

# **State-Building, Peace-Building and Service Delivery in Fragile and Conflict-Affected States: Literature Review**

## **Final Report**

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## **List of Acronyms**

CLTS	Community Led Total Sanitation
DAC	Development Assistance Committee (of OECD)
DFID	Department for International Development (UK)
DRC	Democratic Republic of the Congo
FBO	Faith-Based Organisation
FCAS	Fragile and Conflict-Affected States
GSDRC	Governance and Social Development Resource Centre
MDG	Millennium Development Goal
MSP	Multi-Stakeholder Platform
NGO	Non-Governmental Organisation
NSA	Non-State Actors
NSP	Non-State Provider
ODI	Overseas Development Institute
OECD	Organisation for Economic Development
OPP	Orangi Pilot Project
RQ	Research Question

## Introduction

This literature review is the first output of a one-year DFID-funded research programme on state-building, peace-building and service delivery in fragile and conflict-affected states (FCAS).

Based on the fourth objective of DFID's (2010a) integrated approach to building peaceful states and societies which says that *states need to respond to public expectations in order to maintain legitimacy and stability*, this research programme developed the following hypothesis and six related research questions (RQs):

Hypothesis: *States provide public services and in doing so increase their legitimacy as well as national stability.*

- RQ1: What are the incentives for states to provide inclusive public services at scale?
- RQ2: What is the capacity of the state at national, sub-national and local levels to implement national legislation, (or in its absence international conventions) regarding public services?
- RQ3: How do the organisation and management of service delivery at national, sub-national and local levels amongst state and non-state providers contribute to or undermine state legitimacy?
- RQ4: How does the existence of local governance and accountability structures in relation to public services contribute to state-building and peace-building?
- RQ5: How do upwards and downwards information flows impact on public service policy delivery and expectations?
- RQ6: What kinds of donor modalities have the strongest impact on the delivery of public services which contribute state-building and peace-building?

This literature review aims to summarise the key literature on service delivery and its links to state-building and peace-building in FCAS, looking specifically at information the literature gives in relation to (i) different ways of accessing and delivering services, and (ii) accountability mechanisms within service delivery and how these impact perceptions of legitimacy and expectations for services. It looks at both what the literature says relating to the contribution of service delivery to state-building and peace-building around the issues in the six RQs, as well as the specific contributions of service delivery in four sectors – education, health, water and sanitation.

Comprehensive literature reviews already exist in the public domain covering the general issues around service delivery, state-building and peace-building with a significant body of work produced by the Governance and Social Development Resource Centre (GSDRC), notably:

- University of Birmingham: *Literature Review on State-Building* (Scott, 2007);
- GSDRC: *Topic Guide on Fragile States* (McLoughlin, 2010);
- GSDRC: *Topic Guide Supplement on State-building and Peace-building in Situations of Conflict and Fragility* (Haider, 2010a); and

- GSDRC: *Topic Guide Supplement on State-Society Relations and Citizenship in Situations of Conflict and Fragility* (Haider, 2010b).

In addition, the GSDRC has posted a number of literature reviews relating to specific issues such as non-state providers (NSPs) and pro-poor service delivery. These documents include guidance on the basic concepts and definitions as well as literature summaries. The main limitation is that they reflect a degree of bias towards formal academic literature rather than the practice and debates within aid agencies. In order to provide a more balanced and realistic review we draw particularly on sources representing donor views. These documents draw on a substantial amount of grey literature and agency debate:

- *Concepts and Dilemmas of State Building in Fragile Situations* (OECD, 2008a);
- *Do No Harm. International Support to Statebuilding* (OECD, 2010a);
- *Service Delivery in Fragile Situations* (OECD, 2008b);
- *Statebuilding in Situations of Fragility: Initial Findings* (OECD, 2008c)
- *Building the State and Securing the Peace* (DFID, 2009a);
- *Building Peaceful States and Societies* (DFID, 2010a); and
- *Working Effectively in Conflict-Affected and Fragile Situations* (DFID, 2010b).

We present some definitions and concepts (section 1) commonly used in the literature, especially those explicitly adopted or sanctioned by DFID and the OECD. Fundamental debates about these concepts and definitions are described in section 2. In section 3 we focus the literature review more tightly on the six RQs related to service delivery and its potential or actual links to state-building and peace-building. Sections 4 to 7 look at the sector-specific literature for each of the four sectors (education, health, sanitation and water), with section 8 drawing together common themes as well as differences across the four sectors.

## 1. Terminology and Associated Conceptual Issues

### 1.1 Definitions and Concepts

**State-building**, as defined by the OECD, is:

“...purposeful action to develop the capacity, institutions and legitimacy of the state in relation to an effective political process for negotiating the mutual demands between state and societal groups. Legitimacy will be a principal outcome of the effectiveness of such a process over time, although legitimacy may also be embedded in historical identities and institutions...Together, capacity and resources, institutions, legitimacy and an effective political process combine to produce resilience.” (OECD, 2008a: 14)

This is a social-contract focused definition, one that argues that the objective of state-building is to support a more resilient social contract. OECD (2008a: 17) defines the **social contract**, and the process of generating a social contract as follows:

“The social contract...emerges from the interaction between: (a) expectations that a given society has of a given state; (b) state capacity to provide services, including security, and to secure revenue from its population and territory to provide these services (in part a function of economic resources); and (c) elite will to direct state resources and capacity to fulfilling social expectations.

It is crucially mediated by (d) the existence of political processes through which the bargain between state and society is struck, reinforced, and institutionalized.

Finally, (e) legitimacy plays a complex additional role in shaping expectations and facilitating political process as well as in being produced and replenished by the interaction among all of the other factors. Legitimacy has various domestic forms and sources, which are not always mutually reinforcing: embedded or residual legitimacy, deriving from prior state-formation or other historical dynamics; performance legitimacy that arises from effective and equitable service delivery; and process legitimacy. Legitimacy also can derive from international recognition and reinforcement, though this especially can be at odds with domestic sources of legitimacy.”

This is congruent with the vision of DFID (2010a) which emphasises four elements in its approach to state-building and peace-building:

1. Addressing the causes and effects of conflict and fragility;
2. Supporting inclusive political settlements;
3. Developing core state functions; and
4. Responding to public expectations.

This broad definition encompasses the ideas of resilience and legitimacy which are of particular relevance for understanding the impact of service delivery on state-building (or building resilience).

**Peace-building**, as defined by the United Nations in 2007, involves:

“a range of measures targeted to reduce the risk of lapsing or relapsing into conflict, to strengthen national capacities at all levels for conflict management, and to lay the foundations for sustainable peace and development. Peacebuilding strategies must be coherent and tailored to the specific needs of the country concerned, based on national ownership, and should comprise a carefully prioritised, sequenced, and therefore relatively narrow set of activities aimed at achieving the above objectives.”<sup>1</sup>

A source of current debate is that the more structural aspects of peace-building (laying ‘the foundations for sustainable peace and development’) coincide with state-building. Also, in order to create ‘reciprocal relations’, state-building involves the same processes and aims as peace-building. In practice, agencies often use ‘peace-building’ to refer to shorter-term measures directed at conflict itself but this has been criticised for wrongly limiting the scope of each activity. DFID (2010a) also considers that peacebuilding needs to look beyond the immediate end of conflict and address

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<sup>1</sup> Referenced at:

<http://www.peacebuildinginitiative.org/index.cfm?fuseaction=page.viewpage&pageid=1765>



the root causes of violence, create stability and establish mechanisms for managing conflict without recourse to violence. As part of this, there is also a need to generate confidence, trust and engagement among citizens (UNESCO, 2011: 222).

**Service delivery** is used in the current study to refer to the delivery of health, education, water and sanitation services. Following normal practice, security services are not included. In national plans and budgets (as well as those of aid agencies) service delivery and governance are often addressed separately but in practice the delivery of services is likely to include governance issues. Again there is a danger that concepts and definitions may inhibit the scope of activities and create problems of coordination.

**Conflict** (or '**conflict-affected**') is used to imply a degree of violence. The term conflict is often used as short hand for 'violent conflict' however not all conflict results in violence and a lack of violence does not mean a lack of conflict. The term 'tension' may be better used to describe non-violent forms of conflict.

There is no universal definition or list of **fragile states** or **fragile situations** with different institutes and organisations including different countries in their listings (see for example, the Brookings *Index of State Weakness in the Developing World*<sup>2</sup> and the Fund for Peace *Failed States Index*<sup>3</sup>). However, there is broad convergence around the OECD (2007: 2) assertion that "states are fragile when state structures lack political will and/or capacity to provide the basic functions needed for poverty reduction, development and to safeguard the security and human rights of their populations." This idea continues to drive much developmental engagement in FCAS. Jones and Chandran (2008) in a report prepared for the OECD, extend the definition and define a fragile state as one that cannot meet societal expectations, or manage the gap between expectations and the provision of the state through a political process. They argue that legitimacy, either in terms of its 'embedded form' or its 'historical' form strongly influence expectations and the ability of political processes to cope with unmet expectations; they further propose both a virtuous cycle in which meeting or managing expectations reinforces the social contract, and failing to meet them weakens the social contract.

For a more comprehensive review of widely-used definitions and typologies see Mcloughlin (2010: 9-13). For a wider discussion, and examination of terms such as legitimacy, responsiveness and resilience, see Whaites (2008), DFID (2009a), DFID (2010a), and OECD (2010a). A critical discussion of the same issues is presented by Eldon and Gunby (2009).

## 1.2 Conceptual Issues with Definitions

There are several conceptual issues related to these definitions.

<sup>2</sup> See [http://www.brookings.edu/reports/2008/02\\_weak\\_states\\_index.aspx](http://www.brookings.edu/reports/2008/02_weak_states_index.aspx) for more information.

<sup>3</sup> See

[http://www.fundforpeace.org/web/index.php?option=com\\_content&task=view&id=99&Itemid=140](http://www.fundforpeace.org/web/index.php?option=com_content&task=view&id=99&Itemid=140) for more information, and the Foreign Policy articles related to it at: [http://www.foreignpolicy.com/articles/2010/06/21/2010\\_failed\\_states\\_index\\_interactive\\_map\\_and\\_rankings](http://www.foreignpolicy.com/articles/2010/06/21/2010_failed_states_index_interactive_map_and_rankings)

The first, which we call the ‘what state, what fragility’ challenge, poses the idea that states are in fact less fragile than we assume. This argument, drawing on the ideas of Chabal (1992) and Chabal and Daloz (1999) suggests that there may be different forms of social contract, and typologies of state functionality that ‘work’ better than Western forms or notions of democracy. An example might be where patrimonial relationship structures could provide a greater degree of resilience than democratic structures could provide. Without deep and contextual understanding – which these authors and others suggest is often absent – there is no real way of determining to what extent a social contract is fragile (or resilient), and therefore how international interventions might assist in building resilience.

The second major critique is similar, and stems from a combination of the Weberian state fallacy, and the critique of the *mission civilisatrice*<sup>4</sup> (Paris, 2002). These ideas, drawing on the works of Paris (2004), Ottaway (2002), Ayoob (1995) and others, suggest that (i) the idea of helping states to develop resilience is deeply flawed, because it stems from a particular construct of what a state should look like; (ii) that the idea rests on an assumption that statehood can be achieved in a shorter amount of time than the evidence would ever suggest it has been; and (iii) that the external expectations that accompany assistance to FCAS place demands on states, particularly for “democratic” functionality that are inconsistent with the “often brutal evolution that historically underlies the formation of states.” (Jackson, 1990: 247)

The third major conceptual challenge is what is meant by legitimacy. This can be considered in four dimensions (Held 1996; Leftwich, 2000 and Fukuyama, 2004):

1. Geographical legitimacy – do the citizens want to live in the state, whether or not it is being effective in delivering services (e.g. citizens of the Basque region of Spain)?
2. Constitutional legitimacy – are the rules of the game considered to be fair, right and proper regarding whether the state is unitary or federal, and regarding what autonomy different regions have?
3. Political legitimacy – the citizens may be broadly agreed on the geographical and constitutional legitimacy of the state (dimensions 1 and 2) but citizens question the legitimacy of the government (e.g. Kenya, Myanmar and Zimbabwe).
4. Holistic legitimacy – a state may be effective at delivering services and thus potentially increase the legitimacy of its government in this aspect, but be largely authoritarian, restricting civil liberties or freedom of speech/press thus undermining its legitimacy in these other aspects (e.g. Botswana, Cuba, Korea, Singapore and Taiwan).

The fourth conceptual challenge, which links to the third, is the need to distinguish clearly between building government legitimacy and state legitimacy. Ghani, Lockhart and Carnahan (2005) outline ten core functions that a state must perform in order to exercise *de facto* sovereignty: (i) legitimate monopoly on the means of violence; (ii) administrative control; (iii) management of public finances; (iv) investment in human capital; (v) delineation of citizenship rights and duties; (vi) provision of infrastructure

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<sup>4</sup> This is a French team, translating into English as “civilising mission” and used descriptively in relation to French colonialism.

services; (vii) formation of the market; (viii) management of the state's assets (including the environment, natural resources, and cultural assets); (ix) international relations (including entering into international contracts and public borrowing); and (x) rule of law. They anticipate long-term compacts, entered into by the national leadership "with the international community on one side, and its citizens on the other." These compacts would allow for strategies that are universal, yet tailored to context "by acknowledging that all states must perform a number of services to meet the needs of their populations but that the route taken to develop institutional capability will vary from country to country." (Ghani *et al.*, 2005: 5)

In addition to these conceptual issues, we see four more operational issues that will arise at the country level. In brief, these are:

1. The undesirable state: In certain cases, linked to the idea of holistic legitimacy, the model suggests that helping to assist in service delivery can augment the level of resilience and legitimacy, even in a deeply illegitimate state. Current and complex examples might include the governments of Burma or Egypt. The imperative to ensure that citizens' basic needs are met generates an ethical challenge that decision-makers must address consciously.
2. Humanitarian space: Over the last decade, the set of activities described as humanitarian, and therefore protected by the imperatives of humanitarian space, appear to have expanded. There is a lack of clear guidance as to when state-building and longer-term development considerations should be paramount, with regard to say, school-building, or water, sanitation and hygiene activities, versus humanitarian and life-saving considerations. To make such determinations is beyond the scope of this research, but is important for the aid community to consider.
3. The Millennium Development Goals (MDGs): Whilst the MDGs have been accepted as a basic organising principle for international assistance, their relevance is uncertain in communities in FCAS. When determining how to provide services, there may be a tension between the method that will reach the most people, thereby advancing MDG achievement, and the method that contributes most to legitimacy and resilience. The choice between these is political.
4. Complexity: There is an assumption that aspects of legitimacy can be measured, and that the relationship of models of service delivery to legitimacy can be understood. Yet the dynamic nature involved in looking at how service delivery can generate legitimacy and thus build a more resilient social contract, implies that any inference of causality is at best an inference.

## 2. General Issues

### 2.1. Background

The context for focussing on service delivery's contribution to state-building and peace-building in FCAS is the fact that as a group, FCAS are further away from achieving the MDGs than other countries as well as generally having less resilience. A recent report by Leo and Barmeier (2010) identifies FCAS as the "MDG laggards", lagging behind other low-income countries and middle-income countries in progress

towards meeting the MDGS. In relation to MDG4 (child mortality), UNESCO (2011) reported that under-five mortality rates in conflict-affected poor countries are double those in other poor countries.

A focus on service delivery is important to national governments who are interested in building more resilient states, since if the state can meet the expectations of its citizens for service delivery it is proposed that this is likely to enhance the government's legitimacy.

The international community is concerned about situations of conflict and fragility for a number of reasons other than aid (OECD, 2008a; DFID, 2005; World Bank, 2003). These include: direct security threats; openings for organised crime, drug trafficking,<sup>5</sup> openings for international terrorism and the potential to cause migration. Aid objectives and strategies often become linked to these other objectives. International boundaries between aid, security and diplomatic activity have been reduced both in policy and in practice. Donor aid activity is typically integrated across the 'whole of government'. This trend has been referred to as the 'securitisation' of aid meaning that aid may become an instrument of a dominant security agenda (Duffield, 2001 and 2007). The term 'stabilisation' is used to describe situations where military forces take the leading role. In such cases aid actors may have extremely limited scope to focus on development rather than security.

While one school of thought seeks to distance aid from security objectives, an important body of literature questions the effectiveness of aid on the basis of lack of political understanding (e.g. Calderisi, 2007 and Moyo, 2009). Both in order to distinguish aid from other objectives and in order to make aid more responsive to realities, donors now feel greater pressure to analyse FCAS.

## **2.2 Fragility, Conflict and Legitimacy**

The World Bank has been influential in researching the factors that make a country prone to fragility and conflict (e.g. World Bank, 2003) including devoting its 2011 *World Development Report* to the theme of Conflict, Security and Development. The UN University World Institute for Development Economics Research has also undertaken detailed academic and policy research on global governance and conflict including specific workstreams on "Why Some Countries Avoid Conflicts while Others Fail" and "Making Peace Work: Conflict and Post-Conflict Societies."<sup>6</sup>

However, there is still considerable debate about the conclusions and implications around exact causes of fragility and conflict. Collier (2000) opened a debate by arguing that the main causes of conflicts are more likely to be due to economic opportunities rather than grievance. This was challenged by others arguing that ideological factors, including political exclusion, also played a significant role in conflict (for example, Keen, 2009). The debate about the relative importance of 'greed' (predatory self-interest) and 'grievance' (reactions to 'greed') has not been

<sup>5</sup> "95% of the global production of hard drugs occurs in countries with civil wars and the major supply routes run through conflict countries." World Bank (2003: 2)

<sup>6</sup> See [http://www.wider.unu.edu/research/projects-by-theme/global-governance/en\\_GB/index/](http://www.wider.unu.edu/research/projects-by-theme/global-governance/en_GB/index/) for more details.

entirely resolved but analysis now tends to focus on the interaction of these factors on a case-by-case basis (Berdal and Malone, 2000).

Participation and inclusiveness in decision-making are important elements of addressing grievances. Inclusiveness has been recognised as a necessary element of state-building and is often regarded as the basis for ‘legitimacy’ – a term increasingly used to denote that a state is acceptable to most of its people and population groups (OECD, 2010*b*). Drawing from OECD (2010*b*) a GSDRC literature review notes that:

“State legitimacy can derive from a range of sources, including the effectiveness of public institutions in their performance of various functions, such as service delivery; and their degree of representation and accountability. Legitimacy does not derive solely from effectively functioning institutions, however. Such institutions must resonate with societies in order for them to be considered legitimate...” (Haider, 2010*b*: 9)

Recent OECD (2011) guidance on supporting state-building in FCAS describes state-building as an interaction of three critical factors:

- Political settlements;
- State capacity and responsiveness;
- Social expectations and perceptions.

These factors together dictate the level of state legitimacy and also interact with it. Thus capacity and legitimacy are mutually reinforcing with more resilient states perceived to be those in which social expectations are in line with what the state is able to provide. In addition to considering each factor there is a need to consider the interaction of factors and how they affect service delivery (OECD, 2011). For example, the ability to raise taxes is a function of state capacity and affects the state’s ability to provide services. It may also thereby alter expectations as people may have low expectations as they know that the state lacks capacity or may demand little if they do not pay taxes.

Recent literature has drawn attention to the profoundly political nature of the dilemmas facing leaders in FCAS. There is a disparity between what is supposed to be happening and what is really going on. Leaders may have a strong personal interest in maintaining aspects of fragility and conflict. For example, they may exploit state fragility to manipulate elections and use patronage systems based on state resources to maintain their support through delivering services to certain groups and excluding others (Scott, 2007). In a recent study, Collier (2009) has also drawn attention to the constant threat of military coups in FCAS. De Waal (2009) has developed an argument that patronage systems (even if they involve elements of corruption) should be viewed within the context of a political marketplace.<sup>7</sup> The World Bank has concluded from an extensive review of its activities that “the main focus of donor efforts needs to be on helping staff internalize political analysis in strategy design and implementation” (World Bank IEG, 2006: 66).

<sup>7</sup> See also de Waal’s application of this to Afghanistan and East Timor in:  
<http://www.prospectmagazine.co.uk/2009/11/the-price-of-peace/>

*Political Economy Analysis* and *Conflict Assessment* emerged as tools for aid programme development in FCAS in the early 2000s. DFID's (2002) *Conducting Conflict Assessments* and USAID's (2005) *Strategic Conflict Assessment* are key conflict assessment tools whilst DFID's *Drivers of Change* approach led the thinking on political economy analysis (DFID, 2004 and DFID, 2009b). Recently the World Bank (2009) has also developed a methodology for political economy analysis. GSDRC (2008) provides a short review of the literature on political economy analysis. Although methodologies for assessing the context for aid have become more sophisticated, a recent review finds that the link with decision-making has been weak (Slotin, Wyeth and Romita, 2010). This arises for different reasons but particularly because such assessments are not properly integrated into planning processes.

As part of this more politically aware approach, there is increasing awareness that when supporting service delivery in FCAS, aid can have negative as well as positive impacts. This is reflected in "do no harm" (Principle 2 of the OECD (2007) *Principles for Good International Engagement in Fragile States and Situations*). Donors may strengthen negative interests (greed) or worsen problems of exclusion (grievance). This applies not only to individual political actors and institutions but also to structures. In particular, donors have been concerned (reflecting Principle 3 of the DAC *Principles*) that aid channelled through non-state actors (NSAs) might undermine state-building; hence the emphasis remains on "state-building as the central objective". However, state-building is often seen by donors as a broader term for 'capacity building' encompassing also building state institutions, which can sometimes be done to the exclusion of directly supporting service delivery, especially when this is more challenging to do when aid cannot be given via budget support.

### **3. Literature Relating to Service Delivery and the Key Questions of the Research Project**

As noted above, service delivery can have negative as well as positive impacts on state-building and peace-building. This is not simply an issue of scale and quality but depends on who provides what for whom. This section examines the literature on service delivery in relation to state-building (especially sub-sections 3.1 to 3.3) and state-society relations (sub-sections 3.4 and 3.5). The final sub-section is about lessons from specific aid modalities and approaches related to donors supporting service delivery and its impact on wider state-building and peace-building processes. Sections 4 to 7 will highlight issues relating to the delivery of education, health, sanitation and water services.

#### **3.1 Incentives for States to Deliver Effective and Inclusive Services**

States have a number of core functions they must perform to maintain legitimacy, including provision of safety, security, justice and rule of law (Ghani *et al.*, 2005). Whaites (2008) further distinguishes between essential 'survival' functions of the state and 'expected' functions of the state. In this conceptualisation, survival functions including the provision of security, rule of law and the ability to raise revenue, must be in place to provide an institutional framework for state and state-building processes. In addition citizens expect a responsive state to deliver additional

'expected' functions, including service delivery and social protection. Integrated provision of these functions reinforces the legitimacy of the state and develops trust between citizen and state (Ghani *et al.*, 2005). Expectations of the state will vary within societies and over time according to citizens' identities (gender, religion, family status, etc.) and socio-economic background. The OECD (2011) distinguishes between normative expectations based on beliefs, people's understanding of rights and entitlements and perceptions on what the state *should* deliver and how it should engage with society, and realistic expectations based on previous experience, availability of information and understanding of the current context. The gap between normative and realistic expectations and how this is managed in state-society relations that is central to perceptions of state legitimacy. In unstable situations people's expectations may be focused on security and they may be willing to accept compromises in relation to inclusiveness and services. Public expectations cannot be regarded as fixed but may vary in relation to the context and timing. Although states may be expected to meet expectations in order to achieve legitimacy it is very difficult to establish what people's expectations are, and in many cases planning is based on assumptions, which in some cases may be both naïve and false. The use of national public opinion surveys varies from country to country, as does the willingness of the population to talk openly about their expectations.

Within society there are multiple voices expressing multiple demands on states with different preferences for how the state should respond to their needs. Even in responsive states there are always concerns that some sections of society will dominate political processes causing their preferences to take precedence over others, resulting in the voices of others, for example women or ethnic minorities, being marginalised. States differ in their ability to balance these different preferences and mediate balanced responses to these different expectations (Whaites, 2008).

When services are offered, they may be delivered in such a way as to strengthen the authority of political figures (speeches and constant emphasis on the picture of such figures) or authority in general (instilling a disciplinarian approach, especially in education). Such opportunities to increase power and influence may provide incentives for political leaders but this is likely to reflect a top-down rather than bottom-up concept of state-building.

Both in relation to the formal state and patronage systems, the ultimate threat (or incentive) is that excluded people will resort to disruptive methods including violence to obtain services. But as Collier and others have observed, the 'grievance' of the group may be exploited by 'greedy' interests, leading to a change of political power perhaps but not to structural change. Service delivery can be used both by governments and donors as rewards for peacefulness or as 'peace dividends'. But there is a danger that this may reduce pressure for necessary change. Just as likely, the withdrawal or neglect of services can be used by political leaders as a punishment for lack of support from a particular area or group.

Incentives derived from democracy may be seriously modified by the patronage priorities of the 'shadow state'. Even within the constraints of the *Paris Declaration*, aid can be an incentive to provide inclusive services but may exert pressure only in relation to formal state institutions. Until recently the international community has

favoured a top-down approach. However, this is changing towards a concept of state-society relations and efforts to foster positive, mutually constructive relations; with a focus on the informal dynamics and institutions that can underpin political engagement and affect expectation and perceptions of the state (Pouligny, 2010). The literature also indicates that aid has focused excessively on a paradigm of strong formal institutions influenced by formal civil society organisations (especially non-governmental organisations (NGOs)) but has neglected incentives, informal structures and the private sector.

The World Bank's (2004) *World Development Report* provides the starting point for much of the later analysis and policy-making with regard to service delivery. It identifies three categories of actors involved in service delivery – policy-makers, service providers and clients. Pavanello and Othieno (2008) looking at service delivery within the education sector, observe that the fundamental question is how to manage the relationship between these three groups of actors and their competing goals and expectations so as to provide adequate basic services for the poor. This is not exclusive to the education sector and could apply to all sectors involved in service delivery. They further note two potential routes – a long route by which clients use their 'voice' to influence policy makers; and a short route when clients exert pressure directly on service providers. Meagher (2005) proposes that it is the long route of accountability that is problematic in FCAS with clients involved more directly with the providers rather than the state. As noted above, this model needs to take account of incentives and informal structures.

Links and conditions relating to accountability and transparency are commonly applied by aid agencies but the incentives to comply may be weak in the case of those already holding political power. Such notions may be regarded as challenges to current power structures which provide considerable benefits for political leaders. To create incentives, good performance and results can be rewarded by increasing allocations to a country. But a recent review of the main donor mechanism for this (Performance-Based Allocation) indicates that it is a blunt instrument in relation to the complexities of FCAS (Gelb, 2010).

### **3.2 State Capacity to Implement Legislation Regarding Service Delivery**

Even with some level of state commitment to service delivery there are still many obstacles to implementation. By definition, FCAS often lack the capacity to carry out necessary functions. NGOs and increasingly the private sector, are viewed as alternative sources of capacity for rapid scale-up. The literature draws attention to the limitations of NGOs and the fact that they have their own interests and political economy. NGOs that speak on behalf of excluded groups may lack legitimacy in doing so and may lack incentives to be inclusive. Rapid changes in focus and financing weaken the work of such organisations. Groups made up of excluded people are likely to be more persistent (although leaders within such groups may develop an interest in the status quo). The literature also notes that there is a much wider range of informal institutions, notably community mechanisms and customary local governance mechanisms. But these can also be discriminatory, particularly towards women and youth (EC, 2009; Schoofs and Smits, 2010).



Capacity is greatly reduced by division within society. In FCAS it is likely that identities will be manipulated around political interests. The persistence of such problems can prevent institutions from functioning properly. Actions must be designed in order to reduce rather than exacerbate such divisions. This may involve promotion of multiple identities rather than emphasis on a single identity (Sen, 2006). In this way, capacity building in FCAS is closely related to peace-building, which in turn must share in longer-term processes of state-building.

Given the capacity context, OECD (2008a: 8) outline three key issues for donors working in FCAS:

1. Whether to help reform and rebuild the public functions of the state or to work in parallel with it;
2. Selecting the aid instruments (projects, technical assistance, social funds and humanitarian aid);
3. Prioritising and bundling the service package – including the possibility that where necessary the services may have to be designed according to the resources and the coverage may be limited.

Pavanello and Othieno (2008) in their study of service delivery in the education sector outline three further challenges for donors:

1. What is the appropriate balance between addressing immediate needs (for service delivery) and building long-term capacity?
2. What is the appropriate balance between engaging with the public sector and with NSPs?
3. What is the appropriate balance between supporting central and local government?

They conclude by stating that it is important to address both the immediate needs of service delivery together with longer-term state-building efforts to strengthen the capacity of the state to support the delivery of public services, recognising that this is not an easy task and the exact approach will vary according to context.

### **3.3 Organisation of Services in Relation to State Legitimacy**

OECD (2008a) notes that the poor may face constraints in services not only because of capacity issues but also because of limited access and many different forms of social exclusion. Women as well as certain other groups in specific locations may face structural problems arising from issues such as limited property rights, early marriage, domestic violence, etc. OECD (2008a) advises that, especially in FCAS, such obstacles should be addressed as part of a service delivery package. By implication, unless properly designed, service delivery may increase tensions by exacerbating problems of exclusion

OECD (2008a: 22) asserts that “when these improvements are visible to the public, they can lead to pressure for wider and more systemic reforms.” But although this view is widely put forward by aid organisations, little evidence is presented to show that the process leads to long-term impact at a national level. The problem is that

pressure from below may be counteracted by greater pressures from within the political elite. A focus on ‘drivers of change’ must be complemented by a focus on obstacles and incentives.

Similarly, decentralisation of service management has both positive and negative aspects. On the positive side, it has the potential to allow governments to respond to local needs and it can increase the accountability of the government (at all levels) to the people. However, on the negative side, although local responsiveness can bring about improvements, evidence from the education sector shows that challenges at the local level such as mixed political incentives, weak capacity and limited financial resources can have more negative impacts (Pavenello and Othieno, 2008).

When looking at donor interventions in support of service delivery, a critical issue is the balance between engaging with the public sector and with NSPs. NSPs can facilitate rapid scale-up of services but may also undermine the development of the state sector unless specifically designed or managed otherwise. Although the literature draws attention to this issue (Vaux and Visman, 2005), and it is the subject of DAC Principle Four “prioritise prevention”, there appear to be no general rules or research findings except that a state-building perspective must be applied at all stages and in all situations.

The OECD (2011: 73) contend that if the state lacks the capacity for direct delivery of services and provision is concentrated among NSPs “from a statebuilding perspective it is important for the state to have a prominent role in settling the overall legal and policy framework and coordinating delivery even if it is not always the direct provider.” However, both the OECD (2011) and Batley and Mcloughlin (2010) recognise that for the state to adopt this role requires it to have significant organisational capacity, which may not be present in FCAS.

GSDRC divides NSPs into three categories:<sup>8</sup>

1. Market-based, for-profit providers;
2. Non-profit providers; and
3. Groups rooted in alternative political authority.

The literature indicates that the poor use market-based NSPs to a greater extent than is often recognised. Factors such as accessibility and flexibility may predominate especially in the case of working people who would lose income by trying to use poorly functioning state services. Oxfam International (2008) notes that a growing number of donors are supporting market-based delivery but argues that the focus should remain on state services in order to reach very poor people. This leads back to the question of political incentives to develop an inclusive pro-poor state. Currently, donor attention (especially at the World Bank) has turned to public-private partnerships as a possible solution in some sectors, based on strict contractual arrangements and oversight. Lack of capacity and ability to provide regulatory functions and oversight in FCAS may indicate that this solution may not work in FCAS (OECD Partnership for Democratic Governance, 2010).

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<sup>8</sup> See <http://www.gsdr.org/go/topic-guides/service-delivery/non-state-providers> for more information.

User fees for service delivery are a controversial subject and vary in their application across the different sectors. User fees are typically associated with increased inequity in provision.<sup>9</sup> However, where states are unable to provide free services, services provided through NSPs and supported by fees could mean a wider range of services is provided and access to services increased. Some therefore propose that donors should decide whether to support user fees on a case-by-case basis, depending on the local context (e.g. see Hutton, 2004).<sup>10</sup>

### **3.4 Accountability Structures in Relation to State-Building and Peace-Building**

OECD (2008a: 7) notes that “the quality and availability of services, such as health care and primary education, are a key measure of governance” and goes on to point out that in FCAS accountability becomes a key issue: “service users must take an active role in imposing accountability by engaging directly with service providers”.

In its framework of accountability for service delivery, the World Bank (2004) proposes that citizens (both individually and collectively) should be regarded as principals and the governments as the agents. A relationship of accountability exists when agents have incentives to do what the principals want them to do. Many international NGOs adopt a similar paradigm (see below) envisaging a ‘citizen-centred’ perspective in place of the dominant ‘state-centred’ paradigm (Benequista, 2010).

A key question is whether such efforts bring services within the influence of the very poor rather than simply extend participation beyond a very narrow elite. Several studies including UNESCAP, UNDP and ADB (2007) show that the poor often have to be specifically targeted to ensure that services are accessible for them. Demand-led pro-poor approaches are emerging as successful mechanisms to tackle exclusion – for example, voucher schemes – as they encourage providers to target and include previously marginalised groups.<sup>11</sup> Save the Children (2008a) has examined what methods work best in relation to education. Targeted, inclusive approaches to service provision can also lead to improvements to accountability, both through local level governance mechanisms and by increasing the proportion of society with connections to the state through service delivery (DFID, 2010c). Evidence also suggests that service delivery is more responsive when the poor participate in reforms (DFID, 2010c).

Scott (2007) notes that gender issues are largely absent in the literature on state-building and mechanisms for accountability to women are lacking.<sup>12</sup> Where gender is incorporated into state-building programmes there has tended to be a focus on institutional reform rather than transformative changes of attitudes towards gender roles (Jennings, 2009). Thus gains in equality have tended to be concentrated on formal rights-based improvements, rather than shifts in informal power structures

<sup>9</sup> See for example <http://www.gsdr.org/go/display&type=Document&id=3398>

<sup>10</sup> See <http://www.gsdr.org/go/topic-guides/service-delivery/pro-poor-service-delivery-introduction> for more information.

<sup>11</sup> See <http://www.gsdr.org/go/topic-guides/service-delivery/pro-poor-service-delivery-introduction> for more information.

<sup>12</sup> See also GSDRC (2010).

(Castillejo, 2010). However, in FCAS women often have a weaker relationship with the state, due to social and educational barriers which limit direct access to state institutions, causing their relationship with the state to be mediated through family members or community institutions (Castillejo, 2010; Schoofs and Smits, 2010). Castillejo (2010) contends that post-conflict reconstruction can provide opportunities for women to mobilise, particularly through non-state structures at local level. These new opportunities can also provide avenues for women to adopt leadership roles that may not be open to them within formal politics, because these new spaces within civil society have fewer links to traditional power structures, so women's involvement is less unsettling. Thus involvement of women in governance and accountability structures for service delivery providers may provide opportunities for women to engage with the state outside the formal political arena.

When looking at donors' impact on accountability structures when supporting service delivery, given that aid to FCAS is often channelled via non-state channels thus supporting the short-route rather than the long-route of accountability, OECD (2008a: 8) observes that "external aid can have the effect of diluting the state's accountability for essential services and even weakening the governance framework over the long term."

### **3.5 The Role of Information in Service Delivery**

Information plays an important role in service delivery. The upwards and downwards flow of information enables policymakers at national and local level to be aware of citizen's preferences, and for citizens to have access to information on policy issues regarding service delivery in order to make informed decisions on whether the state is delivering on its promises. This should then encourage more active citizen engagement around service delivery both individually and collectively via community, sectoral and professional associations, networks and unions. Thus, effective information flows can help to build stronger accountability between the state and its citizens providing the state with greater incentives to meet public expectations (OECD, 2008a).

A number of documents especially from international NGOs advocate greater political knowledge and information about rights amongst citizens as a first step to claiming rights and acting for themselves (Benequista, 2010). Such studies often bring together a large amount of anecdotal evidence and persuasive arguments.

It is argued that the involvement of citizens improves the general standard of service delivery and also helps citizens to develop skills that will enable them to better participate in state-building. There remains a question whether such efforts reach the poorest and most excluded groups. A recent mapping of 150 cases of citizen participation found that while positive outcomes were found in 75 percent of cases, negative outcomes were found in 25 percent, indicating that more research is needed to understand the factors that influence the outcomes of citizen engagement in different contexts (Green, 2008). This appears to reflect the finding above that civic engagement may not be equitable. It involves power relations among citizens, between citizens and the state and other powerful actors, and between different state levels. Efforts should be made to determine whose voice is being heard in both

upwards and downwards information flows and to foster inclusive, effective participation (Oosterom, 2009). This is also vital in ensuring that the state remains responsive. In post-conflict contexts if certain voices are neglected it could compound existing divisions in society and tensions between groups.

### ***3.6 Aid Modalities Supporting the Delivery of Public Services that Contribute to State-Building and Peace-Building***

Donors can play an important role in supporting service delivery and/or state-building in FCAS. General and sector budget support can provide much needed fiscal space to support national authorities in financing service delivery, particularly in contexts where there is a low tax base (this will include all FCAS that do not have significant natural resources) (UNDP, 2010). When providing general or sector budget support, in order to ensure more inclusive citizen participation and voice leading to greater accountability around service delivery, Berry (2007: 1) argues that:

“The most effective approaches are in situations where the international community develops and supports national government capacity to lead a sector or sub-sector process which allows broad stakeholder involvement (including national and local level, and state and non state actors).”

The ways in which donors engage to support service delivery can be highly influential on state-society relationships. This is particularly relevant where donors provide aid via NSPs. Whilst supporting NSPs can be essential to provide access to services where the state lacks capacity to deliver these, a recent OECD (2010a) study found concerns that not providing support to state service delivery mechanisms can negatively affect state legitimacy. In particular the OECD (2010a) highlights the risks of creating a ‘dual public sector’ with non-state provision running in parallel to national state structures. Even if the state remains engaged in coordinating and monitoring non-state provision, if their role is not visible to the public their role may not be acknowledged.

However, aid provided via projects, particularly if funds are channelled via NSPs including NGOs, is often able to target marginalised groups whom the government is either not able or unwilling to reach (for example, the Zimbabwe Joint Initiative which supported a multi-sector programme of service delivery to vulnerable groups in six urban areas of Zimbabwe (Fenton, 2007)). When aid is provided in this way, whilst this may provide a short-term peace dividend, it also may end up strengthening donor/NGO-citizen accountability rather than leading to a strengthening of the citizen-state accountability mechanisms, as the government is being effectively by-passed. Whilst this widens access to services amongst marginalised groups, it may also end up undermining state-building processes. However, donors must recognise that in some extreme cases it may be necessary to disengage with government and focus on community and locally-led service delivery, but this may not contribute to wider state-building processes.

Hence, whichever channel through which aid flows, it is important to realise that it does not do so in a politically neutral environment. The way aid is delivered can give legitimacy to certain groups at the expense of others either by supporting the status

quo or by focussing on certain (under-represented) groups or regions. This underlines the importance of donors maximising the positive effects on social cohesion of providing aid to support the delivery of services. As illustrated above, interventions targeted at women could result in transformative change that affects women's relationship with the state or the status of women in society. Conversely Castillejo (2010) presents evidence that some targeted support and resources can be captured by elite women with little connection to grassroots communities, unless the resources are specifically targeted at grassroots levels.

The DAC *Principles* provide important guidance for donors providing aid to FCAS. However, there is some inconsistency when trying to apply all the principles at the same time. When supporting the provision of services, there is a "focus on state-building as the central objective" (Principle 3) where state includes government and civil society, yet also an emphasis on "aligning with local priorities in different ways in different contexts" (Principle 7) with full alignment supporting government systems which can sometimes exclude civil society; "avoiding pockets of exclusion" (Principle 9) may at times also be in conflict with using government systems that do exclude marginalised groups (Brannelly, Ndaruhutse and Rigaud, 2009). This demonstrates the challenges that donors face in ensuring that aid modalities which support the provision of public services also contribute to wider state-building and peace-building processes.

## 4. Education Sector

### 4.1 Introduction

Education is a right and progress in education is critical for the achievement of the wider MDGs in areas such as nutrition, child survival, maternal health, environmental sustainability and poverty reduction. Despite impressive progress in education enrolment over the last decade, there are still 69 million children without access to primary education worldwide and 42 percent of these (28 million) live in conflict-affected poor countries (UNESCO, 2011). Access to education is important but as the latest *Education for All Global Monitoring Report* (2011: 9) states:

"the real test of an education system is 'whether it fulfils its core purpose of equipping young people with the skills they need to develop a secure livelihood and to participate in social, economic and political life.'"

### 4.2 What Constitutes the Delivery of Education Services?

Children may enter education as early as 3 years old through early childhood programmes. Whilst early childhood programmes are widely acknowledged as essential in mitigating the effects of household poverty and strengthening prospects for economic growth, programmes are often not prioritised and continue to suffer from insufficient funding, fragmented planning and inequality (UNESCO, 2011). Between the ages of 5 and 7, children generally start a primary cycle of education which can last from between 4 and 8 years. Post-primary education can consist of secondary education (lower and upper), technical or vocational education programmes, tertiary or higher education and work-related training. Whilst there has

been progress in primary enrolment rates in some countries, post-primary education opportunities are more limited. Basic education is often used to refer to the first nine years of education and therefore is beyond just primary education.

In addition, in FCAS alternative education programmes are common and often provided by NSPs. These provide alternative methods of accessing or delivering education for children and young people, e.g. accelerated learning programmes or alternative curriculum provision such as peace education (Baxter and Bethke, 2009).

### **4.3 Modes of Provision of Education Services**

Education is generally viewed as a state responsibility with the government seen as the provider of education as well as the main driver of educational policy and legislation that supports universal access to basic education (Rose and Greeley, 2006; Batley and McCloughlin, 2010; and Chelpi Den-Hamer, 2011). In reality this is often understood as meaning that the state should provide education directly, so far as capacity allows (Rose and Greeley, 2006). Batley and McCloughlin (2010: 135) found that, education more than other services, is often associated with direct state provision, based on the fact that:

“education provided only with regard to individual benefits will fail to realise the wider benefits (positive externalities) associated with a universally educated population, including nation-building that may result from a common syllabus and identity.”

In reality, particularly in FCAS, where capacity and/or state incentives to provide services may be limited, NSPs including private (for profit) organisations and individual entrepreneurs, non-state (e.g. NGOs and faith based organisations (FBOs)) and communities are likely to play a role in providing education. Goldsmith (2010) found that private provision is more likely to be seen in African countries further from the effects of conflict, so that Uganda and Nigeria have a more dynamic private sector than say Southern Sudan where profit-making private schools have only recently begun.

In many countries FBOs or NGOs are a significant provider of education. For example, in Haiti only 19 percent of primary school-going children attend public schools and 92 percent of all schools are non-public (Boak, 2009a). In the Democratic Republic of the Congo (DRC) 70 percent of all schools are faith-based, mainly Catholic, Protestant, Kimbanguist and Islamic (Boak, 2009b). These different groups can often work in partnership with governments, for example with governments providing salaries, policy direction or even other levels of support. However, these relationships can be complex and Boak (2009b: 18) found that in the DRC, whilst there was an agreement in place between the state and the denominational associations, the agreement lacked “a clear delineation of accountabilities on the part of the different bodies, in particular in relation to the collection of school fees, financial governance and teacher management”.

In crisis situations or emergencies, international and national NGOs often step in to provide or support education service delivery. Although these organisations can have

very different characteristics and agendas (Novelli and Lopes Cardozo, 2008; Paulson, 2007), Chelpi Den-Hamer (2011: 5) states that “in practice one notices various attempts by international humanitarian actors to sideline national governments.” International actors can, however, also provide opportunities for change and introduce more learner-centred methodologies, child-centred environments and increase access for previously excluded age-groups, e.g. through early childhood education opportunities. These new opportunities and ideas can influence and shape expectations and education policy and approaches in post-conflict environments.<sup>13</sup>

Whilst Rose and Greeley (2006: 4) propose that state provision supports the legitimacy of the state “where legitimacy is understood as the ability of the government to work in the interest of the public and demonstrate fairness to all groups in providing security and services,” there seems to be less research on the implications of other forms of provision. It has been argued for example that poorly regulated non-state provision simply endows legitimacy on the provider itself rather than on the government.

Donor support has predominately promoted the primacy of the state (except in times of humanitarian crisis). A comparison between donor support to education in Afghanistan and the DRC (Greeley, 2008a and 2008b; Save the Children, 2008b) highlighted state-building as a primary concern for donors. In Afghanistan, donors supported the Ministry of Education who then contracted NSPs to provide services. In the DRC, donors supported the Ministry of Education to put in place a payroll system as a first step to improving the education sector. However, in the DRC, there were few resources available for actual education service delivery. In both these cases a state-building objective was pursued but it is not known how this impacted on state legitimacy, which in line with the OECD definition “may depend on its being seen to provide services as part of the ‘social contract’ with citizens” (Batley and McCloughlin, 2010: 148). In Haiti, support to state-building in education has led to a focus on building the capacity and the legitimacy of the Government to regulate the multitude of NSPs (Boak, 2009a).

#### **4.4 Education’s Potential Contribution to State-Building and Peace-Building**

In recent years the central role of education in state-building and peace-building has been increasingly acknowledged (e.g. INEE, 2010; UNESCO, 2011). A World Bank study on civil wars since 1960 concluded that a “country which has ten percentage points more of its youth in schools – say 55% instead of 45% - cuts risk of conflict from 14% to around 10%” (Collier, 2000). In addition Collier (2007) found that having a higher proportion of a country’s population that has completed secondary education is one of three key factors in lifting a country out of fragility and conflict.<sup>14</sup>

However, as stated by INEE (2010: 13) “education is more than service delivery and should be recognised for the diversity of roles it can play:

<sup>13</sup> See for example Nicolai (2009).

<sup>14</sup> It is important to note Easterly’s critique of Collier’s statistical assumptions. For more information, see <http://bostonreview.net/BR34.4/easterly.php>.



- As a stabilising factor, and therefore as a service that should be delivered;
- As a potential source for contributing to the likelihood of conflict and perpetuation of fragility; and
- As a potential means to mitigate conflict, contribute to state-building and build more resilient societies.”

Education, therefore, has a complex relationship with state-building and peace-building processes, being able to contribute to or destabilise them (Bush and Saltarelli, 2000; Parvanello and Othieno, 2008; UNESCO, 2011):

“education’s potential to either mitigate or exacerbate conflict and fragility will be a result of nuanced interfaces between education policies, planning and programming and the drivers and dynamics of conflict and fragility” (INEE, 2010: 4).

Education can also be a high profile, political issue. For example, in Kenya, Tanzania, and Uganda free universal primary education was a campaign issue which was implemented by the winning parties (Alubisia, 2005). In the 2010 Somaliland National Elections teachers’ pay also became a high profile political issue (Goldsmith, 2010). Furthermore, research suggests that national politicians and leaders have prioritised expanding the supply of education rather than improving the quality of education, since increasing access has a stronger association with gaining political capital (Williamson and Dom, 2010). Education is also often used as part of the peace dividend with peace agreements, for example in Southern Sudan in 2005. UNESCO (2011: 14) states that: “education can play a pivotal role in peacebuilding. Perhaps more than in any other sector, education can provide the highly visible early peace dividends on which the survival of peace agreements may depend.” Peace agreements often include education in recognition of its potential to address some of the root causes of conflict through equitable and adequate distribution of resources, inclusive access, improved governance and a non-discriminatory curriculum (Save the Children, 2008b).

Widespread and highly visible education policy changes can increase citizen engagement and participation (Alubisia, 2005). However with visibility and high profile, the potential for failure is strong if citizens perceive that the state is not delivering or not able to meet its promises, potentially damaging the citizen-state compact. For example, in Southern Sudan the slow pace of implementation of projects under the Multi-Donor Trust Fund which was mandated by the Comprehensive Peace Agreement, coupled with high expectations created frustrations among stakeholders who saw little evidence of a peace dividend being delivered (AFR/OPCS, 2010)

Tackling inequality and building inclusive education systems are also key issues in state-building and peace-building owing to their pivotal role in unlocking wider social and economic benefits. Inequality is a significant obstacle to accelerated progress in education, particularly at secondary level where attendance and completion are strongly associated with wealth, gender, ethnicity, location and other factors that can lead to disadvantage (UNESCO, 2011). The language used in schools can also contribute to political instability and conflict by excluding some communities from

education because they cannot understand the language of instruction (Pinnock, 2009).

In Sierra Leone, decades of poor governance and exclusionary trends in the education sector were a key contributor to the conflict and fragility; poor access to education was considered to be a grievance. Access to education is better now than it was before the war and a survey found many ex-combatants “now hold positive perspectives on the activities of the current [sic] government and prosperity of the country” (Humphreys and Weinstein 2004: 4; Barakat, Karpinska and Paulson, 2008). Abolition of school fees and increased access can also help change patterns of exclusion and foster trust in the government to serve the needs of its population (INEE, 2011).

A review of cross-country studies found that primary and secondary enrolments are significant as an indicator of the level of state ability and commitment to provide basic services as well as a minimising effect on opportunity costs for joining a rebellion. In particular, increased levels of secondary enrolment, especially male enrolment, are associated with reduced likelihood and duration of conflict (Collier and Hoeffler, 2004; INEE, 2010). As stated by Baraket *et al.* (2008: 17):

“Education trends such as declining enrolment or transition ratios, worsening gender parity indices, regional disparities, and the like are relatively easy to recognise and almost certainly indicate fundamental challenges to state stability, especially if they are a reversal of a positive trend.”

What is taught in schools, as well as who has access to education, can reinforce ethnic or political divisions within a country. An INEE multi-country study in Afghanistan, Bosnia-Herzegovina, Cambodia and Liberia found that:

“education actively or deliberately reinforces and perpetuates fragility for example through the politicisation and manipulation of access, structures, curricula, and textbooks. [Education also] reflects the status quo, for example by reproducing and failing to challenge existent patterns of division, inequality, violence, corruption, and inefficiency” (INEE, 2011: 14).

Spink (2008) also highlights that in Afghanistan the curriculum and textbook reform in the country were not prioritised as it was fraught with political agendas, meaning that the curricula was outdated and secondary school textbooks that extol violence remained in place. Conversely, education may also provide an opportunity to positively address divisions and inequality. Education can provide opportunities to learn skills, attitudes and values for negotiation, respect for diversity and cooperative problem-solving. In addition, targeted education programmes may focus explicitly on peace and conflict resolution, social cohesion, human rights and active citizenship (Sinclair, 2004).

As well as equitable and effective delivery of education and the content of the education, Kirk (2007) highlights a third dimension of fragility-sensitive education provision – the processes through which education takes place. These processes include the management and administration systems and relationships. Of particular

relevance for state-building and peace-building could be the engagement of citizens in the education process and the way in which this is facilitated. This could be through delivery of services, or through increasing the role of citizens and communities in accountability in relation to education at all levels.

A research study on community participation in Liberia found that following the war there had been a focus on the role of PTAs and Community Welfare Committees which was originally driven by NGOs and later taken up by the government (Sullivan-Owomoyela and Brannelly, 2009). This focus had been due, at least in part, to an attempt to empower and involve communities in services. A post-war assessment had found suspicion and distrust between communities and the government. The government was perceived to be too centralised and powerful and community groups wanted empowerment and recognition of their willingness to be involved in the provision of education and health services, through the management of their own resources, and by being involved in identifying needs and solutions (UNDP, 2006).

INEE (2011) also found that in Afghanistan, Liberia and Cambodia, education played a role in mitigating fragility where there was community-based education and community involvement in education management, as this helped to build local ownership and confidence. However, they also state that while community governance “is generally believed to promote local democracy and stronger civil society, details on local governance, such as how decisions are made and by whom, are still largely lacking” and that there is a need to increase the understanding of community-based governance to be able to assess, for example, whether local autonomy strengthens or weakens national identity and cohesion (INEE, 2011: 64).

Research also suggests that school level governance is susceptible to elite capture and to the perpetuation of existing unequal power relations (UNESCO, 2008).

Building a stronger domestic constituency to participate in education processes may also impact on state legitimacy. By examining the work of the Commonwealth Education Fund across 16 counties, Perry (2009) found that empowering civil society organisations to participate in education budget work can contribute to increased transparency and accountability. CSOs can also contribute to governance from the bottom up by creating partnerships at a community level and with local governments through principles of participation and consultation (World Bank, 2005). For education, the impact of such processes has been looked at from an education outcome perspective. However there is less understanding as to how such activities have impacted on expectations or state legitimacy.

## 5. Health Sector

### 5.1 Introduction

In FCAS, poor capacity to deliver public services such as health has resulted in less progress being made on the health MDGs in these countries. As was highlighted in 2005 (DFID, 2005), reports around the September 2010 MDG Summit confirmed higher under-five child mortality and other poor health indicators in FCAS.<sup>15</sup>

<sup>15</sup> [http://www.oecd.org/document/19/0,3746,en\\_21571361\\_43407692\\_46008211\\_1\\_1\\_1\\_1,00.html](http://www.oecd.org/document/19/0,3746,en_21571361_43407692_46008211_1_1_1_1,00.html)

People's health is determined by a range of factors and derives from the interplay between many biological and social determinants, including income, environmental factors, education and health service delivery. A well-known example is female education as the single independent factor influencing children's health (Cochrane, Leslie and O'Hara, 1982).

## **5.2 What Constitutes the Delivery of Health Services?**

Health service delivery is the most visible part of a health system and can be very broadly defined as “the mobilization, management and distribution of health resources – including staff, commodities, equipment, information, and financing – to serve the health needs of a specific population, contributing to effective and equitable health outcomes.”<sup>16</sup>

Health service delivery typically excludes delivery of or integration with other major determinants of health like water, sanitation and education. It is a function of five other health system building blocks: information, leadership and governance, health workforce, health finance and health technologies including drugs and infrastructure (WHO, 2007). With sufficient coverage and quality of services the system should be responsive to a population's needs, protect against the financial risk of disease and improve health outcomes.

## **5.3 Modes of Provision of Health Services**

Most developing countries and therefore most FCAS are used to government-provided and financed health services as the mainstay of the health sector, with varying degrees of direct financial contributions from patients through out-of-pocket expenses, as well as different levels of private sector involvement (e.g. FBOs and for-profit private practice). In most FCAS, these government-led health systems are poorly developed, have often deteriorated in times of conflict, and health outcomes are poor (Salama, Spiegel, Talley and Waldman, 2004). Accountability for the poor services offered is usually weak and the out-of-pocket payments lead to exclusion of the very poor (Gilson and McIntyre, 2005) and substantial financial risk for households with serious illness (Xu, Evans, Kawabata, Zeramdini, Klavus and Murray, 2003).

Post-conflict states usually have very low capacity to improve service delivery even if they have the will. Investments in health in these contexts normally aim to bring the privatised provision of healthcare by NGOs and others under a government umbrella with calls for increased equity and inclusion of underserved populations. During the last decade, the provision of a basic package of health services, free of charge, to all citizens, as a core policy element has become a commonly promoted approach (Strong, Wali and Sondorp, 2005; Cometto, Fritsche and Sondorp, 2010; and Kruk, Rockers, Williams, Varpilah, Macauley, Saydee and Galea, 2010). Part of this approach may be contracting third parties, often NGOs, to provide the services on behalf of the government. One concern with this approach may be low visibility for the government and hence fewer legitimacy gains (OECD, 2010*b*). This concern may be off-set by co-branding and by providing comprehensive services of higher quality

<sup>16</sup> <http://globalhealth.foreignpolicyblogs.com/2010/05/04/systems-thinking-service-deliver/>

by NSPs that in principle are much more accountable than the government's service delivery mechanisms, and have the potential for a wider impact on both health outcomes as well as on socio-economic determinants of health (Carlson, de Lamalle, Fustukian and Newell-Jones, 2005).

As with healthcare provision in most developing countries, FCAS are and are likely to remain dependent on external support to provide a minimum package of health services that are likely to meet the expectations of their populations, even if they do manage to increase national budgets (Pearson, 2009).

#### **5.4 Health's Potential Contribution to State-Building**

Prior to addressing this issue, two additional peculiarities of the health sector should be mentioned. Firstly, there is a tension between what health professionals consider good for health and what people usually demand. For instance, most populations value facility-based curative services over preventive services at primary care levels. Secondly, demands for health services are endless. Even very rich countries cannot afford to pay for all the health services people demand, with resulting political tensions around inevitable rationing of care, as recently experienced with the rationing of care at National Health Service trust hospitals in the UK (Jones, 2011).

In recent years, and in particular in areas where this is not a given, as in most FCAS, leadership and governance are increasingly seen as key elements for health system strengthening. Typically, this leadership role is expected to come from the Government, more specifically from the Ministry of Health. Parallel services<sup>17</sup> and poorly integrated vertical programmes,<sup>18</sup> while often beneficial in terms of health in the short-term, bypass the state and may potentially undermine state-led health systems (Ooms, Van Damme, Baker and Zeitz, 2008). Most experts believe that the health sector should be a public sector concern rather than left to the market, with a principle reasons being because of inevitable market failures as a result of asymmetry of information between provider and consumer (Hsiao, 1995; Peters, 2002; Save the Children 2010a). However, the failure of many developing countries to adequately provide public services, led to pleas to introduce 'new public management' which would expose public services to market pressures, without necessarily privatizing them (Shaw, 2004). In recent years, this also resulted in promotion of a so-called 'purchaser-provider' split, whereby the party who pays for health services, for instance the government, does not necessarily also provide the services but contracts other (private) entities to do so on its behalf while ensuring policy-making, regulation and monitoring of service delivery, such as done in post-conflict Liberia, Cambodia and recently in Afghanistan (Loevinsohn and Harding, 2005). However, the danger is that the implementing agency rather than the government is credited with service delivery (Zuercher and Koehler, 2008). Whilst the impact of donor interventions in service delivery can have a major effect on state-society relations and the legitimacy of the state, especially in the eyes of the poor (OECD, 2008a), it remains to be seen whether this split retains the legitimacy of state-led and state-commissioned health services or whether, for example, it blurs

<sup>17</sup> Services provided outside a government-led framework, as is often seen in FCAS, for instance health services provided by (I)NGOs funded by international donor agencies.

<sup>18</sup> Programmes with a focus on one or more diseases with their own organisation and management.

the distinction between health as a public good and health as a commodity (Palmer, Strong, Wali and Sondorp, 2006). OECD (2010a) cautions that channelling aid through non-state multi-stakeholder bodies can distort sectoral spending as it has done in health sectors, weakening the capacity of states to deliver services with the consequent impact on legitimacy and state-society relations.

There does not seem to be any study that has looked at the expectations of populations regarding healthcare provision by their government. But it is known that people may go to great lengths to access health services in the case of (serious) illness, often at a price they cannot afford. This may plunge households into poverty, in particular in areas where there is insufficient risk-sharing in combination with availability of health services that can be paid for out of pocket (Xu *et al.*, 2003). On the other hand, it is known that utilisation of health care may remain low, even if health services become available and affordable, as was the case in post-conflict Cambodia in the 1990s, as the training of health workers and subsequent quality of care were inconsistent and morale was low (Bhushan, Keller and Schwartz, 2002).

Globally, it seems that there is an inverse relation between the need for health services and expectations that the government will assure availability of those services. More healthy populations with access to more sophisticated health systems have much higher expectations than poor populations with a high burden of disease. This does not mean that people would not appreciate health services being brought to them, and, whoever provides the services, the population is likely to at least opportunistically use the services. There is, of course, the hypothesis that the population will not only appreciate the services offered, but also the provider. It is this hypothesis that is the rationale of health service provision in 'hearts and minds' counterinsurgency operations, such as experiences in Malaya and Afghanistan (Thompson, 2008). It is also the notion behind the idea that health services provided by, or at least organised by the government may contribute to greater legitimacy of that government in post-conflict situations (Rubenstein, 2009) and there is some evidence that service provision through relatively small, rapidly executable projects that meet immediate local needs, has the effect of enhancing relations with local communities, as noted in Iraq (Mashatt, Long and Crum, 2008). However, there may in fact be more examples where this approach might have been counterproductive (Wilder, 2009). There is no evidence that government provision of health services would help increase its legitimacy, but there is also no proof that it does not. An argument regularly used in support of the idea that service delivery enhances legitimacy is the popularity of insurgency groups like Hezbollah and Frelimo with their emphasis on basic service delivery (OECD, 2008b).

The degree to which health service delivery may contribute to increased legitimacy and therefore state-building is also thought to be influenced by the way services are provided. In particular in relation to issues like to whom services are provided, by whom, by what financial means and through which accountability mechanisms. Donors may also influence public expectations by enabling citizens to voice their demands, for example by promoting participatory approaches to define needs and setting high standards in terms of quality of services delivered, accountability mechanisms and transparency, although it is not clear to what extent aid instruments can shape the nature of public expectations (ODI, 2010)

Health as a public good is thought to have significant popular support. If it is provided free at the point of use based on health need (not ability to pay), it can legitimise increased tax collection and build government legitimacy.

“The active involvement and management of services by the community is a key part of a successful health system, and is essential for progress, to rebuild trust and social capital, and in promoting accountability.” (Save the Children, 2010a: 19).

Apart from state-building through an enhanced social contract, another possible path to state-building using health has been postulated. Eldon and Waddington (2008) found that whilst health sector strengthening requires strengthening of health governance, by doing so it can contribute to state-building in the health sector. They concluded that the impact of health sector interventions on wider state-building is unclear. They also called for further research on the potential scope for wider state-building and strengthening of the state-society compact through decentralised and bottom-up approaches.

### **5.5 Health's Potential Contribution to Peace-Building**

A popular notion is ‘Health as a Bridge for Peace’ (WHO, 1998). It is usually used to indicate that health may provide a neutral space in which reconciliation and peace-building may be fostered. A common example is negotiated ‘days of tranquillity’ to allow for vaccination campaigns, but there are more complex approaches and programmes that use the same idea. A related notion is the often-used phrase, in (political) speeches as well as funding proposals, of improved health services being part of the ‘peace dividend’, which may be good for further stabilisation and peace-building (Waldman, 2006). Furthermore, improved health may contribute to improved wealth and therefore be a detriment to renewed conflict, an argument that takes the association between poverty and conflict into account. The reverse, ill-health contributing to conflict, has also been stated, citing the Maoist insurgency in Nepal (Murshed and Gates, 2003). Maybe not so much general ill-health, but in particular the emergence of epidemics may give rise to conflict. Examples would be the earlier hypothesis that countries with high HIV/AIDS prevalence could destabilise and even collapse, and the risk of regional conflict in the case of newly emerging diseases like Severe Acute Respiratory Syndrome and avian influenza (Solé and Sandell, 2003). Finally, wars may lead to widespread poor mental health, which may become a barrier to reconciliation and peace-building in post-conflict states. The ability of health services to address this is still inconclusive (De Jong, 2010).

At present, there is not sufficient and significant evidence to conclude whether improved health service delivery contributes to state-building and peace-building, or whether different ways of delivering healthcare impact differently on state-building and peace-building processes. However, it is clear that the health sector needs to identify how more coherent programming and better governance can bring improved health status and can create more robust systems to reduce inequalities, destitution and fragility (Save the Children, 2010b).

While conceptual frameworks on the link between health and state-building have recently emerged in the literature (Eldon and Waddington, 2008; Kruk, Freedman, Anglin and Waldman, 2010), a clear next step is to look for currently missing empirical evidence, whereby citizens' perceptions will be a key element. Another important element is research on the influence of various modes of health reconstruction, in particular in relation to the inclusiveness of health policy setting and community involvement in planning and implementation.

Despite some methodological measurement problems, mental health consequences such as post-traumatic stress disorder and depression seem widespread in many post-conflict countries (Steel, 2009), and in recent years some attention has been paid to the consequences for women who have been victims of massive sexual and gender-based violence in conflict-affected states (IASC, 2005). It still remains to be established if this may have an effect on the ability of a society to recover from conflict, including contribution to wider peace-building and state-building efforts. However, it may be hypothesised that these consequences will be of influence on recuperation at the community level, and that the health services could play a role in alleviating these adverse consequences, and thus contributing towards improving resilience among conflict-affected communities.

## 6. Sanitation Sector

### 6.1 Introduction

Poor sanitation is one of the major causes of disease worldwide, and one of the most off-track MDGs. 2.6 billion people do not have access to improved sanitation and 1.1 billion defecate in open spaces and bushes daily. According to UNICEF and WHO (2010)<sup>19</sup>, only 31 percent of the total population have access to improved sanitation in Sub-Saharan Africa.

While some progress has been made globally in improving access to sanitation, from 58 percent in 2000 to 61 percent in 2008, the MDG target on sanitation will not be achieved according to the UNICEF-WHO Joint Monitoring Programme (2010).<sup>20</sup> FCAS in particular have not made progress on sanitation, with access to sanitation in for example Sierra Leone (13 percent), DRC (30 percent) and Nepal (31 percent), remaining well below the global average of 61 percent.

Open defecation is also well above the global average in FCAS. Globally, open defecation has reduced from 21 percent in 2000 to 17 percent in 2008 yet Nepal (52 percent), Cambodia (64 percent) and Sudan (41 percent) had some of the highest rates (UNICEF and WHO, 2010). These are clear indications that FCAS have not made enough progress on improving access to sanitation.

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<sup>19</sup> According to the UNICEF-WHO Joint Monitoring Programme, improved sanitation ensures hygienic separation of human excreta from human contact. This includes use of flush/pour flush, septic tanks, piped sewers, pit latrines, ventilated improved pits and pit latrines with slab and composting toilets (UNICEF and WHO, 2010).

<sup>20</sup> Even if the target is achieved, there will be still 1.7 billion people without access to improved sanitation in 2015.



Women and children face disproportionately higher health risks from poor sanitation because they are more likely to spend their time in the local environment. Poor household sanitation and hygiene can have a devastating impact on maternal mortality and child rearing. Poor sanitation disadvantages women because of their reproductive role and their needs for privacy and menstrual hygiene (Gosling, 2010). Women may also be more exposed to risks of sexual violence if they have to travel far for sanitation needs. Recent research by Amnesty International (2010) reported that lack of sanitation is a major cause of gender-based violence, such as rape in slum areas. These risks are likely to be multiplied in FCAS.

Sanitation also has rural-urban disparities and affects women differently in each context. Seven out of ten households without access to sanitation live in rural areas, and with the growth of slums in urban areas, there is a reported increase in open defecation in urban areas (UNICEF and WHO, 2010). Rural areas are on a path to slowly abandoning the practice of open defecation, but they will still miss the MDGs.

Within this context, sanitation has received considerable international attention in recent years, with the United Nations General Assembly declaring 2008 as the International Year of Sanitation, and the decade between 1980 and 1990 dedicated by the UN to improving water and sanitation. DFID (2007) made a firm commitment to sanitation and the international trend is very similar. As a result more programmes are being commissioned to undertake research and to promote sanitation (e.g. DFID-SHARE, 2010) in order to move countries up the sanitation ladder (open defecation, to un-improved toilets, to shared toilets, and finally to improved facilities). Operation, maintenance, and sustained use with hygienic practices are fundamental to achieving health benefits from improved sanitation (Cotton and Tayler, 2000; Sohail and Cotton, 2002).

## **6.2 What Constitutes the Delivery of Sanitation Services?**

Sanitation is the safe disposal of human excreta, and disconnects the routes between mouth and human faeces through hygiene promotion. A good sanitation service reduces environmental health risks and contributes to good public health (Hardoy, Satterthwaite, and Cairncross, 1990). The delivery of sanitation services in its broadest sense includes hardware components, such as the construction of sanitary toilets, storage of human excreta and urine, carrying of excreta and urine, on-site treatment, emptying of pits/septic tanks, final disposal and treatment. It also includes necessary software components, such as creation of demand, hygiene education, skills for construction and maintenance, and supply chains for material.<sup>21</sup> These software components are what are referred to generally as sanitation service delivery components. The policies, regulations and state institutions provide the necessary enabling environment for different groups to achieve higher sanitation coverage and play a role in its direct delivery. Political economy of sanitation has been researched very recently and reports opportunity, sector understanding, realigning accountability, public debate and communication as the key drivers to enhance political support (WSP, 2011).

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<sup>21</sup> See USAID (2009) for a comprehensive list of different aspects of sanitation.

### 6.3 Modes of Provision of Sanitation Services

States have overall responsibility for sanitation as an essential component of public health and a human right.<sup>22</sup> However, in practice, sanitation services components are delivered by small-scale and sometimes large NSPs (private and NGOs) and are self-supplied by the household (where the state's role is very weak in rural areas and only recently emerging in urban areas). In some countries states are more active in providing larger components, such as treatment plants, large pipes and drains particularly in urban areas. Some of this is necessary, but how much these investments benefit the poor in terms of direct access is not well understood. People themselves often provide in-house or communal toilets and a small private sector is active in the supply of materials and skills for construction and maintenance. Certain states also take the responsibility of providing hygiene education and sanitation promotion. Understanding this division is key to establishing citizens' expectations, state and citizen dynamics, and state responsiveness. Donors' recent interest in component sharing is evidence of this need (Changa Pani, 2007).

Responsibilities for sanitation services fall under various ministries and there is no uniform model. At the federal level it could be with the Ministry of Health, Water or Local Government who are responsible for policies, large national programmes and national budget components. At the district and municipal levels it is more common to find local government institutions, such as municipal and district councils. In urban areas, there is a trend to deliver sanitation services through autonomous bodies such as the Water and Sanitation Authority and government-owned utilities. There are stark differences in the roles, responsibilities and technologies available between and within urban (e.g. urban slums versus urban commercial) and rural contexts (e.g. villages versus isolated rural areas) (Welle, 2008). Governments in developing countries are often poorly resourced to provide sanitation services in rural areas and only partially active in urban areas (AfDB, undated).

As explained above, sanitation service delivery requires a mix of hardware and softer components, such as construction of toilets, storage systems, pipes and also creation of demand, motivation to use and maintain and hygiene education. State institutions generally have higher capacity to deliver hardware components, such as construction of toilets or laying of pipes. State capacity to deliver softer components such as creation of demand, maintenance, hygiene and ensuring equity of access and understanding different gender needs are often weak (DFID, 1998; Cranfield University, Aguaconsult and IRC Netherlands, 2006). Nevertheless, this does not mean that states should not have a role in both the hardware and software components of sanitation service delivery.

States have a role in the spread of approaches such as Community Led Total Sanitation (CLTS) highlighting the supportive and enabling role of the state actors, especially in rural areas. This is discussed below in more detail. Promotion of infrastructure needs on urban components is considered equally important (AfDB, undated; Chiplunkar, 2011) on the basis that a healthier and cleaner state is equally important for economic growth and human development. Literature on sanitation

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<sup>22</sup> Unpublished report (2009) of the UN independent expert on the issue of human rights obligations related to access to safe drinking water and sanitation.

does not clearly define the state's role in the software-hardware mix as mentioned above, nor does it elaborate on the role of sanitation services in state-building and peace-building. Non-recognition of non-state provision, community potential and self-supply is a major gap in the literature (Batley and Mcloughlin, 2010). For example, the OECD report by Wang, Ibrek, Hague and Stoveland (2006) takes the view that the state is a set of government institutions that have a major role in all components of sanitation service delivery. A service that is already neglected in more resilient states may be even more neglected in FCAS. Therefore analysing the state's role with respect to various sanitation delivery components, citizens' expectations during times of fragility and the effectiveness of the state's response to providing sanitation services and as a result state-building, are clearly some of the lesser researched areas.

#### **6.4 Sanitation's Potential Contribution to State-Building and Peace-Building**

There is limited literature available which relates sanitation to the process of state-building and peace-building in FCAS. There is ample sanitation-related literature written for non-FCAS and it identifies a number of principles which could be used for FCAS. Those literature groups which are relevant for this research include state policies, state institutions, technologies and approaches and the range of literature concerned with community organisation, state facilitation and phases from emergency/ disaster to development.

State policies at the national level could be a major driver in improving access to sanitation.<sup>23</sup> Existence of a separate policy on sanitation is the first indicator of state responsiveness to the major needs of its citizens. Policies lead to actions, and it has been observed that more attention to promoting hygiene and delivering sanitation infrastructure tends to occur after key policy commitments are approved globally and nationally, e.g. after the water and sanitation decade, or following approval of a national policy (Elledge, 2003; Saywell and Cotton, 1998; and Government of Bangladesh, 1998).

Having a national sanitation policy with enabling strategies is an important sign of commitment by the state to addressing causes of poor public health and in meeting public expectations. In the case of Bangladesh, this policy provided a major incentive for the state to attract international funds, to mobilise state institutions and to use the potential of the community and NSPs. This led to greater state-citizen engagement and negotiations. As a result of this, Bangladesh has seen access to improved sanitation increase from 39 percent in 1990 to 53 percent in 2008 and it has reduced open defecation from 33 to 7 percent. This was promoted as an exemplary case globally, raised Bangladesh's profile in the sector and was positively used by the Government in power, with support from civil society and media (Ahmed, 2008). Bangladesh's efforts on sanitation could show how states could take an enabling role in the provision of sanitation and mobilise resources from different groups. It also shows how Bangladesh has built on the potential of citizens to self-supply certain components and enable supply chains through a range of approaches and how civil

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<sup>23</sup> Sanitation has no global standards and policy guidelines equivalent to water. For example, WHO guidelines on water are more common, while there is nothing on sanitation.

society groups and media could contribute to a state's objectives and citizens' demands.

Political economy analysis in Brazil, India, Indonesia and Senegal also observes the signs of an increasing attention of politicians to sanitation as a political agenda (WSP, 2011). For example, in India there is an increasing trend to strengthen local government institutions to deliver operation and maintenance of sanitation services. In contrast, there are still countries where the state could be seen as a barrier because their policies may not reflect the demand of its citizens. For example, Zimbabwe has policies and technical standards which are neither enabling nor affordable to the majority of the poor (Practical Action, 2011). A positive change from the state to enabling its citizens to build and maintain sanitation facilities could be a win-win outcome, contributing to both better health and also improved state-society relationships.

State institutions such as Ministries and local government departments have an important role in meeting citizens' expectations through state responsiveness. Local government institutions are often the first point of call for citizens and play an important role in the direct delivery, hygiene education and demand creation of sanitation services. They are expected to maintain communal toilets, maintain drains and provide services for emptying pits and septic tanks. Participatory budgeting and demand responsiveness are some of the methods tested with success to build citizen trust in the state, where citizens could demand certain resources. There are a range of governance-rated aspects, such as accountability, transparency, access to information and addressing complaints, where state institutions have a major role (Garandeau, Casella and Bostoan, 2009 and Hutton, 2010). This relates to designing new programmes in sanitation, evaluation of past efforts and basic information such as maps, roles, responsibilities and contact points on sanitation service delivery. Local governments are often under-resourced and poorly capacitated in undertaking these opportunities for improved sanitation supply.

A state's ability to promote affordable and sustainable technologies is crucial to ensuring impact of its policies. It is also important to promote technology choices and more than one pathway to reach an outcome (STEPS, 2011). This is where technology and delivery systems are important and donors have paid attention to these. Key examples of the efforts to support this include DFID (1998) *Guidance Manual on Water Supply and Sanitation Programmes*, Practical Answers (2011) and WaterAid (2011). The state's ability to promote technology choices, and encourage users' participation is an important way of improving state-society relationships. If the state approves only one approach to sanitation access and then is unable to support this, citizens look for other means and channels to access sanitation services, and state-citizen engagement is reduced. Approaches such as participatory planning and participatory technology assessment are important to improving communication, building trust and leading a pathway to empowerment (Ali, Faal and Sprung, 2009).

Participation and organisation of citizens around sanitation service delivery is a very relevant theme to state-building and conflict resolution, especially in light of the findings from the DFID-funded research on Community Led Total Sanitation (CLTS)<sup>24</sup>

<sup>24</sup> See [www.communityledtotalsanitation.org](http://www.communityledtotalsanitation.org) for more information.

and the global recognition of the Orangi Pilot Project (OPP). Research from both CLTS and OPP have demonstrated that communities can come together on sanitation, overcome differences and organise themselves for its sustainable operation. With good facilitation from the state this could achieve state-building and peace-building. The core principles of CLTS and OPP to enable citizens are that they do not offer up-front subsidies and recognise that citizens' efforts are highly important and relevant for FCAS. In the case of the OPP, the state provided larger pipes to further take away sewage from the streets built by people. In the case of CLTS, the state offers a reward once the community achieves the status of Open Defecation Free (ODF).

In India and Bangladesh, National and State governments adopted principles of CLTS to promote sanitation. Community triggering was taken forward by many politicians and the mind-set of upfront subsidy has changed to rewards in some States, once the village is declared ODF. In the case of the well known Orangi Pilot Project, scaling up was supported by a number of national programmes and the principles are adopted in the National Sanitation Policy of Pakistan. Tearfund (2010) reports from its experience in promoting CLTS in Afghanistan and Southern Sudan that there is clear evidence of CLTS leading to better community cohesion, improved relationships between the rich and poor, and citizens' ownership of the process (Harvey, 2008). However, there is not much analysis of the state's role in this process. In Zambia, UNICEF used CLTS at the district level, with support from the district government and local chiefs. The government supported the process once they were satisfied on the minimum standards of what CLTS meant by an improved physical toilet. Both OPP and CLTS offer principles which are important to bring citizens together, to create less dependency on the state, and to offer a model which leads to more strategic support from state to citizens. These approaches offer a range of details on how to deliver such programmes in a situation where the state is under resourced, demand and needs are high and there is little engagement on how to move up on the sanitation ladder.

Within key aspects of sanitation, there is an increasing recognition of hygiene, and a range of publications and research, including DFID's Sanitation and Hygiene Applied Research for Equity (DFID-SHARE, 2010) and the London School of Hygiene and Tropical Medicine's Hygiene Centre Research and Publications<sup>25</sup> (see Curtis and Cairncross, 2003 and Jenkins and Scott, 2006). Some states do have community health promoters and primary health care workers, which is an important state-citizen link delivered at the household level. While there is relatively more research on the impact of hygiene interventions on health, overall, the role of the state in introducing and sustaining behavioural change is still un-researched and it is not known how this helps in state-building. For instance it is poorly understood how citizens perceive improvements in their health through a state-led initiative and whether this increases their trust in the state.

There is also a relevant set of literature, which includes sanitation in emergencies, disasters and conflicts (see DFID, 1998 and Jones and Reed, 2005). Most of this literature is around technical approaches to improve sanitation in these situations, with few links to state-building and peace-building as a more medium-term goal. The

<sup>25</sup> See [www.hygienecentral.org.uk](http://www.hygienecentral.org.uk) for more information.

emerging literature on links between disaster and development could provide important parallels for sanitation transformation (Galperin, 2002). There are examples of how to procure emergency aid, commission contracts, encourage labour-based technologies and analyse local markets. Building capacity of local and national governments is also high on the agenda. There is ample literature developed on transition from emergencies to development (UNISDR, 2008), though there is nothing specific to sanitation.

This initial overview suggests that sanitation typologies and their links to state-building and peace-building have not been researched in any depth so any identified role that sanitation has in contributing to state-building and peace-building processes is a potential role rather than a tested role. The literature identifies a number of areas where sanitation service delivery offers principles and approaches which are relevant to state-building and peace-building. In summary this is about the state accepting sanitation as a need, establishing its role, bringing in investments and delivering its responsibility to difficult-to-reach groups. These responsibilities could be delivered through policies, institutions and finances. The second potential area is about those approaches which are designed to bring citizens together and facilitate a process which brings states on board, but without creating dependencies and/or raising expectations. The literature suggests the potential of CLTS, OPP and the emerging area of component-sharing to do this. This is especially pertinent given that governments are already lacking capacity to ensure access to basic sanitation services in more resilient contexts (Bartram and Cairncross, 2010). The literature suggests that sanitation could contribute to state-building and peace-building in four ways:

1. Through sanitation service provision, or creating an enabling environment for access, governments could reach the people, engage with them, re-build trust on a previously neglected issue and this could be done with relatively minimal upfront investment on related infrastructure.
2. Research shows that people come together on sanitation with good facilitation and natural leadership (Mehta and Movik, 2011; Hasan, 1997). If supported by the state, this could lead to positive engagement of people with the state, and between different groups of people.<sup>26</sup>
3. Sanitation is a relatively less ideological service, as compared to education. It is not considered as a 'God-given natural resource' like water. Therefore, state engagement around sanitation may be relatively easy in some FCAS. Higher sanitation targets improve public health, citizenship and this converts to human development and economic growth.

NSPs continue to play a role in sanitation provision and it is important to see how the state as the facilitator and NSPs as the providers could lead to delivery systems which could also achieve targets of state-building and peace-building.

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<sup>26</sup> In Orangi different ethnic groups came together to agree the route of sewer pipes and later negotiated with the state their participatory plans.

## 7. Water Sector

### 7.1 Introduction

Water is a key to development and to meeting the MDGs but it is estimated that 884 million people worldwide still do not have access to improved water sources. Sub-Saharan Africa in particular is off-track for meeting the MDGs; 37 percent of people without access to improved supplies live there. The vast majority (84 percent) of those without access to improved sources of water live in rural areas (UNICEF and WHO, 2010). It should be noted that statistics often underestimate coverage as they fail to reflect the real breakdown rates of water infrastructure. Managing competing demands for water for different uses is an increasingly major challenge. Access to water is widely linked to access to and ownership of land which has been an issue that has fuelled considerable conflict in countries like Zimbabwe. The policy literature generally identifies the major problems for service delivery in FCAS as the finance gap and the capacity (institutions, people, systems) gap. Whilst the majority of FCAS are in Sub-Saharan Africa, estimates suggest only 26 percent of official development assistance for water supply and sanitation is directed to the region (WSP and World Bank undated). In such countries, governments struggle to find funding to meet even 50 percent of their water and sanitation targets and face particular challenges with addressing equity and sustainability issues (AMCOW, 2011).

### 7.2 What Constitutes the Delivery of Water Services?

The water sector is organised into strongly demarcated sub-sectors: water for health, agriculture/food, for the economy (e.g. hydroelectric power) and the environment. International policy favours 'integrated water resource management' but the sub-sectors are often managed through different government ministries and approaches to water service delivery very differently. This review focuses primarily on delivery of 'drinking' water services whilst recognising the overlapping ways water is used.

### 7.3 Modes of Provision of Water Services

In FCAS, as in other low-income countries, there are many channels through which water is supplied and accessed (Plummer and Slaymaker, 2007).

In urban areas piped water may be supplied to household connections or public stand posts. However, piped connections constitute a minority of coverage – for example in Rwanda where improved sources cover 77 percent of the urban population, only 15 percent are covered by piped supplies (UNICEF and WHO, 2010). Piped supplies are mostly financed through tariffs for household connections, with the possibility of wealthier areas cross-subsiding poor areas, and disconnection for those who cannot pay. Wealthy people may also have their own private borehole or well. Utility companies also sell water from kiosks and from tankers; where utility coverage is limited, people pay high fees for water through unregulated informal markets, for example from private water vendors in slums. In a recent study in Uganda, Bayliss and Watasa (2011) calculated that poor people were paying up to 600 percent more for unregulated water than those buying from the water utility.

Although coverage of water services is relatively higher in urban than in rural areas (in Sub-Saharan Africa 83 percent of population covered in urban areas, compared to 47 percent in rural areas), people living in peri-urban areas or slums often have no access to clean water supplies and there is significant concern about the inability of service provision to keep pace with rapidly growing urban populations (UNICEF and WHO, 2010). Reports suggest that full-scale rehabilitation of water supply infrastructure may be a pre-requisite for viable service delivery and economic growth (WSP and World Bank 2009)

In the past two decades there has been a shift away from supply through public authorities towards water companies or water utilities (semi-public bodies run on commercial lines). Accountability is nominally ensured through consumer feedback, sometimes through a formal regulatory body. Experiments with privatisation of water in urban areas have been troubled (De Waal and Cooksey, 2008) and full privatisation is now less favoured than commercialisation with some public accountability. Whilst public bodies often fail to provide full water coverage, commercialised water services are criticised for neglect of equity issues, and their tendency to 'cherry-pick' high-income/good infrastructure areas for service provision, neglecting poorer areas where ability to pay is low. In FCAS neither the public nor private sector may have good 'reach' (Welle, 2008) though this is difficult to substantiate as reporting of services and infrastructure provision in FCAS seems poor. Additionally, Welle (2008) notes that despite the amount of donor-funded activity in water in FCAS, literature on this is scarce. The dearth of relevant data and literature is commonly mentioned (e.g. WSP and World Bank 2009) and as a result many of the reports on water supply provision in FCAS makes highly generalised points and policy recommendations.

There is a significant concern about peri-urban areas and secondary towns (UN-Habitat, 2005), governed by municipalities, where exponential population growth far outstrips infrastructure and the capacity to supply and manage services. These towns face additional challenges when conflict-displaced people settle there seeking services and livelihood opportunities. Water services/infrastructure may be unavailable to those without formal rights of tenure; conversely where such services and infrastructure is provided it may enable residents of informal settlements to make claims to property rights from the authorities.

In rural areas, service provision varies from piped supplies to drilled boreholes and hand-dug communal wells with piped service delivery very low and often confined to administrative centres. For example, only one percent of the rural population is covered by piped water supplies in Rwanda (UNICEF and WHO, 2010). Some households have their own wells or boreholes and use of 'unprotected' sources is common.

For some years policy has emphasised demand-led approaches which include decentralisation and community participation in construction and maintenance to ensure appropriateness and generate a sense of ownership and responsibility in water users. However, evidence suggests tensions in community-based approaches (Cleaver and Toner, 2006); strong ideas of 'ownership' can exclude already marginalised people in the community. Significant benefits accrue to



professionalisation of water service delivery (economies of scale, technical inputs, linking to ‘authorities’) but these have to be traded off against community control. In some contexts, the colonial legacy means that the community sees contributions as another oppressive tax (Cleaver, 1995). Multi-stakeholder platforms (MSPs) are a promising mechanism for building cooperative water management between stakeholders. Literature suggests MSPs work effectively with practical issues (water management) by ignoring (or backgrounding) the social divisions at the heart of competition over water (Warner, 2007). Whether this is an advantage or not in a post-conflict situation is a moot point.

Reports from FCAS reiterate general policy favouring decentralised, community-based approaches and suggest some of the limits of these, particularly in respect of the ‘capacity conundrum’ – lack of staff, robust institutions and financing to facilitate decentralised service delivery (WSP and World Bank 2009). Welle (2008), referring to Uganda, finds such approaches limited in terms of the human and financial capacity to support them at the community level and CECORE and Saferworld (2008) drawing on experience in Uganda stress the need for a greater proportion of funds and time to be spent on ‘software’ in post-conflict situations. They document the inability of communities to resolve conflicts without escalation, and the need for external mediation of these.

In rural areas privatisation of public water delivery has gained less purchase because there is less chance of ‘cherry-picking’ by the providers, user’s cash incomes are less and more seasonal, economies of scale may be less, markets are not so well developed with little competition, and technical problems of supply and maintenance (for example in drought-prone areas with scattered populations) greater (Bayliss and Adam, 2011). Some argue that there is also a trend for water to be appropriated by the rich (landowners, leaders and business people) and for the poor to suffer dispossession. There is evidence that in FCAS such dispossession is magnified and there is a significant challenge in re-establishing *public* claims to water. This is particularly so as claims to water and water infrastructure are closely inter-related with claims to land rights (e.g. in Zimbabwe). Welle (2008) reports a feasibility study from East Timor stressing the limited capacity of the private sector in a post-conflict environment; other studies highlight increases in conflicts where private contractors do not use local staff (CECORE and Saferworld 2008) and leakage of staff from the government to the private sector, so further diminishing public sector capacity either to deliver or to monitor services (Eldon and Gunby 2009).

#### **7.4 Water’s Potential Contribution to State-Building and Peace-Building**

It is claimed that the delivery of water services is fundamental to the viability of other basic services (e.g. health and education) and could provide a very visible channel for establishing state legitimacy, for example through high profile government-led social infrastructure investment funds, and through community-driven programmes (WSP and World Bank, undated).

The supply of water (through infrastructure) is one possible ‘quick hit’ approach to state-building. Eldon and Gunby (2009) point out that improved access to water and other services/resources may be part of the political settlement (as in Zimbabwe) and

central to people's expectations of the state. Other evidence from Ethiopia, Sudan and Uganda points to the prevalence of conflicts around various aspects of water access and control (even after national political peace agreements have been implemented) suggesting that water is a key priority in people's livelihoods (Welle, Malik and Slaymaker 2008; CECORE and Saferworld 2008; Calow, O'Meally and Lundi, 2010). The importance of water in FCAS can be imputed from such conflicts and from the lack of services infrastructure, several reports emphasise the need for basic needs assessments as a starting point for building services.

However, benefits are only achieved when the infrastructure is maintained and governance arrangements ensure lasting access. The longer time scale of securing sustainability is probably in keeping with a project of building relationships of legitimacy and capacity (e.g. in procurement) in FCAS. Welle (2008) draws on various studies to suggest that project cycles of 24 months and longer are needed for working on water and sanitation projects in FCAS, allowing for sufficient preparation and mobilisation, building trust and the ability of users to exercise voice and to hold service providers to account. She cites the example of the Government of Australia's support to East Timor over a five year period as a step in this direction. One significant bottleneck in ensuring sustainable services is the supply of spare parts and the need to spend time setting up viable procurement and supply systems.

Water allocation and access reflects social, political and economic inequalities (gender, poverty and spatial remoteness) and there is a danger of service delivery reinforcing these. Post-conflict populations are characterised by households with high dependency ratios, who find it hard to physically access water, to pay for water and to participate in public decision-making and water management (i.e. families with large numbers of young children, child or grandparent-headed households, households split by migration or displacement and those caring for conflict, disabled and HIV/AIDS-infected members). Overcoming barriers to access is key to securing benefits from service delivery and ensuring that it does contribute positively to state-building processes. Welle (2008) identifies two possible approaches in FCAS: (i) supply-side approaches emphasising pro-poor policy/institutional reforms and targeting; and (ii) demand-side approaches or rebuilding the role of civil society, especially through community-based management. In considering how to improve capability, accountability and responsiveness, Calow *et al.* (2010) for Ethiopia stress the need for: (i) political prioritisation of water supply issues (including supporting citizens on claiming 'rights to water'); (ii) mitigating measures to ensure that decentralisation is effective and not captured by local elites; and (iii) capacity building at all levels.

International policy for 'good water governance' includes the need for integrated management, community participation and the private sector. Some approaches also stress 'water justice' and the basic rights to water (Slaymaker and Newborne, 2007). Key issues include questions of scale – the level at which services are provided, benefits achieved and relationships of accountability built (Le Quesne, Pegram and Von der Heyden, 2007). Experience suggests no 'quick route' to pro-poor water governance (Cleaver, Franks, Boesten and Klire, 2005).

Both long-route and short-route approaches to good water governance face problems in FCAS (Plummer and Slaymaker 2007; Welle 2008). In the former case, this is partly due to lack of institutional capacity and weak leadership; to redress these she suggests the need for low-level entry points, shadow system alignment (e.g. funding through NGOs but following government planning and management procedures) and political dialogue. Short-route financing (e.g. micro-finance funds channelling resources directly from providers to users) are of limited reach in FCAS (Welle *et al.*, 2008)

NSPs involved in water provision include NGOs, churches and social institutions such as Hometown Associations. Literature suggests that donor funding is critical to state-building through water service delivery, and that services delivered through NSPs still helps to build general state legitimacy (Eldon and Gunby, 2009). Strengthening small-scale providers may be crucial in expanding and sustaining water service delivery, but questions arise about how they are to be regulated where the state is weak (Moran and Batley, 2004). The dangers inherent to 'bypassing' state structures raise questions about (i) whether the longer term capacity of the state to deliver services can be built; and/or (ii) whether the state can act as an efficient regulator of non-state services (Welle, 2008, Bayliss and Adam, 2011).

Given the multiple actors involved in supplying and providing access to water, even where the state has capacity it may only be effective when *combined* with activities of NSPs and with the functioning of informal institutions in the wider post-conflict governance apparatus (Ogbaharya, 2008). State ideas may penetrate non-state and informal (or 'twilight') institutions whilst conversely plural institutional channels also provide routes through which the state can 'read' and respond to society (Eldon and Gunby, 2009). This means that the idea of the state (including ideas about what is legitimate or authoritative) may exist and be reproduced in local informal settings even where state institutions do not reach. However, decentralisation, whilst often considered pro-poor, can actually work against poor households and reinforce power asymmetries in FCAS as marginalised people may be left to access services through local elites (Mapedza and Geheb, 2010; Mtisi and Nichol, 2005).

Claims for the success of private sector delivery of water services (Lindemann, 2006) are challenged by those who see this type of 'neo-liberal state-building' as ineffectual in post-conflict states (Barbara, 2008). At worst water privatisation increases water conflicts (Postel and Wolf, 2001; Tati, 2005); and social movements may have to mobilise to regain public control over water (Ahlers, 2010; De la Motte, Hall and Lobina, 2005).

Various lessons are drawn from efforts to address the water-security nexus in post-conflict situations. There is need for conflict-sensitive approaches to build sustainability and equity and thus develop trust in the state (e.g. CECORE and Saferworld, 2008). Scarcity of water can generate conflicts but it can also alleviate them by providing the incentives for cooperation between stakeholders (PBSO, 2008; Rosario, 2009). Guidelines for conflict-sensitive approaches have been proposed based on experiences in Ethiopia (Bonzi, 2006). State-building structures and social cohesion can be supported through the institutionalisation of common identities and the development of enduring *formal* structures (EC, 2009).

Others argue that use should be made of *traditional* institutions in preventing conflicts over water (Lykke, 2008) and that the reconciliatory principles of customary law are preferable to the adversarial principles of modern legal and bureaucratic systems (Maganga, 2007). The need for a system of third party intermediaries to facilitate dispute resolution between and within communities over water (Ravnborg, 2004) or for semi-autonomous advocates to support people in claiming their water rights from the service providers (Duni, Fon, Hickey and Salihu, 2005) are also considered.

The literature on FCAS and water emphasises the importance of politics. Water was significant in the history of colonial state formation (Allouche, 2010) and is often integral to a post-colonial political settlement (Eldon and Gunby, 2009). Water is used both as a political weapon (e.g. Zimbabwe's National Water Authority was created to reduce the power of municipalities) or as a useful 'peace-building' entry point post conflict, underscoring the point that service delivery can both contribute positively and negatively to state-building processes. Dissatisfaction with service delivery can blend with political discontent to spark opposition (e.g. resistance to water meters in South Africa (Matlala, 2008)).

Gendered issues are likely to feature strongly in access to water and women are likely to benefit disproportionately from improved supplies. However, this cannot be taken for granted as literature suggests that national level peace often fails to deliver security for women and indeed social 'backlashes' against women have been documented with increases in violence against them (Pankhurst, 2007). It cannot then be assumed that community-based approaches are inevitably positive for gender relations in these contexts. Conversely, water may provide a platform for building more equitable relations at community level (Welle *et al.*, 2008).

In summary we can draw on WSP and World Bank (2009) in which a range of strategies for approaching water service delivery (to achieve state-building) in FCAS is proposed. These prominently include establishing accountability mechanisms early in the emergency-development aid continuum, establishing shadow implementation channels whilst building state institutional capacity, establishing basic information data bases and coordination strategies, and working over a long period of time.

## **8. Common Threads and Divergent Issues from the Different Sectors**

### **8.1 The Dual Role of Service Delivery**

The sectoral sections of this literature review have highlighted actual or potential roles of all the four sectors in both state-building and peace-building processes. One of the key conclusions is that service delivery, depending on *how* it is undertaken (exclusively versus inclusively, by which type of provider, and to which groups of people) can contribute either positively, negatively or neutrally to wider state-building and peace-building processes. The exact conditions under which its positive contributions can be assured are not clearly outlined in the literature although they are more developed for education than for the other sectors, with several logical assumptions and hypotheses made, but a lack of comprehensive evidence. This is the first significant gap in the literature.

## **8.2 Expectations in the Different Sectors**

There is real diversity across the sectors in terms of the expected role of the state: in the education sector, the primacy of the state is strongly assumed by citizens and desired by the state even though services are provided by a range of state and non-state actors. There is a similar set-up in the health sector in terms of provision, although an overarching assumption that whilst the state may be responsible, citizens are expected to pay some level of user fees. In the water and sanitation sectors, there is a greater amount of private sector and community provision as well as self-supply through private bore holes, wells and latrines with a general expectation of the payment of user fees. In sanitation particularly, there seem to be relatively lower expectations of the state to deliver services than for other sectors; the majority of financing for sanitation comes from households, and there may be no demand for sanitation if it is not a cultural norm and people are unaware of its importance and potential health and economic benefits. For water, there is also a shift away from fee-paying government direct provision to an expectation by the government that the private sector will play the main role in supplying water with the government taking more of a policy and regulatory role and it is unclear what impact this will have on legitimacy if the private sector does not fulfil its expected role.

If the legitimacy of the state is said to rest on meeting expectations, there is a need to understand the nature of these expectations more clearly, how they are influenced and measured, whether they vary across sectors, between urban and rural populations and across different countries, and whether the expectations of the government and citizens are largely convergent or divergent. This appears to be a second important gap in the literature.

## **8.3 Types of Provision and Impact on Legitimacy**

Across all the sectors, the state plays a role in setting policy, writing legislation, monitoring standards and/or in delivering services. Within the education sector, state involvement in all these levels to a varying degree in most FCAS means that the provision of education services is likely to increase the state's legitimacy. In the health sector, there is more contracting out so there is less direct visibility for the government and whilst evidence suggests that this does not necessarily inhibit state-building there is always a risk that it might (Eldon and Waddington, 2008). However, in both these sectors, the payment of public sector salaries to teachers and health workers is also a very visible aspect that can increase the state's legitimacy and thus contribute positively to state-building and peace-building (Goldsmith, 2010).

State-building has often been seen as capacity building with a strong focus on strengthening the government's role to deliver services and less emphasis on the role of service delivery processes to build a more resilient state. Given the preponderance of NSPs at different levels in all the sectors, a key issue on which the literature remains inconclusive is what impact this has on the legitimacy and the visibility of the state. There is some concern that where there is predominant non-state provision, this will build the visibility, popularity (if done well) and legitimacy of the NSP, but will not contribute to wider state-building and peace-building. However, there is also an argument that where services are provided, regardless of who is

providing them, this gives people a view that services are being provided by the state (though not necessarily the government) and this does go some way to building state legitimacy. The evidence on which one of these views prevails or whether both prevail under certain conditions is a third gap in the literature. Unpacking this further will be important during the country-level fieldwork scheduled for phase 2 of this research programme.

#### **8.4 Level of Inclusiveness of Services**

The literature is clear that equitable service delivery and inclusiveness are key issues for state-building, peace-building and state legitimacy. Within all the sectors, there is a realisation that access to services often reflects social, political and economic inequalities and that service delivery can either reinforce these inequalities or help to overcome them. Inclusive access, whether through eliminating fees or targeting/subsidising access for marginalised groups, plays a critical role in contributing to wider social and economic benefits. The example of non-inclusion in Sierra Leone's education system outlines how this was a significant "grievance" factor that contributed to the collapse of the state. For water, cooperation between stakeholders leading to wider access can help contribute to state-building and peace-building processes. Providing more inclusive access to services gives a positive perception of the state but it may also increase expectations and demands for services leading to unmet expectations. This is a fourth area for which the literature lacks evidence.

#### **8.5 Community Involvement, Ownership and Accountability**

All the sectors have demonstrated that there has been limited research on how governance and accountability processes in the sector may contribute to state-building and peace-building. There is the potential for both elite capture and exclusion in governance processes in the water sector and this is likely to be true in other sectors. Within the education sector, there is often more of a focus in extreme crisis situations on citizens coming together and delivering services themselves rather than looking at advocacy and accountability (INEE, 2011).

There is a pressure in many FCAS to focus on immediate service delivery interventions especially in or directly after situations of crisis. However, the process of building effective systems of accountability and governance at different levels and between levels that lead to more sustained peace and stability needs to be long term. A key challenge is how to focus on both putting in place these governance and accountability mechanisms as well as on service delivery which may be provided predominantly by NSPs.

In light of this, a fifth gap in the literature and area for further research during phase 2 is the existence and depth of short and long routes of accountability and how these impact on state-building and peace-building and whether a balance is needed between them to most effectively build state legitimacy.

**Table 1: Summary of Key Findings and Critical Gaps in the Literature**

Key Findings of the Literature Review	Critical Gaps in the Literature
1. Service delivery can contribute positively and negative to state-building and peace-building.	1. Lack of evidence regarding under what conditions service delivery's positive contributions to state-building and peace-building can be assured.
2. There are differences in citizens' expectations on service delivery in the four sectors.	2. Limited understanding of the nature of expectations.
3. Different types of provision (state versus non-state) may have a different impact on legitimacy through visibility.	3. Lack of clear evidence on whether non-state provision has a negative impact on the legitimacy and visibility of the state.
4. Equitable service delivery is important.	4. Lack of evidence on whether providing inclusive services increases citizens' expectations.
5. There is a challenge when trying to focus on service delivery and state-building simultaneously.	5. Limited research on how community involvement, ownership and accountability impact on state-building and peace-building rather than just on sector outcomes.

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