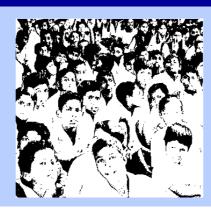


# Good Urban Governance in South Asia (GUGSA)







**Program Overview and Compilation of Case Documents** 





# Good Urban Governance in South Asia (GUGSA)

DOCUMENTATION OF CASE STUDIES
BANGLADESH

Good Urban Governance Practices in Bangladesh – Case Studies of Kushtia & Tongi

Prepared by DEVCONsultants Limited



Good	Urban	Governance	in	Bang	lades!	h

A Case Study of Best Practicing Municipalities
November 2005

Good Urban Governance – South Asia (GUGSA) Project

U.S. Agency for International Development (USAID)

### Good Urban Governance in Bangladesh

## A Case Study of Best Practicing Municipalities

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#### LIST OF ACRONYMS

**BBS** : Bangladesh Bureau of Statistics

**BSTI** : Bangladesh Standards and Testing Institute

CBOsCommunity Based OrganizationsCCCCentral Coordination Committee

**CCDB** : Christian Commission for Development in Bangladesh

CDC : Community Development Committee
CIB : Community Investment Business
COP : Covernment of Panels deek

**GOB** : Government of Bangladesh

**GUGSA** : Good Urban Governance in South Asia

HRD : Human Resource DevelopmentIGA : Income Generating Activities

**LGED** : Local Government Engineering Department

**LPUPAP** : Local Partnership for Urban Poverty Alleviation Project

MoH&FW : Ministry of Health & Family Welfare
NGOs : Non-Governmental Organizations
PCC : Project Coordination Committee

**PG**: Primary Group

**PIC**: Project Implementation Committee

**SAARC** : South Asian Association for Regional Cooperation

**UN** : United Nations

**UNDP** : United Nations Development Programs

**UNICEF**: United Nations International Children's Emergency Fund

**USAID** : US Agency for International Development

# Good Urban Governance in Bangladesh A Case Study of Best Practicing Municipalities

#### INTRODUCTION

Bangladesh is one of the most densely populated countries in the world. The country witnessed a rapid expansion of its urban base from 8.21% to nearly 25% between 1974 and 2003, where 33.75% out of 140 million of the total population is living in urban areas. UN estimates suggest that by 2030 the urban population is likely to cross the 80 million mark. With around 12.5 million people in 2001, Dhaka alone contains nearly 40% of the total urban population of the country. Recent estimates place the population of poor in Bangladesh at 60.9% of the total. Poverty is widely recognized as a multi-dimensional problem involving income, consumption, nutrition, health, education, housing, crisis-coping capacity and insecurity.

In order to address the growing and basic needs of urban population through alleviation of poverty, a series of development projects have been undertaken over the last decade, funded both from national and international sources. However, those projects could hardly meet the requirements of the urban poor. Although, in terms of investment, the amount spent in those development projects was not negligible, the government of Bangladesh and international donors agree that the projects would have had more impact if good governance practices had been exercised.

This study was carried out in March 2005 as a part of Good Urban Governance in South Asia (GUGSA) Project of USAID's Regional Urban Development Office (RUDO). This encompasses the objectives of assessing and disseminating practices of governance principles to improve the 'response capacity' for dealing with the problems and issues associated with accelerated urban growth, and to meet the increasing demands for essential services within the territories. The report contains the precise stories and lessons learned on current practices regarding principles of Good Urban Governances by two municipalities in Bangladesh, Kushtia and Tongi.

### Objectives and Scope of the Case Studies

The general objectives are to ascertain, analyze, document and disseminate the extent of urban good governance by the selected municipalities through their development projects. It also measures the extent of sustainability and replicability of the practices of accountability, transparency, participation, rule of law and predictability into the

areas of institutional strengthening to address poverty and social justice as a whole among the communities in low-income urban settlements.

#### **Selection Process of the Case Studies**

The study involves a comprehensive and sequential process/ methodologies in identifying the best practicing municipalities. The process was completed in two major stages involving project partners and community participants, with active facilitation from a highly professional team of consultants. At the first stage, two best practicing municipalities were identified from a long list of two hundred municipalities using a set of criteria such as population size, population growth rate, per capita total revenue, per capita capital expenditure and program coverage. In the second stage, a detailed and in-depth study was conducted with active involvement of project partners, stakeholders and community participants in the study areas.

# Case 1: Kushtia Municipality

## Local Partnership for Urban Poverty Alleviation (LPUPA) Project

The LPUPA Project began in 1998. Kushtia municipality started implementation of its revised second phase jointly with UNDP from July 1999, with an aim of empowering the urban poor and alleviating poverty. The project involves a holistic "bottoms-up" approach to poverty eradication through urban community organizations, capacity building of local communities and establishing and strengthening linkages between the poor communities and the private sectors, with local government and non-government service-providers and policy-makers. The project follows a fundamental principle of decision-making: every decision is to be made at the lowest operational level, as major project activities are undertaken at the community level. The Local Government Engineering Department (LGED) together with Municipality under the Local Government Division is executing the project.

At the municipality level, a project coordination committee was formed to undertake planning, coordination and monitoring of the project activities. This committee comprised of individuals and representatives from the Municipality, LGED, MoH&FW, Primary Education Department, Social Welfare Department, Women & Child Directorate, DPHE, NGO Umbrella Organization, local UNDP office and from other relevant organizations. Private and other Development Organizations like UNICEF. Social Mobilization or Community Organization, Capacity Building, Community Exchange Program, Community Development Fund for Community Contracts, Income Generating Activities (IGA), Local Government Responsiveness to the Urban Poor and Resource Mobilization are major components of the project.

The project has adopted a large variety of participatory tools including Participatory Urban Appraisal (PUA) for social mobilization and forming community-based organizations (CBOs). A total of 33 Community Development Committees (CDCs) have been formed that consists of 228 primary group members. They represent 4,106 households and a total of 19,355 people from low-income settlements.

# Char Kuthipara Community Development Committee: The Specific Case Study

#### **Current Scenario after CDC Intervention**

The Community Development Committee (CDC) in Char-Kuthipara, has operated for four years, having been officially formed on 2 December of 2001. It is located in the Ward No. 3 of the Kushtia Municipality. The household pattern in the Char-Kuthipara slum looks comparatively better than other areas. With approximately 500 houses owned by about 310 families located on 7-8 acres of land, it constitutes a densely populated area in the town. There are 10 full brick buildings, 50 houses are with brick-wall and tin-sheet roofs, 150 houses are fully made out of corrugated tin sheets and 290 with bamboo-walls and tin-sheet roofs. Most of the land in the settlements is privately owned. Of the individuals living in this community, 37% are female adults; 26% are male adults and 37% are children under 12 years of age. The male-female ratio in this settlement indicates an unfair distribution of population as compared to the national scenario. Since the number of adult females is comparatively higher than males and since many households are headed by women (20%), this community is a place where women carry an unfair economic burden.

The study shows that the majority of the

population is comprised of day laborers (42%), while 11% of the populations are women working as maidservants in neighboring wealthy areas. Public and private institutions employ only 5.3% and 2.6% of the population work in small businesses, while more than 6% of youths in the slum are unemployed. According to the Bangladesh Bureau of Statistics, the district level per-capita income of the community in 2001 was Taka 16,546 (US\$329), as compared to the national average of Taka

"We became confident on our unity and strength, and decided to use that in a partnership business"

- Mr. Selim, President of Char Kuthipara CDC

A partnership enterprise named "Community Investment Business" (CIB) was formed on July 1, 2004, consisting of 18 women and 2 men to produce and sell powdered spices. Members came from 3 neighboring CDCs. They registered the CIB with the local Kushtia Municipality as a group with the purpose of empowering women to improve their economic condition.

In December 2004, members took a loan from their primary savings and credit groups to form a capital fund of Taka 40,000. The male partners visit the rural markets to obtain raw materials at the best prices. The female partners undertake the processing of raw materials (e.g. crushing, finishing and packaging). Relevant CDCs take initiative for selling the CIB products. CIB leaders acknowledge that the project helps them to organize people into community groups and it shows the strength of people's organization and collective efforts.

The CIB earned an average of 10% profit after the first 4 months of operation. Recently it developed a proposal for business expansion and subsequently submitted it to UNDP through the LPUPA Project and to Kushtia Municipality for funding of Taka 2 million. Upon receipt of the fund, the CIB intends to expand its business and market share to maximize profits and achieve organizational goals.

24,598 (US \$421). In Char-Kuthipara only 4% of slum dwellers can secure an annual average income of Taka 48,000; 6% of households earn Taka 36,000-48,000; 16% of households earn Taka 24,000-36,000 and the remaining 74%, struggle to earn Taka 9,000-15,000 per year, which is less than the minimum requirement for managing a per capita calorie intake level as low as 1805. To meet this basic calorie requirement, a family needs an income of at least Taka 31,200 per year. Hence, most people living in the community fall below the poverty line.

Char-Kuthipara settlement has an overall literacy rate of 88% (1680 out of 1900 persons can at least write his/her name), compared to the national rate of 65%. The enrollment of students from the community is significantly improving. The CDC has undertaken a number of training programs for skills and capacity building of its members and beneficiaries. They have provided leadership training to 4 members, gender training to 4, financial management training to 2, group management training to 20, poverty alleviation training to 4, life skills (technical and vocational) training to 8 members and other community level beneficiaries.

Char-Kuthipara is one of the most densely populated settlements in the town. It has only single and narrow passages inside. During the last two years, a total of 5 kilometers of inside roads have been constructed, of which CDC contributed for 2 kilometers of earth-works using their own funds. Kushtia municipality allocated funds for the rest.

During the last 4 years of the project, water facilities and sanitation conditions have been significantly improved in the Char-Kuthipara area. The CDC took measures for increasing coverage and use of sanitary latrines, drainage, tube-wells and waste bins for promoting behavior changes and a safer environment. They have increased access to the existing government and non-government services related to essential health. The project provides basic information regarding existing health services, particularly for the women and children to increase community awareness regarding available services, as well as fulfilling their rights.

Most of the community households have electric connections. No households in the area have landline telephones; however, more than 50 individuals use personal cellphones. All households of the slum have to use fuels like firewood, kerosene or concentrated gas for household purposes.

Char-Kuthipara slum has a community center, constructed by a NGO named CCDB, which is also used as an informal primary school. Community members use this center on various social occasions, but they still have no specific community-based facilities to be used for recreational purposes.

### Community Scenario before forming CDC

The community is comprised of internally displaced and migrated people from rural areas, who lacked unity prior to the formation of the CDC. This limited the community's ability to bring about positive changes in its overall socio-economic status and habitat. Lack of employment opportunities, natural disasters (e.g. river erosion) and other socio-political deprivations (e.g. divorced women, families evicted from homesteads, etc.) push rural people into the urban low-income settlements. There are major deficiencies in basic urban services provided in and around this area, including lack of access to safe drinking water, poor roads and by-roads, limited electricity and fuels, insufficient surface drains or waste disposal systems and few sanitary latrines, apart from limited information and education programs. Moreover, while communication networks and services are instrumental in bringing about changes in economic conditions, the community people did not have access to telephone, energy or the local market for promoting economic enterprises.

# CHANGE FACTORS IN PEOPLE'S LIVES AND LIVING CONDITIONS

The LPUPA Project of Kushtia Municipality has been performing as a replicable role model. It achieved predetermined objectives of creating a sustainable process of supporting people's efforts to overcome poverty and for mainstreaming policies of urban governance. It has created a substantial effect on the municipal service delivery system, basic infrastructure improvements and on overall socio-economic condition of the urban communities.

The increasing response capacity of the local municipality to the needs and priorities of the low-income settlements is resulting in significant changes in the lives of the community in terms of health, hygiene, safety, security and a development-enabling atmosphere through the establishment of a substantial number of sanitary latrines, tube-well, bathing places, drainage and waste bins, roads and walkways and facilitating processes of administering rule of laws.

The study clearly indicates that the current unemployment rate is only 6%; 60.41% of the slum dwellers are engaged in different income-generating activities and occupations including day labor, small enterprises, government and non-government services etc. It also suggests that through participation in the primary group and CDC activities, the community is becoming more organized and gaining a sense of ownership of the implementation processes and its outputs.

# Case 2: Tongi Municipality

# Supporting Households Activities for Hygiene, Assets and Revenue (SHAHAR) Project

The SHAHAR project started at the end of 1999. After the successful completion of the first phase of direct implementation in 2003, the current monitoring and follow-up phase is scheduled to be completed by 2010. This is one of the 4 projects under the PL 480 Title II Integrated Food Security Program (IFSP) of CARE Bangladesh supported by USAID. The project works through five major paradigms (community mobilization, institutional strengthening, income generation, health-hygiene and nutrition and minor urban infrastructure), all of which are delivered through partnerships with local NGOs and the Pourashava (Municipal Authority). It is one of the largest urban pilot projects in the world, with an annual budget of approximately USD 3 million, over a 5-year period.

The overall goal of the project is designed to achieve the objectives in its operational areas: to protect and promote household income and community resources and assets; to improve hygiene and maternal childcare practices of vulnerable groups; and, to create effective and sustainable institutional support mechanisms. The ultimate goal of the project is to protect and promote food and livelihood security of the urban poor and vulnerable households in high-risk urban areas of Bangladesh.

The operational framework of the project allows community-based organizations to maintain an administrative and financial relationship with the Municipality through their central federation, the Community Development Forum (CDF). The Engineering Division of the municipal authority directly supervises project activities being guided and supported by the Chief Executive Officer (CEO). CARE Bangladesh provides technical and financial support to the grassroots project stakeholders e.g. CBOs, their federations and the partner NGOs in consultation with the CEO and Municipal Chairman.

The project activities are designed as an integrated set of interventions keeping within the Household-Livelihood-Security framework (HLS). It is comprised of 4 discreet but integrated sets of activities: Community Mobilization and Institutional Strengthening (CMIS), Income Generating Activities (IGA), Health, Hygiene and Nutrition Activities (HHN) and Minor Infrastructure (MI). The SHAHAR project is an integrated project to be coordinated among seven principle stakeholders: LGD of MoLGRD&C/GOB, USAID, LGED, CARE Bangladesh, Tongi Municipality, Partner NGOs and CRMCs.

# Ershad Nagar Community Resource Management Committee (CRMC): The Specific Case Study

Community Resource Management Committees (CRMCs) are the local community-based organizations, and the Community Development Federation (CDF) is a municipality-based apex organization comprising of different CRMCs (76). The municipality-based CDF is registered with the Government's Social Welfare Department and is acting as the central coordinating body among all CRMCs and other development partners.

#### Current scenario after CRMC intervention starts

#### **Major Organizational Activities of CRMC:**

Organizational: inform community people about the organizational goals, objectives, activities, importance and establish an organizational identity. This also includes the identification of local problems, mobilizing local communities and resources, creating issue-based local movement, etc.

Social Development: Identification: local issues, planning for community development, undertake infrastructure development activities, arbitration, assist community people to increase access to municipal services, create mass awareness on education, health, women empowerment, dowry, violence against women, child-marriage, child rights, anti-trafficking, etc.

Economic: fund-raising, expenditure for development activities, fund management, accounting and financial evaluation of the organizational activities.

Activities related to institutional capacity building: training needs assessment, planning and mobilizing training for the CRMC members. That includes training on leadership development, building liaison and network with local service providers, training on infrastructure maintenance, environment & development, women and children rights, financial management, human rights – social justice and good governance, etc.

The CRMC is located in Block-4 the largest low-income settlement widely known as Ershad Nagar under Tongi Municipality. This settlement constitutes 1,130 households with a total of 5,475 people, among which 1315 are male, 1455 are female and 2710 are children under the age of 12. There 1127 Muslim are households. Christian two families and one Hindu home in the area.

According to the local people, this area began to evolve during post-liberation war the Bangladesh in 1971, and became a full-sized, urban low-income settlement in 1974. Most of the people presently living in Ershad Nagar came from different slum of Dhaka areas City Corporation. Major reasons of their move here was eviction and periodic land acquisition by the government. The regional migration has been mostly due

to river erosion, unemployment, and various types of social or political deprivation including exploitation, violence against women, divorce and eviction. The municipality owns the entire parcel of land on which the settlement has developed, but plot-wise positions are leased-out to selected households. Perhaps due to the ownership pattern, most houses are temporary structures; these include 554 tin-sheet houses, 145 brick-

wall and tin-roofed and the rest with bamboo fencing.

During an assessment conducted by the SHAHAR Project last year, it was found that only 5% of households represent middle-economic earning an average monthly income 7000-8000; while 15% of Taka represent the lower middle class and 80% represents the extremely poor, who can hardly earn an average of Taka 3000-4000 and Taka 1000-2500 respectively. People living in the lowincome settlements have better economic opportunities than those living in other areas of the country. Nearly 20% (1050) of the community, mainly women, are engaged in the neighborhood garment industries. Another 27% of households run small income- generating enterprises.

From an educational perspective, the Ershad Nagar Block 4 community is better than most, with only 2% illiterates. Approximately 80% have been able to cross the primary level (Class I – V), 15% the secondary level (Class VI – X) and 3% obtain higher



Entrepreneur: Ms. Rahima Begum, Age: 35 Husband: Mr. Nuru Bepari Plot No. 125/A Ershad-Nagar, Tongi

Origin: Resettled from Bikrampur under Munshiganj district through getting married to an inhabitant of the slum.

Rahima's husband lost his job in 1996, and they became helpless. Earlier Rahima had bought a cow using the family savings in 1992, and now selling the milk of the cow was her only income source. It was really hard to maintain a family of three with this earning. So she somehow managed a small loan from TDH in 1997, and bought another cow and a rickshawvan for her husband. Over the time her family demand increased, and she then got involved in the CRMC group activities.

Success began when Rahima started group savings, got loans from the CRMC and made proper uses of the loan. Now her average monthly income and expenditure is 9 and 7.5 thousands respectively. Rahima has now 8 cows, among which 2 are giving milk. She has bought 15 decimal lands in Gazipur. Now her family is living in a brick-constructed house having good quality furniture and facilities.

Rahima and her family have increased access to education and information. They all have knowledge about health and hygiene practices. They brought positive changes in their food habits and behavioral practices, which led to a better-off livelihood.

secondary and above education. Presently the CRMC uses a community center building for a non-formal primary school in the daytime, and organize adult literacy classes at night, supported by the Project.

Ershad-Nagar CRMC facilitated diversified entrepreneurship in at least 44 trades in order to create employment opportunities for people of the community. Moreover, a

total of 150 community entrepreneurs have been provided with different vocational trainings by the Project. An additional 958 CRMC and Primary Group members have participated in various skills development training. A total of 779 IGA group members have been trained in the areas of IGA (income generating activities), accounts management, leadership development, advocacy, demand mediation and good governance. All these vocational and skill development-training programs have significantly contributed to develop social capital in the community.

Currently, there are about 13 kilometers of access roads and footpaths inside the Ershad Nagar settlement, among which the Municipality and CARE Bangladesh constructed 8 and 5 kilometers respectively. Last year the Municipality, in association with CARE Bangladesh, constructed 2 kilometers of roads in the eastern part of the neighborhood.

Although not properly managed, the Ershad Nagar settlement is covered with about 5 kilometers of drainage, of which 1 km. is RCC and 4 kms. is brick-walled. There are 3-4 big waste bins provided by the municipal authority and the CRMC has fixed 200 common places for disposal of household solid-waste. Municipal workers come and pick-up the waste on a daily basis.

The Project has constructed 2 community latrines, which serve 200 households. However at this time, most of the households have installed sanitary latrines for their own family use. There are 125 tube-wells in the community, of which 75 are installed by the SHAHAR Project. This ensures the community 100% access to safe drinking water and sanitation.

The Ershad Nagar low-income settlement is fully covered by electricity, but most households still remain without gas connections. For telecommunications, community members use nearby private phone-call centers. Ershad Nagar does not its own healthcare facilities. Community members mostly depend on the public and private centers established across the municipal area and in the capital city of Dhaka for essential health services.

# Community scenario before forming the CRMC

Before the SHAHAR Project, community members of the low-income settlement did not have enough mutual support to undertake joint actions against common social, economic and other livelihood problems. The community lacked confidence and leadership. The SHAHAR Project created a sustainable impact in improving the overall socio-economic status of the Ershad Nagar community, by organizing them into community-based groups and developing their potential and capacities.

Ershad Nagar settlement dwellers had to struggle to increase their incomes in order to survive. The members lacked basic knowledge about health, hygiene, sanitation and the environment. They had no access to information about the local service providers, or economic opportunities by which they could benefit.

Employment opportunities were limited. People worked as daily-wage laborers in construction firms and earth works, ran rickshaws and rickshaw-vans, small-scale household-based poultries etc. While the private sector garment industries began to evolve in Bangladesh during the 1990's, Tongi Municipality, located near the capital city, began to derive some trading advantages.

The physical facilities and communication services in this area began to improve during late 1990's. Local municipal authorities constructed main access roads from Ershad Nagar to Tongi town in 1996. There were no brick-topped roads and pathways inside the area at that time. The municipal authority finalized the pattern of housing settlement through signing lease agreements with the dwellers, constructed semi-pucca households and provided other relevant community facilities. However, the respondents considered this development to be inadequate.

Essential services relating to energy, electricity, telecommunications, health and basic transportation remained almost unchanged for the last five years. The community households still gas/energy facilities and basic health services.

# CHANGES IN PEOPLE'S LIVES AND CONDITIONS IN ERSHAD NAGAR BLOCK 4 LOW-INCOME SETTLEMENT

The model introduced by the SHAHAR Project has brought significant changes to the community in terms of lives and livelihoods. Community members in the low-income settlement have achieved their intermediary goal of sustainable socio-economic development. Following are the features of changes already accomplished.

# Municipal Service Delivery

Installment of 2 community latrines by CRMC and individual initiative for installation and hygienic use of sanitary latrines in households has extended the opportunity for safe disposal of human excreta among 400 new households and increased sanitation coverage to 100%. Installment of 125 new tube-wells has increased access of the households to safe drinking water. Construction of 5 kms of new drains and selection of 200 spots for solid waste disposal has helped the Municipality to solve the problem of safe disposal of household solid waste and water clogging. Construction of 13 kms

of roads and pathways under the CRMC area has increased access to local markets, communication systems, transportation and vehicle movement within the area. Moreover, the Project's successful implementation in preceding years has generated a significant amount of community demand for further project extension and new initiatives towards effective and efficient municipal service delivery.

### Urban Livelihood (Social and Economical)

Average household income in the community has increased by at least 3-4 times as compared to that in the previous 5 years. Not only did it provide the citizens with better economic conditions, but also enhanced the socio-political identity among the communities. Now most members of the community have found employment, and can buy essential commodities or services, including proper medical treatment, education, and clothing for their children and family members.

### **Employment and Poverty Reduction**

The current unemployment rate (below 5%) in the settlement is quite low, with approximately 70% of community members engaged in different income generating activities or occupations - including day labor, small enterprises, government and non-government services. The pattern of food intake, trends in educational development and the level of general awareness among the community contributes towards an enhanced economic condition generated from current diversified employment opportunities.

# PRACTICES OF GOOD GOVERNANCE PRINCIPLES IN BOTH MUNICIPALITIES

Accountability: Both CBOs, Kushtia and Tongi, practice participatory planning and the implementation of project activities at the community level. They select their leaders in a democratic way. Monthly committee meetings are organized to discuss and share project activities and to take decisions with the involvement of all members. These meetings are used to report progress and problems encountered during their implementation to the general community people. Moreover, municipality and project (NGO) staff often attend the CBO meetings and present the status of the technical supports planned and provided. CBO members use these meetings to raise other issues – problems or needs and required support, particularly of the un-served poor and the women. The project structure and reporting mechanism facilitates stakeholders to report to each other for their respective planned support. CBO leaders, coming back from project level coordination meetings and other workshops, routinely share issues and decisions with other committee members. They address public complaints and grievances within the community, demonstrate sincerity in performing assigned job responsibilities, and ensure proper utilization of project resources and opportunities.

**Transparency:** The community-based organizations and the projects in both municipalities maintain full transparency in all of their operational aspects. Allocated project funds and procedures are disclosed to the public by hanging signboards in front of the CBO offices. Every member clearly knows about the CBO budget, income and expenditures incurred, contracts awarded for construction works, management and distribution of funds, etc. In every project meeting, progress made and constrains encountered are discussed with respect to activities and expenditures. Community members also have access to information relating to project implementation processes, financial matters and any other queries.

Participation: The CBOs are making maximum efforts in order to ensure local participation, particularly of the women and the poor, beginning with community mobilization, group formation, project planning and implementation levels. In addition, they ensure participation of the civil society representatives and other service providers in the meetings. All decisions made in the CBOs are routinely documented and subsequently shared with the absent members, which reflects continued interactions and healthy relations between the members. In Kushtia, the implementation guidelines of the LPUPA project, protects the rights of participation of the community in a consolidated manner. As a result, development plans at the local and municipality levels represent needs, interests and priorities of the community

members. The urban poor and women members of the CBOs have strong roles in the project implementation and decision-making processes.

Rule of Law: In Kushtia, CDC leaders prefer to handle the complaints and grievances through assisting respective ward commissioners and the municipality chairman to administer functions related to the enforcement of laws. But in Tongi, the CRMC itself handles the complaints and grievances coming from community members at the initial stage, and if required, they take assistance from ward commissioners and the municipality chairman to resolve the conflicts in a fair manner. The fair and strong supporting role of the CBOs in each municipality has made significant changes in maintaining law and order. Since the CBOs extend assistance to the municipal governments in taking action against local crime, the abuse of drugs, gambling and sporadic muggings have been remarkably reduced. This helps municipal authorities maintain law and order and thus, resulting in a more congenial environment for economic/ industrial development in the area. Having increased employment opportunities, particularly for the low-income community members in Tongi Municipality has also been a positive development.

Predictability: The study interprets predictability as - ascertaining the preparedness and future planning of the CBOs in both municipalities for coping with the urban pattern of instability in terms of settlement, access to available economic opportunities and continuity of social development. The community members at both places are found to be fully aware of their socio-economic uncertainty and probable impacts over their political lives. CBOs and the concerned Primary Groups take these into account, and encourage members to consolidate their savings as much as possible so they can cope with any adverse situation themselves. The CRMC in Tongi has made remarkable progress in creating contingency funds through members' subscriptions, so that it can extend financial assistance to concerned members in case of further eviction or any kind of household damages caused by natural calamities. The Community Development Forum (CDF), an apex body of the CRMCs, also facilitate the process of awareness and encourages all of its member CRMCs to raise funds like the Ershad Nagar CRMC for protection against future economic challenges.

# CBO- Municipality Interdependency: An instance of Motivation

Apart from practicing good governance principles themselves, both municipalities are found to be very proactive by involving all CBOs in the municipal governance system. They organize on a regular basis various occasions like national and international day observance, cultural functions, annual Poura-Mela (exhibition-Tongi) along with

CBOs and partner NGOs (for Tongi) to demonstrate progress in socio-economic development within the municipal territories. Selective CBO leaders are continuously encouraged to participate in the municipality-based different coordination committees, for example Total Literacy Movement, Slum Improvement Committee, Gender Committee etc. On the other hand, municipal authorities are also found to be enthusiastic with participating in the various occasions organized by the CBOs. All these stories indicate a high degree of inter-dependence between the CBOs and the Municipality, which helps promote effective governance.

# SUSTAINABILITY AND REPLICABILITY OF THE KUSHTIA AND TONGI MODELS

# Sustainability of the Project Processes, a Calculative Hunch: Char-Kuthipara CDC, Kushtia Municipality

The study team examined different parameters in the context of assessing sustainability of the project. The CDC has attained the formal authority and recognition by the communities as well as the local municipality. It has been in the process of developing and operationalizing its own governing systems and procedures to undertake social development issues. The planning and implementation process of the CDC takes sustainable shape through the institutional capacity strengthening initiative of the project. It demonstrated distinct group characteristics, which gives it a unique identity. The study indicates that an enhanced level of individual and group interests is involved in organizational development and in achieving the sustainable project processes. Furthermore, networks of the CDC with local service providers and local government bodies justify the belief that the process can be sustained.

### Ershad Nagar Block 4 CRMC, Tongi Municipality

The entire process of the project exercised throughout the interventions, is predicted to be sustainable in terms of its effects and in achieving its ultimate goals. The project undertakes its strategy revision, while the key question was always: "Will the activities be sustained after the project no longer exists?" This led to the formulation of an innovative "Pressure Plates Model (PPM)" that was developed by CARE Bangladesh. The model operates on the premise that unless the community takes charge of its own development, it will slowly erode and eventually disappear. Apart from community mobilization, adequate support structures have been established so that these communities could receive assistance in different areas. Taking this philosophy, the model attempted to create an environment where pressure emanates from one of the smallest units of the community, the household.

The project began concentrating its efforts in sensitizing and mobilizing local service providers (LSPs) at the final stage of the PPM process, where the pressure applied by the representative on the CRMC would correspondingly create a resultant pressure, which the CRMC would transfer to the relevant LSPs concerned with that issue. The hypothesis was that should the project be successful in mobilizing the different special interest groups in that community on relevant issues which affect them rather than general issues, and finally be able to make the LSPs more responsive, then the communities would be in a position to continue their development on appropriate and current issues even after the exit of CARE and its partner NGOs.

### Replicability of the Models in Practice:

The model of poverty reduction through local partnership among communities, local government and UNDP in Kushita has continued to achieve sustainability in terms of its program planning, implementation, financial self-sufficiency and employment generation. The SHAHAR Project has been successful in improving local governance in Tongi, compared to other municipalities. The model of community empowerment and grassroots institutional development through an effective partnering among urban low-income communities, local government, partner NGOs and CARE Bangladesh in Tongi has also achieved a measure of sustainability. The particular CBOs have successfully exceeded others (e.g. CDCs and CRMCs) in demonstrating practices of good governance, promoting participation at multiple levels and fostering CBO-Municipality interdependency, employment generation, and thus contributing to reduction of poverty as a whole.

Both models (in Kushtia and Tongi) operate within a general framework similar to most municipalities in Bangladesh. From this point of view, the study assumes that this model of participatory planning and implementation could be smoothly replicated in other areas as well. Moreover, as the major strengths and instruments of the project for urban poverty alleviation lie with the participating communities, this could also be tried out in other countries in the sub-continent representing similar demographic and socio-economic conditions.

#### LESSONS LEARNED

Numerous lessons have been identified and learned from the project in both municipalities. Despite the lack of adequate process documentation on valuable lessons i.e. events and facts, which have been affecting their lives and attitudes, some community members make positive testimonies.

Vital lessons learned are:

# • Enabling environment is a pre-condition for the success of any collective actions.

The LPUPA and SHAHAR Projects in both municipalities have created outstanding effects because of the opportunities they provided to the people of the community for participating and facilitating the process to meet their own needs and preferences. CBOs in both areas have direct funding for undertaking development activities, which provides them with authority in decision- making, undertaking collective actions and empowering organizations.

### • Women's participation makes the difference.

Before launching the Projects, more than half of the idle people in the community were female. Efforts made by women entrepreneurs' added distinct value to the communities' struggles for better livelihood. Successful integration and mobilization of the women in the community into the development activity brings a sense of well-being to the larger society.

### • Integrity in leadership and organizational dynamics make people united.

For many reasons, the poor people were loosing the interests and trust in community development initiatives undertaken by the government and non-government agencies. However both these Projects have been able to consolidate integrity among the leadership of community organizations and continue addressing demands of groups in the community. This has helped rebuild trust and respond better to the interests of the disadvantaged people in community organizations and their leadership.

### • People follow, once the way is shown.

At the time that the Projects began, the people did not show interest in participating, even demonstrating a lack of confidence in those initiatives. But when some innovative people started taking part and brought about success at their individual level, then others started to follow. The primary challenge of the project was to identify and mobilize the right resource persons.

#### Mutual trust and unity again proved as key power.

The CBOs' leadership in community development significantly eradicates the common phenomenon of helplessness, lack of trustworthiness, powerlessness particularly among the women and the poor. Through the project initiative, people came together, interacted and undertook joint actions for the betterment of their community.

### • Development in entrepreneurship and social advancement goes together.

Poor community people, particularly the women, take the opportunity to develop their entrepreneurship skills through training and exchanging experience with other CBOs. They also get access to and make use of micro-credit supports for achieving their social empowerment.

### • Access to basic services increased through network of local providers.

A local network of essential service providers has been formed in Tongi, which greatly helps community members increase their access to basic services related to health and nutrition, micro-credit, education and life-skills development.

# • Last but not the least, the practice of good governance principles fosters acceptability.

Although there is still room for further improvement, the overall performance of the CBOs in terms of practicing good governance principles has been remarkable. They have demonstrated good examples of establishing joint accountability, promoting participation, maintaining transparency, increasing access to information and services, extending cooperation in executing rules of law and enhancing coping capacity of the community. This has resulted in achieving high levels of organizational acceptance by the common people in both municipalities.

### Key Messages of the Study: The Conclusion

The CBOs have potentially emerged as a dynamic grass-roots people's institution. Their functional mechanism affects the multi-faceted dimensions of urban development through adoption of participatory planning and implementation processes. Presently the CBOs in both municipalities have been in a position to respond to the complicated urban issues and challenges, which have accelerated due to recent population boom in the country. The CBOs have also proved to be effective for decentralization of local government by showing their ability to be self-governing organizations. They have successfully accelerated women's participation in the community development initiatives, changing women's position in the society. They have learned how to play the effective role of a change agent for exploitation of greater socio-economic benefits provided by the process of urbanization, so that the poorest segment of the community can reach the benefits. This is important in the context of ever-growing disparity between the rich and the poor in the newly emerging urban societies of the country.

Lessons learned from the CBOs and their communities include recognition of the importance of an enabling environment in empowering grass-roots communities, particularly of women and the poor. Given the opportunity to plan and work, people who suffer from the problems, can find ways to more easily reach for economic, political and social advancements. All these efforts have remarkably contributed to the alleviation of poverty among the targeted communities, and thus, enhance the quality of people's lives.

The study also grasped the public interests and prevailing opportunities of improving some areas of project intervention and capacities in order to achieve organizational sustainability. These include the requirement of having legal entity of the CBOs, involving CBOs in the formulation of strategy and guidelines on taking on responsibilities, expanding local network with service providers and local government institutions in some cases, diversifying IGA components, intensifying HRD initiatives, sustainable integration of the CBOs into the operational framework of local municipalities, adopting effective documentation process for lessons learned and dissemination, strengthening environmental sanitation, and activating apex bodies of the CBOs (e.g. CDF in Tongi, Kushtia yet to initiate) towards their goals.

Finally, the study clearly showed that the adoption and practice of the good governance principles are prerequisites for organizational successes. It has created CDCs with trustworthy images to the people. As a result, the CDC has emerged as an effective and dynamic institution for undertaking integrated community development initiatives.