

Samarthan: Centre for Development Support – India

Established in 1994, Samarthan is a leading civil society organization (CSO) working in the states of Madhya Pradesh and Chattisgarh in India. Samarthan promotes participatory development and governance through direct field action, capacity building, research, and advocacy. Samarthan has trained both government officials and the public on India's Right to Information Act and has worked on district and block-level planning processes to facilitate community participation in development plans. In the area of capacity building, Samarthan has worked with local village development committees (VDCs) to improve their capacity to participate in the Madhya Pradesh Rural Livelihood Project. Samarthan also has trained *Panchayats* (local governing bodies) to monitor government programs like the National Rural Employment Guarantee Scheme (NREGS) – a program to provide the rural poor with 100 days of guaranteed employment each year. The organization's research activities include analyses of the implementation of the NREGS and the Right to Information Act, as well as assessments of the viability and activities of India's local government system (*Panchayati Raj*). Samarthan also works on issue-based partnerships with more than 200 CSOs to demonstrate participatory governance and amplify the voices of the poor, *Dalits* (scheduled castes), tribal groups, and women in policy-making platforms.

Samarthan Promotes the Formation of Village Health and Sanitation Committees Using Participatory Monitoring and Budget Analysis

In 2005 the Government of India launched the National Rural Health Mission (NRHM) with the aim of increasing public expenditure on health, reducing regional imbalances in health infrastructure, improving management of finances and human resources, and promoting decentralization in the management of district-level health programs through active citizen participation. The NRHM specifies that each village must have a Village Health and Sanitation Committee (VHSC), which is to be provided with an untied fund of Rs. 10,000 (US\$ 215) annually, to be used for health-related projects based on the community's needs. The NRHM also mandates decentralized health planning.

From 2007 to 2008 Samarthan conducted community monitoring and budget analysis of the NRHM in six villages of Sehore district in Madhya Pradesh. As a first step, Samarthan facilitated the formation of community committees that would monitor health services based on various performance indicators.

While carrying out the participatory monitoring work, Samarthan realized that there was no mechanism for holding local health institutions accountable for their performance. The local monitoring committees also found that two key components of the NRHM – the VHSCs and decentralized planning – did not exist. Until

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Overall Score: 67
Government provides significant information to the public on how it manages public resources.

Availability of budget documents critical for effective public input:	
Pre-Budget Statement	No
Executive's Budget Proposal	Yes
Citizens Budget	Yes
Enacted Budget	Yes
In-Year Reports	Yes
Mid-Year Review	Yes
Year-End Report	Yes
Audit Report	Yes
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2007 there were no VHSCs in any of the six villages. Despite repeated assurances from the responsible block medical officer that the VHSCs would be formed, they were not and thus no funds were transferred to them.



At that point, Samarthan asked the chief medical and health officer (CMHO) of Sehore district to provide them with the annual reports on NRHM fund utilization for the period 2005-2008. Samarthan found that only 40 percent of the amount that should have been allocated for each block was reflected in the budget, and that the district used only 6 percent of the total budget allocated for VHSCs. This last finding prompted Samarthan to search for more information on the number of VHSCs formed per year. The organization learned that out of 1,050 villages in the district where VHSCs were to be formed, only 327 had been established as of 2008. Furthermore, Samarthan discovered that even in the villages where the VHSCs were formed, the district administration had arranged for

the committees to receive the untied funds in small installments of Rs. 2,000 (US\$ 43) each. Thus the VHSCs were restricted to planning only small-scale activities, which contradicted the purpose of the untied funds. Samarthan brought the issue to the attention of the CMHO and other officials in the local health departments. As a result of Samarthan's pressure, the district administration started to pursue the formation of committees and ensure the timely release of funds.

By 2009 the formation of VHSCs and the release of untied funds had increased considerably. There was an increase of 52 percent in the formation of VHSCs over the cumulative figures through 2008. Similarly, the utilization of funds for VHSCs had increased by almost

36 percent. VHSCs had been formed in nearly 500 villages and the untied funds had been used by the communities for various health-related projects, such as creating soak pits around water pumps (to prevent breeding grounds for mosquitoes), purchasing a trolley for trash collection and dumping, deepening and cleaning village drains, organizing a health camp, and maintaining cleanliness around a health center.

With the support of the state's Reproductive and Child Health Society, Samarthan also has conducted training programs for VHSCs in three districts of northeastern Madhya Pradesh on village self-governance (*Gram Swaraj*) and reproductive health.

Samarthan's Participation in the Partnership Initiative

For its project with the Partnership Initiative, Samarthan is tracking expenditures and implementing social audits of the NREGS in two districts of Madhya Pradesh, a largely rural state where 37 percent of the population live below the poverty line. Although Madhya Pradesh is a relatively high performer in implementing NREGS compared to other states, it still falls far short of expectations. For example, less than 12 percent of participating households receive a full 100 days of work each year, and the average number of days of work per household is only 21.3. The state's NREGS has also experienced delays in receiving technical approvals for projects and the release of funds. In order to address these problems, Samarthan is building the capacity of villagers to monitor NREGS implementation and to hold the local government accountable. At the same time, Samarthan will conduct detailed analyses of local-level data and educate local government officials about the importance of sharing information in a transparent manner. Samarthan will also carry out "reverse expenditure tracking" to test the demand side of the NREGS. Villagers' demands for work through the NREGS are placed before authorities at the subdistrict level, from where they go to the district level, then to the state level, and finally to the national level, at which point funds for employment are disbursed. This part of the process is essential to ensure that the 100 days of employment to which villagers are entitled are actually claimed.

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The IBP's Partnership Initiative is a collaborative effort that seeks to enhance the impact of civil society budget work in selected countries of Africa, Asia, and Latin America. The initiative strives to contribute to the development of sustainable institutions; to increase public access to timely, reliable, and useful information; to enhance the effective participation of civil society in policy and budget processes; and to establish a platform of good practices on which future generations of civil society can build.