

Review of the Governance Effectiveness of the Constituency Development Catalyst Fund in Tanzania

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Abstract

This study reviews the governance effectiveness of the Constituency Development Catalyst Fund (CDCF) after three years of implementation in mainland Tanzania. Effectiveness is defined as *an aggregate measure of (or judgement about) the merit or worthiness of an activity*, and governance of the CDCF defined as *the extent to which members of the Constituency Development Catalyst (CDC) Committee adhere to governance criteria of (i) rule of law, (ii) accountability, (iii) participation, and (iv) equity in discharging their duties*. Thus, the governance effectiveness of the CDCF refers to *the extent to which the CDCF has merit or worthiness in terms of (i) rule of law, (ii) accountability, (iii) participation, and (iv) equity*. The primary data were gathered from a survey conducted in six electoral constituencies in Tanzania mainland, namely Kinondoni, Lindi Urban, Kilosa Kati, Singida West, Siha, and Karatu. The survey consisted of questionnaires administered to 82 respondents and one-on-one interviews with 18 elected officials and government staff.

Applying the local governance and local development frameworks, the study finds all elements of CDCF governance (rule of law, accountability, participation, and equity) to be ineffective. The t-tests confirm our null hypotheses that there are no differences in all measures of CDCF governance between high performance and low performance constituencies, measured on the basis of their capacity to absorb CDCF resources. Exploration of interview data indicates that CDCF co-existence with the Local Government Capital Development Grant (LGCDG) and involvement of members of parliament undermine the CDCF's governance effectiveness. Contrary to the Constituencies Development Catalyst Fund Act, No. 16 of 2009, for example, some funded projects are solicited by MPs (top-down approach) during political rallies.

One important finding is that the CDCF is not always used for the purposes for which it was designed. What is clear from the study is the existence of governance deficits in CDCF implementation. Based on the findings, it seems logical to strengthen CDCF governance mechanisms by amending the CDCF Act. However, this study was a small-*N* design, thus necessitating a larger and more representative sample before making firm conclusions and recommendations on the state of CDCF governance in Tanzania.



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List of Abbreviations and Acronyms

ASDP	Agricultural Sector Development Programme
CAG	Controller and Auditor General
CCHP	Comprehensive Council Health Plan
CCM	Chama cha Mapinduzi
CDC	Constituency Development Catalyst
CDCF	Constituency Development Catalyst Fund
CDF	Constituency Development Fund
CHADEMA	Chama cha Demokrasia na Maendeleo
CMT	Council Management Team
CSO	Civil Society Organisation
CUF	Civic United Front
DADP	District Agriculture Development Plan
D-by-D	Decentralisation by Devolution
DC	District Commissioner
DDP	District Development Plan
DLG	Democratic Local Governance
DPLO	District Planning Officer
DT	District Treasurer
ESDP	Education Sector Development Programme
FBO	Faith Based Organisation
FY	Financial Year
IPF	Indicative Planning Figures
LAAC	Local Authorities Accounts Committee
LGA	Local Government Authority
LGCDG	Local Government Capital Development Grant
MMAM	Mpango wa Maendeleo ya Afya ya Msingi
MP	Member of Parliament
NGO	Non-Governmental Organisation
O&OD	Opportunities & Obstacles to Development
PEDP	Primary Education Development Programme
PETS	Public Expenditure Tracking Survey
PF	Policy Forum
PHSDP	Primary Health Services Development Programme
PMO-RALG	Prime Minister's Office–Regional Administrations and Local Governments
PMU	Procurement Management Unit
RAS	Regional Administrative Secretary
RC	Regional Commissioner
SEDP	Secondary Education Development Programme
TASAF	Tanzania Action Social Fund
WDC	Ward Development Committee
WEO	Ward Executive Officer
WSDP	Water Sector Development Programme

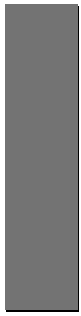


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About Policy Forum and REPOA

Policy Forum is a network of over 70 Tanzanian civil society organisations drawn together by their interest in influencing policy processes to enhance poverty reduction, equity, and democratization with specific focus on public money accountability.

REPOA is an independent, non profit-profit organization concerned with poverty and related policy issues in Tanzania. REPOA undertakes and facilitates research, enables monitoring, and promotes capacity building, dialogue and knowledge sharing.

1

Introduction

The Constituency Development Catalyst Fund (CDCF) is the latest local development funding mechanism in Tanzania. It is intended to provide people with an opportunity to make local development expenditure choices (United Republic of Tanzania, 2009). It was established in July 2009 for the purpose of development projects in every electoral constituency (United Republic of Tanzania, 2012a). Driven by long-standing concerns over slow and uncertain flow of fiscal transfers to the lower levels of government for development projects, the CDCF was expected to ensure that funds are made available on time to facilitate implementation of development projects at the grassroots level.

Institutionally, the CDCF has been designed to help the Members of Parliament (MPs) address their constituencies' developmental needs. In this respect, Tanzania's parliament passed the Constituency Development Catalyst Fund Act No. 6 of 2009, which directly provided MPs with funds to implement development projects in their constituencies. Thus, unlike other central government transfers for development projects that must filter through other layers of administrative organs and bureaucracies (e.g. through the health and water sector ministries and agencies), the CDCF funds go directly to the local level (Kimenyi, 2005).

In addition, underscoring the importance of grassroots voice and participation in projects that are intended to benefit local constituents, the CDCF was expected to provide individuals working at the grassroots level, through their MPs, an opportunity to be more actively involved in making expenditure choices that maximise their welfare in line with their needs and preferences (Kimenyi, 2005). However, reports of governance deficits in local government authorities (LGAs) have led to concerns over the CDCF's potential to achieve its objectives. For example, despite increased local governance practices (holding village and ward meetings and forming village and facility committees), a study by Kessy, Mashindano, Rweyemamu, and Prosper (2006) observed a breakdown of the government administrative machinery in responding to the voices of the people as well as malpractices in the course of delivering public services.

CDCF is a form of fiscal decentralisation. However, local expenditures in Tanzania are facing significant governance challenges. During the financial year ending on 30th June 2011, the Controller and Auditor General (CAG) report on Local Government Authorities noted that 56 LGAs were issued with qualified audit opinions and 5 Councils were issued with adverse audit opinions. When reviewing contract documents and transactions, the CAG noted suspected fraudulent practices in contracts, resulting in extra cost on contract sums: overpayment to the contractors and the payments being made without being supported by payment certificate. Consequently, "the councils made payments which they received no benefit hence creating nugatory expenditure to the Government" (United Republic of Tanzania, 2012a, p. 25).

Development grant leakages have also been reported. The government's 2010 PETS in primary and secondary education revealed that while councils received higher amounts of capital development grants compared to what was received by schools, some school reports do not show any capital development grant receipts even where district council reports state that such grants have been made. The capital development grant accounted for by schools is approximately 27 per cent less than what is reported to have been forwarded from district councils (United Republic of Tanzania, 2010).

Similarly, 2011 PETS by HakiElimu tracked education development grants and found that in 2008–09 the amount of funds reportedly dispersed to schools was Tshs. 8 million while the actual amount of funds that reached schools according to school heads was Tshs. 6.6 million. The amount of development funds leaked along the way from the council to schools increased in 2009–10: a total of Tshs. 25.3 million was sent to schools according to district administration; however, only Tshs. 1.6 million reached schools, according to the records of heads of schools (HakiElimu, 2011a).

The CAG report for FY 2010–11 also noted diverted funds: contrary to Order No. 49 of Local Authority Financial Memorandum of 1997, 20 councils made transfers amounting to Tshs. 750,621,650 from one account to another, both belonging to the same council, in the form of a loan which was not reimbursed to the originating account up to the year's end. Similarly, the government PETS revealed that 66 councils (out of 131 councils surveyed) spent less on education than what they had received, and the remaining amount was not carried over to the next year, meaning that they were diverted to other uses. About Tshs. 28.9 billion of education grants transferred to these councils in 2007–08 was diverted to purposes other than education (United Republic of Tanzania, 2010).

In addition, the CDCF has been established in Tanzania amid concerns over erratic delays in public fund disbursements to LGAs for implementing development projects in constituencies. When reporting audit findings for FY 2010–2011, for example, the CAG reported considerable delays in disbursing the first instalment of CDCF resources. As such, the Government's commitment to the formula-based allocations has been weak, with CAG reports indicating a dwindling trend of allocations to the Local Government Capital Development Grant (LGCDG) year after year.

Under decentralisation by devolution (D-by-D), councils are required to observe a bottom-up planning approach and integrate plans from villages and facilities. In developing Comprehensive Council Health Plans (CCHPs), for example, health centres and dispensaries have to prepare their plans in collaboration with the health facility governing committees before submitting them to the council for consolidation by the council health planning teams into the CCHP (United Republic of Tanzania, 2012b). However, the 2011–12 analysis shows that 39 councils did not include health centres and dispensaries plans in their CCHPs.

REPOA's findings from formative process research on local government reform in Tanzania reveal concerns about inadequate participation in six case councils from Mwanza city, Ilala municipality, Iringa district, Moshi district, Kilosa district and Bagamoyo district, where the tendency had been towards top-down approaches (Chaligha, 2008). Cooksey and Kikula (2005) noted that pet projects sponsored by the Regional Commissioner (RC) and District Commissioners (DC) were sometimes haphazardly integrated into district plans even though there was no semblance of participation in their elaboration.

1.1 Research Objectives and Questions

This study reviews the governance effectiveness of the CDCF in Tanzania, through an examination of governance issues arising from three years of CDCF implementation in mainland Tanzania: 2009–2010, 2010–2011, and 2011–2012. Specifically, the study set out to

- Determine the extent to which CDC committee members comply with the CDCF Act, Public Procurement Act, and Public Finance Act during the implementation of CDCF projects (rule of law and accountability).
- Appraise the CDCF linkages to district and national development plans (participation).
- Determine the extent to which implemented CDCF projects ensure equity in local development (equity).
- Explore how the CDCF co-existence with the LGCDG system influences CDCF governance.
- Explore how the involvement of MPs as chairpersons of CDC committees affects CDCF governance.

The main question guiding the study is, to what extent has CDCF governance been effective? The specific questions are as follows:

- To what extent do CDC committee members comply with the CDCF Act, Public Procurement Act, and Public Finance Act during the implementation of CDCF projects?
- To what extent do CDC committee members submit the CDCF activity and financial reports to higher authorities and share information with the local citizens?
- To what extent do CDC committee members fund projects from the Ward Development Committees (WDC) that are selected by local communities through the O&OD process?
- To what extent do CDC committee members ensure equity in selecting and funding local development projects?
- How does the CDCF and the LGCDG system co-existence influence CDCF governance?
- How does involvement of MPs as chairpersons of CDC committees undermine CDCF governance?

1.2 Justification of the Study

Governance effectiveness helps CDC committee members to prudently manage funds and strengthen their collaboration with Council Management Teams (CMTs) as well as local elected officers (councillors and village chairpersons). At this early stage in CDCF implementation, it is important to review the governance effectiveness of the CDCF mechanism and unearth potential weaknesses. The findings will inform the government of Tanzania as to whether the governance principles are adhered to during CDCF implementation

At the local level the concern is mainly about governance deficit that undermines the delivery of quality public services. Developing a better understanding CDCF governance effectiveness is therefore imperative. To review this governance effectiveness, we adopted local governance and local development frameworks that recognise the importance of governance and civic engagement for efficient implementation of local development projects.

From a public policy perspective, assessing the governance effectiveness of the CDCF is especially important because it is a local development funding mechanism that parallels the LGCDG, but

circumvents local planning, local budgetary allocations, and local reporting procedures (United Republic of Tanzania, 2009). Understanding how these two local development funding streams co-exist is therefore important.

1.3 Scope of the Study

This study distinctly analyses CDCF governance effectiveness in terms of application of rule of law in CDCF implementation, accountability in CDCF implementation, participation in CDCF planning, and equity in access to CDCF-funded services. Using qualitative and quantitative approaches and secondary data, the study explores the roles played by MPs and the existence of LGCDG in complementing or undermining CDCF governance effectiveness.

2

Framework for Analysis

The CDCF is a local development funding scheme in which the central government allocates public funds to local communities (constituencies) for implementing development projects. The CDCF Act defines a constituency as an electoral unit established by the Electoral Commission pursuant to Article 7 of the Constitution of the United Republic of Tanzania. These constituencies can be the entire district managed by a local government authority/council (for example, Karatu) or several geographical units within a district served by one council (for example, Kinondoni). The CDCF Act provides for the allocation and an orderly disbursement of local development funds to these constituencies.

Adoption of multiple approaches to local development funding has implications for governance. Having a well-functioning alternative local development funding mechanism is only likely when there are sufficient political, administrative, legal, and financial capacities at the sub-national level as well as adherence to governance principles. Thus, good governance is a prerequisite for CDCF effectiveness.

Governance is a slippery concept. Hitherto there is no strong consensus in the literature as to what exactly governance means. However, there is some grain of agreement as to its basic ingredients (Makaramba, 2003), including rule of law, participation and equity (Bloom, Sunseri, and Leonard, 2007), voice and accountability, political stability and absence of violence, government effectiveness, regulatory quality, rule of law, and control of corruption (Kaufmann, Kraay, and Massimo, 2010).

The basic ingredients mentioned above suggest that governance is a multi-faceted concept encompassing all aspects of the exercise of authority through formal and informal institutions in the management of the state's resource endowment (Huther and Shah, 1996). From this perspective, Ivanyna and Shah (2010) define governance as "an exercise of authority and control to preserve and protect public interest and enhance the quality of life enjoyed by citizens" (p. 4). This definition encompasses both the governance environment (quality of institutions and processes) as well as governance outcomes (efficiency and effective delivery of public services). Taking an institutional approach, the United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP) defines governance as "the process of decision-making and the process by which decisions are implemented (or not implemented)" (UNESCAP, 2009, p.1). This study adopts UNESCAP's definition because it focuses on the formal and informal actors involved in decision-making and the formal and informal structures that have been set in place to make and implement the decision.

Governance can be used in several contexts, such as international (global) governance, national governance, and local (sub-national) governance (UNESCAP, 2009), as well as corporate governance and project governance (Australian Government, 2013). Since the CDCF is a local development funding mechanism, a local governance framework is ideal for measuring its governance effectiveness. For example, local governance is a fundamental requirement for ensuring an effective strategic and practical response to the Millennium Development Goals (MDGs) (UNDP, 2005).

The definition of effectiveness is twofold. According to OECD (2002), effectiveness is (1) "the extent to which the development intervention's objectives were achieved, or are expected to be achieved, taking into account their relative importance" (p. 20), and (2) "*an aggregate measure of (or judgement about) the merit or worthiness of an activity, i.e. the extent to which an intervention has attained, or is expected to attain, its major relevant objectives efficiently in a sustainable fashion and with a positive*

institutional development impact” (p. 20). This study adopts the latter definition, for it measures the governance effectiveness of the CDCF, i.e. *measure of the merit or worthiness of an activity*.

The CDCF Act provides governance mechanisms to ensure that CDCF resources are used as intended and achieve their targeted objectives. These include procurement procedures (rule of law), expenditure reporting (accountability), bottom-up planning (participation), and poverty and geographical targeting (equity). CDCF governance is therefore defined as the extent to which members of the CDC committee adhere to governance criteria of (i) rule of law, (ii) accountability, (iii) participation, and (iv) equity in discharging their duties. Thus, our operational definition of CDCF governance effectiveness refers to the extent to which the CDCF has *merit or worthiness* in terms of (i) rule of law, (ii) accountability, (iii) participation, and (iv) equity.

Since the overall CDCF performance depends in part on the ability of CDC committees to manage the funds, then its governance mechanisms should be well functioning; otherwise the objectives of the CDCF Act may not be realised. Governance effectiveness helps CDC committee members to increase their objectivity in selecting projects from the wards as well as in oversight and evaluation. This study develops a CDCF governance effectiveness index to measure the extent to which CDC committees are meeting the local governance criteria of (i) rule of law, (ii) accountability, (iii) participation, and (iv) equity in discharging their duties.

Our CDCF governance effective index is grounded in the local development framework as suggested by Helling, Serrano, and Warren (2005), which draws on concepts underpinning the decentralised and participatory methods employed by practitioners of sectoral, local government, and community support approaches. Under a local development framework, CDCF projects are scattered around simultaneous initiatives for sectoral approaches, including the Primary Education Development Programme (PEDP), the Secondary Education Development Programme (SEDP), the Agriculture Sector Development Programme (ASDP), the Primary Health Services Development Programme (PHSDP or MMAM in Swahili), and the Water Sector Development Programme (WSDP).¹

2.1 Rule of law in CDCF Implementation

The concept of rule of law has, over the years, come to represent an opposition to the rule of one man or a despotic king, which is highly inimical to good governance (Makaramba, 2003). Governance requires fair legal frameworks that are enforced impartially (UNESCAP, 2009). A well-designed and well-implemented rule-based system of intergovernmental fiscal transfers brings greater stability, predictability, and discretion to local government finances, thereby promoting good planning and efficient local service delivery (Boex and Yilmaz, 2010). In this respect, the CDCF Act stipulates that “the charge on, and every expenditure from the CDCF, shall be made in accordance with the Public Finance Act, the Public Procurement Act and this Act” (United Republic of Tanzania, 2009).

Section 15 of the CDCF Act states that (1) all works, goods, and services relating to projects shall be procured in accordance with the Public Procurement Act (PPA); and (2) all tenders and quotations

¹ CDCF projects are also modelled on local governance approaches. This includes construction of village government offices and ward government offices. CDCF community support approaches are related to financing of income-generating groups and other community-based initiatives.

tabled at a meeting of the Constituency Development Catalyst Committee shall indicate that the committee has no objection to the award through a minute resolution before the tender of quotation is awarded. However, the CAG report established that the average level of compliance of LGAs to the PPA and related regulations was 41 per cent, mostly due to the lack of established or effective Procurement Management Units (PMUs).²

During FY 2010–11, CAG revealed that expenditures amounting to Tshs. 4,673,316,247 in 19 councils were incurred out of the approved budget without seeking any authorisation, contrary to Section 10 (3) of the Local Government Finances Act No. 9 of 1982. In addition, CAG revealed a number of inadequately documented contracts where the respective contract files lacked vital information, including contract agreements, Bills of Quantities (BOQ), Engineers' estimates, interim certificates, site minutes, copies of payment vouchers, and procurements made outside the procurement plan (United Republic of Tanzania, 2012a).

2.2 Accountability in CDCF Implementation

Accountability measures focus on transparent public financial management, including openness in allocations, transfers, and expenditures (Yilmaz, Beris, and Serrano-Berthet, 2008). Thus, “accountability links local decision-making to the implementation of public-sector and community-based initiatives and to the results they produce at the local level” (Helling et al., 2005, p. 22). For decentralisation to work adequately, therefore, those who initiate local capital projects must be accountable to those who pay for local projects and those who benefit from those projects (Bagaka, 2008).

The transparency component of CDCF accountability provides information on what is done, how it is done, and with what resources and results (Helling et al., 2005). Despite the fact that CDCF projects are supposed to share information with the intended beneficiaries, Baird, McIntosh, and Özler (2011) found in their evaluation of Tanzania Action Social Fund (TASAF) II that the poor and marginalised are exactly the groups among whom the awareness of the community development projects is the lowest. Thus, the intended CDCF beneficiaries may fail to demand accountability of CDC committee members due to lack of information.

Accountability mechanisms in the public services delivery chain also seem to be weak. For example, a study of democracy and poverty in Ruvuma region found that a head teacher who was reported to the District Council by the school committee for embezzling PEDP funds was not made accountable for the project's subsequent collapse (Kessy et al., 2006). He was instead transferred to a nearby school in the same position (head teacher) much to the chagrin of the villagers.

2.3 Participation in CDCF Planning

Representative democracy does not necessarily mean that the concerns of the most vulnerable groups would be taken into consideration in decision-making (UNESCAP, 2009). Thus, participatory

² In turn, ineffectiveness stems from understaffing or absence of appropriate staff qualifications, skills, or training (World Bank, 2010).

mechanisms should be in place to ensure that the needs of the poor and other vulnerable groups are taken on board during decision-making regarding their welfare. Public facilities like health centres, schools, and water supply systems tend to be used more often and are better maintained when citizens participate in decision-making than when investment decisions have been made by actors outside of the community (UNDP, 2005).

Sub-Section 12(1) of the CDCF Act states that the list of constituency-based projects for which CDCF funds may be disbursed shall be initiated by the members of the community who reside in a constituency. Sub-Section 12(2) states that upon compilation of the list of projects, an MP shall keep the record of the projects, to be attached with the list and submitted to the CDCF for consideration. This is a bottom-up participatory planning process, which starts from the villages to the wards, and follows the O&OD approach, which is also applied by LGAs in creating development plans for funding from the LGCDG.

The WDC receives the projects identified by the communities at the village level and consolidates them in accordance with the available funding envelopes, mainly the LGCDG. The projects that miss out on LCCDG but merit funding are forwarded to Ward Executive Officer (WEO) for submission to the CDC committee. In this regard, CDCF projects are considered to improve *allocative efficiency* because funding is directed to projects that would be picked by WDCs from the bottom-up planning process (O&OD).

From a normative perspective, Parker and Serrano (2000) note two reasons for why having a *local planning system* in CDCF may increase *allocative efficiency*: “First, it promotes a process by which *all* communities express their preferences rather than only a few. Second, it creates an instance at the local government level where these preferences are discussed and investment options are made” (p. 9). There are, however, wide variations in the constituency characteristics that may impact on the choice of the projects and mode of delivery and which may enhance or impede on the efficiency of CDCF utilisation (Kimenyi, 2005).

2.4 Equity in Access to CDCF

Although the CDCF takes a relatively small amount of national resources, its impact in terms of poverty reduction can be significant if the funds are efficiently utilised (Francis, Nekesa, and Ndungu, 2009). For example, Sub-Section 12(4) of the CDCF Act states that “the projects to be implemented and for which the Constituency Development Catalyst Fund funds are to be disbursed shall be equitably spread within the constituency”. This is a good governance initiative because a community’s well-being depends on ensuring that all its members feel that they have a stake in it and do not feel excluded (UNESCAP, 2009).

Although benefiting the poor is not an explicit CDCF objective, the issue of equity is an important component of CDCF governance. “Good governance requires that institutions and processes try to serve all stakeholders within a reasonable timeframe” (UNESCAP, 2009, p. 2). Realisation of this governance ideal requires putting in place targeting mechanisms. The CDCF Act provides mechanisms for both geographical and poverty targeting. According to Sub-Section 5.3(b), targeting consists of “(i) forty-five per cent in relation to the population of people living in a constituency; (ii)

twenty per cent in relation to the poverty margin; (iii) ten per cent in relation to the size of the geographical area of a constituency” (p. 6)

Targeting in CDCF projects may also take place via other mechanisms. By waiting for requests from communities, the CDCF applies a *reactive targeting* model. However, *reactive targeting* can be expected to produce less favourable targeting outcomes than a *proactive targeting* model, which allocates funds in a pro-poor manner either by excluding the better-off or by using a progressive allocation rule (World Bank, 2002). In this regard, targeted beneficiaries may not benefit from CDCF funds if governance principles are not observed during the selection of community projects.

2.5 The CDCF Governance Effectiveness Index

The CDCF presents an interesting hybrid case of local governance and local development frameworks. We measure the governance effectiveness of the CDCF in the local development context through a CDCF governance effectiveness index encompassing the application of *rule of law in CDCF implementation, accountability in CDCF implementation, participation in CDCF planning, and equity in access to CDCF*. Table 1 outlines the set of variables used in constructing the index.

Table 1: CDCF Governance Effectiveness Index

No.	Dimension	Variables
1	Rule of law in CDCF implementation	Impartiality
		Compliance
2	Accountability in CDCF implementation	Transparency
		Answerability
3	Participation in CDCF planning	Involvement
		Consultation
4	Equity in access to CDCF	Targeting
		Responsiveness

We assume there are no significant differences between case constituencies in all measures of CDCF governance effectiveness in our index.³ The null hypotheses are as follows:

- There is no significant difference between high performers and low performers in respect for **rule of law** in CDCF implementation.
- There is no significant difference between high performers and low performers in **accountability** of CDCF implementation.
- There is no significant difference between high performers and low performers in citizen **participation** in CDCF planning.
- There is no significant difference between high performers and low performers in **equity** in CDCF projects.

³ We have divided constituencies into high performing and low performing. The methodology section describes the criteria used for placing them into those categories.

We also explore the roles played by the (i) co-existence of the CDCF and LGCDG, as well as (ii) involvement of MPs as executive chairpersons of CDC committees in complementing or undermining CDCF governance effectiveness. One key aim of the CDCF is to ensure that additional public resources for local development reach the electoral constituencies despite the existence of the LGCDG system, while providing MPs representing those constituencies with a mandate to manage these resources. This may have implications for the CDCF governance as MPs are also required play oversight roles in local government financial management.

2.6 CDCF Co-existence with LGCDG (Funding Streams)

Up to 2004, development funding for LGAs mainly came from various (mostly area-based) donor-funded programmes that to varying degrees sought to integrate regulations and procedures into local government (Tidemand, 2005). Since 2004, the government (with assistance from the World Bank and donors) introduced a system for devolving development funds to LGAs – a fiscal transfer for development funding according to LGAs’ own priorities – resulting in the Local Government Capital Development Grant (LGCDG).

LGCDG is a system of graduated responsibilities based on demonstrated performance. The grant is distributed among LGAs according to a formula (population, poverty index, and land area), but in order to instil fiscal discipline and enforce adherence to good governance at the LGA level, only those districts that fulfil basic minimum conditions (such as reasonable audits, quality of development planning, etc.) are allocated grants (United Republic of Tanzania, 2004). The CDCF is also formula-based as indicated in Sub-Section 5(3) of the CDCF Act.

2.7 Parliamentary Involvement in CDCF

Section 10 Sub-Section (1) of the CDCF Act states that “[t]here shall be a Constituency Development Catalyst Committee for every constituency which shall be composed of and convened by the elected members of parliament and shall have a maximum number of seven members, comprising (a) the elected Member of Parliament, who shall be the Chairman” (United Republic of Tanzania, 2009, p.8). According to this sub-section, other CDC committee members are:

- The District Planning Officer, who shall be the Secretary,
- Two councillors who reside in the relevant constituency, one of whom shall be a woman.
- In the case of mainland Tanzania, membership also includes two WEOs, and in the case of Tanzania Zanzibar one Sheha, all of which shall reside in the relevant constituency.
- One member shall be nominated by the committee from among the active NGOs in the area, if any.

Unlike measures of poverty, Baird et al. (2011) observed that variables measuring political activity and connectedness increase both the demand-side probability to seek out the programme *as well* as the supply-side probability of selection. In this regard, ward councillors also benefit from improved personal access to public resources (Besley, Pande, and Rao, 2012).

According to Sub-Section 10(7) of the CDCF Act, where an MP loses his seat in the general election or a by-election or dies, one of the councillors shall be a chairman of the committee until such time when another MP is elected, provided that (a) the committee existing prior to a parliamentary election or by-election shall continue to be in office in a manner provided for under this Act, and (b) the list of projects shall not be changed (United Republic of Tanzania, 2009). Such legal arrangements may make CDC committee members compete for resources on behalf of their wards and villages/mitaa.



Methodology

The study applied both quantitative and qualitative approaches. The primary data were gathered from the survey conducted in six electoral constituencies of Tanzania mainland, namely Kinondoni, Lindi Urban, Kilosa Kati, Singida West, Siha, and Karatu. The survey consisted of questionnaires administered to 82 respondents and one-on-one interviews with 18 elected officials and government staff.

3.1 Sampling and Sample Size

Development funds and grants are provided to LGAs for constructing new infrastructure or rehabilitating existing infrastructure according to defined priorities against a broad investment menu, with a view of empowering communities, improving service delivery, and reducing poverty (United Republic of Tanzania, 2012a). The CAG report for FY 2010–2011 showed that, as of 30th June 2011, a total of Tshs. 2,683,368,422.21 in CDCF disbursements to LGAs was unspent. Thus, unutilised development grants imply that some LGA activities were either partially implemented or not implemented at all.

This review of CDCF governance effectiveness uses the amount of unspent CDCF money reported by CAG as a measure of CDCF projects performance. Constituencies with large unspent balances of CDCF resources are categorised as low performers, while those with smaller unspent balances are termed high performers. Using these criteria, six case-study constituencies, i.e. three high-performing constituencies and three low-performing constituencies, were picked for this study (see table 2).

Table 2: Sampled Constituencies in Terms of Unspent CDCF Money

No.	Constituency	Amount unspent	Council status
High-performing constituencies			
1	Karatu	835,527	Rural
2	Siha	1,087,299	Rural
3	Lindi Urban	20,351,969	Urban
Low-performing constituencies			
1	Kinondoni Municipal (Kinondoni)	53,628,895	Urban
2	Singida District (West)	124,207,904	Rural
3	Kilosa District (Central)	174,098,442	Rural

Source: The Annual General Report of the Controller and Auditor General on the Audit of Local Government Authorities for the financial year ended 30th June, 2011.

This study measures CDCF effectiveness by comparing the selected districts in terms of respect for rule of law exemplified by the committees, accountability demonstrated in resource allocation and CDCF implementation, extent of citizen participation in project identification and implementation, and equity in access to the CDCF.

In each constituency, the questionnaires were administered to five members of the CDCF committee and ten beneficiaries who are members of CDCF-funded project committees (beneficiaries). The

sample size was 82 respondents. In addition, one-on-one interviews were conducted with the MPs who chair the CDCF committees, District Planning Officers (DPOs)/council planning officers who are the secretaries of the CDC committees, council directors who are the CDCF accounting officers, and District Treasurers (DTs) who are the custodians of CDCF funds.

3.2 Data Collection

A six-point Likert response format was used as an instrument for measuring five criteria of CDCF effectiveness in our index. There was also a limited number of open-ended questions at the end, where respondents could make recommendations on how to improve CDCF effectiveness. Table 3 shows the number of respondents by constituency.

Table 3: Questionnaire Respondents by Constituency

Constituency	Frequency	Per cent
Karatu	15	18.2
Kilosa	14	17.2
Kinondoni	11	13.4
Lindi TC	13	15.8
Siha	14	17.2
Singida	15	18.2
Total	82	100.0

Source: Field data

The questionnaire was pilot tested prior to the fieldwork and adjusted accordingly. Pilot testing was conducted in Mkuranga constituency, where the research team administered the data collection tools to CDC committee members, CDCF project beneficiaries, and the government staff responsible for CDCF management. During the fieldwork, three groups of three researchers were formed, each group covering two constituencies: Group 1: Karatu and Siha; Group 2: Kilosa Kati and Singida West; and Group 3: Lindi Urban and Kinondoni.

In each constituency, the researchers first introduced the research project to council authorities and sought the clearance to administer the data collection tools to relevant respondents. After obtaining consent from the council directors, the researchers administered questionnaires to CDCF committee members at the council headquarters and physically visited the CDCF project committee members (beneficiaries) in their localities and administered the questionnaires to them (see table 4).

Table 4: Types of Questionnaire Respondents

	Frequency	Per cent
No response	4	4.9
CDC committee member	27	32.9
CDCF project committee members	51	62.2
Total	82	100.0

Source: Field data

One-on-one interviews were conducted with key informants in their offices and project sites. This enabled some interviewees to make references to official documents when responding to questions. We interviewed two MPs, six DPLOs/council planning officers, six council directors, and four DTs.

We used a semi-structured interview guide with questions similar to those in the questionnaire. The aim was to triangulate the responses from the questionnaire on the extent to which CDC committee members adhere to criteria of CDCF governance (rule of law, accountability, participation, and equity). In addition, the interview guide included questions on how CDCF co-existence with the LGCDG and the involvement of MPs undermine the CDCF governance. Furthermore, questions were asked and clarifications sought on issues related to CDCF governance effectiveness.

3.2.1 Secondary data

We also analysed available documents from LGAs and CAG to cross-validate the primary data. The documents examined produced useful information about the CDCF governance effectiveness in the case constituencies. The documents included council reports and audit reports, as well as working papers, discussion papers, and journal articles, particularly those on the CDF in Kenya, which informed Tanzanian legislators when enacting the CDCF.

3.3 Data Analysis

We analysed data from the administered questionnaires by using the Statistical Package for Social Sciences (SPSS) computer software. First, we developed a scale of CDCF governance effectiveness with four measures of (i) rule of law, (ii) accountability, (iii) participation, and (iv) equity. We determined the cut-off point for degree of governance effectiveness to be 50 per cent or a mean score of 2.5.

After obtaining the mean scores of each measure of governance effectiveness, we determined the score that would be used in comparison to the mean score. Thereafter, we used a calculator to divide the mean score by the score we determined earlier to convert into a percentage. Finally, the decimal obtained from division was multiplied by 100, and then we added a % sign on a calculator to obtain a percentage. The percentage change showed the extent to which an individual aspect of CDCF governance is effective or ineffective, i.e. gains or loses value.

Second, we used a qualitative procedure to explore how CDCF co-existence with LGCDG and involvement of MPs undermine or promote CDCF governance. We could not run regression analyses to explain the influence of these two factors because the number of questionnaires was very low (82) and hence could not even meet the small-*N* research requirements. Thus, we explain

how rather than *why* CDCF co-existence with LGCDG and involvement of MPs may have influenced CDCF governance.

The interview data were typed in Word files to produce transcripts by computer. The transcripts were read closely, and then we coded the data. The research objectives were used as categories during the coding process. A 'cut and paste' method was used to combine all the data for each category, and then we saved it under separate files. The responses in each category were finally analysed by looking for dominant themes and typologies that emerged. Afterwards, we explained how CDCF co-existence with LGCDG and involvement of MPs may have influenced CDCF governance.

4

Analysis and Findings

4.1 Rule of Law in CDCF Implementation

The respondents were asked to answer questions on the opening and usage of CDCF accounts; the retaining of receipts, savings, and accruals to CDCF; payments made on the basis of a minute resolution; and reallocation of funds. Table 5 shows that the mean rule of law in CDCF implementation is 2.02, with a standard deviation of 2.390. Among the measures of rule of law, payments made on the basis of a minute resolution scored higher, and reallocation of funds scored lower. This suggests that most CDCF payments are approved on the basis of minutes recorded in the CDC committee meetings.

Table 5: Average Scores of Rule of Law in CDCF Implementation

Variable	N	Minimum	Maximum	Mean	Std. deviation
Opening and usage of CDCF accounts	82	-9	5	2.29	2.622
Retaining of receipts, savings, and accruals to the CDCF	82	0	5	2.35	2.359
Payments made on the basis of a minute resolution	82	-9	5	2.55	2.649
Reallocation of funds	82	-9	5	.89	1.931
Total				2.02	2.390

Source: Field data

To determine the extent to which rule of law in CDCF implementation is effective or ineffective, we converted mean scores into percentages. Our cut-off point for degree of effectiveness was 50 per cent. All indicators in table 6 point to rule of law ineffectiveness, except payments made on the basis of a minute resolution (51%). Overall, the rule of law in CDCF implementation is ineffective (44%).

Table 6: Effectiveness of Rule of Law

Indicator	Percentage	Status
Opening and usage of CDCF accounts	45	Ineffective
Retaining of receipts, savings, and accruals to the CDCF	47	Ineffective
Payments made on the basis of a minute resolution	51	Effective
Reallocation of funds	17	Ineffective
Overall percentage and status	44	Ineffective

Source: Field data

The findings in table 6 are consistent with our qualitative analysis. The majority of respondents across the case constituencies said that CDC committees consider the minutes of the resolution before making payments. The analysis shows that district treasurers indeed release the funds after receiving minutes from the council planning officer.

The most ineffective aspect of rule of law is reallocation of funds. The findings from interviews also show that reallocation of funds from one approved CDCF project to another is common practice.

In Kilosa, for example, the clearance of bushes to pave the way for a road from Ilongo to Mfuluni via Idete was approved. Later on, however, the CDC chairperson deemed that the project was new and thus cancelled it. He also suspended other road projects, from Chanzuru Mamoyo to Mkwatani and from Kiegea to Berega. As one of the respondents charged, “[t]hese roads just needed maintenance but they were cancelled for political reasons”.

The CDCF Act requires each council to open and use an exclusive account for the CDCF, but this indicator also points to ineffectiveness. Interview data support this finding. For example, five of the six case constituencies have yet to open a CDCF account as required by the CDCF Act. Instead, they channel the CDCF disbursements through the council’s development account. One of the respondents in Lindi admitted that “[t]here is no specific account for CDCF. We use the development account, which caters for all development expenditures. There is no separate account for CDCF now”.

4.2 Accountability in CDCF Implementation

The respondents were asked to answer questions on posting of the quarterly CDCF reports on notice boards, submission of annual returns to PMO-RALG, submission of the disbursement and expenditure records to PMO-RALG, and auditing of funds received by the CDC committee. Table 7 shows that the mean accountability in CDCF implementation is 1.64, with a standard deviation of 2.472. Among the measures of accountability, posting of the quarterly CDCF reports on notice boards scores higher, while submission of the disbursement and expenditure records to PMO-RALG scores lower. This suggests that posting information on the notice boards is the most effective form of CDCF accountability, compared to submitting reports to higher authorities.

Table 7: Average Scores of Accountability in CDCF Implementation

Variable	N	Minimum	Maximum	Mean	Std. Reviation
Posting of quarterly CDCF reports on notice boards	82	-9	5	1.98	2.325
Submission of annual returns to PMO-RALG	82	-9	5	1.41	2.419
Submission of disbursement and expenditure records to PMO-RALG	82	-9	5	1.24	2.646
Auditing of funds received by the CDC committee	82	-9	5	1.93	2.498
Total				1.64	2.472

Source: Field data

To determine the extent to which accountability in CDCF implementation is effective or ineffective, we converted mean scores into percentages. Again, our cut-off point for degree of effectiveness was 50 per cent. The indicators in table 8 point to ineffectiveness in accountability, as none reached or surpassed the 50 per cent threshold. Overall, accountability is ineffective (32%), thus indicating governance ineffectiveness of the CDCF.

Table 8: Effectiveness of Accountability

Indicator	Percentage	Status
Posting of quarterly CDCF reports on notice boards	39	Ineffective
Submission of annual returns to PMO-RALG	28	Ineffective
Submission of disbursement and expenditure records to PMO-RALG	24	Ineffective
Auditing of funds received by the CDC committee	38	Ineffective
Overall percentage and status	32	Ineffective

Source: Field data

While nearly all respondents consider posting CDCF information on the noticeboards as an effective means of ensuring openness and transparency in CDCF implementation, some of them were not sure whether DPLOs do, in fact, post CDCF information on the notice boards. One of the respondents in Kilosa doubted: "If at all, the DPLO does post CDCF information on the notice boards, then it is only to a limited extent. The notice boards that are easily accessible by citizens are those placed in the market centres and village offices, but I have never seen such information displayed there".

The lower mean score for submission of CDCF records to PMO-RALG was unsurprising. A majority of respondents across case constituencies are not happy with the CDCF reporting mechanisms. According to the CDCF Act, progress and annual reports should be submitted to PMO-RALG directly. However, this is contrary to the usual local government reporting procedure. All councils submit sector progress reports to RAS, who in turn submits them to PMO-RALG. As one of the council interviewees in Singida complained, "CDCF reporting procedure is strange because it circumvents RAS. He is there to ensure the reports submitted to the central government are genuine. How can PMO-RALG in Dodoma authenticate the CDCF reports from throughout the country without the involvement of RAS"?

The analysis reveals that some councils were not aware of CDCF accountability mechanisms and therefore were submitting CDCF reports to RAS instead of PMO-RALG. One of the respondents lamented: "We were not aware of the requirement of submitting CDCF reports to PMO-RALG directly until recently; instead we were submitting them to RAS. As a result, we were blamed for lacking accountability. But we did not know".

4.3 Participation in CDCF Planning

The respondents were asked to answer questions on community involvement when WDCs identify and prioritise projects, submission of priority projects by WDCs, incorporation of CDCF projects in the district sectoral plans, and incorporation of CDCF projects in the district development plans. Table 9 shows that the mean participation in CDCF planning is 2.175, with a standard deviation of 2.410. Among the measures of participation, community involvement when WDCs identify and prioritise projects is higher, while incorporation of CDCF projects in the district sectoral plans (e.g. DADPs, CCHPs) scores lower. The CDCF Act requires the CDC committees to receive project proposals from the wards, where it is assumed that the O&OD approach would have been followed, starting from the village/mtaa (street) level.

Table 9: Average Scores of Participation in CDCF Planning

Variable	N	Minimum	Maximum	Mean	Std. deviation
Community involvement when WDCs identify and prioritise projects	82	-9	5	3.12	2.279
Submission of priority projects by WDCs	82	-9	5	3.04	2.306
Incorporation of CDCF projects in the district sector plans	82	-9	5	1.21	2.488
Incorporation of CDCF projects in the district development plans	82	-9	5	1.33	2.568
Total				2.175	2.410

Source: Field data

To determine the extent to which participation in CDCF planning is effective or ineffective, we also converted mean scores into percentages. Table 10 shows that community involvement when WDCs identify and prioritise projects (62%) and submission of priority projects by WDCs (60%) are effective, but incorporation of CDCF projects in the district sector plans (24%) and incorporation of CDCF projects in the district development plans are ineffective (24%). Overall, participation is ineffective (43%), thus indicating governance ineffectiveness of the CDCF.

Table 10: Effectiveness of Participation

Indicator	Percentage	Status
Community involvement when WDCs identify and prioritise projects	62	Effective
Submission of priority projects by WDCs	60	Effective
Incorporation of CDCF projects in the district sector plans	24	Ineffective
Incorporation of CDCF projects in the district development plans	26	Ineffective
Overall percentage and status	43	Ineffective

Source: Field data

The interview data demonstrate that community involvement in planning for CDCF projects is necessary. However, the determining factor on whether a project is funded is the decision-making process within the CDC committee. Karatu is the highest performer, but even there some respondents complained about the lack of funding for projects submitted to the CDC. One respondent pointed out, for example, that the MP is the one who initiates projects. Even if projects are submitted by the wards, the MP as a chair still influences project selection.

The analysis indicates that councillors also influence which projects are selected for submission to the CDC committee from their wards. It was, however, claimed that the councillors involve their voters so that their priorities are reflected in the development projects. As one of the respondents in Karatu said, “[b]efore initiating the school development project for funding from CDCF at my ward, we called a public meeting and people were able to speak up on how the project should be run”.

It is difficult to know whether CDCF projects are linked to the district sectoral plans, such as DADPs and CCHPs, because the planning processes and funding streams are different. This means that district development plans, which start at the village level following the O&OD approach, do not involve CDCF components. After receiving the funds from the treasury for the CDCF, the DPLO informs the MP and calls the CDC committee meeting for allocation of funds to CDCF projects.

4.4 Equity in Access to CDCF

The respondents were asked to answer questions on prioritisation of projects, solicitation of projects from the wards, acceptance of project proposals from poorer wards, and the role of politicians in the project selection process. Table 11 shows that the mean equity in access to CDCF-funded services is 1.615, with a standard deviation of 1.8617. Among the measures of equity, accepting project proposals from poorer wards scores higher, while soliciting projects from the wards scores lower. The CDCF sometimes helps to accomplish development projects, meaning that the CDC committees are sometimes compelled to accept project proposals from poorer wards even if they score low (which is still a bottom-up approach).

Table 11: Average Scores of Equity in Access to CDCF

Variable	N	Minimum	Maximum	Mean	Std. deviation
Prioritisation of projects	82	-9	5	1.39	1.734
Solicitation of projects from the wards	82	-9	5	1.35	1.848
Acceptance of project proposals from poorer wards	82	-9	5	2.23	1.958
Role of politicians in the project selection process	82	-9	5	1.49	1.907
Total				1.615	1.8617

Source: Field data

To determine the extent to which equity in access to CDCF is effective or ineffective, again we converted mean scores into percentages. Table 12 demonstrates that none of the equity indicators have reached or surpassed the threshold of 50 per cent. Therefore, all of them point to ineffectiveness. Overall, equity is ineffective (32%), thus indicating CDCF governance ineffectiveness.

Table 12: Effectiveness of Equity

Indicator	Percentage	Status
Prioritisation of projects	27	Ineffective
Solicitation of projects from the wards	27	Ineffective
Acceptance of project proposals from poorer wards	44	Ineffective
Role of politicians in the project selection process	29	Ineffective
Overall percentage and status	32	Ineffective

Source: Field data

Analysis of interview data supports the findings in table 12. For example, the CDCF Act bars the CDC committees from soliciting projects from the wards (top-down approach), but that is still being done. The analysis reveals that MPs are the ones who solicit projects from the community when mobilising community projects or addressing political rallies. One of the respondents in Kilosa admitted that “[s]ometimes we solicit projects from the community instead of waiting for the WEOs to submit their projects. More often we do that for political reasons”.

While some projects are decided on during political rallies, others are decided in the WDCs during the deliberation of village projects that pass through the O&OD process. The WDCs are chaired by councillors, so bias in project selection cannot be ruled out even when the bottom-up approach is adhered to. This suggests that although CDCF projects are initiated by the residents, these projects may still be vulnerable to capture by local political elites.

Despite the prioritisation of projects from poorer wards, some of them may still fail to be implemented because of the cost-sharing requirement (matching funds). In Siha, for example, some wards failed to utilise their allocated money simply because the projects were in wards that were too poor to share the costs. Waivers and exemption mechanisms are not provided by the CDCF Act, making the funded projects almost out of reach for the poorest segments of local communities.

Looking at all the measures in the CDCF governance effectiveness index, the overall scores in table 13 below show that mean participation is higher and mean equity is lower. In terms of percentage, none of the measures of CDCF governance have reached or surpassed a threshold of 50 per cent. This means the overall CDCF governance is ineffective.

Table 13: Overall Scores of Measures of CDCF Effectiveness

Measure	N	Mean	Std. deviation	Percentage
Rule of law	82	2.02	2.390	44
Accountability	82	1.64	2.472	32
Participation	82	2.175	2.410	43
Equity	82	1.615	1.8617	32

Source: Field data

We assumed that there is no difference in all measures of CDCF governance effectiveness between the case constituencies regardless of whether they spend more or less. To test our null hypotheses, we ran independent samples t-tests. The findings demonstrate that, indeed, there is no significant difference between high performers (N = 82) and low performers (N = 82) in all measures of CDCF governance effectiveness.

Results from the independent samples t-tests fail to find any significant difference between high performers (N = 82) and low performers (N = 82) in **rule of law** (sig .844). The *t* statistic under the assumption of unequal variances has a value of .197, and the degrees of freedom has a value of 79.099, with an associated significance level of 8.44. The significance level indicates no difference between high-performing constituencies and low-performing constituencies in terms of **rule of law in CDCF implementation**, and hence the hypothesis is accepted.

Results from the independent samples t-tests fail to find any significant difference between high performers (N = 82) and low performers (N = 82) in **accountability** (sig .645). The *t* statistic under the assumption of unequal variances has a value of .462, and the degrees of freedom has a value of 73.368, with an associated significance level of .645. The significance level tells us to accept our hypothesis because there is no difference between high-performing constituencies and low-performing constituencies in terms of **accountability in CDCF implementation**.

Results from the independent samples t-tests reveal a significant difference between high performers (N = 82) and low performers (N = 82) in **participation** (sig .982). The *t* statistic under the assumption of unequal variances has a value of .022, and the degrees of freedom has a value of 73.722, with an associated significance level of .982. The significance level indicates no difference between high-performing constituencies and low-performing constituencies in terms of **participation in CDCF planning**, and hence our hypothesis is accepted.

Results from the independent samples t-tests show a significant difference between high performers (N = 82) and low performers (N = 82) in **equity** (sig .476). The *t* statistic under the assumption of unequal variances has a value of -.716, and the degrees of freedom has a value of 61.978, with an associated significance level of .476. The significance level tells us to accept our hypothesis because there is no difference between high-performing constituencies and low-performing constituencies in terms of **equity in CDCF**.

4.5 Does CDCF Co-existence with LGCDG undermine CDCF Governance?

Interviews with key informants indicate that CDCF co-existence with LGCDG undermines the governance effectiveness of CDCF in case constituencies. The analysis suggests that the boundaries as regards roles and responsibilities of certain actors for the CDCF and LGCDG are blurred and overlapping. In some constituencies, the Council Management Teams (CMTs) advised DPLOs to ensure that a modest number of CDCF projects are picked so as to finance them fully and ensure they are completed as planned. This is contrary to the CDCF Act, which confers such power to CDC committees.

Mechanisms for the CDCF's co-existence with LGCDG do not clearly define the CMT's roles and responsibilities, and yet the CMT is responsible for coordinating all local development projects. The analysis of interview data shows that some CDC committees submit selected CDCF projects to CMT for discussion while others do not. For example, as one of the respondents in Karatu observed, "[t]he secretary (DPLO) sits down with the chairman (MP) beforehand to discuss the estimates and then submit them to CMT for discussion". In Kinondoni, however, one of the CDC committee members expressed his discontent to see the council planning officer (secretary to the CDC committee) in the last FY submit a CDCF fund utilisation proposal to the CMT for deliberation.

Local government procedures require the council director to use her/his experts (CMT) to determine the costs of development projects targeted for implementation, but this should not be the case for the CDCF. There is the CDC committee, which estimates the costs. Findings from our key informant interviews show that some CMT members blame the CDC committee for underestimating

the costs of many CDCF-funded projects. Not surprisingly, some members of the CDC committee in Kinondoni are not happy with submitting CDCF projects to the CMT.

Usually, the treasury releases CDCF project funds to councils without receiving any plans from the constituencies. In the LGCDG, Indicative Planning Figures (IPFs) are provided each year by the treasury in order to be used for local planning. One of the respondents in Singida pointed out that “50 per cent of the LGCDG is planned at the council level and 50 per cent at the sub-council level. But the CDCF Act requires the CDC committee to receive and approve projects from the wards that qualify for funding”. The challenge is how to budget without prior information about resource envelopes that would be made available for the CDCF.

In addition, the analysis finds that the CDC committees have no clear criteria for allocating funds to CDCF projects. As one of the respondents in Kinondoni revealed, “[i]t is usually judgemental, based on individual analysis by CDC committee members, especially the chairperson and the secretary. The problem is that on the one side there is an MP who is a politician, and on the other side there is an expert and professional with the title of the council planning officer”.

Despite the differences in funding mechanisms, the CDC secretary is the council planning officer, who is also responsible for managing the LGCDG. This has raised concerns about the overlapping responsibilities, interference, and duplication of processes when the council planning officer coordinates both the CDCF and LGCDG. One of the respondents in Siha cited the financing of the basic education infrastructures: The “education capital development grant has virtually ceased. As a result, almost all CDCF funds are directed to basic education infrastructures at the expense of other sectors, which are equally important to the local community”.

The analysis shows that almost all CMTs in case constituencies consider the CDCF as an opportunity to offset the deficits in development funding. Projects that miss funding through the O&OD process are supposed to be taken over by the CDCF. As one respondent in Kilosa put it, “harmonisation of CDCF and LGCDG projects is done during implementation”. Such practice may lead to double funding, i.e. the possibility that both the LGA and CDCF report that funds were used for a project, but in effect one budget is misappropriated.

4.6 Does Involvement of MPs Undermine CDCF Governance?

The respondents were asked to mention the council structure responsible for managing the CDCF in their constituencies. Table 14 shows that the CDC committees were seen as more responsible for CDCF implementation, followed by the parliamentarians and council planning officers. According to the CDCF Act, the main organ responsible for CDCF implementation is the CDC committee under the MP.

However, even though many CDCF projects were completed, more often they were of poor quality. A respondent in Karatu lamented:

Many CDCF projects in our constituency are completed. The main issue is quality. There is no quality control at all. Classrooms are below standards. When we ask, the response is always the allocated funds were not enough.

Further analysis indicates considerable political interference, raising concerns about mismanagement of CDCF projects. As one of the respondents in Kinondoni pointed out, “[t]he MP dictates decisions as a chairman. He influences decisions on projects to be supported without taking into consideration their feasibility. That’s why some projects are incomplete”.

The analysis of the findings also suggests that the CDCF has become a local political patronage tool. Across the constituencies visited, some interviewees considered funds from CDCF as personal money that the MPs used for showing appreciation to voters. Moreover, there is a perception that the funds belong to the MP, as one interviewee said in Swahili: “*hizi hela za Mbunge*”, which literally means “this money is from our MP”. In another constituency, the DPLO complained about the use of money to purchase t-shirts to support political campaigns during the 2010 general elections.

Nevertheless, the analysis shows that the machinations of MPs sometimes do not go without a challenge. One of the CDC committee members in Singida, for example, revealed the following:

Once our constituency’s MP attempted to force us to accept allocation of funds for payment of secondary school fees for children of his voters. We rejected this because paying fees is a recurrent expenditure while CDCF is for development projects. I sometimes become a nuisance to the MP. The way I see it CDCF is just a patronage tool of MPs, who use it for distributing rents among their political supporters.

Similar resistance was observed in Kilosa, where one councillor who is a member of the CDC committee refused to resign from the committee despite pressure from the MP. The councillor does not support the political ambitions of the MP who, as a result, has been masterminding the councillor’s expulsion from the CDC committee. The councillor, however, so far has resisted bowing out, arguing that since he was elected to the position by his fellow councillors and not handpicked by the MP, the MP has no authority to expel him. However, the political infighting in the Kilosa CDC committee was cited as the reason for underutilisation of funds. As one of the respondents revealed,

I am handling funds for three constituencies: Kilosa Kati, Mikumi, and Gairo. Gairo is doing well, followed by Mikumi. The problem is Kilosa Kati, whose MP was a senior cabinet minister until recently when he resigned from the post. Currently, the MP is not getting on well with one councillor in the committee. This makes it difficult to approve projects. During the last financial year, for example, we failed to use 73 million shillings.

Politicisation of CDCF implementation also makes accountability difficult. The DPLO should collect information from the funded projects before preparing progress and annual reports for submission to PMO-RALG. But the analysis shows that the collection of such records from the CDCF-funded projects has been difficult. Members of some project committees do not want to submit reports to

DPLOs, citing the claim that the money belongs to their MP, so the DPLO has nothing to do with the accountability of the funds.

The CDCF Act is silent on sitting allowances. However, CDC committee members are usually paid allowances. As one of the respondents in Kilosa revealed, “[w]e don’t know if we should be paid allowances. The MP just decides the amount to pay us from his own pocket”. Similarly, the analysis reveals times when project committee members want to be paid allowances from the funds allocated to them for construction, repairs, or procurement of items.

Another cause for concern is the composition of CDC committees. In all constituencies, CDC committee members include two councillors, and one of them is a woman, as stipulated in the CDCF Act. However, in two constituencies, we found that a personal assistant to the MP is also a member of the CDC committee, which is contrary to the CDCF Act. In Kilosa, the MP’s assistant brings the number of members to eight instead of the seven as stipulated by the law. Even worse, in Singida West, the MP’s assistant has occupied the position of the committee’s NGO representative.

4.7 Discussion

All measures show that CDCF governance is ineffective and that there are insignificant differences between high-performing and low-performing constituencies in all measures of CDCF governance effectiveness. Analyses of interview data corroborate these findings. In addition, findings from qualitative analysis across case constituencies indicate that CDCF co-existence with LGCDG and the involvement of MPs in CDCF management may undermine CDCF governance effectiveness.

Overall, the findings suggest that the beneficiaries of CDCF projects are often those who are embedded in the clientele networks of the MPs. In some constituencies, the findings show that projects funded include payment of school fees for children whose parents are political supporters of the incumbent MPs. Furthermore, the MPs in almost all constituencies have used political rallies as venues for mobilising and influencing the selection of projects to be funded by the CDCF.

Inaugurated in 2009, the CDCF has been implemented in all constituencies, with the initial funding from the treasury made in the first quarter of FY 2009–2010. In two constituencies, the findings indicate that MPs who were seeking re-election in 2010 used CDCF money to print t-shirts bearing political messages of their campaigns. This suggests that despite insufficiency and erratic disbursements of funds, the CDCF is captured by the local political incumbents. Taken together, these factors may have contributed to undermining the expected *allocative efficiency* of the CDCF.

The ineffectiveness of the **rule of law in CDCF implementation** suggests a lack of incentives (both rewards and sanctions) for ensuring that the CDC committees comply with the CDCF Act, the Public Procurement Act, the Public Finance Act, and other related laws. For example, Sub-Section 5(6) of the CCDF Act states that once funds are allocated for a particular project in a constituency, they shall remain allocated for that project and not be reallocated during the financial year for any other purpose in that constituency. Nevertheless, the findings show that funds are reallocated from one project to another.

Moreover, Sub-Section 19(2) of the CDCF Act states that all projects shall be development projects and may include costs related to studies, planning and design, or other technical inputs for the project, but shall not include recurrent costs of a facility. However, some CDCF-funded projects are not developmental in nature, which is contrary to the law. This raises a concern over the efficiency of DPLOs in discharging their CDCF roles.

Similarly, the CDCF Act requires the opening of a constituency account, which should be maintained for every constituency in accordance with the provisions of Section 22 of the CDCF Act. This was not done in many of the constituencies studied. Therefore, drawing on Bagaka (2008), it is conjectured that CDC committee members lack the technical skills to administer project funds.

The CDCF Act requires committees to have seven members, consisting of an MP as a chairperson, a DPLO as a secretary, two councillors, two WEOs, and a representative for the active NGOs in the constituency. Nevertheless, the findings show variations in committee composition across case constituencies. Where the MP is a minister (for example, Kilosa before the cabinet reshuffle in early 2012), the number of committee members cited was eight, including the MP's assistant. This is unlawful because a secretary to the MP is neither an elected official nor government staff.

In addition, the findings indicate that NGO representatives were not included in some CDC committees. In Singida, for example, there are seven members, as required by the CDCF Act, but the position of NGO representative is held by the MP's assistant. One implication here is that CDCF management might be difficult, as committee members would be loyal to the MP's political party instead of being accountable to citizens.

After passing the CDCF Act in 2009, the responsibility of MPs would have been to oversee the CMT's usage of the fund as councillors in their councils. But this is not the case, as the CDCF Act assigns legislators with a managerial role instead of oversight. The MPs are the chairpersons of the CDC committee and wield influence on the manner in which the projects are selected and funds disbursed for project implementation. The findings suggest abuse of these powers, as MPs are blamed for diverting resources for political reasons.

Sub-Section 19(3) of the CDCF Act prohibits the spending of funds for the purpose of supporting political bodies or political activities or for supporting religious bodies or religious activities. But MPs who are entrusted with the responsibility of ensuring compliance are often the ones who disregard this sub-section by using the CDCF money to bankroll their political campaigns or distributing rents to their political supporters. This suggests that non-compliance with the CDCF-related laws is also a result of the politicisation of CDCF management.

The ineffectiveness of **accountability in CDCF implementation** points to low possibilities for citizens to question the use of the CDCF or for the CDC committee to provide citizens with justification on the use of the CDCF. Citizens are expected to obtain information from CDCF project committees, local officials, or service delivery units. In addition, reporting of CDCF money is not clearly defined in sector and sub-sector programmes (such as PEDP, SEDP, ASDP, WSDP, and PHSDP), which provide sector-specific local accountability frameworks.

The same applies to administrative accountability. The CDCF Act directs the council planning officers to submit reports directly to PMO-RALG instead of doing so through RAS. In some constituencies, this requirement has been very difficult to comply with. In Singida, for example, CDC committee members complained about the complexities of reporting to both PMO-RALG for the CDCF and RAS for the LGCDG. One implication is the lack of CDCF reporting as demonstrated by the case of Singida West. This is consistent with findings from HakiElimu (2011b), which observed from the CAG report that the CDC committees and their respective councils did not report to PMO-RALG the amount of money received and spent.

As for downward accountability, the analysis shows that CDCF records are prepared by sub-committees that run CDCF-funded projects. However, CDC committees fail to disseminate information for public consumption. It is assumed that community members will access such records through their administrative structures, such as Ward Councillors/WEOs, Village Executive Officers (VEOs)/Mtaa Executive Officers (MEOs), and service delivery units. In Siha, for example, councillors whose schools receive the money are notified. Head teachers are also given letters. In turn, these officials are expected to relay information to their constituencies.

The ineffectiveness of **participation in CDCF planning** shows that despite the political machinations by the incumbent MPs and sometimes councillors, most projects deliberated on by CDC committees are not funded. More often such projects are those that pass through O&OD processes and are forwarded to CDCs by WEOs after getting the approval of WDCs.

Moreover, the findings suggest that clientelism exists in CDCF implementation, and those who are disconnected may not benefit from funding. When examining data applications for project funding under Tanzania TASAF II, Baird et al. (2011) found a similar scenario. While the targeting of TASAF II projects is mildly pro-poor both at the national and at the local levels, the authors demonstrate that these projects (and funds) also flow towards households that have high levels of civic engagement and are connected to the local elites.

The findings show that **equity in CDCF projects** has the lowest mean and is the most ineffective aspect of CDCF governance. This should not be surprising given the patronage politics that surround CDCF implementation. Despite the bottom-up approach of project conception and design, MPs are the ones who are calling the shots when it comes to initiating projects for CDCF funding. Even if such projects are submitted by wards, MPs still influence their acceptance or rejection in the CDC committees.

After receiving the priority projects from the wards, the CDC committee deliberates on which projects to finance. The whole process is recorded thoroughly in the minutes. The challenge is the lack of adequate funds, so very few projects are selected. Despite this constraint, projects may not be picked on the basis of equity because MPs are the ones with the final say. For example, across case constituencies many projects that were funded in 2010–2011 were those promised by the MPs during the 2010 general elections.

Both **CDCF co-existence with LGCDG** and **involvement of MPs** seem to undermine the governance effectiveness of the CDCF. As such, the CDCF is a parallel structure that both complements and duplicates development projects funded not only by the LGCDG but also by

TASAF and other local donor-funded projects. This has implications for project implementation. The CAG report for FY 2011–2012 already cited poor management of development projects as a result of overlapping roles within the LGAs. The report insisted that projects implemented in the LGAs should be under the supervision of the department heads of the respective projects (United Republic of Tanzania, 2012a).

Similarly, Local Authorities Accounts Committees (LAAC) recommended that all accounting officers and respective department heads should be responsible for ensuring effective supervision and implementation of development projects under their jurisdiction (United Republic of Tanzania, 2012a). Yet under the CDCF Act, department heads are stripped of the responsibility to supervise the projects under their jurisdiction, and those responsibilities are conferred to politicians (members of parliament as well as councillors elected to the CDC committees) and DPLOs (whose roles are primarily coordination rather than supervision).

In the case of LGCDG, funding is dependent upon adjustments made on a yearly basis to give incentives/sanctions to the LGAs. The adjustment means that well-performing LGAs are rewarded and poor-performing LGAs are sanctioned in terms of allocations. A reward/sanction performance “rating” is not applied to the CDCF. This means that constituencies in councils that obtain high LGCDG ratings receive more local development funding than constituencies in the councils that fail to obtain sufficient scores.

The CDCF does not contain performance criteria for funding. Even worse, funding circumvents the local planning and budgetary allocation procedures. This means that the CMT may not have an incentive to monitor and manage the CDCF-funded projects and opens up the possibility for double funding and misappropriation. Nevertheless, the findings reveal that this is not always the case. There are variations between high-performing constituencies and low-performing constituencies in terms of approaches used by the incumbent MPs in managing CDCF funds as well as the involvement of CMTs in discussing CDCF projects.

The council director is the accounting officer of both the CDCF and LGCDG, implying that the DPLO is administratively accountable to the council director. The CMT (council director and departmental heads) is held to account by the full council (i.e. citizens’ representatives). But the findings show that there is no such institutionalised mechanism through which the CDC committee is held accountable by citizens and/or citizens’ representatives.

Furthermore, political economy theory suggests that having MPs chair the CDC committees is an effective way of avoiding the perils of bureaucratic capture in CDCF projects. This requirement tilts previous asymmetrical power relations away from the CMTs to elected officials, who are directly accountable to the citizens. However, this accountability framework is fraught with challenges. The findings show that managing funds through the CDC committee is difficult partly because the majority of members are loyal to the MP instead of being accountable to citizens, demonstrating that this arrangement is bad in terms of governance effectiveness. As Ongoya and Lumallas (2005) argued, this is “democratic accountability going overboard without a whimper” (p. 5)

The inclusion of both elected officials and local government staff was also expected to mitigate any fears that MPs, as chairmen of CDC committees, would exploit their positions to build spheres of influence to the detriment of CMTs. Nevertheless, the findings show that despite this hybrid nature

of the CDC committee, the MPs in some constituencies still managed to select projects on the basis of patronage politics. This means that CDC committee members may lack incentives for prudent management of funds and that it may foster collusion between the MP and the DPLO.

The Karatu MP is from the leading opposition party, Chama cha Demokrasia na Maendeleo (CHADEMA). The MP for Lindi Urban is from another opposition party, the Civic United Front (CUF). The remaining four constituencies are from the ruling Chama cha Mapinduzi (CCM). Nevertheless, CDCF implementation in Karatu and Lindi Urban is also marred by patronage politics. This means that CDCF governance effectiveness cannot be related to the MP's political party affiliation but rather to their individual attitudes towards governance principles.

Similarly, in Kenya, which Tanzanian MPs borrowed from when enacting the CDCF Act in 2009, the institutionalisation of CDFs as a mechanism of resource allocation across party lines helped to nurture a loyal opposition, even over the objections of the executive branch (Baskin, 2010). The same motivation seems to have driven the Tanzanian political elites to enact the CDCF Act despite strong opposition from civil society. The analysis shows that some MPs are biased in favour of some types of projects because they are popular with voters.

As such, the current popularity of CDFs in Kenya appears to rest mainly on the generally held political calculus in which centrally placed politicians bring home development resources to local communities and groups in exchange for political support (Baskin, 2010). Using evidence from the Kenyan 2007 election, Gutiérrez-Romero (2013) found that the probability of the MP being re-elected was affected by both how the CDF was spent and by residents' ethnicity. If the recent social cleavages observed in Tanzania are anything to go by, the CDCF may also be used by MPs of multi-ethnic constituencies to favour their particular ethnic groups.

In addition, research in Kenya found a general inflation of project costs accompanied by an undersupply of procured materials, while the lack of adherence to tendering and procurement regulations allows the looting of the CDF kitty (Awiti, 2008). Such corrupt practices suggest that this local funding mechanism is also an avenue for generating illegal revenues to bankroll incumbent MPs' election campaigns.⁴

One consequence of the CDCF's politicisation is the misperception that the funds belong to the MPs and that voters are free to access them to solve their household problems. The findings show that some citizens (due to misleading information given by their MPs during political rallies) flock to council planning offices asking for funds to meet their household needs. Similarly, some councillors are up in arms when their wards do not receive funds for implementing the projects they have submitted to the CDC committee.

More seriously, the CDC committees lack a formula for deciding which project to fund. In some constituencies, the severity of problems at hand is the main factor. In Siha, for example, priority is given to primary education, and the CDCF is used to fund schools that are in dire need of resources. But the existence of abandoned projects and the poor quality of completed projects, coupled with ineffective rule of law, accountability, and participation, and disregard for equity, imply low governance effectiveness of the CDCF.

⁴ In Kenya, the 2007 CDF audit reports indicate that billions of CDF monies cannot be accounted for (Awiti, 2008).

5

Conclusions and Recommendations

This study reveals low CDCF governance effectiveness. Our exploration of interview data suggests that CDCF co-existence with LGCDG and the involvement of MPs are not supportive of effective CDCF governance. In other words, CDCF lacks *merit* and is not *worthwhile* in terms of governance criteria. Overall, the study points to the need to address these shortcomings.

CDC committees may not be autonomous organs when it comes to CDCF implementation. This study demonstrated that CDC committee members influence decisions on projects to be funded, and the MPs and their political allies within the committees use the funds to distribute rents to their followers.

The most common types of projects funded by the CDCF have been roads, classrooms, healthcare buildings, administrative buildings, and piped water supply. However, this study shows that most of these investments were not efficaciously implemented. One reason is ineffective CDCF governance in such a way that both the planning/funding and construction/rehabilitation of local facilities/infrastructures are flawed.

With respect to operations, CDCF-funded projects have performed poorly, as compliance with the laws and reporting of activities are disregarded. The CDCFs are run by CDC committees, but in most constituencies NGO representatives are not included on the committees. The CDCF Act recognises civil society's roles and requires each CDC committee in Tanzania to have a representative of active NGOs in their constituency. Accountability mechanisms are weak in such a way that community members are not informed about the selection and implementation of CDCF projects, nor are they involved in monitoring the implementation of CDCF projects.

Overall, weak accountability mechanisms, coupled with ineffective rule of law and participation, have made room for local elected incumbents to use the CDCF as their political patronage tool. In such circumstances, CDCF resources may benefit the non-poor more than the poor. From the findings it is fair to conclude that the actual CDCF implementation does not adhere to the existing legal framework, and hence low governance effectiveness prevails.

CDCF projects are not incorporated into the district development plans because they are not in LGAs' budgetary allocation **votes**, compared with projects in the DDPs, which are funded through LGCDG. As the findings show, the treasury indicates planning figures and budget ceilings for recurrent and development spending of the LGAs. Under the CDCF, no such figures and ceilings are provided to councils. This has led to confusion among local planners, as the funding envelope for CDCF projects is not known, while it is known for LGCDG-funded projects.

The rationale for the MPs' and councillors' oversight functions is to hold the executive accountable for their actions. If there is bureaucratic capture, then this means that MPs and councillors are failing in their oversight function. Allowing MPs to take on an executive role (planning, monitoring, etc.) cannot constitute an alternative accountability framework, since MPs and councillors cannot be held accountable to themselves (wearing two hats!).

5.1 Policy Implications

The ineffectiveness of the **rule of law in CDCF implementation** suggests a lack of rewards and sanctions for ensuring that the CDC committees comply with the CDCF Act and other related laws. Incentives are important for compliance with rules and regulations, but the CDCF Act describes sanctions for only one offense, i.e. misappropriation of funds or assets from CDCF (Sub-Section 28[1]) and sub-section 28(2) prescribe a penalty of “a fine not exceeding fifteen million shillings or to imprisonment for a term not exceeding five years or to both”.

The ineffectiveness of **accountability in CDCF implementation** points to low possibilities for citizens to question the use of the CDCF or for the CDC committee to provide citizens with justification on how the CDCF is used. Information sharing with service users and reporting progress and financial performance to a higher authority are key aspects of public accountability. However, the CDCF Act does not incentivise (via rewards and sanctions) accountability of CDCs and their members.

The ineffectiveness of **participation in CDCF planning** shows that due to the political machinations by the incumbent MPs, most projects submitted by WDCs are not always funded. Yet, the CDCF Act requires projects to be community-based (Sub-Section 19[1]). This means that although citizen participation in the CDCF has legal backing, compliance by CDCs has been difficult.

The findings show that **equity in CDCF projects** has the lowest mean and is the most ineffective element of CDCF governance. This suggests a capture of CDCF projects by constituent elites (including MPs, councillors, village chairpersons, and other influential people). For example, some councillors are up in arms when their wards do not receive funds for implementing the projects they

The CDCF Act is silent on sitting allowances. However, members of the CDC committee are usually paid allowances. Yet, economic incentives may not activate involvement of members in CDC committees.

5.2 Recommendations

Based on the policy implications it seems logical to amend the CDCF Act to address the current governance deficits in the CDCF's implementation. However, the sample of 6 councils can only allow for tentative recommendations. Given this small-*N* research design, additional research with a larger and more representative sample is needed before making firm conclusions and recommendations on the state of CDCF governance in Tanzania.

5.2.1 Suggestion for further research

Given that it is now five years since the CDCF was rolled out, an impact evaluation of this intervention should be conducted to establish its effects on local development outcomes.

Specifically, a large-*N* research design is needed to study the effects of MPs' executive roles on CDCF governance.

The CDCF circumvents local budgetary processes. Thus, another area of future research is the co-existence of the CDCF and other local development funding streams (including LGCDG).



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