive	70	25.0
Not supportive	180	64.3
Total	280	100

Source: Survey Research, 2017

From the table above 10.7% and 25% of the total responses are of the view that the local government is very and fairly supportive respectively to community development association whereas, 64.3% opined that the local government has not been supportive at all to CDAs/CBOs activities. One of the reasons for the low support is the council willingness to actually carry community alone in development process and this could be attributed to the style of administration that does not have provisions for community participation at all.

Community have different needs, problems belief and practices getting them involved in programmes design and implementation helps to ensure that strategies and outcome are appropriate for and acceptable to community.

Community are the beneficiaries of the projects provided, involving them in service provisions helps to internalise skills, knowledge by the members of the community and thereby making it easier, simpler and even cheaper for them to sustain the projects even when service providers have left for a longer period.

Table 5.21: Were Local Communities Involved in the Planning and Implementation of Water Supply Related Projects?

Items	Frequency	Percentage
Yes	100	35.7
No	180	64.3
Total	280	100

Source: Survey, 2017

Form the table above 100 respondents representing 35.7% of the total responses feel that the local communities were involve in the planning and implementation of water supply related projects whereas, the remaining 64.3% opined that water supply related projects were cited without the consent of the local communities.

However, the responses of the Local Government caretaker show that communities do contribute immensely in Community Development activities especially in given or in our land where community projects will be cited. These efforts could not be possible without their involvement in the projects planning and implementation

He further explained that the participation of communities in provision of facilities sometimes depends on the nature of the area. In most cases community in more rural areas participate more physically in the local government effort to provide local health and water facilities than communities in the urban centres. The study shows that the more rural the area the high participation of the community in projects and vice versa. Effective information sharing and community consultation are some of the factories that promote community participation but in situation where all of these are absent, the participation seem to be low even in the rural areas.

Table 5.22: How Supportive are the Local Communities in CD activities Especially Water Supply Related Projects?

Item	Frequency	Percentage
Very supportive	60	21.4
Fairly supportive	120	42.9
Not supportive	100	35.7
Total	280	100

Source: Survey Research, 2017

From the table above 21.4% and 42.9% are of the view that the local communities were been very and often fairly supportive in CD activities whereas, the remaining 35.7% held contrary

opinion on the issues. This show that lo0cal communities have to some extend been supportive to CD activities

According to our secondary sources, observation and interview results we noticed that the local government contrary to respondent view have to some extend been supportive to community development activities most especially those that are Health care and Water Supply related projects.

Below is the synthesis of both efforts made in each of the 10 communities selected for this study

1. Buzaye Village: This is a rural community located along Bauchi-Jos road and in 2010, the community provided with Maternity by the Local Government at the cost of ₦22 Million naira. In the first place, the community donated the Land for construction of maternity, but after the construction the community demanded from local government for the payment of land in which the Maternity is built. In the same year (2010), the community therefore, provided with one Borehole at the cost ₦1.2 Million.

2. Miri: This is a semi-urban community because of the influence of the Bauchi town. The community is located just 5 km from Bauchi town and in 2008, the community has been provided with Maternity at the cost of ₦11 million naira and two (2) Boreholes cost ₦2.4 million in the same year. This community located at the same axis with Buzaye Bauchi, Jos road.

3. Durum Village: is another more rural community located in Northern part of the Local Government Council and the community provided with Solar Water system cost ₦1.5 million in 2010. The community however, had an existing Maternity which renovated in the same year 2010 at the cost of ₦1.3 million. This community built two additional rooms' in the maternity, staff Quarters were built at the cost of N9 million naira and the community therefore, fully ready at any time to give their maximum contribution needed by service providers for the progress and sustainability of the maternity (staff interviewed 2013).

4. Kushi Village: This community is located in a very remote village in Durum District and provided with maternity at cost of ₦22 million and one (1) Borehole cost ₦1.2 million in 2008. The community contributed to the whole process with the land and un-skilled labour during implementation. They all located at the Northern part of Bauchi local government council.

5. Bishi Village: This community is located along Bauchi-Gombe road and in 2010, the local government provided with the community a maternity cost ~~N~~22 million naira and three (3) Boreholes cost ~~N~~1.2 million each making the total cost of ~~N~~3.6 million. The community contributed to the service providers with the land and sometime with un-skilled labour.

6. Gidiri Village: In this village CSDP provided for the community a maternity, Staff Quarters and Bridge. The community contributed one million naira financially, land, sand and un-skilled labour, gravel, all water need for the bridge project and the local government also contributed N1 million. The community in maternity project contributed 500,000 for the project. The total cost for the maternity was around 6 million naira. Two Boreholes were installed at the cost of 1.6 million. This community participated well and contributed higher than any community selected in this study.

7. Zungur Village: this community is located at the Southern part of Bauchi town and in 2010; the local government provided for the community two Boreholes at the cost of 2.4 million naira and renovated their maternity at the cost of 9.2 million naira. No full participation of the community in these projects.

8. Wuro Jamail: This is another community selected for the study which is more rural than any community in this study. In 2008, the community was provided with the maternity at the cost of N22 million and a Borehole cost N1.2 million by the local government but the Borehole is currently not functioning. These two communities located at the southern part of Bauchi local government. The participation of the community was low in these projects because the local government used contractors for projects.

9. Kobi: This is an urban community located within Bauchi town and because of the closeness of the community to Abubakar Tafawa Balewa Teaching Hospital and availability of maternities nearby communities, Kobi do not have maternity rather it has Dispensary which is renovated in 2008 cost ~~N~~1 million by the local government. One Borehole installed in the same year (2008) at cost of ~~N~~1.2 million. But in this community, no clear indication of community participation even in terms of supervision, monitoring of facilities on how people utilize them except the workers of Dispensary.

10. Inkil: this another urban community located at the 1km from Bauchi town. At the tail end of 2013, the MDGs constructed maternity for the community at the cost 12 million in which the local government contributed 500,000 and community contributed with the Land

for the projects. Two Boreholes were installed in the community at the cost of 2.4 million naira. The community through self-help effort constructed big culvert leading to the maternity (field Survey 2013).

From the above survey of the Community Development Activities in the communities under study we can draw some conclusion that:

The Local Government in collaborate with some Donor Agencies have been supporting of Community Development Activities especially on health care and water supply related projects

Some Local Communities have been contributing financially and other wise to Community Development Activities.

What is not clear here, the extents of community involvement in the planning and implementation of the projects as well as the degree of sustainability of these projects mounted by the local government.

Sustainability

Table 5.23: How do you Assess the Quality of the Water Supply Related Projects?

Item	Frequency	Percentage
Excellent	10	3.6
Good	100	35.7
Poor	170	60.7
Total	280	100

Source: Survey, 2017

The table above assess the quality of the CD projects as a measure of sustainability.

3.6% of the responses feel that the quality of the projects was excellent whereas 35.7% think that the quality is good. However, 60.7% held the view that the quality of these CD projects was poor. Perhaps this explains the poor candidate of these facilities as observed during our visit to these communities.

Table 5.24: How sustainable are these CD Projects?

Items	Frequency	Percentage
Well sustain	19	6.8
Fairly sustain	94	33.6
Not sustain	164	58.6
Total	280	100

Source: survey Research, 2017

The above table assess the level or extend of sustainability of the CD projects put in place. 6.8% of the responses are of the view that these CD projects are well sustained while 33.6% feeling that they are fairly sustained whereas 58.6% opined that these CD projects where not sustainable.

Several reasons could be adhered for the non-sustainability of the CD projects some of which include poor quality of the projects is noticed in the poor condition of the CD projects. Thus, non-involvement of the community in the planning and implementation of most of those CD projects

5.6 Testing of Hypothesis ‘II’ Using Chi-square on Community Participation in Water Supply Projects.

H₀: There is no significant relationship between community participation and sustainable water supply project.

Case Processing Summary					
Cases					
Valid		Missing		Total	
N	Percent	N	Percent	N	Percent

How do you assess the quality of water supply related project? *						
How supportive are the local government to the communities in CD activities especially water supply related project?	281	100.0%	0	0.0%	281	100.0%

Source: SPSS Output 2017.

How do you assess the quality of water supply related project? * How supportive are the local government communities in CD activities especially water supply related project? Cross tabulation

			How supportive are the local government to the communities in CD activities especially water supply related project?			Total
			Very Supportive	Fairly Supportive	Not Supportive	
How do you assess the quality of water supply related project?	Excellent	Count	1	0	0	1
		Expected Count	.2	.4	.4	1.0
	Good	Count	60	40	0	100
		Expected Count	21.7	42.7	35.6	100.0
	Poor	Count	0	80	100	180
		Expected Count	39.1	76.9	64.1	180.0
Total		Count	60	120	100	281
		Expected Count	61.0	120.0	100.0	281.0

Source: SPSS Output 2017.

Chi-Square Tests

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	166.280	4	.000
Likelihood Ratio	215.288	4	.000
Linear-by-Linear Association	155.842	1	.000
N of Valid Cases	281		

Source: SPSS Output 2017.

Symmetric Measures

		Value	Asymp. Std. Error	Approx. T	Approx. Sig.
Interval by Interval	Pearson's R	.746	.021	18.714	.000
Ordinal by Ordinal	Spearman Correlation	.736	.023	18.163	.000
N of Valid Cases		281			

Source: SPSS Output 2017.

Hypothesis:

H₀: There is no significant relationship between community participation and sustainable water supply project.

H₁: There is significant relationship between community participation and sustainable water supply project.

Decision

Reject the null hypothesis if the calculated value is greater than the tabulated value and accept otherwise.

At 5% level, the critical value corresponding to the sample size is 0.305.

At 5% level of significance, $\chi^2_{\alpha, v} = \chi^2_{0.05, 4} = 9.488$

Major Findings:

Since the calculated value (0.746) is greater than the tabulated (0.305), we reject the null hypothesis and conclude that there is significant relationship between community participation and sustainable water supply project ($P = 0.000$) between community participation, support and sustainable water supply project. The relationship is strong and positive. The positive relationship showed that an increase in one variable will lead to the increase in the other variable. Otherwise, an increase in the community participation and support will lead to the sustainability of water supply project.

From the chi – square, the calculated value (166.280) is greater than the tabulated value (9.488) and hence concluding that the sustainability of water supply project depends on the community participation and support. That is to say, the project will not be sustained without community participation.

5.7 Synthesis of Findings of the Study

Based on the series of interviews conducted, questionnaires administered as well as observation made in the field, the following are the various findings of the study which we synthesized for in-depth understanding of the focus and major findings of the study.

Buzaye Village: This is a rural community located along Bauchi-Jos road and in 2010, the community provided with Maternity by the Local Government at the cost of #22 Million naira. In the first place community donated the Land for the construction of maternity, but after the construction the community demanded from the local government for the payment

of the piece of Land in which the Maternity is built. In the same year (2010), the community is therefore, provided with one Borehole at the cost of #1.2 Million.

Miri: This is a semi-urban community because of the influence of the Bauchi town. The community is located just 5 km from Bauchi town and in 2008, the community has been provided with Maternity at the cost of #11 million naira and two (2) Boreholes at the cost of #2.4 million naira in the same year. These communities located at the same axis with Buzaye Bauchi, Jos road.

Durun Village: is another more rural community located in Northern part of the local Government Council and the community provided with Solar Water system at the cost of #1.5 million naira in 2010. The community however, has an existing Maternity which renovated in same year 2010 at the cost of #1.3 million. One good thing with this community, they built two additional rooms' in the maternity. For this maternity, Staff Quarters were built at the cost of #9 million naira and community however are fully ready at any time to give their maximum contribution in any way needed by service providers for the progress and sustainability of the maternity (staff interviewed 2013).

Kusi Village: This community is a very remote village in Durum District and provided with maternity at cost of #22 million naira and Borehole at the cost of #1.2 million naira in 2008. The community contributed with the land and even some times with un-skilled labour. They are all located at the Northern part of Bauchi local government council.

Bishi Village: This community is located along Bauchi-Gombe road and in 2010, the local government provided for community a maternity cost #22 million naira and three (3) Boreholes at the cost of #1.2 million naira each making the total cost of 3.6 million naira.

The community contributed the to the service providers with the land and sometime with un-skilled labour.

Gidirgi Village: In this village CSDP provided for the community a maternity, Staff Quarters and Bridge. The community contributed one million naira which is 1% financially, land, sand, un-skilled labour, gravel, all water need for the bridge project and the local government also contributed #1 million naira. The community in maternity project contributed 500,000 for the project. The total cost for the maternity is around 6 million naira. Two borehole were installed at the cost of 1.6 million. This community participated well and contributed higher than any community selected in this study.

Zungur Village: This community is located at the Southern part of Bauchi town and in 2010; the local government provided for the community two Boreholes at the cost of 2.4 million naira and renovated their maternity at the cost of 9.2 million naira.

Wuro Jamail: This is another community selected for the study which is more rural than any community in this study. In 2008, the community was provided with the maternity at the cost of #22 million naira and a Borehole at the cost of #1.2 million naira by the local government but the Borehole is currently not functioning. These two communities located at the southern part of Bauchi local government.

Kobi: This is an urban community located within Bauchi town and because of the closeness of the community to Abubakar Tafawa Balewa Teaching Hospital, Specialist Hospital and availability of maternities nearby communities, Kobi do not have maternity rather it has Dispensary which is renovated in 2008 at the cost of #1 million naira by the local government. One Borehole installed in the same year (2008) at the cost of 1.2 million naira. But in this community, no clear indication of community participation even in terms of

supervision, monitoring of facilities on how people utilize them except the workers of Dispensary.

Inkil; this another urban community located at the centre of Bauchi town. At the tail end of 2013, the MDGs constructed maternity for community at the cost of 12 million in which the local Government contributed 500,000 and community contributed with the Land for the project. Two Boreholes were installed in the community at the cost of 2.4 million naira. The community through self-help effort constructed big culvert leading to the maternity (field survey 2013).

Having surveyed the ten communities (Miri, Buzaye, Wuro-Jamail, Zungur, Inkil, Kobi, Bishi, Gidirgi, Durun, and Kusi) in Bauchi local Government Areas, the conclusion one can draw is that, the local government has failed one of its primary objective as the third tier of government in Nigeria, as “to provide opportunities for people to participate in their development process as contained in (1976 reform, Dasuki Commission report, and 1999 constitution). Information gathered through focused group interviewed from respondents indicated that communities’ do not participated in healthcare and water facilities provided by the local government within the period of the study. The results of questionnaires administered to local government officials and members of the ten communities’ shows that communities at local government level not participated in the provisions of health and water facilities provided by the local government. Except however, few communities such facilities were provided by donor agencies like MDGs, USAID-TSHIP, and UNISEF etcetera. These Non-Governmental Organizations provide services in collaboration with communities in the process. For example a case of Gidirgi Community where by the community fully participated in constructions of Bridge and Maternity, the community contributed 1% financially, provided with all needed water, sand, gravels, and unskilled labour which

actually reduced the project's cost. The study however, identified that communities do not actively participated in decision making process of their areas. The initiators, implementers and evaluators are government officials or so called experts. The felt needs or problems of communities are better identified by the communities themselves rather than outsiders.

The study found that the failure of development projects largely attributed to the inability of government to create opportunities for people to actively participate in initiation, implementation and evaluations of health and water supply facilities in the selected communities. As a result some facilities are not acceptable, workable, sustainable, achievable or profitable to the communities or beneficiaries.

The basic problems facing these communities are; the low level of education which denied them to understand the policy process, most people does not have idea of community participation in projects initiation, implementation and evaluation at the government level. Lack of access to information in the areas visited, the study however, revealed that information available on government projects, programmes and service are difficult to obtain and interpret and the local government officials are not doing enough to promote community participation in process. With the intervention of LEAD in some places, communities organised and mobilised to fully participated in projects initiations, implementations, evaluations and maintenances. The study therefore, acknowledged that rural communities participated relatively well in projects than those in the urban centres. In the urban centres there is high level of individuality. Unlike rural communities who bounded by a strong social system are easier and simpler to be mobilized to achieve an accelerated pace of development projects. In the urban centre therefore, communities are not easier and simpler to mobilize because of high level of individualism and most of the government projects concentrated in urban centres.

The study have found that no sustainable projects as a result of community participation in the provisions. The study equally found that no projects reflected community felt-needs that has grade achievement in the communities, this is as a result majority of the communities thought initiation, implementation, evaluation and maintenances' of community development projects are the sole responsibility of governments.

by the community fully participated in constructions of Bridge and Maternity, the community contributed 1% financially, provided with all needed water, sand, gravels, and unskilled labour which actually reduced the project's cost. The study however, identified that communities do not actively participated in decision making process of their areas. The initiators, implementers and evaluators are government officials or so called experts. The felt needs or problems of communities are better identified by the communities themselves rather than outsiders.

The study found that the failure of development projects largely attributed to the inability of government to create opportunities for people to actively participate in initiation, implementation and evaluations of heath and water supply facilities in the selected communities. As a result some facilities are not acceptable, workable, sustainable, achievable or profitable to the communities or beneficiaries.

The basic problems facing these communities are; the low level of education which denied them to understand the policy process, most people do not have idea of community participation in projects initiation, implementation and evaluation at the government level. Lack of access to information in the areas visited, the study however, revealed that information available on government projects, programmes and service are difficult to obtain and interpret and the local government officials are not doing enough to promote community participation in process. With the intervention of LEAD in some places, communities

organised and mobilised to fully participated in projects initiations, implementations, evaluations and maintenances. The study therefore, acknowledged that rural communities participated relatively well in a project than those in the urban centres. In the urban centres there is high level of individuality. Unlike rural communities who bounded by a strong social system are easier and simpler to be mobilized to achieve an accelerated pace of development projects. In the urban centre therefore, communities are not easier and simpler to mobilize because of high level of individualism and most of the government projects concentrated in urban centres.

The study have found that no sustainable projects as a result of community participation in the entire communities under-study except in Gidirgi as a result of intervention of donor agency. The study equally found that healthcare and water supply projects reflected community felt-needs but have less grade achievement in the communities, this is as a result majority of the communities have not participated in initiation, implementation and evaluation of community development projects.

5.8 General Findings:

a. The result of the Qui-sguire using SPSS shows that, an increase in one variable will lead to the increase in the other variable. That is to say,an increase in the community participation and support will lead to the sustainability of the project.

b. Based on the series of interviews conducted, questionnaires administered as well as observation made in the field, the study found that no framework designed at Local Government meant to encouraged community participation in development process and even the one designed by the World Bank is not practically apply by the Local Government. Most

of the service providers in Bauchi Local Government have failed to realised community problems and need community input for lasting solution of their problems.

c. The study however discovered that, most of the projects are given on the bases of contracts by the local government and therefore restricting community involvement in the projects cycle. That is, at the projects initiation, formulation, implementation and evaluation levels. It impedes community ownership & project-sustainability in the communities.

d. The study found that there is great discrepancy between felt-needs as seen by the local government officials and agents of external bodies of community members, in the communities understudy.

e. The study therefore, discovered that local initiative on a community priority neglected in most cases by local government service providers which lead to the un-sustainability hence, abandonment of most projects at the local government.

f. The study generally discovered that, almost all the projects provided by the local government do not reflect community felt-need, even if they do, the community can not influence the outcome of the projects.

CHAPTER SIX

Conclusion, Summary and Recommendations

6.1 Introduction

This chapter presented the summary and conclusion of the study. However, on the basis of findings of this study, recommendations were also made in line with the findings in chapter five.

6.2 Summary

Participation and Sustainability are the concepts that occupy a central place in the world of development. Though participation has been the buzzword and catchphrase known mostly to donors and aid agencies (both international and local) including international government organisations, today, some government development programmes and projects are beginning to apply participatory approaches which have not only increased inter-disciplinary interest but have also exerted influence in development policies, programmes and project initiation, planning, implementation as well as monitoring and evaluation both at micro and macro levels. It is on this note that we evaluated the efforts of Bauchi Local Government in promoting community participation which is an imperative and important ingredient that facilitate project sustainability.

Based on the data presented and analysed, the following have been summarised which are also the major findings of the study.

- a. Community sensitisation, mobilisation and capacity building were undertaken in the projects with greater efforts to ensure sustainable development being made in project

provided by donor agencies, but the one provided by the local government more and more need to be done in this aspect.

b. Community empowerment and participation as well involvement in decision making process has generated the feeling of community ownership of bridge, boreholes, and health facilities in Gidirgi community which in turn has increased community valuing and commitment to the projects.

c. Projects sustainability is not only dependent on the level at which communities are involved in the entire project cycle, but it is an interplay of factors including the financial, manpower training and material capacity as well as prioritise community felt need and building confidence in the community.

d. The more commitment of people in the projects the more sustainable it becomes. This is so in light that it will serve as training of the individual members of the community like in Gidirgi community.

6.3 Conclusions

In view of the outcome of data collected, presented and analysed as well as the hypotheses tested, the study concludes that no meaningful development project or programme either by the government, NGOs and/ donor agencies should be implemented without adequate community participation or involvement in the entire project cycle from initiation, implementation, monitoring to evaluation of outcome of projects. Community participation in development projects that affect their lives and wellbeing is thus advocated for as an important ingredient and lubricant which stimulate project sustainability. This is because community empowerment and participation of beneficiaries and/ or stakeholders in

development projects that concerns them tends to generate a sense of trust and confidence which promote ownership of the project to which the end result is its sustenance.

To this end, the notion of seeing communities as beneficiaries should be discarded; they should be regarded as stakeholders and be seen from the conception to the delivery as well as monitoring and evaluation of project as potentials and development partners where their local knowledge and competence should be developed, built and utilised to enhance their involvement in order to make them see the project as theirs, project, maintain and ensure its continuity functioning and sustenance after the outsider withdraw its support.

More importantly, project sustainability is not just a function of community participation alone, it is interplay of many factors including the interest of the project provider, the technical capacity and financial potentials of benefiting communities as well as the immediate felt need of the people. However, to ensure community participation in any development project, there is the need to do some level of community sensitisation and mobilisation, built their capacities, empower them so as to generate a sense of ownership of the project which will serve to engender its sustainability and reduce the chances of waste, failure and abandonment of useful and cherished development projects or programmes.

6.4 Recommendations

The essence of research has always been to find solutions to existing as well as perceived problems. Therefore, in line with the findings of this study, we recommended that:

a. In any local government framework for Sustainable Development Process at Community level, there is need to effectively involve community members and view them as best partners in creating solutions to existing or perceived community problems. This is because some problems in community needed community resolutions and responses. There

are some health initiative like polio and reproductive health which in most case do not have general acceptability, workability. Sustainability, profitability in places visited because of their belief, attitude culture and religions extra. In this context, professionals need to learn new skills; such as adults-learning approaches, conflict resolution, cross-sector collaboration, cultural sensitivity and participatory research and evaluation. The programme professionals must respect the people whom they will implement the project and appreciated their cultural context, where recognizant of the benefit of learning from communities, give community decision making authority and charged course as circumstances evolved. This will certainly encourage and promote community participation in development process.

b. Local Government Programme Staff or external bodies should facilitate rather than direct the programmes in the community and should strike for sustainability through community driven decision and actions. Programmes facilitators should ensure that communities participate in initiation, implementation, evaluation and benefits of projects and more importantly they (facilitators) must ensure that the least powerful in communities are well-integrated and represented in leadership positions.

c. Community needs as perceived by the people must be as-certain and respected. When a discrepancy exists between needs as seen by the local government officials and agents of external bodies, ways must be sought to close the gap.

d. Service providers should embark on projects that will encourage community participation these can be done through consultation and by embarking on projects started the community.

e. All projects to be implemented in community by government of any level should reflect felt-needs of the community.

6.5 Contribution to Knowledge and Suggestion for Further Studies

In literatures and empirical studies reviewed, little or no effort has been made to undertake a research with a dynamic dimension as this by breaking down the variables and indicator of community participation and project sustainability for clear understanding of the concepts and for easy collection and analysis of relevant data. These therefore make this research novel and have contributed immensely to existing body of knowledge in the field development, both in theory and by implication in practice.

In view of the contribution of the study to knowledge, we humbly acknowledged the limitation of time including methodology though not to the detriment and quality of this research document, and therefore suggest further studies to focus principally on “the Role of Local Government in Project Sustainability, the Role of NGOs in Project Sustainability, Impact of Capacity Building, Community Empowerment, Impact of Empowerment and Participation on Project Sustainability”.

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Appendixes:

Appendix I:

Interview Schedule for Local Government Officials

1. Can you please briefly tell us how healthcare and water supply projects implemented by the the local government from 2012 to 2017 in the selected communities?
2. In what level of the project-cycle, the community participated?
3. What was the level of community involvement in the initiation of the projects?
4. What training did the community receive concerning the projects?
5. At the level of planning (decision making, sharing of responsibility), what were the contributions of the community to the projects?
6. At the level of implementation (resource utilisation), what were the contributions of the community to the projects?
7. What is the monitoring and evaluation arrangement for the projects?
8. How would you describe community satisfaction with their level of participation in the projects?
9. Who really benefited from these projects, and how (impact of the projects)?
10. What is the maintenance arrangement for the projects?
11. How do you see these projects in years to come (its sustainability)?

12. What do you think are the challenges and threats to continued survival (sustainability) of the projects?
13. Is community participation responsible for sustainability of these projects?
14. What are the plans to ensure that these projects will continue to be functional and operational for a long period to come?

Appendix II:

Interview Schedule for Some Community Members in the ten (10) Selected Communities of the Local Government Areas

1. Can you please briefly tell us about the healthcare and water supply projects implemented by the local government or any of the service providers from 2012 to 2017 in which your community participated in?
2. In what level of project-cycle your community involved in these projects?
3. What was the level of the community involvement in initiation of the projects?
4. What training did your community receive concerning the projects?
5. At the level of planning (decision making, sharing of responsibility), what were the contributions of your community in the projects?
6. At the level of implementation (resource utilization), what were the contributions of your community in the projects?
7. What is the monitoring and evaluation arrangement for the projects in your community?
8. How would you describe community satisfaction with their level of participation in the projects?
9. Who really benefited from these projects in your community, how (impact of the projects in your community)?
10. What is the maintenance arrangement for these projects in your community?

11. How do you see these projects in years to come (its sustainability) in your community?
12. What do you think are the challenges and threat to continued survival (sustainability) of the projects in your community?
13. Is community participation responsible for sustainability of these projects?
14. What are the plans to ensure that these projects will continue to be functional and operational for a long period to come in your community?

Appendix III

Questionnaires for the Projects

Department of Local Government Studies,

Faculty of Administration,

Ahmadu Bello University, Zaria.

Dear Respondents,

I am a postgraduate student from the above department, faculty and institution carrying out studies on the topic, “Community Participation and Sustainability of Healthcare and water supply Projects in the selected Communities of Bauchi Local Government Area, Bauchi State.” The questionnaire is meant to elicit responses and gather information that will enrich studies. Note that any information provided will be treated confidential and used only for the purpose of this studies.

Thank you.

Yours faithfully,

Yunusa, Idris

Please tick [] where applicable in the boxes provided at the end of each question.

Section A: Bio-Data of Respondent

1. Gender:

a. Male []

b. Female []

2. Major Occupation:

a. Farmer []

b. Trader []

c. Civil Servant []

d. Student []

3. Age: []

a. 18-25 []

b. 26-35 []

c. 46-55 []

d. 56 and above []

Section B: General Participatory Activities Involving the community in the Projects

1. Did community sincerely and effectively participate in initiation and implementation of healthcare and water projects?

a.. Yes []

b. No []

2. Are the healthcare projects provided in between 2008 and 2013 sustainable as a result of community participation?

a. yes []

b. No []

3. Are the water facilities provided in between 2013 and 2018 Sustainable as a result of community participation?
4. a. yes
5. b. No
6. Has the Local Government ever involved your community or Associations in formulating and implementation of healthcare and water projects?
7. a. yes
8. b. no
9. What role the Local Government assigned to your community and or Associations in implementing healthcare and water projects?
- a. Un-skilled labour & protection
- b. Financial contributions & good ideas
10. Who are the financiers of healthcare and water projects in your community? A. Local Government b. LG and community.....
-

Information about Sustainability Issues

11. Are healthcare and water projects sustainable as a result of community participation in the provisions at the Local Government Areas?
- a. Yes
- c. No
12. How did the Local Government intend to achieve the projects earmarked in the healthcare and water supply programme?
- a. Direct-labour
- b. contract

13. What role has the Local Government assigned to your community in maintain healthcare and water projects?.....
.....

14. How has your community and Associations played the role?.....
.....

15. What challenges did your community or Associations faced in maintaining the healthcare and water projects?.....
.....

Information about community felt-needs

16. How did the Local Government get to know the needs and aspiration of your community?.....
.....

17. If Local Government projects reflected community felt-needs, can they be successful?
b. Yes []
c. No []

18. How has your community contributed to the projects reflected their needs?.....
.....

19. What success recorded by the Local Government on projects reflected the community felt-needs?
a. Positive []
b. Negative []

20. Has the Local Government ever implemented and recorded grade success on projects reflected community felt-needs?
a. Yes []
b. No []

Information about Grade Achievement

- 21. What are healthcare and water projects tend to achieve in your community?.....
.....
- 22. How Local Government simply and easily achieved goals and targets of healthcare and water projects in your community?
 - a. With community involvement []
 - b. Without community involvement []
- 23. Can one say projects of healthcare and water supply projects are easily achievable in your community through Local Government and community collaboration?
 - a. Yes []
 - b. No []
- 24. What challenges faced by the local Government and community in provisions of healthcare and water facilities in the communities?.....
.....
- 25. How the identified challenges can be overcome?.....
.....

Appendix IV:

Checklist of Issues for Observation

1. Facilities in the project
 - Physical facilities
 - Equipment
2. Community access to the project
 - a. The terrain of the community
 - b. Distance to the facilities
3. Utilization of the project
 - Number of people using the facility
 - Regularity of the facility
4. Maintenance of the project
 - a. Supply of the equipment
 - b. Supply of physical facilities
 - c. Care for the equipment, physical facilities and environment
5. Functionality of the project
 - Regular use of equipment and physical facilities
 - Efficiency of the equipment and physical facilities

QUESTIONNAIRE FOR OFFICIALS AND COMMUNITIES OF BAUCHI LOCAL GOVERNMENT REA

Department of local Government and Development Studies; Faculty of Administration
Ahmadu Bello University Zaria.

Researcher Idris Yunusa

Email: idrisgumale7@gmail.ComGSM 07064926646/ 07086666239

Place..... Date Time

Purpose of research

We are doing a Survey that is part of a Masters research by Ahmadu Bello University Zaria. We study areas of community participation in Development process in some selected communities of Bauchi local Government Area; Bauchi State, Nigeria. There no right or wrong answers; we just want to know your personal views. This questionnaire is anonymous, all answers will be kept confidential and results will only be used for a general discussion.

A. Demographic Profile:

1. Sex
2. Occupation
3. Educational status
4. Age bracket; 30-40, 40-50, 50-65
5. Marital status
6. Political Parties

B. General Information about community participation in development process in Bauchi Local Government Area.

26. Did community sincerely and effectively participate in initiation and implementation of healthcare and water projects? A yes b No
27. Are the healthcare projects provided in between 2008 and 2013 sustainable as a result of community participation? A yes B No
28. Are the water facilities provided in between 2013 and 2018 Sustainable as a result of community participation? A yes B No
29. Has the Local Government ever involved your community or Associations in formulating and implementation of healthcare and water projects? A. yes b. no
30. What role dis the Local Government assigned to your community and or Associations in implementing healthcare and water projects?
31. Who are the financiers of healthcare and water projects in your community? A. Local Government b. LG and community.

Information about Sustainability Issues

32. Are healthcare and water projects sustainable as a result of community participation in the provisions at the Local Government Areas?
33. How did the Local Government intend to achieve the projects earmarked in the healthcare and water supply programme? A. Direct-labour b. contract
34. What role has the Local Government assigned to your community in maintain healthcare and water projects?
35. How has your community and Associations played the role?
36. What challenges did your community or Associations faced in maintaining the healthcare and water projects?

Information about community felt-needs

37. How did the Local Government get to know the needs and aspiration of your community?

38. If Local Government projects reflected community felt-needs, can they be successful?
39. How has your community contributed to the projects reflected their needs?
40. What success recorded by the Local Government on projects reflected the community felt-needs?
41. Has the Local Government ever implemented and recorded grade success on projects reflected community felt-needs?

Information about Grade Achievement

42. What are healthcare and water projects tend to achieve in your community?
43. How Local Government simply and easily achieved goals and targets of healthcare and water projects in your community?
44. Can one say projects of healthcare and water supply are easily achievable in your community through Local Government and community collaboration? A. yes b. no
45. What challenges faced by the local Government and community in provisions of healthcare and water facilities in the communities?
46. How the identified challenges be overcome?

QUESTIONNAIRE FOR PRINCIPAL OFFICERS OF THE LOCAL GOVERNMENT

Department of local Government and Development Studies; Faculty of Administration
Ahmadu Bello University Zaria.

Researcher Idris Yunusa

Emai: idrisgumale7@gmail.Com

GSM07064926646

Place..... Date Time

Purpose of research

We are doing a Survey that is part of a Masters research by Ahmadu Bello University Zaria. We study areas of community participation in Development process in some selected communities Bauchi local Government Area, Bauchi State. There no right or wrong answers; we just want to know your personal views. This questionnaire is anonymous, all answers will be kept confidential and results will only be used for a general discussion.

C. Demographic Data:

7. Sex
8. Occupation
9. Educational status
10. Age bracket; 30-40, 40-50, 50-65
11. Marital status
12. Political Parties

B. General Information about community participation in development process in Bauchi Local Government Area.

1. How are projects implemented at Local Government level?
2. Who and who are involved in the process? (Initiation, formulation and approval).
 - a. Community-members/community-leaders
 - b. Only service providers
3. What was the healthcare situation before the local government initiated healthcare programme?
4. What are the objectives of the programme (on healthcare) for the local government area?
5. What was the water supply situation in the local government area before the local government implemented the water supply programme?
6. What are the objectives of the water supply programmes?
7. What specific projects did the water supply programmes intend to achieve?
8. What specific projects did the healthcare programmes intend to achieve?
9. How did the Local Government intend to achieve the projects earmarked in the water supply and healthcare programmes (direct labour or contract)?
10. What was the cost of the cost of implementing the projects (Healthcare and Water Supply)?
11. How far have the projects been implemented?
12. Who are the financiers and how much has each financier contributed to the project-implementation?

Questionnaire FOR COMMUNITY-MEMBERS

Department of Local Government and Development Studies; Faculty of Administration
Ahmadu Bello University Zaria.

Researcher Idris Yunusa

Emai: idrisgumale7@gmail.Com GSM 07064926646

Place..... Date Time

Purpose of research

We are doing a Survey that is part of a Masters research by Ahmadu Bello University Zaria. We study areas of community participation in Development process at local Government area of Bauchi, Bauchi State. There no right or wrong answers; we just want to know your personal views. This questionnaire is anonymous, all answers will be kept confidential and results will only be used for a general discussion.

A. Demographic Data:

- 13. Sex
- 14. Occupation
- 15. Educational status
- 16. Age bracket; 30-40, 40-50, 50-65
- 17. Marital status
- 18. Political Parties

D. General Information about community participation in development process in selected communities Bauchi Local Government.

1. Has the Local Government ever involved your Community or Association in formulating and implementation of healthcare and water
2. Who and who are involved in the process (initiation, formulation and approval).
3. Supply projects? Yes or No
4. If yes, tell us how, the name(s) of projects and when.
5. If No, tell us why.
6. What was the Healthcare situation in your Community before the current projects by the local government?
7. How did the Local Government get to know about the situation before implementing the projects?
8. What was the water supply situation before the Local Government implemented the water supply projects?
9. How did the local Government get to know before implementing the projects?
10. What role did the Local Government assign to your community and or Association in implementing Health care and water supply projects?
11. How far has your community and or Association played that role?
12. What role has the Local Government assigned to your community in maintaining the Health care and Water Projects?
13. How far has your community and or Association played that role?
14. What challenges did your community or Association face in maintaining the Health care and water projects?

Appendix

Checklist of Issues for Observation

1. Facilities
 - a. Health centre's infrastructures and working facilities
 - b. Equipment
 - c. Locations and availability of water projects
2. Community access to the project
 - a. The terrain of the community's environment
 - b. Distance to the family to the health centres and water projects
 - c. Proximity of the household to the health centres and water supply projects
3. Utilization of project facilities of two projects
 - a. Number of people using the two projects facilities
 - b. Regularity of use of the two projects facilities
 - c. Care for the equipment; physical facilities and environment of two projects
5. Functionality of the project
 - a. Regular use of equipment and physical facilities of the two projects
 - b. Efficiency of the equipment and physical facilities for both water supply projects & health centres
4. Maintenance of the two project's facilities