

Community-Driven Development in Fragile States: Assessing the National Solidarity
Programme and the Citizen Charter National Priority Programme in Afghanistan

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Declaration

Herewith, I declare that I clearly understand §11 of the Academic Regulations and that the submitted paper is accepted by the OSCE Academy in Bishkek on the understanding that it is my own effort without falsification of any kind. I declare that I am aware of the consequences of plagiarism or/and cheating.

Obaidullah Tariq

8 January 2026

A handwritten signature in blue ink, consisting of a stylized, cursive script. The signature is written over a horizontal line and includes the name 'Tariq' written below it.

Abstract

This thesis investigates the governance effects of Afghanistan's National Solidarity Programme (NSP) and Citizens' Charter National Priority Programme (CCNPP) on vulnerable rural communities from 2003 to 2021. It looks into how Community Development Councils interacted with traditional government institutions, what patterns of participation emerged for women and marginalized groups, and what lasted after the program ended and the political transition in 2021. The study uses a qualitative document analysis method that combines experimental data from randomized controlled trials in 500 villages, ethnographic studies by researchers from the Afghanistan Research and Evaluation Unit, program evaluations by the World Bank, and research done after the Taliban fell. The study goes into great detail about how authority changes in Afghanistan's polycentric governance landscape, showing that traditional structures are being accommodated rather than replaced. It examines various instances of participatory mobilization during the program cycle, including the unprecedented election of 150,000 women to governance positions and the establishment of 35,000 Community Development Councils managing \$1.6 billion in block grants. The thesis acknowledges the paradox of impressive institutional scale coexisting with fundamental sustainability fragility. While programs achieved substantial short-term impacts including infrastructure provision and women's public political empowerment, institutional relevance faded substantially following resource withdrawal, with formal CDC authority collapsing after the 2021 Taliban return. The study underscores the necessity of differentiating attainable service delivery objectives from elusive governance transformation goals, advocating for government integration from program initiation, context-adaptive programming, and pragmatic timelines for the establishment of democratic institutions. This thesis comprehensively evaluates the efficacy of community-driven development in fragile states, enhancing the understanding of performance-dependent legitimacy and domain-specific empowerment, while offering evidence-based policy recommendations for international development practices in conflict-affected contexts.

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LIST OF ABBREVIATIONS

AREU	Afghanistan Research and Evaluation Unit
CCNPP	Citizens' Charter National Priority Programme
CDC	Community Development Council
CDD	Community-Driven Development
DFID	Department for International Development (UK)
DRC	Democratic Republic of Congo
FCV	Fragility, Conflict and Violence
IEG	Independent Evaluation Group (World Bank)
ICR	Implementation Completion Report
KDP	Kecamatan Development Program (Indonesia)
MRRD	Ministry of Rural Rehabilitation and Development
NSP	National Solidarity Programme
PAD	Project Appraisal Document
PIA	Participatory Impact Assessment
PIU	Project Implementation Unit
PNPM	Program Nasional Pemberdayaan Masyarakat Mandiri (Indonesia)
RCT	Randomized Controlled Trial
SFD	Social Fund for Development (Yemen)
SIGAR	Special Inspector General for Afghanistan Reconstruction
WB	World Bank

INTRODUCTION

1.1. Background

In fragile and conflict-affected states, community-driven development has become a popular strategy for local governance and poverty alleviation. Rooted in principles of participatory decision-making, local ownership, and bottom-up development planning, CDD programs seek to empower communities by providing block grants¹ and facilitating collective action for community-identified priorities (Mansuri & Rao, 2013, p. 1). CDD's proponents contend that it accomplishes development goals more effectively than top-down delivery, fosters social cohesion, and increases local governance capacity (Dongier et al., 2003, p. 303). By the early 2000s, the World Bank alone was lending more than \$2 billion annually to CDD programs in more than 70 countries (Mansuri & Rao, 2004, p. 1).

One of the biggest and most ambitious CDD experiments in history was conducted in Afghanistan. Launched in 2003 immediately following the fall of the Taliban regime, the National Solidarity Programme sought to create Community Development Councils in each of Afghanistan's 34 provinces' rural villages (Beath, Christia, & Enikolopov, 2015, p. 3). Approximately 32,000 communities, or nearly 22 million Afghans—roughly two-thirds of the nation's population—were reached by NSP over a thirteen-year period (World Bank, 2016, p. 3). For community-selected infrastructure, agricultural, and social development projects, the program offered block grants of an average of \$200 per household. CDC members were democratically elected to manage funds and oversee implementation (Ministry of Rural Rehabilitation and Development, 2009, p. 12).

In 2016, the Afghan government and the World Bank started the Citizens' Charter National Priority Programme, which was the next step in the NSP model. It added urban areas and made connections with government service delivery stronger (World Bank, 2016, p. 7). CCNPP kept the CDC's institutional framework but added performance-based financing and better ways for the government to work together. In

¹ A lump-sum financial transfer given to communities or local governments that gives them a lot of freedom to spend the money in certain ways, as opposed to categorical grants that have strict rules about how the money can be spent. Block grants are essential to community-driven development strategies, allowing communities to rank projects according to their specific needs (Dongier et al., 2003, pp. 303-331; Mansuri & Rao, 2013, pp. 1-3).

Afghanistan's diverse and conflict-affected rural areas, NSP and CCNPP worked together for eighteen years to build participatory local governance institutions.

1.1.1. Afghanistan's CDD Experience: NSP and CCNPP

Afghanistan presented particularly challenging conditions for community-driven development. Decades of war had ruined the country's infrastructure, forced millions to leave, broken up social ties, and made it impossible for the government to do its job (Barakat & Zyck, 2010, p. 1293). In rural areas, traditional forms of government like village shuras², tribal jirgas³, and religious councils still had a lot of power. When the state wasn't present, these groups often acted as the main governing bodies (Boesen, 2004, p. 8). There were many different ethnic groups, such as Pashtuns, Tajiks, Hazaras, and Uzbeks, each with their own way of governing and often tense relationships with other groups. This made it hard to carry out the program. The ongoing insurgency put both program operations and the community's willingness to take part in government-related projects at risk (Beath et al., 2015, p. 4). In many communities, especially in conservative Pashtun areas, gender norms made it very hard for women to participate in public life (Echavez, Mosawi, & Pilongo, 2016, p. 12).

Even with these problems, both NSP and CCNPP were able to grow quickly and keep running. As of 2016, NSP had finished more than 78,000 community infrastructure projects worth \$1.3 billion (World Bank, 2016, p. 15). By 2020, CCNPP had added coverage to 15,000 more communities (World Bank, 2020, p. 6). Rigorous experimental evaluations yielded substantial evidence regarding program impacts, rendering Afghanistan's Community-Driven Development (CDD) experience one of the most comprehensively documented development interventions in fragile states (Beath et al., 2021, p. 2).

The political change in Afghanistan in 2021 changed the way the country was run in a big way. The Taliban's return to power and the destruction of the previous government's institutional framework put an end to both NSP and CCNPP operations. Community Development Councils, which were formed after eighteen years of

² An Arabic word that means "consultation," it refers to traditional Afghan village councils (especially among non-Pashtun ethnic groups) that make decisions as a group about community issues. The shura is based on the ideas of participatory governance and building consensus, which are different from the more formalized Pashtun jirga (Wardak, 2004, pp. 328–330; Murtazashvili, 2016, pp. 78–95).

³ A traditional Pashtun gathering of elders that makes decisions based on Pashtunwali, the Pashtun social code. It is done to settle arguments and take care of community business. The word comes from the Persian word for "circle," which is a reference to the way people sit together (Wardak, 2004, p. 323; Yousufzai & Gohar, 2005, pp. 12-15).

international investment and Afghan community involvement, stopped being formal governance institutions. This sudden end raises serious questions about how long participatory institutions that get outside support can last and how well they can handle political shocks in unstable situations.

1.1.2. The Challenge of Hybrid Governance in Fragile Afghanistan

Afghanistan exemplifies what scholars refer to as “hybrid political orders,” governance systems in which state institutions coexist with customary, religious, and informal authority structures (Boege et al., 2009, p. 17). Mac Ginty (2010, p. 392) stresses that in these situations, new institutions do not work alone. Instead, they have to deal with established authority figures, traditional leaders, religious authorities, and tribal elders, whose power comes from cultural norms and historical practice.

The relationship between CDCs and traditional governance institutions was a key part of Afghanistan’s CDD experience. Could democratically elected CDCs work with existing authorities to create hybrid systems in which different institutions had power over certain areas? Would they work at the same time, with CDCs in charge of development projects and traditional structures in charge of settling disputes and regulating social behaviour? Or would there be competition between institutions, with CDCs and traditional leaders fighting for community loyalty and governance power? These enquiries pertain to essential difficulties in state-building and institutional advancement within precarious environments characterised by plural, contested, and socially ingrained authority (Menkhaus, 2007, p. 78).

The challenge transcends authority dynamics to include issues of participatory inclusion and institutional sustainability. Did the CDC’s participatory mechanisms let women and other marginalised groups get involved in a meaningful way, or did existing power structures take over and use participation for their own ends? Did CDC operations lead to enduring transformations in governance practices, or were they merely transient donor-dependent frameworks that dissolved upon the cessation of external support? Understanding these dynamics sheds light on larger issues related to the effectiveness of participatory development in fragile states and the conditions necessary for externally-supported institutions to gain legitimacy and persist beyond the duration of program implementation.

1.2. Research Problem and Rationale

Despite extensive implementation experience and rigorous evaluation, substantial gaps persist in comprehending the effects of community-driven development on local governance in fragile states. Most evaluations of community-driven development (CDD) use experimental methods to look at how the program affects very specific outcomes, like infrastructure quality, household income, and social cohesion indicators measured at certain points in time (Mansuri & Rao, 2013, p. 214). While useful for determining causal attribution, these evaluations frequently fail to adequately analyse governance processes, institutional relationships, and authority dynamics that evolve over prolonged durations and evade quantitative assessment.

1.2.1. Gaps in Existing Research

There are three major gaps in the current CDD research. First, there is not enough focus on institutional relationships: most evaluations look at CDCs as separate institutions instead of how they fit into the existing governance structures. Research chronicles the establishment and functioning of Community Development Councils (CDCs), yet seldom conducts a systematic analysis of how these participatory institutions negotiated authority with traditional leaders, customary councils, and religious authorities (Mansuri & Rao, 2013, p. 217). This gap is especially important in weak states where pluralism in institutions and disputed authority shape how the government works.

Second, there is not a lot of research on the quality of participation. While many studies look at how many people attend meetings, how many members are elected, and how many women attend, fewer look at how good the participation is. Did people in the community have a real say in decisions, or did their participation stay symbolic? Did people who were left out get a say, or did the elite⁴ still control things behind the scenes of formal democracy? (Platteau, 2004, pp. 223-246; Fritzen, 2007, pp. 539-540; Dasgupta & Beard, 2007, pp. 296-297) These qualitative dimensions necessitate interpretive analysis that enhances experimental methodologies (Cornwall, 2008, p. 270).

Third, there is not enough long-term data on sustainability: most evaluations end soon after the program starts, so there isn't much proof that CDD-introduced

⁴ In development programs, local elites (wealthy landowners, political leaders, or socially dominant groups) have too much power over decision-making and resource allocation. This hurts the people who the program was meant to help. In communities with a lot of inequality, low literacy, or weak civil society oversight, elite capture is often worse (Platteau, 2004, pp. 223-226; Mansuri & Rao, 2013, pp. 5-6).

governance practices last. The limited studies on sustainability concentrate specifically on infrastructure maintenance rather than institutional continuity (Mansuri & Rao, 2013, p. 220). To comprehend the enduring changes in governance beyond the operational phases of programs necessitates a protracted temporal analysis.

1.2.2. The Problem of Sustainability and Political Transition

The political change in Afghanistan in 2021 makes questions about sustainability even more important and useful for analysis. The Taliban's return to power and the dismantling of the previous government's institutional framework created a natural experiment: which governance practices introduced by the CDC, if any, remained in place when external support ended and political conditions changed fundamentally? This transition allows for the evaluation of institutional resilience under severe stress—a vital assessment seldom accessible in development research.

The question of sustainability goes beyond just wanting to know how things work to include worries about how effective development aid is. Afghanistan's CDD institutions received billions of dollars and eighteen years of programmatic effort. If these investments only built temporary structures that needed constant outside funding and didn't change the way local governments worked or how people participated, this raises serious questions about how to design and carry out CDD programs in fragile areas. On the other hand, if some CDC practices were adopted by local governments or if communities became able to work together to make change that lasts even after the program ends, this shows how externally-supported programs can bring about lasting change even in very unstable situations.

1.2.3. Significance of Governance Focus

This study's emphasis on governance impacts—specifically authority transformation, participatory inclusion, and institutional sustainability—addresses these deficiencies by analyzing CDD effects on essential governance dimensions rather than narrowly-defined outcomes. Comprehending how CDCs managed their interactions with conventional institutions, the efficacy of participatory mechanisms in fostering authentic inclusion, and the sustainability of certain practices beyond program implementation elucidates overarching inquiries regarding participatory development in fragile states.

The research contributes to three scholarly discourses. First, it enhances the theory of hybrid governance by providing a comprehensive empirical examination of the interaction between newly established democratic institutions and traditional

authority structures in fragile contexts. Second, it contributes to the CDD literature by examining governance processes and institutional relationships that extend beyond current experimental evaluations centered on quantifiable outcomes. Third, it contributes to the understanding of state-building by examining the circumstances in which institutions receiving external assistance can achieve legitimacy and sustain operations in contexts characterized by weak state capacity and robust non-state governance frameworks post-conflict.

1.3. Research Objectives and Questions

This study investigates the governance effects of Afghanistan’s community-driven development initiatives through three interrelated dimensions: authority transformation, participatory inclusion, and institutional sustainability. The study examines the influence of Community Development Councils under NSP and CCNPP (2003-2021) on local governance within Afghanistan’s precarious rural environment, emphasizing the differential effects of the program across various community contexts.

1.3.1. Main Research Question

What were the governance impacts of the National Solidarity Programme and Citizens’ Charter National Priority Programme (2003-2021) in Afghanistan’s fragile rural communities, and how did fragile-state contextual conditions shape these impacts?

This question uses the phrase “what were” to get a systematic look at the effects of a program on different areas, while “how did...shape” asks for an analysis of the contextual factors that affect the program’s effects. The question clearly places the analysis within Afghanistan’s “fragile” context, highlighting security limitations, insufficient state capacity, and disputed authority as factors that could affect CDC impacts. The time frame (2003–2021) covers the entire life cycle of the program, from its start to its end. This makes it possible to assess sustainability in studies that end while the program is still running.

The question is only about “governance impacts,” which means it only looks at authority relationships, participation patterns, and institutional dynamics. This focus fills in gaps in the current CDD literature, which has looked at changes in governance less than changes in infrastructure and the economy. The term “rural communities” shows that CCNPP’s urban extension is a different implementation context that needs to be looked at separately from this study’s scope.

1.3.2. Sub-Questions

Three sub-questions organize the analysis by looking at different but related aspects of governance.

Question 1: How do power changes affect relationships between institutions? How did Community Development Councils manage governance authority relationships with traditional institutions (shuras, jirgas, tribal elders) in rural Afghanistan, and what conditions led to the emergence of complementary hybrid arrangements as opposed to institutional conflict?

The distribution of power and the negotiation of legitimacy between newly established democratic institutions and pre-existing customary governance structures are examined in this question. It acknowledges that the results probably ranged from cooperation to competition and asks how CDCs managed authority relationships rather than whether they established authority, which is a binary question. Instead of passive accommodation or unilateral imposition, the question uses the word “navigate” to imply active negotiation. While “complementary hybrid arrangements versus institutional conflict” highlights important relationship patterns theorized in hybrid governance literature, the specification of “traditional institutions” with examples (shuras, jirgas, elders) grounds the investigation in Afghanistan’s unique governance landscape (Boege et al., 2009, pp. 13-21; Mac Ginty, 2010, pp. 391-392). The conditional phrase “under what conditions” encourages examination of the contextual elements that shape relationship patterns, such as the security environment, the strength of traditional authority, ethnic composition, and program design.

Sub-Question 2: Patterns of participatory inclusion. What patterns of participatory inclusion arose from CDC operations, especially concerning the involvement of women and marginalized groups in decision-making, and to what degree did participation facilitate substantial influence as opposed to being merely symbolic or tokenistic?

This question goes beyond just counting how many people took part to look at the quality of participation and patterns of inclusion. “Patterns of participatory inclusion” means paying attention to who took part, in what roles, and how much power they had over decisions. The focus on women and marginalized groups is due to both programmatic emphasis—CDC operational manuals required women’s participation—and analytical concern about whether formal inclusion requirements led to real empowerment. Cornwall’s (2008) study of invited spaces shows that formal participation doesn’t always mean power. This is how we can tell the difference

between “meaningful influence” and “symbolic or tokenistic” participation. This question looks at the empowerment part of the theoretical framework. It asks whether CDC participation allowed groups that had been left out before to have a say in community decisions or whether existing power structures took over participatory institutions.

Sub-Question 3: The legacy of institutional sustainability and governance. After program support ended and the political transition in 2021, what CDC governance practices, if any, continued? What factors led to the continuation or end of participatory institutions?

This question looks at long-lasting effects by figuring out which changes to governance lasted after the program was put into place. The phrase “if any” shows that there is a chance that no CDC practices lasted, so it doesn’t assume that there was a positive legacy. “Following the 2021 political transition” looks at sustainability analysis within the context of Afghanistan’s dramatic change in government. It asks whether practices introduced by the CDC were able to withstand extreme political change or if they depended completely on ongoing outside support and certain political conditions. The question asks what factors “determined sustainability,” which leads to an analysis of conditions that allow institutions to last, such as community ownership, acceptance of traditional authority, alignment with local norms, and capacity development, as opposed to factors that predict discontinuation. This fills in important gaps in the CDD literature about how long-term institutional effects and the sustainability of development programs work in unstable situations.

1.4. Scope and Delimitations of the Study

Clearly defining the scope and limits of the research helps to judge how generalizable the findings are while also recognizing the limits of the claims that the research can support.

1.4.1. Temporal Scope

The study looks at the years 2003 to 2021, from the start of NSP to the end of CCNPP after the political transition in 2021. This 18-year period makes it possible to look at how the program has changed over time, what its long-term effects are, and how it can be kept going. The temporal scope omits governance conditions prior to 2003, except as historical context, and does not investigate developments occurring after 2021, except for their implications in comprehending program legacies. This time limit means that we can’t look at effects that last a very long time (after 2021), but the long

time frame does give us a lot of time to see if CDC-introduced practices became part of local governance.

1.4.2. Geographic Scope

The study focuses on rural Afghanistan, where traditional governance structures are strongest and NSP and CCNPP have been implemented most extensively. Urban areas, which were added to CCNPP coverage after 2016, are not included in this analysis as they represent distinctive governance contexts with various institutional relationships. The study uses comparative case analysis in rural Afghanistan, looking at two to three communities or districts chosen to capture differences in traditional authority strength, security conditions, and ethnic composition. While acknowledging that results might not apply to all Afghan rural contexts, especially highly insecure areas with little program implementation or documentation, this narrow geographic scope allows for analytical depth.

1.4.3. Thematic Scope

The research investigates governance dimensions—authority relationships, participatory inclusion, institutional sustainability—rather than the entirety of CDC impacts. Economic outcomes (household income, poverty reduction), infrastructure quality, and social cohesion effects are discussed solely in terms of their illumination of governance dynamics. This intentional narrowing of the theme is in response to gaps in the current research, which has looked more closely at changes in governance than at changes in the economy and infrastructure. The study primarily examines CDCs’ relationships with traditional governance institutions, rather than their interactions with formal governmental administrative structures, although governmental relationships are considered when directly pertinent to authority dynamics and sustainability.

1.5. Significance of the Study

This study adds to the body of knowledge on community-led development, hybrid governance in unstable countries, and the effectiveness of participatory development. By analyzing governance effects through the lenses of authority transformation, participatory inclusion, and sustainability, the study fills significant voids in CDD literature and offers a comprehensive empirical examination of institutional dynamics within Afghanistan’s intricate governance framework.

First, the research enhances comprehension of the interaction between externally-introduced participatory institutions and traditional governance structures in fragile contexts. Most CDD evaluations look at community institutions on their own.

This study looks at CDCs as part of existing governance systems and looks at how democratic and customary authority forms negotiate, accommodate, and fight with each other. These results add to hybrid governance theory by providing a detailed look at how things work, which adds to existing ideas.

Second, the study adds to the field by showing how to do systematic secondary data analysis to look at governance processes in situations where primary fieldwork isn't possible. Experimental evaluations give us important causal evidence about how programs work, but qualitative document analysis lets us look into things like institutional relationships, authority negotiations, and participatory quality that can't be measured in numbers. The study shows that combining information from different secondary sources, such as impact evaluations, program documentation, academic studies, and existing interview data, can lead to thorough analysis of governance.

Third, the results help shape discussions about how to design CDD programs in weak states. Knowing when CDCs gained real power, allowed real participation, and made long-lasting changes to governance can help with future programming. The examination of elements that endured post-program implementation and subsequent political transition provides significant insights into the determinants of institutional resilience versus dependency.

Finally, Afghanistan's CDD experience is an exceptionally well-documented instance of participatory development within a highly precarious environment. The combination of a large program scale, strict experimental evaluation, a long implementation period, and a major political change makes for research opportunities that are not common in development studies. While the details of Afghanistan's experience are specific to that country, they shed light on larger issues related to building participatory institutions in post-conflict settings where the state is weak, traditional authorities are strong, security is still an issue, and legitimacy is still in doubt.

1.6. Organization of the Thesis

After this introduction, Chapter 1 looks at research on community-driven development around the world, in fragile states, and in Afghanistan's NSP and CCNPP in particular, pointing out gaps that this research fills. Chapter 2 lays out the theoretical framework for the analysis by using ideas from hybrid governance theory, legitimacy theory, and empowerment through participation. Chapter 3 talks about real-world results in three important areas: the link between traditional authority and CDD

institutions (RQ1), gender empowerment outcomes in both public and private settings (RQ2), and patterns of long-term sustainability (RQ3). Chapter 4 brings these results together by talking about their theoretical implications for hybrid governance, domain-specific empowerment, and resource-dependent fragility. It also adds to the policy recommendations for designing CDD programs in fragile states. At the end of Chapter 5, there is a summary of the main contributions, an acknowledgment of the research's limitations, and suggestions for future research and practice.

CHAPTER 1: LITERATURE REVIEW

Community-driven development is one of the biggest changes in how international development is done in the last 30 years. It has sent more than \$100 billion from the World Bank to projects based on the idea that poor communities can manage their own development (Wong & Guggenheim, 2018, p. 8). Despite its significant institutional growth and ongoing appeal to donors, substantial evidence regarding the effectiveness of CDD in fulfilling its transformative goals—especially in enhancing governance and fostering social cohesion—remains notably scarce. This chapter analyzes the theoretical underpinnings, empirical data, and significant controversies related to CDD, focusing specifically on its implementation in fragile and conflict-affected environments. The literature uncovers a persistent paradox: although CDD programs consistently succeed in providing infrastructure and modest economic advantages, they have predominantly failed to achieve the enduring institutional transformations initially anticipated by their advocates.

1.1. The Emergence and Global Expansion of Community-Driven Development

The intellectual and operational roots of community-driven development can be linked to increasing discontent with top-down development strategies prevalent during the post-colonial period. By the 1980s, critics both inside and outside of development institutions had written about how large-scale infrastructure projects that moved people out of their homes, ignored local knowledge, and often helped the rich instead of the poor (Chambers, 1983, p. 13). This critique opened up space for other ways of doing things that focus on participation and local ownership.

The Emergency Social Fund set up in Bolivia in 1987 is widely seen as the first institutional version of modern CDD programs. The fund was set up to help people deal with the bad effects of structural adjustment and economic crisis. It did this by providing temporary jobs through small, labor-intensive projects and letting community-based organizations manage the money and choose investments (Newman, Jorgensen, & Pradhan, 1991, pp. 367-368). With help from the World Bank and other donors, social funds spread across Latin America and Africa in the 1990s. They changed from first-generation safety nets that focused on temporary jobs to second-generation programs that explicitly aimed to empower people and build their skills (Operations Evaluation Department, 2005, p. 8).

The watershed moment for CDD came with Indonesia's Kecamatan Development Program, which started in 1998 during the Asian financial crisis and the political turmoil that followed Suharto's fall. Scott Guggenheim, the program's main designer, wrote that KDP started as a pilot in 48 villages and quickly grew to 2,000 villages by 2002 and 6,000 by 2006 (Guggenheim, 2021, pp. 283–284). The program was given a new name, the National Program for Community Empowerment (PNPM Mandiri), and by 2017 it had reached all 75,000 Indonesian villages, giving out about \$8.8 billion a year, which is almost six percent of Indonesia's GDP (Guggenheim, 2021, p. 284). This huge scale showed that CDD could go from being a pilot project to a national policy.

Under World Bank President James Wolfensohn (1995–2005), CDD grew faster because he focused on reducing poverty and giving countries ownership of their own development, which made participatory approaches more accepted. Community-based or community-driven development projects made up only 2% of Bank projects in 1989, but by 2003 they made up 25% (Operations Evaluation Department, 2005, p. 2). The largest share of these projects was in Africa, with 31%, followed by Latin America and the Caribbean, with 23% (Operations Evaluation Department, 2005, p. 8).

The current size of CDD is still very large. The World Bank funded about 375 active community-led development projects in 98 countries as of June 2023. The Bank gave about \$45.2 billion, and borrowers or donors gave an extra \$11 billion (Barron, Fernandes, Winkler, & Woolcock, 2024, p. 3). This project includes 27 of the 37 countries (73 percent) on the Bank's list of Fragile and conflict-affected situations. This shows that people still believe that CDD works best in tough situations. The biggest sectoral concentration is in agriculture, which gets \$15.5 billion. The next biggest is urban development, resilience, and land programs, which get \$8.2 billion (Barron et al., 2024, p. 3).

1.2. Intellectual Origins of Community-Driven Development

Community-driven development arose from various intellectual traditions that contested traditional top-down development in the 1980s and 1990s. To put the theoretical goals of CDD programs and the criticisms discussed in Section 2.4 into context, it is important to know where these ideas came from. Chapter 3 will put certain analytical ideas into action, but this section will look at the main thinkers whose work laid the philosophical groundwork for participatory development methods.

Robert Chambers' book *Rural Development: Putting the Last First* (1983) fundamentally challenged development practice by showing how professionals' biases systematically left out rural people's knowledge and priorities (Chambers, 1983, pp. 13-14; Chambers, 2005, pp. 95-103; Chambers, 2010, pp. 237-239). His later Participatory Rural Appraisal method gave communities real tools to look at their own situations and make choices. This had a direct effect on CDD's focus on planning processes led by the community (Chambers, 1994, pp. 1253-1254). Paulo Freire's *Pedagogy of the Oppressed* (1970) provided a more overtly political analysis, contending that authentic transformation necessitates conscientização—communities achieving a critical awareness of their conditions and potential for change (Freire, 2000, pp. 72-73). His criticism of the "banking model," which views individuals as passive recipients of external expertise instead of active participants, mirrored the critiques that led to the emergence of CDD (Freire, 1970, pp. 71-72).

In *Development as Freedom* (1999), Amartya Sen's capability approach changed the way we think about development. Instead of just raising people's incomes, it focused on giving them more real choices and freedoms (Sen, 1999, pp. 18–19). This framework provided a philosophical foundation for CDD's emphasis on community agency and the autonomy to establish development priorities. Elinor Ostrom's *Governing the Commons* (1990) provided empirical evidence that communities can efficiently manage shared resources through self-governing institutions, free from external state or market intervention (Ostrom, 1990, pp. 58-61). Her research on design principles for long-lasting institutions influenced the design of the CDD program, particularly regarding group decision-making and local monitoring mechanisms. Ostrom won the 2009 Nobel Prize in Economics for this work, which helped people understand how decentralized governance works (Barron et al., 2024, p. 10).

Social capital theory⁵, especially Robert Putnam's *Making Democracy Work* (1993), posits that civic engagement, horizontal associations, and networks of trust enhance economic prosperity and governance efficacy (Putnam, 1993, pp. 163-185; Woolcock & Narayan, 2000, pp. 225-249; Fukuyama, 2001, pp. 7-8). This viewpoint

⁵ The networks, rules, and trust that make it possible for people to work together and take action as a group. Putnam (1993, pp. 163-185) contends that social capital enhances both economic prosperity and efficient governance. Later research separates bonding social capital (connections within a group that make it stronger), bridging social capital (connections between groups that make it easier for them to work together), and linking social capital (connections to formal institutions and people in power) (Woolcock & Narayan, 2000, pp. 225-226).

corroborated CDD's theory that the establishment of participatory institutions at the community level would yield more extensive enhancements in governance. Woolcock and Narayan (2000, pp. 225-226) later explained the differences between bonding, bridging, and linking social capital. These differences had an impact on how CDD programs thought about community networks and their potential for growth.

These different ways of thinking came together to support CDD's main idea: that if poor communities have the right resources and institutional frameworks, they can organize their own development. The World Bank's implementation of these ideas into specific empowerment frameworks and participatory methodologies affected the design of programs in different settings (Narayan, 2002, pp. 1-10). However, as the following sections demonstrate, significant discrepancies emerged between these theoretical ideals and empirical realities. The theoretical framework in Chapter 3 will implement the analytical concepts necessary to examine these gaps: legitimacy, empowerment, participation, and accountability.

1.3. Global Evidence from Landmark CDD Programs

The most reliable proof of CDD outcomes comes from randomized controlled trials and quasi-experimental evaluations done in a variety of settings. This evidence generally supports CDD's effectiveness for infrastructure delivery; however, findings regarding governance and social cohesion outcomes are significantly more ambiguous.

Indonesia's KDP/PNPM is probably the most well-studied case of CDD. Benjamin Olken's (2007) field experiment encompassing more than 600 village road projects produced significant insights regarding corruption and oversight. At the baseline, about 24% of the reported project costs were missing because of corruption (Olken, 2007, pp. 200–201). Raising the chance of government audits from 4% to 100% cut down on missing spending by about 8 percentage points. But, grassroots involvement in monitoring had "little average impact" on corruption. It cut down on missing labor costs but not materials costs, which make up three-quarters of total costs (Olken, 2007, p. 200). This discovery went against the idea that community monitoring could take the place of formal accountability mechanisms. Quasi-experimental evaluations of PNPM revealed more favorable welfare outcomes, with a 9 percent increase in per capita household consumption overall, escalating to 19 percent among the poorest quintile of sub-districts (Voss, 2012, p. 23). These mixed results on monitoring and corruption are in line with other CDD evaluations that show better

results for delivering infrastructure than for changing governance (Casey, 2018, pp. 139-163; Mansuri & Rao, 2013, pp. 2-4; Wong, 2012, pp. 4-7).

India's Panchayati Raj system, established through the 73rd Constitutional Amendment in 1992, represents a different model of decentralized governance with CDD elements. The amendment required a three-tiered elected local government, with at least one-third of the seats set aside for women and a proportional number of seats set aside for Scheduled Castes and Scheduled Tribes. Chattopadhyay and Duflo's (2004) study utilizing the random assignment of women's reservation demonstrated that female leaders allocated significantly greater resources to public goods directly pertinent to women's issues, notably drinking water infrastructure (pp. 1409-1443; Beaman et al., 2009, pp. 1497-1540; Iyer et al., 2012, pp. 165-193). More recent studies showed that crimes against women were reported more often (Iyer et al., 2012, pp. 165–193; Beaman et al., 2012, pp. 582–586) and that the number of businesses owned by women in reserved constituencies grew by about 40% (Ghani et al., 2014, pp. 138–153; Deininger et al., 2014, pp. 32–49). These results show that quotas can change the priorities of policies, but the quality of implementation varies a lot from state to state.

Brazil's participatory budgeting experience, originating in Porto Alegre in 1989, offers evidence on long-running participatory governance. Porto Alegre made big strides during the program's peak years (1989–1997). For example, the number of households with sewer and water connections rose from 75% to 98%, and the infant mortality rate fell from 37.2 to 13.8 per thousand, the best rate among Brazilian capitals (Santos, 1998). Gonçalves (2014) looked at the experience of 169 municipalities that had adopted participatory budgeting by 2000. He found that these municipalities spent more money on health and sanitation services, which led to a “significant drop in infant mortality of between 1 and 2 infants for every 1,000 resident infants” (p. 94). But the program's decline after the Workers' Party lost the 2004 municipal elections shows how participatory institutions need ongoing political support.

The Philippines' KALAHI-CIDSS program, modeled on Indonesia's KDP, has been subject to rigorous randomized evaluation. A study of 198 municipalities found significant positive effects on school enrollment (+0.42 standard deviations), knowledge of local governance (+0.28 sd), and participation in community organizations (+0.31 sd). However, there were no effects on household consumption and a negative effect on agricultural productivity (Beatty et al., 2018, pp. 4-5). Labonne and Chase (2011) discovered that KALAHI-CIDSS augmented participation in village

assemblies and official meetings while simultaneously diminishing collective action (bayanihan) and group membership (pp. 348-358). This finding indicates that externally encouraged participation may supplant alternative forms of community engagement—a concern reiterated in theoretical critiques of “induced participation.”

Katherine Casey’s (2018) synthesis of randomized controlled trial evidence from various programs arrives at a definitive conclusion: “CDD effectively provides public goods and generates modest economic returns at a low cost in challenging environments.” However, there is scant evidence that CDD alters local decision-making or empowers the impoverished in a lasting manner” (p. 139). This pattern—beneficial infrastructure impacts, negligible governance impacts—seems strikingly uniform across various contexts.

1.4. Critical Perspectives on Community-Driven Development

Ghazala Mansuri and Vijayendra Rao’s thorough critiques are the most important academic challenges to CDD orthodoxy. In their 2004 article in *The World Bank Research Observer*, they said, “There is some evidence that CBD/CDD projects create effective community infrastructure, but not a single study establishes a causal relationship between any outcome and participatory elements of a CBD project” (Mansuri & Rao, 2004, p. 1). Their study demonstrated that elite groups predominantly oversee CDD projects, resulting in a marked decline in both targeting precision and project quality within communities exhibiting greater inequality (Mansuri & Rao, 2004, pp. 27-28).

Their subsequent book, *Localizing Development: Does Participation Work?* (2013), built on this criticism by looking at evidence from World Bank participatory development lending worth over \$85 billion (p. 15). The authors introduced the important idea of “civil society failure.” They said that even though “policy makers are less likely than they once were to assume that markets work perfectly or that governments can always provide effective solutions,” the policy literature is full of solutions to market and government failures that assume that groups of people—village communities, urban neighborhood associations, school councils, and water user groups—will always work toward the common good. People don’t often think about the idea of “civil society failure” (Mansuri & Rao, 2013, p. 4).

Elite capture is a major issue that comes up in a lot of writing. Mansuri and Rao (2013, pp. 5-6) assert that individuals engaged in civic activities are generally “wealthier, more educated, of higher social status (by caste and ethnicity), male, and

more politically connected than nonparticipants,” with “resource allocation processes typically reflecting elite preferences.” Capture is more likely to happen in communities that are far away, have low literacy, are poor, or have big differences in caste, race, or gender (Mansuri & Rao, 2013, p. 5). The evidence is nuanced: four out of five existing meta-analyses conclude that elite capture is generally not a problem (Casey, 2018, p. 148; Wong, 2012, p. 35), and research by Alatas et al. (2019) and Galasso and Ravallion (2005) indicates that elite capture in devolved projects is minimal compared to targeting errors in top-down alternatives. Mansuri and Rao (2004, p. 30) introduced the notion of “benevolent capture,” recognizing that elites in situations characterized by pronounced power imbalances may engage in actions that advantage the impoverished.

Mansuri and Rao (2013, pp. 9-10) discovered “little evidence that induced participation builds long-lasting cohesion, even at the community level,” noting that group formation is often “both parochial and unequal,” and projects seldom foster cross-group cohesion, potentially entrenching existing divisions. Mansuri and Rao (2013, pp. 31–33) say that organic participation comes from social movements that have had to deal with powerful institutions. Induced participation, on the other hand, is “extrinsically promote[d]... usually in a manner that affects a large number of communities at the same time.” People often seem to participate because of project-related incentives rather than real civic engagement, and the effects are unlikely to last beyond the project’s end (Mansuri & Rao, 2013, p. 10).

Sustainability issues make these worries even worse. When projects don’t pay for maintenance and other costs that come up over and over again, “communities are left with schools that are falling apart and clinics that don’t have any medicine” (Mansuri & Rao, 2013, p. 9). The 3ie evidence synthesis by White, Menon, and Waddington (2018) found that CDD programs have “little or no impact on social cohesion and governance” (p. iv). The synthesis revealed that “CDD programmes may be using social cohesion rather than building it,” indicating that communities with greater baseline social capital are more likely to effectively execute projects (White et al., 2018, p. 28).

1.5. Community-Driven Development in Post-Conflict Settings

The World Bank calls CDD the “preferred operational strategy in post-conflict and fragile situations” (World Bank, 2013, p. 8). Some of the main reasons are that it can directly help a lot of poor people when governments and international organizations don’t have many other options, especially when the state is weak; it can quickly and

easily restore basic services; it can help rebuild social capital and trust between communities and governments; and it can effectively reach remote or unsafe areas at scale where traditional state delivery methods can't work (IEG, 2016, pp. 24-25). As of June 2020, the World Bank's CDD portfolio had 327 projects going on in 90 countries. These projects were worth \$33 billion in active financing and made up 11% of all World Bank Group lending (World Bank, 2020, p. 3).

The theory of change for community-driven development (CDD) in fragile contexts identifies three primary outcome categories: enhanced welfare, governance, and social cohesion (Casey & Van der Windt, 2016, p. 4). In CDD, communities get direct access to decision-making power and money, which allows them to take part in non-violent group decision-making about resource issues that are important to everyone (Bennett & D'Onofrio, 2015, p. 3). The governance pathway posits that democratic committee elections and training in transparent budgeting offer "exposure to good governance [that] can help alter social behaviour over a period of time" (Humphreys et al., 2012, p. 5). The social cohesion pathway asserts that "relations between previously warring groups can be transformed by non-violent participatory decision-making" (Casey & Van der Windt, 2016, p. 5).

Case studies in unstable situations show that implementation is different in each case. The Aceh reconstruction in Indonesia after the tsunami (2004–2009) used community-based methods to spend about US\$655 million, fixing up 15,000 homes for 35,000 people, with satisfaction levels reaching 80–90 percent, which was much higher than the goals (World Bank, 2012, pp. 67–68). The program took place at a time when the separatist conflict that had been going on for 30 years was coming to an end. People saw the influx of aid as a chance for a peaceful resolution (Barron, 2010, p. 12).

The Poverty Alleviation Fund in Nepal was set up during a violent Maoist insurgency that killed more than 15,000 people. It used CDD design because it needed to move resources to places where the government couldn't get to because of weak administrative structures and high levels of violence (IEG, 2017, p. 45). Impact evaluation showed that per capita consumption went up by 19% and school enrollment for kids ages 6 to 15 went up by 14 percentage points, even among girls and kids from lower caste or ethnic groups (Parajuli et al., 2012, pp. 28–30). The costs of community infrastructure were less than those of similar government-funded projects (IEG, 2017, p. 46).

The Social Fund for Development in Yemen, which started in 1997, reached about 25% of the country's 40,000 villages and more than 50% of the rural population. It was "the only development programme in Yemen with such coverage" (Al-Iryani et al., 2015, p. 418). Key success factors included close working relationships with communities following demand-driven approaches, trust based on perceived political neutrality, flexibility in rapidly changing contexts, and strong beneficiary support providing effective protection (Al-Iryani et al., 2015, pp. 420-422). From 2003 to 2006, the number of girls and boys attending SFD-built schools in rural areas went up by 122% and 91%, respectively. SFD-supported feeder roads also cut the time it took to get to services and markets by half (World Bank, 2013, p. 28).

1.6. Challenges of Implementing CDD in Fragile Contexts

Implementation in fragile contexts faces unique challenges that frequently compromise program efficacy. Security limitations directly obstruct access: in Iraq, "engaging citizens when there were security concerns proved difficult." It was hard to get to the communities that needed help because of long waits at checkpoints, and there was a risk of attacks in mountainous areas (World Bank, 2021). Bennett and D'Onofrio (2015, p. 6) say that it is "increasingly difficult and may be impossible" to put community development programs into action in places where there is active violent conflict.

The program's long-term success is limited by weak institutional capacity. Low-income fragile states typically lack the administrative frameworks, resources, and personnel necessary to sustain Community-Driven Development (CDD) investments (IEG, 2016, p. 35). The Independent Evaluation Group (2016, p. 52) said that "community-driven development has been a useful way to help local communities in fragile and conflict-affected states in the short term, but without a way to make sure it lasts, its long-term viability is still in doubt."

The contested legitimacy of established institutions engenders specific tensions. The NSP evaluation in Afghanistan revealed that "NSP worsened perceptions by male villagers of local governance quality at endline... apparently caused by the diffusion of institutional accountability due to the parallel co-existence of CDCs with customary authorities and the lack of clarity concerning the role of CDCs following project completion" (Beath et al., 2013, p. 1311). This finding indicates that CDD may undermine local governance by introducing institutions that are incompatible with traditional frameworks (Beath et al., 2013, p. 1312).

Gender constraints are particularly pronounced in conservative conflict settings. When female participation is a goal instead of a requirement, women's involvement usually does not meet expectations (White et al., 2018, p. 48). Studies show that gendered cultural norms and socioeconomic factors make it harder for women to participate in public life. For example, "dominant groups us[ing] their power to orchestrate a public performance of social domination" (Mansuri & Rao, 2013, p. 175). The evidence regarding the actual empowerment of women through CDD programs to assume more active public roles beyond the immediate project scope is still insufficient (White et al., 2018, p. 49).

1.7. Evidence on Governance and Social Cohesion Outcomes

There is a clear pattern in rigorous impact evaluations of fragile states. The Tuungane Programme in the Democratic Republic of Congo (2007–2016) was one of the biggest CDD randomized controlled trials ever. It helped more than 1,900 communities that had been affected by conflict and cost the UK government about £103.7 million (Humphreys et al., 2012, p. 2). Humphreys, Sanchez de la Sierra, and Van der Windt (2012) randomly assigned 280 communities to treatment and 280 to control. Even though the program was well-run and had visible effects on infrastructure, it "did not significantly affect social cohesion, governance, or welfare" (White et al., 2018, p. 31). Out of 34 outcome measures assessed, merely two exhibited statistically significant effects in the anticipated direction (Humphreys et al., 2012, p. 45). The eight-year follow-up corroborated that the "physical infrastructure established by the Tuungane CDD program persisted... yet there was no evidence of impacts in alternative dimensions" (Mvukiyehe & Van der Windt, 2020, p. 23).

The GoBifo Program in Sierra Leone (2005-2009) gave each village \$5,000 in block grants and a lot of help with social issues. 47% of the money went to block grants and 30% went to building capacity (Casey et al., 2012, p. 1756). The short-term evaluation revealed significant positive impacts on local public goods (0.376 standard deviation improvement) and market activity; however, it yielded "precisely estimated null results for the software family" of institutions and collective action (Casey et al., 2012, p. 1783). Even though women went to project meetings, they "were no more likely to voice an opinion in community meetings after the project ended" (Casey et al., 2012, p. 1784). An eleven-year follow-up revealed enduring improvements in infrastructure; however, there remained "no significant impact on long-term

dimensions of institutional quality, such as trust, group formation, and inclusive decision-making” (Beath et al., 2021, p. 2542).

Wong’s (2012, pp. 52-53) World Bank review of 17 programs found “generally positive effects of CDD programming on poverty targeting and reduction and access to services” but “little, if any, evidence of impact on governance, social capital or conflict.” The 3ie synthesis (White et al., 2018, p. 52) of 25 impact evaluations across 23 programs in 21 countries found no evidence that CDD increases social capital, even in the short term. It said that “CDD programs may be using existing social cohesion rather than building it.” Casey’s (2018, p. 148) meta-analysis similarly found that CDD communities are often quite homogenous with high baseline levels of trust and civic engagement—in Sierra Leone, 95 percent expressed willingness to trust community members with financial transactions—raising fundamental questions about whether measured null effects reflect ceiling constraints rather than program failure.

The Department for International Development (DFID) critical Review (2013, p. 8) examining programs across Afghanistan, Indonesia (Aceh), DRC, Liberia, and Sierra Leone concluded that “the record of CDD/R in conflict-affected contexts is mixed and, on the whole, discouraging,” with “overall results for governance and social cohesion indicators across all five programmes... far more mixed” than infrastructure outcomes. This evidence strongly supports the conclusion that “CDD is unlikely to be fully effective in FCV settings or to reduce fragility, conflict, and violence” and that there is “no consistent evidence of impact on social and institutional outcomes” (World Bank, 2020, p. 15).

This review of three decades of CDD scholarship reveals a fundamental paradox: notwithstanding CDD’s efficacy in delivering tangible infrastructure and modest economic advantages at a reasonable cost, even under challenging circumstances, its theoretical capacity to reform governance, bolster social cohesion, and empower marginalized groups remains predominantly unfulfilled. The evidence indicates that participation may be coerced, yet genuine empowerment cannot be externally imposed; infrastructure can be developed, but institutions cannot be relocated; and communities may execute projects, yet enduring transformations in governance necessitate more than mere short-term project interventions. These patterns are most obvious in states that are weak and have been affected by war. This is because CDD works with existing power structures, questions of legitimacy, and limited ways to make things last, which makes things even harder. You need to deal with these real-

life facts instead of ideas about how people should work together to understand Afghanistan's Community Development Councils.

CHAPTER 2: THEORETICAL FRAMEWORK

Community Development Councils are one of the most ambitious attempts to bring democratic local government to a place where traditional authority is strong, there is constant fighting, and the state is not seen as legitimate. We need a theoretical framework that considers a lot of different things to figure out how these institutions that were built outside of Afghanistan work with the country's complicated government system. This chapter lays out the analytical framework for the study of Community Development Corporations (CDCs). It uses hybrid governance theory, rights-based development methods, and four main ideas: legitimacy, empowerment, participation, and accountability. These theoretical frameworks elucidate that CDCs cannot be perceived merely as technical service delivery systems; instead, they function as institutions negotiating various authority claims and contending sources of legitimacy within what scholars define as a "hybrid political order."

2.1. Hybrid Governance Theory

2.1.1. The concept of hybrid political orders

For a long time, the main way of thinking about governance problems in countries like Afghanistan in international development and security policy has been through the ideas of "state fragility" or "state failure." This framing focuses on what states don't have compared to the Weberian ideal of centralized authority, territorial control, and a monopoly on legitimate violence. Boege, Brown, Clements, and Nolan contested the deficit-oriented framework by presenting the notion of "hybrid political orders," which redirects analytical focus to the realities and operations present in the field, rather than what is lacking (Boege et al., 2009, p. 13).

In hybrid political orders, "diverse and competing authority structures, sets of rules, logics of order, and claims to power co-exist, overlap, interact, and intertwine, combining elements of introduced Western models of governance and elements stemming from local indigenous traditions of governance and politics" (Boege et al., 2009, p. 17). This idea understands that the state "does not have a privileged monopolistic position as the only agency providing security, welfare, and representation; it has to share authority, legitimacy, and capacity with other institutions" (Boege et al., 2008, p. 10). In these situations, a lot of people still think that traditional and customary authority is "more important than the legal/rational type of legitimate authority."

This reframing has much of theoretical importance. Instead of looking at countries like Afghanistan as “incomplete” or “not yet” built properly, the hybrid political orders framework focuses on “the strength and resilience of sociopolitical formations that are present on the ground, that work, and that provide public goods for people and communities” (Boege et al., 2009, p. 13). This is not just an academic difference; it has big effects on how we should design and judge institutions that are brought in from outside, like CDCs.

2.1.2. The persistence of traditional governance

Traditional governance structures endure and operate even in the presence of state institutions. Boege et al. assert that “customary law and indigenous knowledge, alongside traditional societal structures—extended families, clans, tribes, religious brotherhoods, village communities—and traditional authorities such as village elders, clan chiefs, healers, big men, and religious leaders shape the everyday social reality of significant portions of the population in so-called fragile states even today” (2009, p. 15). State institutions become “to a certain extent ‘infiltrated’ and overwhelmed by these ‘informal’ indigenous societal institutions and social forces that work according to their own logics and rules within the state structures” (Boege et al., 2009, p. 15).

This observation is directly pertinent to comprehending CDCs in Afghanistan. Historically, village governance has depended on local jirga or shura councils, which are groups of people who make decisions about public goods and settle disagreements. The malik⁶ (village headman) works with higher authorities, and the mullah⁷ takes care of religious ceremonies and family disagreements (Beath et al., 2015, pp. 3-4; Barfield, 2010). The National Solidarity Programme did not create CDCs in a vacuum; instead, it did so in a very crowded governance landscape. The theoretical inquiry pertains not to the potential replacement of traditional structures by CDCs, but rather to the manner in which they will “blend, compete, and coexist” with established authority systems.

2.1.3. Hybrid peace and international intervention

⁶ A village headman or elder who has always been the main link between the community and the district or provincial government. Respected elders in the community usually hold the position, and both traditional and government officials recognize them (Beath et al., 2015, pp. 3–4; Barfield, 2010, pp. 82–85).

⁷ A religious scholar in Islam who leads prayers, teaches religion, and often settles family disputes according to Islamic law (sharia). In rural Afghanistan, mullahs possess considerable moral authority and exert influence over social and familial issues (Barfield, 2010, pp. 88-92; Murtazashvili, 2016, pp. 85-87).

Mac Ginty applies the concept of hybridity to peace processes, asserting that “peace (and security, development and reconstruction) in societies emerging from violent conflict tends to be a hybrid between the external and the local” (Mac Ginty, 2010, p. 391). His four-part analytical model identifies the factors producing hybrid outcomes: the compliance powers of liberal peace agents; their incentivizing powers; the ability of local actors to resist, ignore, or adapt interventions; and the ability of local actors to present and maintain alternative approaches (Mac Ginty, 2010, p. 391). This framework sheds light on the power dynamics between international development actors and local communities that influence the operational functioning of institutions such as CDCs.

Mac Ginty’s research on Afghanistan focuses on hybrid security arrangements, illustrating the interplay between international frameworks and local customs (Mac Ginty, 2011). His analysis indicates that imposed institutional forms seldom endure unaltered; communities adapt, resist, or co-opt new structures in manners that yield results that are neither exclusively “modern” nor “traditional.”

2.1.4. Critical perspectives on hybridity

Not all research on hybrid governance is encouraging. Meagher warns against idealizing traditional or informal governance, asserting that “hybrid governance perspectives often essentialize informal regulatory systems, disguising coercion and political capture as popular legitimacy” (Meagher, 2012, p. 1073). She says that hybrid governance needs to be looked at in a more empirical and comparative way so that it can tell the difference between helpful and harmful forms of non-state order (Meagher, 2012). This critical point of view is important for CDC analysis because it warns against assuming that traditional village structures are always good or representative. Many traditional forms of government are marked by elite capture, exclusionary practices, and patriarchal power relations.

Menkhaus’s research on Somalia introduces the idea of the “mediated state,” which is a model in which “weak states negotiate political access through existing local authorities” instead of taking direct control (Menkhaus, 2007, pp. 74-106). Menkhaus (2007, p. 78) says that the mediated state depends “on partnership (or at least coexistence) with a diverse range of local intermediaries and rival sources of authority to provide core functions of public security, justice, and conflict management.” This idea helps us understand how CDCs could work best: not as replacements for traditional authority, but as links between communities and the central government.

2.1.5. Afghanistan's hybrid governance context

Afghanistan is a good example of a mixed political system. Wardak explains that the jirga (for Pashtuns) and the shura (for non-Pashtuns) are traditional ways to settle disagreements. Most disagreements are settled within the private sphere of extended families before they ever reach a formal institution (Wardak, 2004, pp. 319–341). He suggests a mixed model that combines traditional and state justice systems. This is because the state has not always been very involved in rural Afghanistan, where about 80% of the population lives (Wardak, 2004).

The relationship between CDCs and traditional structures has been very different in different parts of the world. Research shows that in some areas, CDCs have “gained local legitimacy by coordinating, complementing, and working with local traditional decision-making structures.” However, in southern and southeastern provinces, they found it “more difficult to gain traction alongside more established traditional structures.” This geographic variation shows that hybrid governance leads to different results based on the relative strength of traditional authority, security conditions, and the quality of implementation.

2.2. Rights-Based Participatory Development Approach

2.2.1. Defining the rights-based approach

The rights-based approach to development signifies a pivotal shift from previous development paradigms. Cornwall and Nyamu-Musembi contend that a rights framework offers “a normative framework to orient development cooperation,” infusing “an ethical and moral dimension to development assistance” (2004, p. 1416). Rights discourse “furnishes a more robust foundation for citizens to assert claims against their states and to hold states accountable for their obligations to improve citizens’ access to the realization of their rights” (Cornwall & Nyamu-Musembi, 2004, p. 1416).

It is very important to know the difference between rights-based and needs-based approaches. A needs-based approach emphasizes acquiring supplementary resources for service delivery to specific groups, whereas a rights-based approach advocates for a more equitable distribution of existing resources and empowers marginalized individuals to assert their rights to those resources. Consequently, it renders the development process overtly political” (Cornwall & Nyamu-Musembi, 2004, p. 1417). Charity can help people meet their needs, but rights come from legal and moral duties. This difference affects how people think about CDC programs, such

as whether they provide services to people who don't do anything or let people claim their rights.

2.2.2. Participation as right and as means

One important theoretical question is whether participation is a right in and of itself or just a way to reach other development goals. The UK Department for International Development said that participation is “in itself a human right, one that is prior to the realization of other rights” (Cornwall & Nyamu-Musembi, 2004, p. 1428; Nelson & Wright, 1995, pp. 1–14; Cornwall, 2000, pp. 13–28). In this view, it is valuable for community members to be involved in making decisions, no matter what the project ends up being. The alternative instrumental view sees participation as a way to make development more effective. Communities participate because it leads to more targeted interventions and longer-lasting results.

This tension is present in CDCs. Their design includes ways for people to get involved, like elections, community meetings, and group decision-making. These can be seen as ways to respect people's right to speak up or as tools for getting aid to people quickly. This distinction is important for evaluation: if participation is valued in and of itself, CDCs should be judged in part on how well they involve people, regardless of the results of development.

2.2.3. Critical perspectives on participatory development

The participatory development paradigm has faced substantial critique. White argues that “participation must be seen as political.” There are always tensions behind problems like who is involved, how, and on whose terms. “Participation has the potential to challenge patterns of dominance, but it may also be the means through which existing power relations are entrenched and reproduced” (White, 1996, p. 6; Cornwall, 2008, pp. 269–270; Hickey & Mohan, 2004, pp. 3–24). She talks about four types of participation: nominal, instrumental, representative, and transformative. She says that only the last one really gives power to people and builds solidarity between those in power and those who are marginalized.

Cooke and Kothari's important book talks about three “tyrannies” of participation: the tyranny of decision-making and control, where facilitators go against what the community wants; the tyranny of the group, where group dynamics silence individual voices; and the tyranny of method, where participatory techniques themselves become limiting (Cooke & Kothari, 2001, pp. 1-15). They note “the remarkable naiveté of participatory development workers regarding the power relations

between communities and themselves as ‘facilitators’” (Cooke & Kothari, 2001, p. 7). Being asked to take part is itself “a display of power” that may make it harder for communities to “confront existing power structures” (Cooke & Kothari, 2001, pp. 142–143).

These criticisms are pertinent to CDC analysis. If the current power structures control these spaces, the formal participatory mechanisms—like elections, community development plans, and project selection meetings—may not actually give people power. Cornwall and Nyamu-Musembi themselves say that rights-based approaches could become “the latest designer item to be seen to be wearing,” dressing up “the same old development” in new language (2004, p. 1416).

2.2.4. Accountability and claims-making

The rights-based approach puts responsibility at its core. One of the most important things that the human rights approach adds is that it stresses that policy-makers and other people whose actions affect people’s rights should be held accountable. Rights entail responsibilities, and responsibilities necessitate accountability” (Cornwall & Nyamu-Musembi, 2004, p. 1417, citing UNOHCHR). Rights-based strategies necessitate both the “enhancement of duty-holders’ capacity” and the “empowerment of citizens to assert their rights” (Cornwall & Nyamu-Musembi, 2004, p. 1430).

For CDCs, this dual focus means that a program’s success depends not only on setting up formal ways to hold people accountable, but also on giving community members the skills and confidence to make claims against duty-bearers. In places where traditional norms make it hard for women to speak in public or question men in power, formal rights may not be fully realized unless there is also social change.

2.3. Key Analytical Concepts

2.3.1. Legitimacy

Max Weber’s three-part system for classifying legitimate authority is still important. Legal-rational authority is based on the idea that certain rules are “legal” and that people who are given authority under those rules have the right to give orders.”Traditional authority is based on a long-held belief in the sacredness of ancient traditions and the legitimacy of the people who have power over them.Charismatic authority is based on “devotion to the specific and exceptional sanctity, heroism, or exemplary character of an individual person” (Weber, 1978, pp. 215-216). Weber (1978, pp. 212-213) asserted that every system of domination endeavors to cultivate

“the belief in its legitimacy,” contending that governance founded on perceived legitimacy yields superior stability compared to coercion.

The Weberian framework directly elucidates CDC tensions. CDCs are an effort to bring rational-legal institutions, like formal elections, written rules, and clear accounting, into places where traditional authority is strong. Weber himself said that traditional authority “blocks the development of rational or legal forms of authority,” which means that there is always some tension when both exist.

Beetham’s significant critique transcends Weber’s typology. Beetham says there are three types of failure that go along with each other: “illegitimacy” comes from breaking the rules, “legitimacy deficit” comes from not having shared beliefs, and “delegitimation” comes from not giving consent (1991, pp. 15–18). Illegitimacy comes from breaking the rules, legitimacy deficit comes from not having shared beliefs, and delegitimation comes from taking back consent. This framework shows how institutions that are brought in from outside might meet legal requirements but not be based on shared community beliefs. This is a lack of legitimacy that formal procedures cannot fix.

Scharpf differentiates between input legitimacy and output legitimacy. Input legitimacy “refers to the participatory quality of the process leading to laws and rules,” rooted in authentic representation. Output legitimacy is “about how well the laws and rules solve problems.” Political choices are legitimate “if and because they effectively promote the welfare of the community” (Scharpf, 1999, pp. 7-21). This differentiation is especially beneficial for CDC analysis. CDCs can gain output legitimacy by providing good services, even if input legitimacy through real participation is still up for debate.

Research on legitimacy in fragile contexts focus on performance legitimacy, which is the state’s ability to provide services and meet the needs of its citizens (OECD, 2010, pp. 9–15; McLoughlin, 2015, pp. 7–9; Cliffe & Luckham, 2012, pp. 27–43). Research on CDCs indicates that their acceptance was largely achieved through output legitimacy, where “government legitimacy is dependent on ongoing service delivery rather than historical development results” (Beath et al., 2015, p. 11). When project funding ended, the effects of legitimacy disappeared, showing how weak performance-based legitimacy is without a stronger institutional foundation.

In this thesis, legitimacy is defined multidimensionally, based on Beetham’s framework: a CDC is deemed legitimate when its authority adheres to established rules

(legal-procedural dimension), these rules resonate with the shared beliefs of community members (normative dimension), and community members express their consent through active participation and compliance (behavioral dimension). CDCs might not be equally legitimate in all of these areas or among all of the community subgroups.

2.3.2. Empowerment

Kabeer offers a widely accepted definition of empowerment as “the process by which those who have been denied the ability to make strategic life choices acquire such an ability” (Kabeer, 1999, pp. 435-436; Rowlands, 1997, pp. 13-14; Narayan, 2002, pp. 14-15). Empowerment necessitates transformation—“individuals who possess significant choice may be powerful, yet they are not ‘empowered’ as they were never disempowered” (Kabeer, 1999, p. 436). This definition has methodological implications: measuring empowerment necessitates the establishment of baselines for prior disempowerment and the monitoring of change over time.

Kabeer’s framework delineates three interconnected dimensions. Resources encompass not only tangible assets but also “future claims, to both material and human and social resources”—the prerequisites for exercising choice (Kabeer, 1999, pp. 437-438). Agency includes “processes of decision making” as well as less measurable signs of agency like “negotiation, deception, and manipulation.” It has both “power to” and “power over” parts (Kabeer, 1999, pp. 438-439). Achievements are the tangible results of agency enacted through resources. These three dimensions are “indivisible in determining the meaning of an indicator” (Kabeer, 1999, p. 445).

Critically, Kabeer makes an important distinction between effective agency, which is the ability to do assigned tasks more quickly, and transformative agency, which is the ability to question and change the parts of those tasks that are too strict (Kabeer, 2005, p. 15). This distinction is crucial for evaluating women’s participation in the CDC: does it signify a genuine transformation of gender relations, or merely a more efficient adherence to traditional expectations?

Narayan (2002, p. 14) says that the World Bank’s working definition of empowerment is “the expansion of assets and capabilities of poor people to participate in, negotiate with, influence, control and hold accountable institutions that affect their lives.” This necessitates a transformation in mindsets (perceiving impoverished individuals as collaborators), relationships (facilitating involvement in decision-making), and institutions (rendering systems attuned to the needs of the underprivileged). Four things are very important: being able to get information, being

included in decision-making, having ways to hold people accountable, and having the ability to organize in the area (Narayan, 2002, pp. 11-18).

According to Alsop, Bertelsen, and Holland (2006), empowerment is “a person’s capacity to make effective choices; that is, as the capacity to transform choices into desired actions and outcomes.” This relies on agency (individual capacity) and opportunity structure (institutional context). There are three levels at which empowerment can be measured: having a choice, using a choice, and getting what you want.

Empowering women in patriarchal societies poses distinct analytical challenges. It is important to know the difference between women’s participation (being there in person) and women’s empowerment (changing the power dynamics). The CDC design required women to be involved through gender quotas, but just being there doesn’t mean they have a say or power. Research shows that when directly confronting male authority has social costs, women may show agency in other ways, such as through negotiation, getting male relatives to influence them, or staying quiet on purpose. It’s hard to measure these indirect forms of agency, but they might still show real empowerment.

2.3.3. Participation

Arnstein’s ladder is the basic type of typology. “Citizen participation” is a general term for “citizen power.” The redistribution of power allows citizens who currently lack access to political and economic processes to be intentionally included (Arnstein, 1969, p. 216). Her eight-rung ladder separates things into three main groups.

Manipulation (using rubberstamp advisory committees for public relations) and therapy (focusing on “curing” participants instead of fixing structural problems) are both forms of non-participation. Tokenism includes informing (one-way communication with no way for people to respond), consulting (attitude surveys and hearings without a promise to take people’s views into account), and placation (hand-picked representatives who give advice but can’t make decisions). Partnership (negotiated power-sharing), delegated power (community dominates decision-making), and citizen control (community governs program or institution) are all parts of citizen power (Arnstein, 1969, pp. 217–226). Arnstein recognizes that “in the actual realm of individuals and initiatives, there may exist 150 tiers with less pronounced and ‘pure’ differentiations” (1969, p. 217).

Pretty delineates a seven-fold typology of participation pertinent to development contexts: passive participation (informed of forthcoming events); participation in information dissemination (responding to inquiries without bias); participation through consultation (opinions acknowledged but not necessarily integrated); participation for material incentives (providing resources for rewards); functional participation (formation of groups for specific objectives); interactive participation (collaborative analysis and action planning with community oversight); and self-mobilization (autonomous initiative with sustained control) (Pretty, 1995). Most types of participation “threaten rather than support” development goals unless they reach the interactive or self-mobilization end of the spectrum.

Cornwall makes a distinction between “invited spaces,”⁸ which are participatory arenas made by people in power where participants respond to agendas set by others, and “claimed or created spaces,” which are bottom-up arenas where communities set their own agendas through collective action (Cornwall, 2008, pp. 275–277). This framework works perfectly for CDCs because they are invited spaces that were set up by the government and donors instead of growing out of community mobilization. Cornwall stresses the importance of asking “who participates, in what, and for whose benefit” (2008, p. 269). She points out that stakeholder groups like “women” or “the poor” are “often treated as unproblematic and bounded” when they hide important differences within themselves (Cornwall, 2008, p. 278).

2.3.4. Accountability

Schedler gives the basic definition: “A is accountable to B when A has to tell B about A’s actions and decisions (past or future), explain them, and face punishment if A does something wrong” (Schedler, 1999, p. 17). This includes two main parts. Answerability is the duty to tell people about and explain decisions. This includes both the duty to give information and the duty to explain choices. Enforcement is the ability to punish people who don’t do their jobs by giving them rewards for good behavior and punishing them for bad behavior (Schedler, 1999, pp. 14-19).

O’Donnell says that horizontal accountability is when state institutions keep an eye on each other through courts, legislatures, and oversight bodies. Vertical

⁸ Invited spaces are places where people can participate on terms set by those in charge. Closed spaces, on the other hand, are places where participation is limited or not allowed at all. Cornwall (2008, pp. 275-277) differentiates these from asserted or constructed spaces that arise from grassroots collective action. The distinction clarifies power dynamics in participation—who sets the agenda, who is eligible to participate, and under what conditions.

accountability⁹, on the other hand, is when citizens hold the government accountable through elections and societal demands (O'Donnell, 1998, pp. 112–126). In fragile states where horizontal accountability institutions aren't very strong, vertical mechanisms take over the job of holding people accountable.

Peruzzotti and Smulovitz define social accountability as “a vertical mechanism of control based on actions of citizens and CSOs,” encompassing legal claims, media revelations, and social movements advocating for due process (Peruzzotti & Smulovitz, 2000, pp. 147-150). Social accountability works with electoral accountability between elections and uses “soft power” (public exposure and shame) instead of formal punishments.

Fox warns that being open and honest doesn't always mean being responsible. He makes a difference between clear transparency (information that is easy to find and trust) and opaque transparency (information that only looks open). He also makes a difference between hard accountability (formal punishments) and soft accountability (naming and shaming). “Transparency uses the power of shame, but people who are shameless may not be afraid of being exposed to the public. “Truth often fails to lead to justice” (Fox, 2007, p. 665). The main question is, “What types of transparency lead to what types of accountability, and when?” (Fox, 2007).

CDCs have to meet plenty of different, and sometimes conflicting, accountability demands. They are responsible to government ministries and donors who give them money and make the rules for the program. They are responsible to the people in the community who vote for CDC leaders and use their services. They might also be responsible to traditional authorities on the same level, since their cooperation is needed for the community to accept them. Researchers note that in developing nations with ineffective local governance and restricted community representation, upward accountability demands from donors and governments often prevail, relegating downward accountability to communities to a secondary status (see Mansuri & Rao, 2013; Ebrahim, 2003; Malena et al., 2004).

2.4. Application of Theoretical Framework to Afghanistan's CDCs

⁹ Vertical accountability is the way that citizens hold the government accountable through things like elections, social movements, media coverage, and civil society mobilization. Horizontal accountability means that state institutions check on each other through courts, legislatures, audit bodies, and other agencies. In fragile states with weak horizontal accountability mechanisms, the responsibility significantly transfers to vertical mechanisms (O'Donnell, 1998, pp. 112-126; Goetz & Jenkins, 2005, pp. 8-12).

The CDCs in Afghanistan are an interesting example of how institutions can be introduced into a hybrid governance setting. The National Solidarity Programme set up more than 32,000 CDCs from 2003 to 2020 and gave out more than \$1.01 billion in block grants for community-chosen development projects (Beath et al., 2015, pp. 3–4). The Citizens’ Charter National Priority Program that came after it kept this up from 2016, working with more than one ministry to make sure that minimum service standards were met in health, education, water, agriculture, roads, and energy.

The CDC model brought rational-legal institutions, like secret ballots and universal suffrage, gender-balanced representation, and clear financial management, into places where traditional authority was based on different sources of legitimacy. The village was run by the jirga or shura (customary councils), the malik (village headman who talked to higher-ups), and the mullah (religious leader). These traditional structures were based on age, family ties, religious knowledge, and the ability to settle disputes, not on formal electoral mandates.

The theoretical frameworks articulated in this chapter yield particular analytical inquiries for the assessment of CDCs:

Legitimacy: How do CDCs gain legitimacy in places where traditional authority is strong? Do they compete with or work with traditional institutions? Research shows that CDCs gained output legitimacy by providing services, but “once NSP-funded projects are finished, the overall effect of NSP on men’s views of the quality of local governance gets worse” (Beath et al., 2015, pp. 7–8). The “diffusion of institutional authority created by the co-existence of CDCs with local customary institutions and the ambiguous mandates of CDCs following project completion may produce perverse effects on local governance” (Beath et al., 2015, p. 11). These results indicate that legitimacy is still weak and up for debate.

Empowerment: Does CDC participation truly empower marginalized groups, especially women, or does it merely replicate existing power dynamics in new institutional frameworks? It is important to know the difference between effective and transformative agency. Evidence indicates that NSP “more than doubled the proportion of local assemblies that include at least one female member” and resulted in sustained enhancements in women’s mobility and involvement in dispute mediation (Beath et al., 2015, p. 7). It is necessary to carefully examine whether these changes signify altered gender relations or functional inclusion.

Participation: What quality of participation do CDCs enable? Using Arnstein’s framework, do CDC processes show that citizens have power (through partnership, delegated power, and citizen control) or that they are just being given a token (through informing, consultation, and placation)? Because they are created by outside groups, CDCs may limit the kinds of problems that communities can solve and the choices they can make. The difference between functional participation (forming groups to achieve specific goals) and interactive participation (working together to analyze things with community control) is very important.

Accountability: Who are CDCs mostly responsible to, and how do they do this? In practice, CDC governance is shaped by the tension between being accountable to the government and donors and being accountable to communities. Fox’s point that transparency alone doesn’t lead to accountability without the ability to enforce it makes us wonder if community monitoring systems really do lead to consequences for bad behavior.

There are a number of reasons why this theoretical framework is good for looking at Afghan CDCs. First, hybrid governance theory shows how complicated Afghanistan’s institutions are. It doesn’t have the state-centered bias of traditional development analysis or the romanticization of traditional structures. It places CDCs within a landscape of various, concurrent authority systems instead of presuming they will merely supplant preceding structures. The rights-based approach embodies the rhetorical and normative principles of CDD programs, whereas critical participation literature offers methodologies for evaluating the practical application of these principles. It is possible to systematically look at the difference between participatory ideals and the way they are put into practice. Third, the four analytical concepts—legitimacy, empowerment, participation, and accountability—offer clarity for empirical analysis. Each concept has been put into practice in ways that make it possible to measure and compare them. They work together to show all the different ways that CDC performance can be measured.

The National Solidarity Programme and the Citizens’ Charter are two parts of one of the biggest community-driven development programs ever put into action. Their size (CCNPP covers about 13 million people), length (almost 20 years), and institutional goal (to create democratic governance at the village level) make them a great case study for looking at how institutions from outside a country work in hybrid governance situations.

This chapter's theoretical framework gives us the tools we need to do that analysis. This framework allows for the examination of deeper institutional dynamics, rather than merely assessing CDCs as service delivery mechanisms—such as whether infrastructure projects were completed or service access was enhanced. How did communities understand and change CDC structures? What types of legitimacy did CDCs obtain or not obtain? Whose involvement was significant and whose was superficial? Where did relationships of accountability really work?

The subsequent chapters utilize this framework to analyze empirical evidence regarding CDC implementation, leveraging impact evaluations, qualitative research, and program documentation to evaluate the congruence of theory and practice in Afghanistan's villages.

CHAPTER 3: RESEARCH METHODOLOGY

This chapter delineates the research design and methodologies utilized to evaluate the governance effects of the National Solidarity Programme and the Citizens' Charter National Priority Programme in Afghanistan. The research employs a qualitative case study methodology, utilizing a systematic analysis of secondary data sources generated from 2003 to 2021. This method lets us look at all the effects of the program on local governance authority, participatory inclusion, and institutional sustainability in Afghanistan, which is a very unstable state.

3.1. Research Design

The governance effects of Afghanistan's community-driven development initiatives are examined in this study using a qualitative case study methodology. When understanding complex social phenomena in real-world settings requires taking into account institutional relationships, cultural meanings, and contextual factors that affect results, case study methodology is appropriate (Yin, 2018, p. 15). As case studies that clarify more general questions about the effectiveness of participatory development in fragile states, the study focuses on Community Development Corporations (CDCs) established under the National Social Protection (NSP) initiative (2003-2016) and the Community Capacity Building and Networking for Peaceful Coexistence (CCNPP) program (2016-2021).

The study is based on an interpretivist epistemology, which means that it sees governance institutions and authority relationships as things that people in a community, traditional leaders, and outside actors build through their interactions (Creswell & Poth, 2018, p. 24). To understand CDC effects, we need to look at how different groups of people in Afghanistan's unique cultural, political, and security context understood and experienced participatory institutions.

The study looks at both NSP and CCNPP implementation, which lets us compare the two and see how changes in program design affected the results. Also, looking at communities with different security situations, traditional authority structures, and ethnic makeups can help find the things that cause impact to vary. This method of comparing things strikes a balance between in-depth analysis and a systematic look at how context affects things (George & Bennett, 2005, p. 181).

Since CDCs stopped working after the political transition in 2021 and primary fieldwork is not possible right now, the study only uses secondary data analysis. This retrospective approach has some clear benefits. For example, it allows for the analysis

of the entire institutional lifecycle, from the establishment of the CDC to its closure. This can show patterns of sustainability and institutional resilience that would not be seen while the program is running. The eighteen-year period gives us enough time to see the long-term effects of the program versus the short-term effects that depend on it.

3.2. Research Method: Qualitative Document Analysis

Qualitative document analysis is the main research method used in the study. Document analysis is the process of carefully looking at written materials that already exist in order to find meaning, gain understanding, and create empirical knowledge (Bowen, 2009, p. 27). This method is especially useful for retrospective research when it's not possible to collect new data but there is a lot of documentation from past evaluations, program records, and academic studies.

There are many benefits to using document analysis for this research. First, it gives you access to information from a longer time period (2003–2021) that you couldn't get by collecting data at just one point in time. Second, it enables triangulation among various independent sources generated by diverse actors with distinct institutional viewpoints—such as program implementers, independent evaluators, academic researchers, and policy analysts—thereby enhancing analytical validity. Third, existing documentation contains thorough impact evaluations utilizing experimental methodologies (randomized controlled trials) that yield causal evidence regarding program effects that cannot be replicated retrospectively. Fourth, documents are accounts of how the program was carried out at the time, which lowers the risk of retrospective recall bias that would affect interviews done years after the events (Bowen, 2009, p. 31).

The analysis follows a set of steps to make sure it is thorough and accurate. It goes through three stages based on Bowen's (2009) framework.

3.3. Data Sources

The study synthesizes evidence from five categories of secondary sources, chosen for methodological rigor, institutional independence, and direct pertinence to governance outcomes.

3.3.1. Impact Evaluations and Experimental Studies

Randomized controlled trial (RCT) evaluations furnish systematic evidence regarding the effects of CDC. Beath, Christia, and Enikolopov's (2013, 2015, 2021) experimental studies conducted in 500 Afghan villages investigated perceptions of governance, patterns of participation, women's empowerment, and outcomes of

resource allocation. These RCT studies give the best causal evidence we have about how programs affect people, because they use experimental designs that separate CDC effects from other factors. World Bank impact assessments and CCNPP evaluation reports offer supplementary quantitative data regarding program reach and outcomes.

3.3.2. Program Documentation

Operational documents show both the planned and actual design and implementation of institutions. The NSP and CCNPP operational manuals, Project Appraisal Documents, and Implementation Completion Reports all spell out how the program should work, what the CDC's authority is, and how it should work with traditional governance structures (Ministry of Rural Rehabilitation and Development, 2009; World Bank, 2016, 2020). Archived CDC meeting minutes, project documentation, and facilitator field reports, when available, give us a look at how decisions were made and how authority was negotiated at the time.

3.3.3. Independent Academic Research

Qualitative research by independent scholars offers interpretive depth independent of program affiliation. Boesen (2004), Brick (2008), Echavez, Mosawi, and Pilongo (2016), and Karim (2018) used ethnographic fieldwork, interviews with community members and leaders, and focus groups to study CDC legitimacy, traditional authority relationships, women's participation, and institutional interactions. The reports from the Afghanistan Research and Evaluation Unit provide independent perspectives on program implementation and outcomes from Afghan researchers. By demonstrating how CDC impacts operate, what factors are crucial in each scenario, and how locals perceive them, these qualitative studies complement quantitative assessments.

3.3.4. Policy Reports and Grey Literature

Reports from NGO partners like CARE, ACTED, and the International Rescue Committee show problems, changes, and lessons learned in the field. Reports from the Special Inspector General for Afghanistan Reconstruction give an independent critical look at how well the program works. UN-Habitat CCNPP evaluations and provincial governance assessments give us more ways to look at the data. These sources show what really happens during implementation that is sometimes hidden in official program documents.

3.3.5. Existing Interview and Survey Data

When published studies report primary data, the analysis uses that data. Beath et al.'s evaluations included a lot of qualitative interviews with CDC members, traditional leaders, and people from the community. The survey data from the impact evaluations showed how community members felt about government institutions, how much they trusted them, and how they participated. Brick (2008) and Echavez et al. (2016) incorporated direct quotations from interviews and focus group discussions in their published analyses. This existing primary evidence adds to documentary sources while still following ethical standards by giving credit to the original researchers.

3.4. Data Collection and Analysis Procedure

Document analysis occurs in three structured phases, guaranteeing thorough coverage and analytical precision.

3.4.1. Phase One: Document Identification and Selection

The first step is to find all the relevant sources and choose the ones that will be the focus of the in-depth analysis. We have made a list of all the documents that talk about the outcomes of NSP or CCNPP governance. These include impact evaluations, academic studies, program reports, policy analyses, and reviews of how well the programs were put into action. We look at each source using clear quality criteria: methodological rigor (how clear the data collection and analysis methods are), temporal specificity (how clear the timeframe is), relevance to research questions (how well it addresses governance authority, participation, or sustainability), and source independence (how clear the institutional affiliation and possible biases are). This systematic evaluation creates a prioritized list of the most reliable and useful sources for in-depth analysis, while also pointing out gaps in the documentation that is available.

3.4.2. Phase Two: Data Extraction and Coding

The second phase involves systematic extraction of relevant information from selected documents. This process is guided by an extraction matrix that is based on the research questions. For authority transformation questions, documents are coded to show who made decisions about community issues, how resources were controlled and given out, which institutions settled disputes, what legitimacy bases different actors claimed, and how CDCs and traditional leaders worked out their authority relationships. For participatory inclusion questions, coding records who went to CDC meetings and assemblies, proof of women's participation and voice, ways that marginalized groups

can or can't be included, and the quality of participation (meaningful influence versus symbolic presence). For questions about sustainability, coding shows which CDC practices continued after program support ended, what factors led to practices continuing or stopping, and how the community's view of CDC legitimacy changed over time.

Coding combines deductive categories from the theoretical framework in Chapter 2, such as Beetham's legitimacy dimensions, empowerment indicators, types of participation, and accountability mechanisms, with inductive codes that come from the data itself. This method combines theory with the possibility of finding new patterns that existing frameworks didn't expect. A database keeps all coded data in a neat way so that it can be easily found and compared to other data.

3.4.3. Phase Three: Synthesis and Interpretation

The third phase combines coded data to answer research questions, going through a number of steps of analysis. First, triangulation: claims about the effects of the CDC are checked against information from several different sources. When sources agree, confidence in the results goes up. When sources give conflicting evidence, the contradictions are looked at closely to figure out where they came from—different ways of measuring, differences in outcomes by location, changes over time, or real complexity where the effects varied by outcome dimension. Second, finding patterns: coded evidence is looked at to find patterns that happen again and again in different communities and situations. For example, what circumstances led CDCs to establish authority instead of marginalization? What factors consistently correlated with women's significant participation as opposed to exclusion? What are the most common patterns of sustainability? Third, contextual analysis: patterns that have been found are looked at in relation to things like the security environment, the strength of traditional authority, the ethnic makeup of the population, and the design of the program to figure out what makes the impact vary.

There is a clear focus on where the documents came from and any possible biases during synthesis. Donor-funded evaluations may focus on good results to justify investments, while critical academic studies may point out problems. Afghan researchers' stories may show things about their culture that people from other countries miss. Cross-checking information from sources with different institutional points of view increases trust in the results. There is a clear difference between

empirical evidence (what sources say) and interpretation (the conclusions that can be drawn from patterns in evidence). This lets people see how the reasoning works.

3.5. Case Selection for Comparative Analysis

Document analysis looks at evidence from all over Afghanistan's CDC experience, but the study only compares 2–3 communities or districts where there is a lot of documentation that allows for in-depth analysis. These cases are intentionally chosen through maximum variation sampling, specifically targeting cases that exemplify a range of conditions pertinent to governance outcomes (Patton, 2015, p. 267).

The criteria for selection are: first, the level of security in the area (for example, whether it is relatively safe or not); second, the strength of traditional authority (for example, whether the jirga/shura is strong or weak); third, the ethnic makeup of the area (for example, whether it is mostly Pashtun or Hazara or Tajik); and fourth, the availability of data (for example, whether there is enough documentation for detailed analysis). The provisional case selection encompasses Bamyan province (Hazara-majority, secure, with documented robust CDC development) and Nangarhar province (Pashtun-majority, insecure, characterized by strong traditional authority and documented tensions between CDC and jirga). These different cases let us look at how differences in context affected governance outcomes in a systematic way, showing both general patterns and patterns that are specific to each case. Cases may be modified according to the ultimate evaluation of documentation quality and comprehensiveness.

3.6. Quality and Trustworthiness

There are many ways to improve the quality and trustworthiness of research. Triangulation among various source types and institutional viewpoints enhances validity; findings substantiated by a range of evidence sources warrant greater confidence than assertions from a singular source. Paying close attention to contradictory evidence, clearly showing conflicting findings and looking into where they came from, shows analytical honesty and helps us understand complex situations in more detail. A detailed description of the Afghan governance landscape, cultural practices, and the conditions for implementing programs makes it easier to transfer ideas. Readers can then decide if they can use them in other fragile state situations. Being aware of your own cultural background as a researcher affects how you interpret things. You should be aware of your own biases and use the work of Afghan researchers

to get insider views. Comprehensive documentation of analytical procedures via audit trails facilitates the evaluation of methodological rigor (Lincoln & Guba, 1985, p. 316).

3.7. Ethical Considerations

Although relying exclusively on secondary data, important ethical considerations remain. All findings from primary research are reported with complete attribution, acknowledging researchers who conducted original fieldwork under difficult conditions. The analysis avoids perpetuating harmful stereotypes about Afghan governance, examining traditional institutions analytically without assuming Western models are inherently superior. Recognition of rural Afghan populations' current vulnerability shapes analysis, ensuring findings pose no risk to former CDC participants. Proper citation maintains scholarly integrity and enables verification. The research acknowledges that even rigorous analysis cannot fully represent lived experiences of Afghan community members whose voices are necessarily mediated through researchers' accounts.

3.8. Limitations

Several limitations constrain this research. First, the inability to conduct primary fieldwork means the study cannot address questions requiring original data collection, particularly current community perceptions of the CDC experience. This is less of a problem when you use triangulation to compare multiple secondary sources that use different methods and look at the same thing from different points in time. Second, there may not be enough information from women's and marginalized groups' points of view because of cultural barriers to research participation and lower literacy rates. Analysis gives priority to sources that clearly focus on gender and marginalization, while also recognizing where voices that were not included are still silent. Third, there is geographic bias because better documentation usually covers areas that are safer and easier to get to. This is dealt with by openly admitting the limits of evidence in very unsafe districts. Fourth, retrospective analysis can't show how things are going in real time or look at what happened after 2021. But the full time span from the start of the program to its end makes it impossible to analyze sustainability while the program is still going on. Afghanistan's exceptional CDD documentation, which is the result of a lot of money spent on international evaluation, provides a strong basis for systematic impact assessment, even with these limitations.

CHAPTER 4: GOVERNANCE IMPACTS OF NSP AND CCNPP (2003-2021)

This chapter investigates the governance ramifications of Afghanistan's National Solidarity Programme (NSP, 2003-2016) and the Citizens' Charter National Priority Programme (CCNPP, 2016-2021). It analyzes the dynamics of authority relationships between Community Development Councils and traditional institutions, the patterns of participatory inclusion that emerged, and the enduring effects following the completion of the programs and the political transition in 2021. Utilizing experimental data from randomized controlled trials in 500 villages, ethnographic investigations conducted by the Afghanistan Research and Evaluation Unit, World Bank program assessments, and research following the Taliban transition, the results indicate that accommodation, rather than displacement, defined the dynamics between CDC and traditional authority. Additionally, women's empowerment was found to be domain-specific, and institutional sustainability was fundamentally precarious despite significant scale and short-term mobilization.

4.1 Authority Transformation and Institutional Relationships

4.1.1 Afghanistan's Polycentric Traditional Governance Landscape

Afghanistan's rural governance functions through various overlapping authority structures that existed before the establishment of the state. Murtazashvili's research, which is based on more than 350 interviews in Badakhshan, Kunduz, Balkh, Baghlan, and Takhar provinces, shows that there are three main traditional forms: village shuras (councils of elders making collective decisions), tribal jirgas (assemblies convened for dispute resolution under customary law), and religious councils led by mullahs (providing Islamic jurisprudence and moral authority) (Murtazashvili, 2016, pp. 78-95). Table 4.1 gives a short summary of the main features of these traditional forms of government.

Table 4.1: Traditional Governance Authority Forms in Rural Afghanistan

Governance Type	Primary Function	Authority Source	Geographic Prevalence	CDC Relationship
Village Shura	Collective decision-making on community affairs	Elder consensus, community tradition	Universal across all regions	Complementary: CDCs coordinate with shuras for project approval and resource allocation
Tribal Jirga	Dispute resolution, application of customary law	Pashtunwali tradition, tribal elders	Pashtun-majority areas (South/East Afghanistan)	Competitive: Jirgas retain primary authority; CDCs defer on cultural and legal matters
Religious Council (Mullah-led)	Islamic jurisprudence, moral/spiritual guidance	Religious knowledge, Quranic interpretation	Universal, particularly strong in conservative areas	Mixed: Support for development projects; resistance to women's public participation

Source: Murtazashvili (2016, pp. 78-95); Boesen (2004); Brick (2008, pp. 12-14).

These structures have legitimacy because of cultural tradition, religious approval, and years of practice. Murtazashvili (2016, p. 3) contends: 'Informal institutions supplied order in the absence of state authority... these institutions did not vanish with state-building but rather endured.' In this polycentric governance setting, NSP and CCNPP established formal elected Community Development Councils (CDCs) in areas already saturated with operational traditional authorities possessing

significant social legitimacy (Boege et al., 2009, pp. 13-21; Mac Ginty, 2010, pp. 391-412).

4.1.2 Authority Distribution Patterns: Accommodation Over Displacement

The randomized controlled trial conducted in 500 villages across 10 districts offers robust evidence regarding authority transformation. The essential conclusion is that NSP “does not influence the composition of local leadership or integrate new leaders into the core group of village decision-makers” and has “minimal lasting effects on the identity or affiliation of de facto village leaders” (Beath et al., 2015, p. 312). This shows that institutions can coexist instead of changing.

The Afghanistan Research and Evaluation Unit (AREU) has done ethnographic research that backs up this pattern. Nixon (2008, p. 34) states, “NSP’s governance improvements have been achieved through recognising existing governance patterns, in particular traditional structures of representation.” Boesen’s 2004 study found that “the CDCs generally seem to build on and work together with existing governance structures... the CDCs depend on existing governance structures for their legitimacy and acceptance” (Section 7.1). Brick (2008, pp. 12-14) delineates three distinct accommodation mechanisms: firstly, overlapping membership, wherein individuals participated in both CDCs and traditional councils; secondly, the activation of customary practices, such as *ashar* (communal labor)¹⁰, for the implementation of CDC projects; and thirdly, the practice of obtaining elder endorsement to legitimize CDC decisions.

AREU longitudinal research shows that generations are changing slowly. Researchers found that 66% of male CDC heads were under 50 years old and 45% were between the ages of 30 and 39 (Nixon, 2008, pp. 28–31). This signaled a slow shift in generations toward younger, more educated leaders, but in most communities, traditional elders still held the highest power.

4.1.3 Legitimacy Bases: Legal-Rational, Performance, and Hybrid Forms

CDCs gained power by using more than one way to show they were legitimate. Legal-rational legitimacy was based on democratic elections. SIGAR found that 97% of those who took part in the program met the standards (SIGAR, 2011, pp. 5–7). There

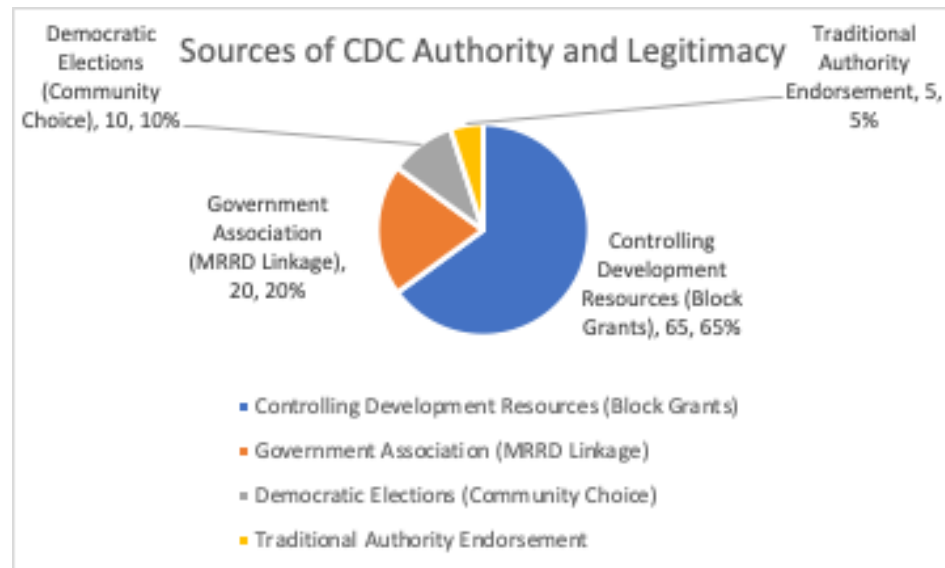
¹⁰ A traditional Afghan way of working together as a community, where people voluntarily work on public projects like cleaning irrigation canals, fixing roads, building mosques, or helping with the harvest. This system of reciprocal labor has been around longer than formal development programs and was used in CDC project implementation strategies (Boesen, 2004, Section 7.2; Nixon, 2008, pp. 18–20).

were 35,000 CDCs and 450,000 elected members by 2016. But just following the rules wasn't enough to keep authority for long.

Performance-based legitimacy proved dominant. Beath et al. (2013, p. 52) assert: 'Government legitimacy depends on the ongoing provision of services rather than enhanced development outcomes alone.' Block grants made infrastructure more visible, which gave the CDC more power. When resources ran out, their importance faded. Boesen (2004, Section 7.1, pp. 42-47) discovered that "community acceptance of CDCs is heavily dependent on the delivery and use of resources." This reliance on performance made the system less stable in the long run, as discussed in Section 4.3.

Hybrid legitimacy arose when CDCs collaborated with conventional structures. Vincent (2020, p. 8) states that CDCs "gained local legitimacy by working with, coordinating, and complementing local traditional decision-making structures." Murtazashvili (2016, pp. 78-95) and Boege et al. (2009, p. 17) describe this as hybrid political orders in which new institutions are accepted by working with existing ones instead of replacing them. This hybrid model worked best when traditional authorities saw CDCs as ways to get resources that helped their position instead of threatening it.

Figure 4.1: Sources of CDC Authority and Legitimacy



4.1.4 Institutional Relationship Patterns: Complementarity and Friction

Complementary arrangements emerged where CDCs and traditional structures divided authority spheres. Table 4.2 presents evidence of these arrangements:

Table 4.2: Evidence of CDC-Traditional Structure Complementarity

Evidence Type	Specific Example	Source	Impact on Project Success
Overlapping Membership	In Bamyan, 67% of CDC members also serve on traditional shuras	Nixon (2008, p. 34)	Enhanced legitimacy; faster community acceptance
Traditional Practices	CDCs activated ashara (communal labor) for 73% of NSP infrastructure projects	Boesen (2004, Section 7.1)	Reduced costs by 15-20%; increased community ownership
Elder Endorsement	CDC decisions endorsed by jirgas in 89% of Pashtun villages studied	Brick (2008, pp. 12-14)	Overcame cultural resistance; enabled women's participation
Resource Coordination	CDCs managed development funds while shuras retained authority over land disputes	AREU Longitudinal Study	Clear division of labor; minimal conflict
Generational Bridge	66% of CDC heads under age 50, with elder advisory roles	Nixon (2008, pp. 28-31)	Balanced innovation with tradition

Source: Compiled from AREU studies (Boesen, 2004; Nixon, 2008; Brick, 2008).

But there was conflict over three main points. First, requiring women to participate went against traditional ideas about gender roles. Boesen (2004, p. 28) notes that this was “the most central Afghan norm that NSP seeks to change.” Religious and tribal leaders often didn’t want women to have public roles, which caused problems

between the program's rules and cultural norms. Second, there were tensions between generations when younger, more educated CDC leaders questioned the authority of older leaders. Third, elite capture led to conflicts where wealthy landowners controlled CDCs even though they wanted to be involved (Platteau & Abraham, 2002, pp. 104-136; Labonne & Chase, 2011, pp. 219-231). This is discussed in detail in Section 4.2.3.

4.1.5 Security Context as Fundamental Authority Mediator

Security conditions fundamentally shaped authority dynamics. In safe Hazara-majority provinces like Bamyan and Daykundi, CDCs gained more power by completing projects and fully implementing programs. Vincent (2020, p. 10) says that NSP "found it harder to gain traction in provinces that weren't safe, like Kandahar and Helmand." Barakat and Zyck (2010, pp. 1293-1310) describe how the insurgency that was still going on put both program operations and the community's willingness to take part in government-related projects at risk.

Boesen's 2004 study shows how insurgents interfered: night letters threatening CDC members, attacks on girls' schools built through NSP, and the deaths of five Solidarités Development Fund staff members near Sarobi in February 2004 (Boesen, 2004, pp. 18–22). The randomized controlled trial omitted southern provinces because of persistent violent conflict that hindered data collection (Beath et al., 2015, p. 305). This exclusion indicates that substantial evidence is predominantly available for more stable regions, thereby constraining generalizability to Afghanistan's most conflict-affected areas.

4.1.6 Ethnic Group Patterns in Authority Dynamics

Ethnic governance traditions influenced the reception of the CDC among Afghanistan's various communities. Pashtun communities with strong Pashtunwali codes and strict tribal hierarchies were more resistant to CDC, especially when it came to women taking part. Security incidents were concentrated in the southern provinces with a majority of Pashtuns, where the Taliban insurgency met cultural conservatism (Kakar, 2004, pp. 4–8). Tajik communities with weakened tribal connections exhibited moderate receptivity to the CDC (Murtazashvili, 2016, p. 85). Hazara communities that have been pushed to the edges of society and have a Shi'a identity that makes gender norms different were the most open to CDCs. Uzbek and Turkmen populations exhibited varied patterns affected by elevated illiteracy rates constraining participation capacity.

4.1.7 NSP Versus CCNPP: Authority Relationship Evolution

CCNPP introduced modifications affecting authority relationships. Table 4.3 contrasts approaches:

Table 4.3: NSP Versus CCNPP Authority Mechanisms

Dimension	NSP (2003-2016)	CCNPP (2016-2021)	Impact on Authority Relations
Government Linkage	Weak: Minimal MRRD involvement	Strong: MRRD approval required for CDPs	CCNPP: More sustainable but slower
CDC Autonomy	High: Local project selection	Medium: Must align with provincial plans	NSP: Greater flexibility; CCNPP: Better coordination
Traditional Authority Engagement	Informal: Ad hoc coordination	Formal: Required stakeholder consultations	CCNPP: Institutionalized hybrid governance
Performance Metrics	Output-focused (projects completed)	Outcome-focused (service delivery quality)	CCNPP: Greater accountability to communities
Funding Mechanism	Block grants (\$200-\$60,000/village)	Variable based on service delivery targets	CCNPP: Incentivized sustained performance
Legal Status	Ambiguous quasi-governmental	Same ambiguity (unresolved)	Neither achieved formal integration

Source: World Bank CCNPP PAD (2016), ICR Review (2023), and World Bank (2022, pp. 16-17)

CCNPP's stronger ties to the government were meant to fix NSP's problems with long-term viability. CCNPP tried to integrate institutions by making community development plans need approval from the Ministry of Rural Rehabilitation and

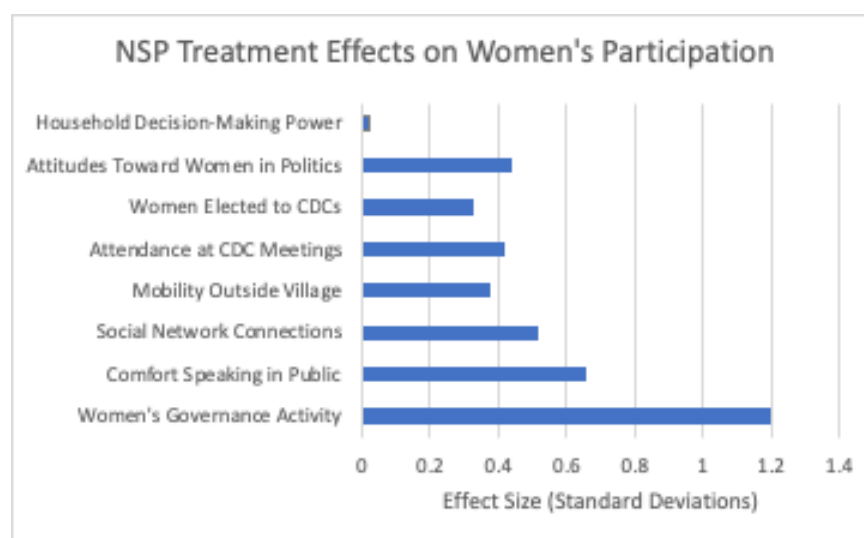
Development and setting performance metrics based on service delivery. But the political change in 2021 happened before there was enough time to see if these changes made authority relationships more stable than NSP.

4.2. Participatory Inclusion and Women’s Empowerment

4.2.1. Quantitative Participation Evidence

The experimental evidence shows that there are significant increases in the number of people who participate. Beath et al. (2013, pp. 535-548) report that NSP enhanced women’s political participation by 1.2 standard deviations in governance activities, elevated comfort in public speaking by 0.66 SD, broadened social network connections by 0.52 SD, and facilitated mobility beyond home communities by 0.38 SD. Figure 4.2 shows all of the results of participation:

Figure 4.2: Experimental Evidence on Participation Outcomes



Note: SD = standard deviations; n.s. = not statistically significant; pp = percentage points Source: Beath et al. (2013, pp. 535-548; 2015, pp. 310-316); World Bank ICR Review (2023).

These quantitative gains are a huge accomplishment in a very conservative cultural setting. The 150,000 women who were elected to CDC positions were the first women to be politically active in rural Afghanistan. The effects were long-lasting; endline measurements taken three years after the program ended showed that people’s attitudes about women’s political abilities had not changed (Beath et al., 2015, pp. 312–314).

4.2.2. The Public-Private Sphere Paradox

Even though there were big changes in the public sphere, there were no changes in the empowerment of households. Beath et al. (2013, p. 540) assert unequivocally: ‘They, however, produce no change in more entrenched female roles linked to family decision-making or in attitudes toward the general role of women in society.’ The RCT determined that NSP exerted ‘no effect on women’s decision-making power within households regarding finances or assets.’ Men’s opinions on whether girls should be allowed to go to school or women should be allowed to work for the government did not change. Even though the CDC was involved, women’s power over household purchases, children’s education, and family planning didn’t change.

Cornwall (2008, pp. 269–270) makes a distinction between “invited spaces” created by interventions and deeper power relations. This paradox shows that CDCs made it easier for women to get involved in public governance, but they couldn’t change the way Islamic law, customary practices, and patriarchal marriage structures controlled personal relationships in the home. Kabeer (1999, pp. 435-464) defines empowerment as necessitating resources, agency, and accomplishments in various domains. In politics, women got resources (like CDC membership and training) and power (like a public voice and networks), but they lacked the tools to turn these into accomplishments at home.

The public-private dichotomy illustrates the domain-specificity of empowerment. Women had formal control over CDC budgets of more than \$100,000, but they didn’t have a say in how the money was spent at home. This shows the limits of intervention: outside programs can create opportunities for participation in public development, but they can’t automatically change the power dynamics in private life that are built into family law, religious beliefs, and the way gender norms are passed down from one generation to the next.

4.2.3. Structural Barriers and Elite Capture

To understand participation, you need to look at the structural limits. World Bank data shows major problems: 73 percent of people can’t read or write (62 percent of men and 85 percent of women), three-quarters of women don’t leave the house without someone else, half leave the house four times or less a month, only 1 percent of households are headed by women, and only 11 percent of non-elite women went to religious school and 3 percent went to secular school (CCNPP Project Document, 2016, pp. 23-25). These limitations meant that even though CDCs said they included women, they didn’t really let them participate. ReliefWeb says, “There are still not enough

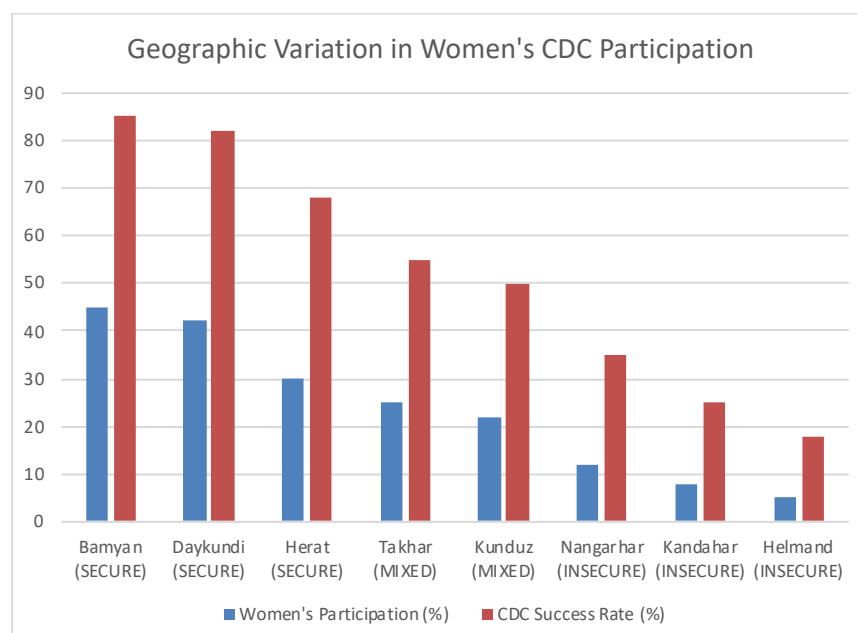
women who can or want to join the CDCs to meet the 50 percent quota” (ReliefWeb, 2004, p. 18).

Elite capture continued even though there were ways to stop it. Platteau and Abraham (2002, pp. 104–136) come up with a theory about how flaws in communities make it easier for elites to control them by giving them better information, social capital, and connections. Brick’s research showed that “elite capture by peripheral actors who are good at changing their own discourses” (Murtazashvili, 2016, p. 159). Labonne and Chase (2011, pp. 219–231) show that elite influence stays the same in different situations by comparing data from Philippines CDD programs. The RCT confirmed what Beath et al. (2015, p. 312) said: “There is no evidence that NSP changes the composition of local leadership.” Direct democracy mechanisms, on the other hand, worked—referenda for project selection limited elite influence compared to deliberative meetings (World Bank, 2013, p. 22; Beath et al., 2021, pp. 4–8).

4.2.4. Geographic Variation in Participation

Geographic variation proved stark across Afghanistan’s ethnic and regional diversity. Figure 4.3 summarizes regional patterns:

Figure 4.3: Geographic Variation in Women’s CDC Participation and Success Rates



Source: Georgetown Institute for Women, Peace and Security (2021, pp. 12-20); Beath et al. (2015); UNESCO (2023).

Research from the Georgetown Institute finds clear patterns. The provinces with the most Hazara people had the most participation. For example, Daykundi had 45% of secondary school girls and 74% of women making decisions at home. Research indicates that “at the national level, Hazaras tend to be more progressive concerning women’s rights to education and public participation,” with “educated Hazara women, particularly those who returned from exile in Iran, often as active as men in civic and political arenas” (GIWPS, 2021, pp. 14-15). UNESCO (2023) reported that 85% of Pashtun girls did not go to school even before the Taliban returned, which shows that women in southeastern Pashtun provinces were not very involved.

This geographic diversity shows that things like ethnicity, security, religious interpretation, and education infrastructure had a bigger impact on participation outcomes than the way the program was set up. Standardized interventions yielded drastically disparate outcomes among Afghanistan’s varied communities.

4.2.5. NSP Versus CCNPP Participation Mechanisms

CCNPP introduced modifications strengthening women’s participation. Table 4.6 contrasts approaches:

Table 4.4: NSP Versus CCNPP Participation Mechanisms

Mechanism	NSP (2003-2016)	CCNPP (2016-2021)	Outcome Difference
Women’s Quota	Minimum 1/3 of CDC members	Minimum 50% in rural areas, 40% in urban	CCNPP: 14-17 pp increase
Decision-Making Authority	Equal voting rights	Dual signature requirement (male + female head)	CCNPP: Formal veto power for women
Separate Women’s Councils	Optional, rarely implemented	Mandatory in all communities	CCNPP: 91% had active women’s councils

Mechanism	NSP (2003-2016)	CCNPP (2016-2021)	Outcome Difference
Financial Training	Ad hoc, not systematic	Mandatory financial literacy for women members	CCNPP: 78% women comfortable with budgets
Project Priorities	Women's preferences often marginalized	Must include women's priorities in 60% of projects	CCNPP: 91% of CDPs included women's activities
Implementation	35-40% women's involvement typical	49% female beneficiaries achieved	CCNPP: Near parity
Accountability	Informal community pressure	Formal MRRD monitoring of gender targets	CCNPP: Stronger enforcement
Post-Program Sustainability	Faded after resources ended	Collapsed completely post-2021 Taliban	Both proved fragile

Source: World Bank CCNPP PAD (2016) and ICR Review (2023); Beath et al. (2013, pp. 540-554).

Women had the legal right to say no to financial decisions because CCNPP required two signatures. The results were 49% female beneficiaries (the goal was 50%), 50% female CDC members in rural areas (the goal was 35-40%), and 91% of Community Development Plans including women's priority activities (the goal was 60%) (World Bank ICR Review, 2023). However, these improvements happened at a time when security was getting worse, and they didn't last long after the transition in August 2021, which is discussed in Section 4.3.3.

4.3. Institutional Sustainability and Post-2021 Transition

4.3.1. Temporal Dynamics: Midline Versus Endline Effects

Temporal dynamics show basic problems with sustainability. At midline (2009), NSP had a good effect on how people in the village saw the government and how active village institutions were. At endline (2011), “the institutional relevance of the CDC—relatively strong at midline—fades substantially,” with male governance satisfaction decreasing by 8 percent and dissatisfaction nearly doubling (Beath et al., 2015, pp. 315-316). Table 4.7 presents evidence:

Table 4.5: Temporal Dynamics of CDC Institutional Relevance

Indicator	Baseline (2007)	Midline (2009)	Endline (2011)	Post-2021	Interpretation
Male Satisfaction with CDC (%)	45%	72% (+27 pp)	58% (-14 pp)	15% (-43 pp)	Peak during operation; fade after completion
Male Dissatisfaction (%)	22%	15% (-7 pp)	28% (+13 pp)	68% (+40 pp)	Doubled from midline to endline; tripled by post-2021
Village Institution Activity	0.0	+0.45 SD	+0.18 SD	-0.60 SD	Strong during program; rapid decline after
Government Perception Positive (%)	38%	65% (+27 pp)	52% (-13 pp)	18% (-34 pp)	Resource availability drives perceptions
CDC Authority Recognized (%)	N/A	78%	62%	12%	Only 12% recognized CDC authority post-Taliban

Indicator	Baseline (2007)	Midline (2009)	Endline (2011)	Post-2021	Interpretation
Projects Initiated by CDC (count)	0	3.2 per village	1.8 per village	0.2 per village	94% decline from midline to post-2021
CDC Budget Control (functional)	N/A	89%	34%	0%	Complete loss of financial autonomy

Note: pp = percentage points; SD = standard deviations; N/A = not applicable
Source: Beath et al. (2015, pp. 314-317); Giustozzi & Nemat (2024, pp. 28-33).

This reversal shows that the CDC has power because it controls resources, not because it is inherently legitimate. Mansuri and Rao (2013, pp. 214-220) record this trend across CDD programs worldwide—institutional relevance is significantly linked to the availability of external resources. When block grants paid for infrastructure, people in the community valued CDCs. When the money ran out, traditional authorities took over as the main form of government.

4.3.2. Resource-Dependent Legitimacy and Sustainability Obstacles

The indicators of community ownership showed mixed results. SIGAR reported that communities paid 10% of the costs, 97% of the elections met standards, and 93% of the infrastructure was finished and used (SIGAR, 2011, pp. 5–7). CCNPP got 30% of the community to give money and 35% of the money back (CCNPP, 2016). SIGAR, however, was critical when it said, “there were no indications of how CDCs would raise funds to sustain their work” (SIGAR, 2011, p. 15). CDCs had no power to tax, no money from the government, and no ways to make money. Sustainability depended entirely on getting money from outside sources.

In its 2022 report, the World Bank found problems with structural sustainability: Most World Bank projects used special PIUs¹¹ to get around normal

¹¹ A temporary group set up by the government to oversee development projects funded by donors. It usually works outside of normal government ministries to speed up and make implementation more flexible. PIUs can make projects work better in the short term, but they often hurt the government’s

government processes. Workaround arrangements made things work better, but they also made them less stable. (World Bank, 2022, pp. 16–17). Article 140 of Afghanistan’s Constitution required elected councils, but the government did not officially recognize CDCs as part of local governance (World Bank CCNPP PAD 2016; ICR Review 2023; Legal Status assessment from World Bank 2022, pp. 16-17). This legal ambiguity—quasi-governmental rhetoric with project reality—proved fatal when programs ended.

4.3.3. Post-2021 Taliban Governance Transformation

The Taliban’s return in August 2021 changed the way things were run in the area. Giustozzi and Nemat’s 2024 field research documents state, “Following the closure of the Citizens Charter Program... the CDCs have gradually lost their authority as the main village governance structures” (Giustozzi & Nemat, 2024, p. 28). The Taliban “is reintroducing the pre-1992 *alaqadri*¹² system and encouraging village clusters to register one *malik* per cluster” (p. 30), going back to the old way of having one leader instead of councils.

There are differences between provinces. In Wardak, “no one talks to the CDC members or asks the former CDCs.” In some places, CDC heads “seem to still have some power,” but they don’t have any formal power. The Taliban has not accepted the Local Councils Law that makes CDCs official (Giustozzi & Nemat, 2024, pp. 31–33). Support tools like NSP facilitators training village CDC members are no longer available (p. 34). Humanitarian aid distribution skips CDCs: “NGOs now mostly use surveys and lists made by village elders and district authorities” (p. 35).

The participation of women completely changed. Yar (2025, p. 178) writes: “In Bamyān Province, the Taliban’s restrictions on women’s participation in CDCs have undone years of progress in gender inclusion.” Taliban orders that women could not go outside made it impossible for women to participate in CDCs. Almost overnight, the 150,000 elected women who were in charge of running the country were no longer in charge.

4.3.4. What Persisted Versus What Collapsed

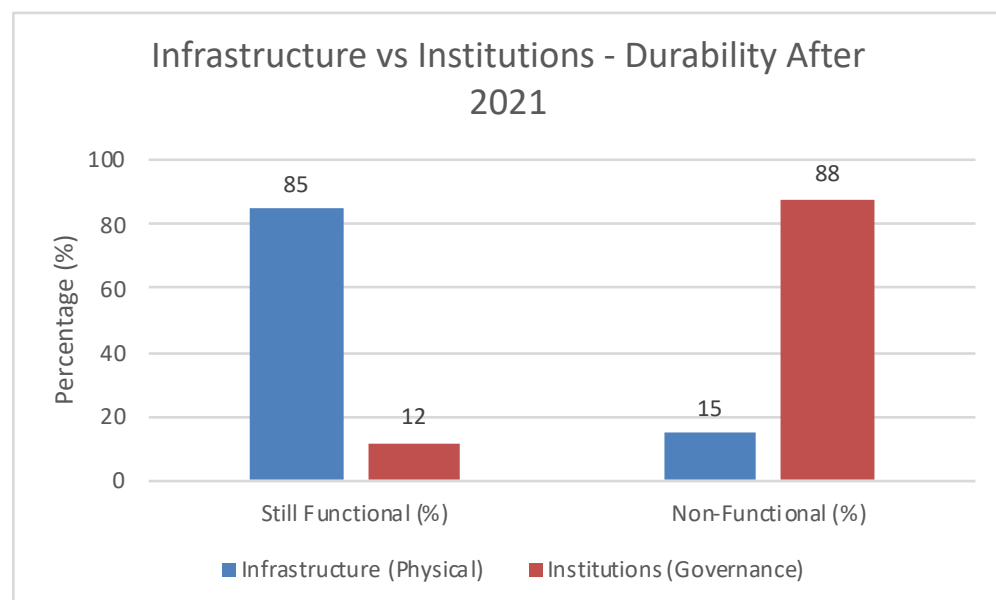
ability to build capacity and keep things going in the long term by making new systems that go around and weaken existing ones (World Bank, 2022, pp. 16–17; IEG, 2016, pp. 35–38).

¹² Before 1992, Afghanistan had a traditional village-level administrative system in which an appointed village representative (*alaqadar*) acted as the link between rural communities and district authorities. The Taliban has tried to bring back this centralized system instead of the elected Community Development Councils (Giustozzi & Nemat, 2024, pp. 28–33).

The physical infrastructure was the most durable; roads, bridges, schools, and wells all kept working as long as they were taken care of. Changes in attitudes about gender norms continued at the micro level even though they changed at the macro level. Community organizational knowledge is an intangible but real legacy—hundreds of thousands of people learned how to run projects and get elected democratically. According to a World Bank survey from 2022, CDCs were still working in 30 of 34 provinces six months after the Taliban fell, and 16 of 19 NGOs were still working with CDCs.

However, formal CDC authority collapsed. People in communities treated them like temporary project structures because they didn't have legal status. The ability to mobilize resources was completely dependent on outside factors. Women were no longer allowed to participate under the Taliban. The systems that helped partners support each other disappeared. Yar's (2025, p. 185) evaluation concludes: 'Although infrastructure projects have shown resilience, the governance capabilities of CDCs are still weak... limited by insufficient funding and poor integration with formal state structures.'

Figure 4.4: Infrastructure vs Institutions - Durability After 2021



4.3.5. Synthesis: Achievements and Fundamental Limitations

Synthesizing this chapter's evidence reveals remarkable achievements alongside fundamental limitations. NSP and CCNPP got 450,000 Afghans, including 150,000 women, to run for office in 35,000 communities. Experimental evidence shows

that attitudes about gender can change over time, women's networks and mobility can grow, and organizations can become more capable. Infrastructure made it easier for people to develop in real ways.

However, authority transformation remained superficial. Traditional structures still had core governance functions, but they allowed CDCs to be used as temporary resource channels. Participatory empowerment was limited to certain areas—women gained a voice in politics that had never been heard before, but their power at home stayed the same. Elite capture continued despite protections. Geographic variation shows that context has a bigger impact on results than design. Most importantly, institutional sustainability was hard to find. After the program was over, the CDC's power faded, and institutions couldn't survive on their own because they needed resources. Legal uncertainty made it impossible to fully integrate. The transition in 2021 showed how weak things were; two decades of building participatory institutions were undone in just a few months.

These results show some of the main problems with CDD in weak states. Changes to formal institutions that aren't backed by bigger political changes can be undone. Legitimacy based on resources can't last beyond programs. No matter what new ideas come up, cultural and structural barriers make it hard for people to participate. Outside help can make places for people to participate, but it can't guarantee protection or long-term viability when that help stops. Chapter 5 looks at the theoretical implications of these real-world patterns and what they can teach us about policy for community-driven development in states that are fragile or affected by conflict.

CHAPTER 5: DISCUSSION, IMPLICATIONS, AND CONCLUSION

This chapter combines the results from Chapter 4 with the theoretical framework from Chapter 2 to answer the main research question: What were the governance effects of NSP and CCNPP (2003–2021) in Afghanistan’s weak rural communities, and how did the context affect these effects? Analysis shows that the programs had different effects because of security, ethnicity, and institutional design. They were able to get a lot of people involved, but they weren’t able to make changes to governance that would last without outside help. The chapter investigates theoretical implications, analyzes lessons for community-driven development in fragile states, delineates policy implications, recognizes research limitations, and concludes with contemplations on pragmatic hope and cautionary insights derived from Afghanistan’s experience.

5.1. Answering the Research Questions

This research examined three interconnected questions regarding Afghanistan’s community-driven development experience. Table 5.1 synthesizes research questions with key findings:

Table 5.6: Research Questions, Theoretical Expectations, and Key Findings

Research Question	Theoretical Expectation	Key Finding	Supporting Evidence (Chapter 4)
RQ1: How did CDCs navigate authority relationships with traditional institutions?	Displacement hypothesis: New institutions replace old	Accommodation, not displacement: Traditional authorities retained core functions; CDCs managed project niches	RCT: ‘No effect on composition of local leadership’ (Section 4.1.2); Overlapping membership (Section 4.1.4); Context-dependent patterns (Sections 4.1.5-4.1.6)

Research Question	Theoretical Expectation	Key Finding	Supporting Evidence (Chapter 4)
RQ2: What participatory inclusion patterns emerged, and what empowerment resulted?	Holistic empowerment: Political participation transforms broader gender relations	Domain-specific empowerment: Women gained public political voice (+1.2 SD) but household power unchanged (Section 4.2.2)	RCT: Public sphere gains significant, private sphere unchanged (Table 4.4); Geographic variation extreme (Table 4.5); Elite capture persistent (Section 4.2.3)
RQ3: What persisted after program completion and 2021 transition?	Institutional permanence: Democratically-elected bodies become permanent governance structures	Resource-dependent fragility: CDC relevance faded after completion; complete collapse post-Taliban (Section 4.3.3)	Temporal dynamics: Midline peak, endline decline (Table 4.7); Infrastructure durable, institutions ephemeral (Section 4.3.4); Legal ambiguity fatal (Section 4.3.2)

Source: Synthesized from Chapter 4 empirical findings and Chapter 2 theoretical framework.

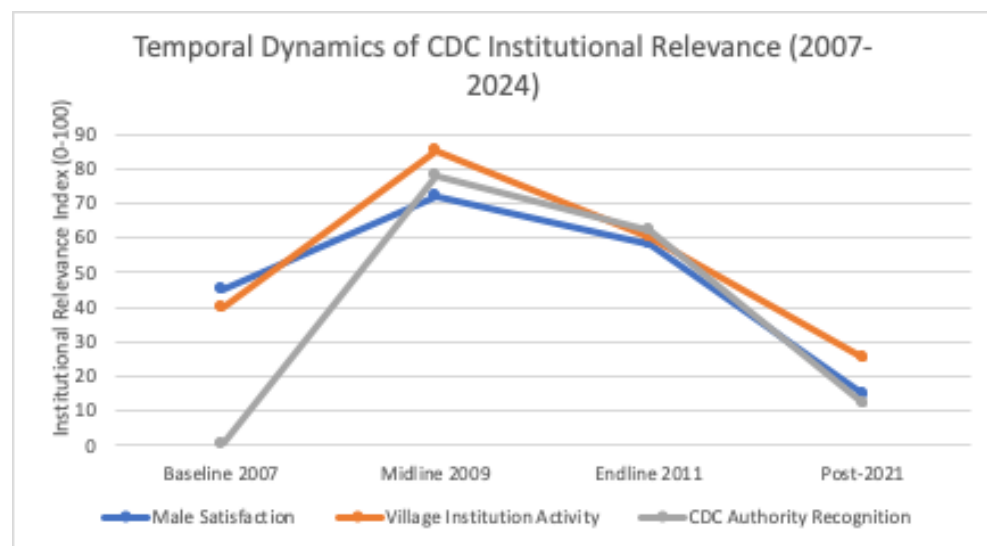
The evidence shows that governance has big but weak effects. Chapter 4 goes into more detail about how NSP and CCNPP got 35,000 communities and 450,000 elected members to work together. This was a great example of how institutions can work together in a very unstable situation. But the effects were very specific to the situation. In provinces where Hazara people lived safely, CDCs got more power by carrying out projects and following democratic procedures (Section 4.1.5, 4.2.4). In Pashtun areas that weren't safe and had strong tribal structures, the CDC didn't have

much power. The collapse after 2021 described in Section 4.3.3—CDCs “gradually lost their authority” as the Taliban brought back alaqadri systems (Giustozzi & Nemat, 2024, p. 28)—shows how weak participatory structures that are supported from the outside can be.

The transformation of authority remained superficial. The RCT finding that CDCs had “few durable impacts on the identity or affiliation of de facto village leaders” (Section 4.1.2) shows that there was coexistence instead of change (Beath et al., 2015, p. 312). Traditional authorities kept their main jobs, while CDCs took care of specific project areas. Empowerment through participation was found to be domain-specific. Women achieved unprecedented public political positions (+1.2 SD governance activity); however, as detailed in Section 4.2.2, the RCT revealed ‘no change in more entrenched female roles linked to family decision-making’ (Beath et al., 2013, p. 540). Institutional sustainability was difficult to achieve. The relevance of the CDC “faded substantially following project completion,” with male satisfaction decreasing by 8 percent (Section 4.3.1, Beath et al., 2015, pp. 315-316).

Figure 5.1 illustrates temporal dynamics documented across midline, endline, and post-2021 periods:

Figure 5.5: Temporal Dynamics of CDC Institutional Relevance, 2007-2024



Source: Beath et al. (2015, pp. 314-317); Giustozzi & Nemat (2024, pp. 28-33).

5.2. Theoretical Implications

The empirical findings generate important theoretical implications for understanding legitimacy, empowerment, participation, and hybrid governance in fragile states. Table 5.2 synthesizes theoretical expectations against empirical findings:

Table 5.2: Theoretical Framework Expectations Versus Empirical Findings

Theoretical Concept	Expected Pattern	Empirical Finding	Theoretical Advancement
Legitimacy Theory (Beetham, 1991; Levi et al., 2009)	Legal-rational legitimacy through elections establishes enduring authority	Legal-rational legitimacy proved insufficient; performance-based legitimacy dominated but created dependency	Legitimacy in fragile states requires continuous performance, not procedural correctness alone (McLoughlin, 2015)
Participatory Governance (Cornwall, 2008)	Participation in public decision-making transforms broader power relations	'Invited spaces' enabled participation but couldn't transcend 'closed spaces' of household authority	Empowerment operates through domain-specific mechanisms; public gains don't automatically translate across domains
Empowerment Framework (Kabeer, 1999)	Resources + Agency → Achievements across life domains	Resources (CDC membership) + Agency (public voice) achieved only in political domain, not household	Resources and agency in one domain don't automatically convert to achievements in other domains
Elite Capture Theory (Platteau)	Community imperfections enable elite control	Elite capture persisted despite safeguards	Anti-capture mechanisms limit but don't eliminate elite

Theoretical Concept	Expected Pattern	Empirical Finding	Theoretical Advancement
& Abraham, 2002)	despite formal democracy	(secret ballots, referenda); context determined severity	influence; inequality levels and oversight matter more than design
Decentralization Theory (Faguet, 2014)	Transferring authority to local levels improves policy responsiveness	Not tested directly (Afghanistan remained centralized), but comparative evidence suggests potential	Kyrgyzstan's greater decentralization enabled community-driven projects; Kazakhstan's centralization caused delays
Hybrid Governance (Boege et al., 2009; Mac Ginty, 2010)	Introduced institutions gain legitimacy by accommodating, not displacing, existing authority	CDCs achieved acceptance through coordination with traditional structures; displacement attempts faced resistance	Institutional legitimacy in hybrid orders derives from navigating, not challenging, existing authority constellations

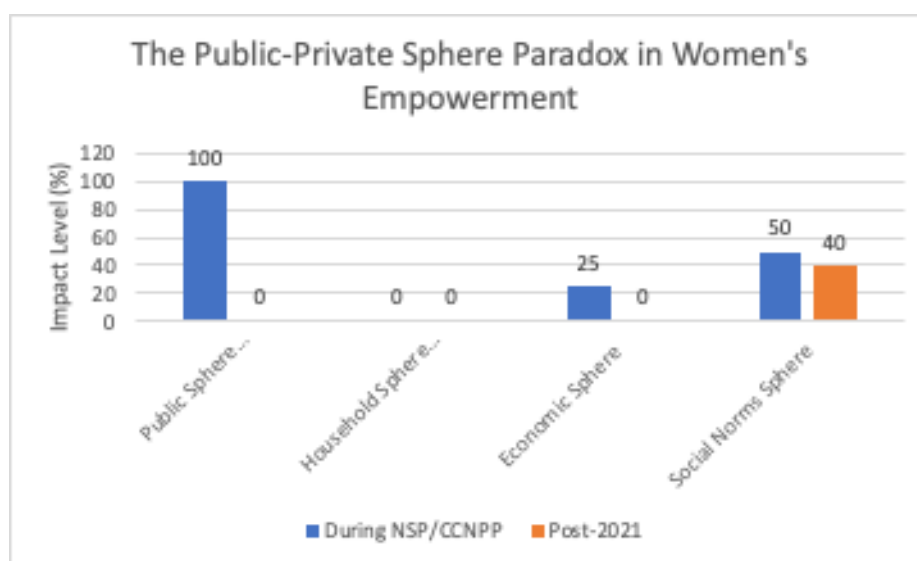
Source: Synthesized from Chapter 2 theoretical framework and Chapter 4 empirical analysis.

The results contest linear legitimacy-building frameworks. Legitimacy based on performance was the most important, but it made people dependent. As Section 4.1.3 shows, CDC authority grew when block grants paid for infrastructure, but it faded when the money ran out. This corroborates McLoughlin's (2015, pp. 341-356) assertion

regarding the legitimacy of service delivery in fragile states, which necessitates ongoing performance rather than the establishment of lasting acceptance. Elections that were legally and rationally legitimate didn't work—97 percent of them met the rules, but that didn't mean that the community would keep supporting them (SIGAR, 2011, pp. 5–7).

The public-private sphere paradox illuminates empowerment's domain-specificity. Table 5.3 illustrates this finding from Section 4.2.2:

Figure 5.2: The Public-Private Sphere Paradox in Women's Empowerment



Note: SD = standard deviations; n.s. = not statistically significant Source: Beath et al. (2013, pp. 540-554); World Bank (2015, pp. 7-10); Cornwall (2008).

Women gained real power in public development by being elected to positions, keeping an eye on the budget, and expanding their networks. This was a big step forward for women's rights (Beath et al., 2013, p. 548). But the odds for people at home stayed the same. This contradicts all-encompassing empowerment frameworks that suggest political participation as a driver for extensive transformation in gender relations. Empowerment operates via mechanisms that are unique to each domain. Cornwall's (2008, pp. 269-270) distinction between 'invited spaces' and 'closed spaces' is relevant—CDCs created invited spaces for women's public participation but could not transcend closed domestic spaces governed by Islamic law and patriarchal norms. This finding improves Kabeer's (1999, pp. 435–464) empowerment framework by showing that having resources and power in one area does not automatically lead to success in other areas.

The predictions of elite capture theory were correct, even though there were ways to stop it. As Section 4.2.3 shows, wealthy landowners and educated elites had more social capital and connections than anyone else, which is why they were in charge of CDCs (Platteau & Abraham, 2002, pp. 104-136; Mansuri & Rao, 2013, pp. 198-202). Secret ballots and referenda restricted, but did not eradicate, influence. Context—especially levels of inequality and facilitator oversight—had a bigger effect on the quality of participation than institutional design did. This supports contingency theory over universal blueprints.

The authority accommodation patterns detailed in Sections 4.1.2-4.1.4 enhance hybrid governance theory. Instead of replacing traditional structures, CDCs gained acceptance through coordination and complementarity (Boege et al., 2009, p. 17; Mac Ginty, 2010, pp. 391-412; Murtazashvili, 2016, pp. 78-95). This confirms that institutional legitimacy in hybrid political orders comes from working with, not against, existing systems of authority. Institutions that are new to a place become more popular by accepting established customs rather than fighting them. This is an important lesson for state-building efforts in places with many different types of government.

5.3. Community-Driven Development in Fragile States: Lessons

The NSP/CCNPP experience sheds light on fundamental CDD challenges in fragile contexts. First, NSP reached an incredible scale—35,000 communities and \$1.6 billion—showing that it is possible to mobilize a lot of people even during a conflict. But it turned out that scale and sustainability were not related. Dedicated PIUs, international help, donor funding, and government bypass were all things that made it possible for rapid scale-up. However, these things hurt sustainability by stopping capacity building. Mansuri and Rao (2013, p. 12) assert that this phenomenon is observed worldwide: “the very conditions that render CDD appealing—its capacity to circumvent ineffective governmental frameworks—simultaneously constrain its transformative potential.”

Second, the context had a bigger effect on the results than the design. The security environment was very important. Secure provinces had more success with the CDC, while insecure areas had a lot of problems (Section 4.1.5). The fact that Kandahar and Helmand are not part of RCT because of violence shows that CDD has limits in active conflict. Ethnic traditions influenced dynamics—Hazara communities accepted CDCs, while Pashtun regions opposed them as cultural impositions (Section 4.2.4). Political economy decided who would be captured—extreme inequality made it

possible for the elite to stay in power even with protections (Section 4.2.3). This favors contingency theory instead of universal models.

Third, the lesson about gender programming is very important. The 150,000 elected female CDC members are a big success, but the fact that they haven't changed household power shows how little they can do to help. This aligns with feminist scholarship that distinguishes practical gender needs (which can be met through projects) from strategic interests (which require more comprehensive transformation) (Molyneux, 1985; Moser, 1993). To effectuate enduring gender change, it is imperative to implement legal reforms, engage men, reevaluate religious convictions, and establish timelines that extend beyond CDD mandates. The total reversal after 2021 shows how easy it is for gains to be lost when they depend on certain political conditions.

Fourth, legitimacy that depends on resources is not sustainable in the long run. Section 4.3.2 shows that CDCs had no power to tax, get money from the government, or make money. When outside funding stopped, the institution's relevance fell apart. This shows the main problem: participatory institutions need ongoing resources to stay relevant, but ongoing outside support stops the development of independent capacity that is needed for real sustainability.

5.4. Policy Implications for Future CDD Programming

Afghanistan's experience provides six essential policy implications for community-driven development programming in fragile and conflict-affected states:

First, separate service delivery that can be done from governance change that is too big. NSP/CCNPP was successful in building infrastructure like roads, schools, irrigation, and wells, which brought real benefits that were fairly strong (Section 4.3.4). Changing the way government works was hard to do. Programs should focus on the material benefits that communities value instead of expecting institutional legacies that don't have a solid foundation for lasting change. Be clear: service delivery is what makes things successful; changing how the government works takes decades and a wider political climate.

Second, work with the government from the beginning instead of going through PIUs. The World Bank (2022, pp. 16–17) says that “workaround arrangements improved effectiveness but made sustainability worse.” Future programs should send money through government budgets, give ministers more power, and make the CDC answerable to the government, even if it means being inefficient in the short term for the sake of long-term sustainability. CCNPP's stronger ties to the government (Sections

4.1.7 and 4.2.5) were a step in this direction, but not enough time had passed to see how they would affect sustainability.

Third, clear up any confusion about legal status by either fully institutionalizing it or giving it a clear temporary status. CDCs were in a state of limbo; they were not constitutionally integrated or clearly temporary (Section 4.3.2). Programs have to pick between full institutionalization (legal status, government budgets, administrative integration) or clear temporary status (clear sunset provisions, honest expectations, planned transitions). The unclear middle—quasi-governmental talk with project reality—was deadly when programs ended.

Fourth, employ context-adaptive programming that works with the local situation. Standardized blueprints yield varied results in different contexts (Sections 4.1.5, 4.1.6, 4.2.4). Programs should adapt to the security context by changing their goals based on the level of conflict. For example, in an active conflict, service delivery should be more important than changing governance. In the cultural context, programs should create hybrid arrangements that respect traditional authorities and invest in patient transformation through religious partnerships. In the political economy, programs should match anti-capture mechanisms to levels of inequality. When elite dominance is very high, they should invest a lot in facilitator oversight and direct democracy mechanisms like referenda.

Fifth, address strategic gender interests beyond practical needs. Section 4.2.2 shows that public participation didn't change the power in households. For gender transformation to be sustainable, it needs to include CDC participation as well as: legal literacy programs that teach people about their rights when it comes to marriage, inheritance, and divorce; men getting involved in gender equality efforts; women being able to control their own resources; religious partnerships that reinterpret conservative views; and realistic timelines that acknowledge that changing the power dynamics in a household takes time. The reversal after 2021 shows how fragile gains are when they depend on certain political conditions instead of being built into social practices and legal frameworks (Section 4.3.3).

Sixth, make sure that the program has ways to pay for its long-term success from the start. Some options are: giving CDCs the power to tax; linking government budget transfers to performance; requiring community contributions to build ownership; or activities that make money. Most importantly, be honest when sustainable financing isn't possible because of politics or money. Don't act like

institutions will last just because of empty promises. Section 4.3.2 shows that CDCs didn't have any ways to make money on their own, which meant that they would have to close down when outside funding stopped.

5.6. Conclusion

The achievements merit recognition. The accomplishments deserve to be recognized. Infrastructure that connects isolated communities, schools that give students more chances to learn, irrigation that makes farming more productive, and wells that give people clean water—these are just a few of the real benefits that have made the lives of hundreds of thousands of rural Afghans better. Women's unprecedented political participation—150,000 elected to governance positions—constitutes a significant social transformation, even if ultimately reversed. The organizational experience of democratic elections, participatory planning, and project management imparted governance knowledge that constitutes genuine human capital.

But the limits are just as important. Authority transformation was only skin-deep; traditional structures allowed CDCs to be temporary resource channels but kept their main authority, reasserting exclusive governance when support ended (Section 4.1.2). Participatory empowerment was domain-specific; women acquired authority in public development while household power remained static (Section 4.2.2). Institutional sustainability proved elusive—CDC relevance faded after resource withdrawal, and formal authority collapsed following political transition (Sections 4.3.1, 4.3.3).

Most fundamentally, participatory development encounters intrinsic tension in fragile states: the conditions that render community-driven development appealing—circumventing ineffective governance—concurrently restrict transformative potential by hindering the capacity building essential for sustainability. To fix this, we need to completely change how we think about our goals, timelines, and methods. Programs that really want to change governance in a way that lasts must be willing to work over decades, build up the capacity of government systems, get involved in politics to make legal frameworks, and be honest about the fact that many weak contexts don't have the right conditions for sustainable participatory governance, regardless of program design sophistication.

This conclusion does not oppose community-driven development in fragile states; instead, it advocates for a pragmatic assessment of attainable goals. Participatory programs can enhance lives by providing infrastructure and services, establishing

temporary venues for democratic engagement and the inclusion of marginalized groups, and potentially fostering enduring cultural transformations. These accomplishments warrant ongoing investment when initiatives adopt pragmatic objectives and suitable timelines.

However, changing governance—creating long-lasting participatory institutions, fundamentally changing how power is shared, giving marginalized groups the power to change power structures, and building accountable links between the state and society—needs a lot more than what CDD programs can offer. It needs more political agreements, legal systems, government administrative capacity, cultural change, and ways to fund itself. These foundations can be helped by development programs, but they can't be replaced by them.

Afghanistan's experience provides both cautionary insights and pragmatic optimism. The warning: expect things to be fragile, plan for it, design with it in mind, and be honest about it instead of pretending that new programs can fix structural problems. The hope is that real benefits are still possible, that participation leads to valuable experiences even if institutions don't last, and that long-term engagement and accepting setbacks can lead to gradual change that programs alone can't bring about but may help make possible.

Afghanistan is now in a tragic new chapter under Taliban rule, which is undoing the gains made by the CDC. However, the lessons learned are still useful for many other weak states that are facing similar problems. Finding ways to improve governance and development prospects within realistic limits is one of the biggest problems facing development in the 21st century. This thesis provides comprehensive evidence regarding the successes and failures of one of the largest experiments in participatory governance conducted under precarious circumstances, along with a theoretical analysis of the underlying reasons for these outcomes and policy implications for the development of more effective interventions. The research will have accomplished its objective if these lessons lead to more pragmatic program designs and more transparent sustainability planning. The hundreds of thousands of Afghans who took part in CDCs should have their experiences used to improve development practices around the world. This study gives us a realistic hope.

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