

CHAPTER ONE

INTRODUCTION AND BACKGROUND TO THE STUDY

1.1 BACKGROUND TO THE PROBLEM STATEMENT

In recent times poverty reduction has engaged the attention of the global community. For instance, the World Bank and the International Monetary Fund's (IMF) Poverty Reduction Strategy Initiative introduced in 1999 - sought to make aid more effective in reducing poverty ... (World Bank, 2004). Again in September 2006, the 189 members of the United Nations (UN) adopted eight Millennium Development Goals (MDGs), committing themselves to making substantial progress toward the eradication of poverty and achieving other human development goals by the year 2015. The MDGs are the strongest statement yet of the international community to ending global poverty. They acknowledged the multi-dimensional nature of development and poverty alleviation; an end to poverty requires more than just increasing incomes of the poor (Todaro and Smith, 2006).

According Fox and Liebenthal (2006) reducing poverty in Africa might appear to be an elusive, even quixotic, and a book about Africa's successes in reducing poverty might seem at variance with conventional wisdom about Africa. They added that, by all measures, poverty in Africa as a whole has increased and deepened; and the prospects of meeting the Millennium Development Goals seem to be receding. For instance, World Bank forecasts anticipate per capita growth averaging 1.6 per cent over the 2006 to 2015 period; a reversal of the region's long-term historical decline. However, even this is far short of the growth needed to reduce poverty to half of the 1990 level. In fact, the number of poor in Sub-Saharan Africa (SSA) is expected to go up from 314 million in 2001 to 366 million people in 2015.

Yet another argument is that, Africa continues to present the world with the most formidable development challenge. Of the 32 countries in the world with the lowest levels of human development, 24 are in Africa. While other regions have seen poverty levels decline dramatically over the past four decades Africa has fallen further behind (World Bank, 2004). Fox and Liebenthal (2006) points out that only one African country, Uganda, has seen a steady decade-long decline in poverty. In this respect, Africa stands in sharp

contrast with the rest of the developing world, especially East Asia, where poverty is being reduced consistently across countries and over time.

The poverty profile of Ghana was first analysed spatially in 1998/99 - through the Ghana Living Standards Survey (GLSS) assignment and it was realised that five out of the 10 regions had 40 per cent or more of their people living in poverty. These regions were the Eastern, Central, Upper West, Upper East and Northern Regions with profiles of 44 per cent; 48 per cent; 84 per cent; 88 per cent and 69 per cent respectively. The second attempt in 2005/06 at studying the level of poverty in Ghana revealed that an average of 28.5 per cent of the people are poor which may imply that some of the interventions at poverty reduction have yielded positive results. However, the poverty profiles of the three northern regions of Ghana are still comparatively high. The Northern and the Upper East Regions have been able to reduce their poverty position respectively from 69 per cent to 52 per cent and from 88 per cent to 70 per cent. Whereas the Upper West Region has moved slightly up from 84 per cent to 88 per cent (GOG and UNDP, 2007)

The GOG and UNDP (2007) pointed out that poverty trends in Ghana also differ among the various economic sectors. Poverty is particularly evident in two sectors in Ghana: agriculture and the informal sector, with the agricultural sector being the worse affected. Next to agriculture, 29 percent of those in micro and small enterprises live below the poverty line (National Policy Group, 2005 Cited in GOG and UNDP, 2007). Literature has also shown that there is a general decline in the incidence of poverty for all groups. The absolute figures indicate that food crop farmers are the poorest compared to people in other activities. They recorded the highest poverty incidence of 68 percent in 1991/92 but it fell to 46 percent in 2005/06.

Nkum, (1998) also collaborates the fact that both the incidence and depth of poverty are found to be greater in Northern Ghana (the rural savannah) and less severe in Southern Ghana, which has the least incidence of poverty in Ghana. He further argued that in the rural north, poverty affects whole communities and thus threatens food security especially in the lean season, whereas in the urban areas, it is more of an individual condition and relates more to access to stable employment.

This research assessed poverty reduction efforts in Ghana, with particular references to the experience of the European Union Micro Projects Programme (MPP) in the Northern Region. Specifically the study examined the MPP and how it fits into the poverty reduction policy/programme of Ghana; its contribution to poverty reduction in the Northern Region; as well as the core challenges it encountered in its efforts at poverty reduction in the region. The findings would help generate appropriate and effective policy options to expedite the poverty reduction process in a vigorous and sustained manner.

1.2 THE PROBLEM STATEMENT

Northern Ghana continues to present Ghana with the most formidable development challenge. Of the five regions (Northern, Upper East, Upper West, Central and Eastern Regions) in Ghana with the highest levels of poverty in 1992, three are in northern Ghana. While other regions have seen poverty levels decline dramatically over the past one and half decade Northern Ghana has fallen further behind. There has been an erratic trend in poverty levels in Northern Ghana compared with rest of Ghana. In this respect, Northern Ghana stands in sharp contrast with the rest of the country, especially the Central and Eastern Region, where poverty is being reduced consistently across the regions and over time.

Generally, poverty is substantially higher in rural areas than urban areas, so that poverty in Ghana is disproportionately a rural phenomenon with increasing levels of urban poverty in recent years. Within both urban and rural areas, poverty is disproportionately concentrated in the savannah. This area has benefited very little from the poverty reduction, which has occurred at the national level in Ghana (GSS, 2000). Again, evidence from literature in collaboration with the above has shown that the northern savannah area, which is by far the poorest of the ecological zones, is left behind in terms of poverty reduction, even though poverty was smaller in 2005/06 than in 1991/92. This has resulted in an increase in the share of the poor living in the rural savannah areas from 32.6 percent in 1991/92 to 36.6 percent in 1998/99 to 49.3 percent in 2005/06. Hence, today, while the rural savannah areas in 2005/2006 accounted for only one fourth of the population, they accounted for half of the poor (GSS, 2006 Cited in Coulombe and Wodon, 2007).

Notwithstanding the fact that, there have been several governmental, non-governmental and donor efforts among others tailored towards reducing the levels of poverty in Ghana,

poverty is more acute in the three regions of the north and in the rural coastal zones. Regional inequalities have persisted, with large numbers of households in the savannah and rural coastal zones appearing to be in a situation of chronic or persistent poverty, owing to their relative isolation from markets. There remain significant disparities in household access to health, education and potable water. While Accra and the urban coastal and forest zones have enjoyed significant improvement in their living standards, with even the poorest group in these areas appearing to benefit, the savannah and rural coastal areas have seen very little improvement in economic well-being.

One of such efforts is the MPP, which is a collaborative effort between the Government of Ghana (GOG) and the European Union (EU) to provide facilities that will enhance development and improve upon living standards in rural communities in Ghana. It is essentially a rural development programme with the beneficiary rural communities actively involved in the implementation of the programme (GOG and EU, 2000). The MPP complements government efforts to increase access and utilization of good quality basic social and economic infrastructure and services by deprived poor communities. It provides direct support to the on-going decentralisation of government and the focus is to promote bottom-up development and poverty reduction process.

On the whole, the MPP seeks to address the question of poverty with a four-prong strategy. The first is to improve rural access to social services, through provision of social infrastructure such as; schools, clinics, water and sanitation, etc. The second is to, improve rural livelihood, through the provision of socio-economic infrastructural facilities such as; markets, feeder roads, transport, butcher shops, etc. The third is to, promote sustainable rural development through environmental friendly practices such as; creation of wood lots, encouraging practices that reduces erosion and site degradation, etc. and finally to promote micro-enterprise development through the provision of micro-credit, management and entrepreneurial training, etc.

Notwithstanding the poverty related interventions of MPP in the northern region, there still exist problems of uneven quality of service delivery and availability of funding for new priorities, which have contributed to increasing poverty concentration in the northern region. A large contributing factor is inadequate development of rural infrastructure; households in these regions have remained largely disconnected from economic growth

taking place in the rest of the country, with limited opportunities to escape from poverty because of their limited access to education, health services, market and other public services (World Bank, 2004). In view of the above problem, the research will try to answer among others the following questions:

1. After several years of implementation, are the MPP interventions reducing poverty?
2. What is the evidence for the effects of the MPP on poverty reduction?
3. What aspects/dimensions of poverty are the MPP reducing?
4. What are some of the core challenges of the MPP in reducing poverty?

1.3 JUSTIFICATION FOR THE RESEARCH

The justification of this study stems from, among others the role of poverty reduction efforts in enhancing improved access to basic necessities of life (including food, health care, water, and shelter), as well as halting the further deterioration in the living standards experienced by vulnerable and disadvantaged population groups and strengthen their prospects for a decent life. This has been a challenge for most developing economies including Ghana.

The research may also be very useful for national development, as it will attempt to investigate and find answers to the underlying causes of the rather low poverty reduction outcomes in the study area. It will also attempt to assess the MPP efforts at reducing poverty in the region and the associated problems and challenges encountered and how such challenges and problems were overcome as a basis for offering policy alternatives, to ensure that poverty reduction effort yield the desired results.

The research will also contribute to knowledge and literature as the research report will serve as an important source of literature on efforts of reducing poverty in Ghana with particular emphasis on the experience of the MPP in the Northern Region of Ghana. The research will also identify areas for further research.

Generally, the results of this study will be beneficial to the people within the project area and direct beneficiaries of the project as it will serve as a feedback into improving the project design to ensure that the desired impact of the project is felt at the end of the project implementation period. Also given that, women, children, the aged and rural

farmers among others are the worse affected by the problem of poverty in Ghana as indicated in the Ghana Poverty Reduction Strategy: an Agenda for Growth and Prosperity for 2003 to 2005, the results of this research will help enhance the targeting processes of project interventions in Ghana and elsewhere.

The results of the study will be useful to policy makers, development practitioners and academics, as well as the MPP coordinators as it will provide a better insight into poverty reduction related projects. Such an insight will enhance better project packaging and management to achieve desired results.

1.4 RESEARCH OBJECTIVE

The general objective of the study is to assess poverty reduction efforts in Ghana, with particular reference to the experiences of the MPP in the Northern Region of Ghana and make policy recommendations to enhance the effectiveness of these project interventions in reducing poverty in the Region. The specific objectives are to:

1. Examine MPP and how it fits into the poverty reduction policies/programmes of Ghana;
2. Analyse the contribution of MPP to poverty reduction in the Northern region;
3. Identify some of the key challenges that hinder poverty reduction efforts of the MPP;
4. Make policy recommendations to enhance poverty reduction efforts in the Northern Region through the project interventions.

1.5 THE SCOPE OF THE RESEARCH

This study primarily focused on poverty reduction efforts in Ghana from 2000 to 2008 with particular emphasis on the MPP's efforts at reducing poverty in the Northern Region. Geographically, the study was centred on the MPP's interventions in Northern Region and was limited to the 5th MPP interventions in the region.

The study focused mainly on the following key issues: the efficiency and effectiveness of the MPP as a tool for poverty reduction as well as how the MPP fits into national poverty reduction policies/programmes. It also focused on the contribution of the programme to poverty reduction in the Northern Region; it also explored some of the core challenges

encountered by the MPP in its efforts at contributing to the poverty reduction efforts in the study area; and finally the research tried to make key policy recommendations to enhance and improve the MPP's efforts at reducing poverty.

1.6 METHODOLOGY

The research begun with the conception of an idea - that the European Union MPP contributes to poverty reduction efforts in the Northern Region. This was followed by the conceptualisation and operationalisation of the key concepts of the study. The second phase of the research involved determining the choice of research design and methodology to employ for the study. The next issue in this phase was the determination of the unit of analysis and key variables of the study and how they would be measured. The third phase involved data collection and processing into forms appropriate for manipulation. Following this came the final phase which involves data analysis and summary of results which formed a basis for making recommendation. Refer to appendix 1 for schematic presentation of the research methodology.

1.7 ORGANISATION OF THE REPORT

This report is organised into six chapters. Chapter one introduces the problem and its context. It specifies the problem statement, the objectives, scope, justification and limitations of the research.

Chapter two covers the conceptual framework and the theoretical bases of poverty reduction. In this chapter all the important aspects of the main concepts of poverty and poverty reduction considered critical for the study were discussed. Also discussed in this chapter was the theoretical basis of poverty reduction and the policy focus and strategies for poverty reduction from the global and Ghanaian perspectives. Finally, an attempt is made at examining the Micro-Project concept and the key principles of the MPP's approach.

Chapter three defines the research methodology applied for the study. This section provides the processes and methods employed in investigating the research problem. It also provides a guide for understanding how the research was conceived and carried out.

Chapter four focuses on the physical, social and economic characteristics of the study area. Also examined in this chapter is the poverty situation in the Northern Region with particular emphasis on the levels of poverty and incidence of poverty within the region. Other indicators of poverty like access to basic education and health services as well as nutrition and food security situation in the region were discussed.

To fully appreciate the contribution of the MPP to the poverty reduction efforts in the Northern region three districts were selected and assessed to determine the actual contribution of the MPP to poverty reduction in the region. The results are presented chapter five. In this chapter attempts were made to discuss the extent to which the MPP is compatible with national policies/programmes of poverty reduction. Also the chapter analysed the contribution of the MPP to poverty reduction in the Northern Region. Finally an attempt was made at identifying and discussing some of the key challenges that hinder poverty reduction efforts of the MPP.

The study concludes in chapter six with a summary of the key findings of the study. It also provides recommendations to make poverty reduction interventions more effective and ends with a conclusion.

CHAPTER TWO

CONCEPTUALISATION AND THEORETICAL BASES OF POVERTY REDUCTION

2.1 INTRODUCTION

This chapter attempts to define the key concepts of the study and their operational limits. This is done against the theoretical background of the subject and the existing body of knowledge in the field. In this chapter, all the important issues of the study are identified as well as the main data points. Concepts help improve the clarity of issues under discussion as well as helping in delimiting the study. However, concepts are not universal in definition but relative to the context, and sometimes a matter of choice of terms. Concepts can be said to be ‘ideas’ or ‘notions’ and can also be considered as tools of enquiry as well as the content or object of the study itself (Inkoom, 1999)

2.1.1 Evolution and Conceptualisation of Poverty

Poverty is blessed with a rich vocabulary, in all cultures and throughout history. From an analytical perspective, thinking about poverty can be traced back at least to the codification of poor laws in medieval England, through to the pioneering empirical studies, at the turn of the century, by Booth in London and by Rowntree in York. Rowntree’s study, published in 1901, was the first to develop a poverty standard for individual families, based on estimates of nutritional and other requirements.

In the 1960s, the main focus was on the level of income, reflected in macro-economic indicators like Gross National Product per head. This was associated with an emphasis on growth, for example in the work of the Pearson Commission, *Partners in Development* (1969). In the 1970s, poverty became prominent, notably as a result of Robert MacNamara’s celebrated speech to the World Bank Board of Governors in Nairobi in 1973, and the subsequent publication of *Redistribution with Growth* by Chenery et al (1974). Two other factors played a part. First was emphasis on relative deprivation, inspired by work in the United Kingdom by Runciman and Townsend. Townsend, in particular, helped redefine poverty: not just as a failure to meet minimum nutrition or

subsistence levels, but rather as a failure to keep up with the standards prevalent in a given society.

The second shift was to broaden the concept of income poverty, to a wider set of 'basic needs' (Streeten and Burki, 1978) including those provided socially. Thus, following International Labour Organisation's pioneering work in the mid-1970s; poverty came to be defined not just as lack of income, but also as lack of access to health, education and other services. The concept of basic needs inspired policies like integrated rural development. Its influence continues to be seen in current debates about human development.

New layers of complexity were added in the 1980s. The principal innovations were: (a) the incorporation of non-monetary aspects, particularly as a result of Robert Chambers' work on powerlessness and isolation. This helped to inspire greater attention to participation; (b) a new interest in vulnerability, and its counterpart, security, associated with better understanding of seasonality and of the impact of shocks, notably drought. This pointed to the importance of assets as buffers, and also to social relations (the moral economy, social capital). It led to new work on coping strategies. (c) A broadening of the concept of poverty to a wider construct, livelihood. This was adopted by the Brundtland Commission on Sustainability and the Environment, which popularised the term sustainable livelihood. (d) Theoretical work by Amartya Sen, who had earlier contributed the notion of food entitlement, or access, emphasised that income was only valuable in so far as it increased the 'capabilities' of individuals and thereby permitted 'functionings' in society. (e) Finally, the 1980s was characterised by a rapid increase in the study of gender. The debate moved from a focus on women alone (women in development), to wider gender relations (gender and development). Policies followed to empower women and find ways to underpin autonomy, or agency.

The 1990s saw further development of the poverty concept. The idea of well-being came to act as a metaphor for absence of poverty, with concomitant emphasis on how poor people themselves view their situation. At the same time, inspired by Sen, UNDP developed the idea of human development: 'the denial of opportunities and choices... to lead a long, healthy, creative life and to enjoy a decent standard of living, freedom, dignity, self-esteem and the respect of others'.

2.1.2 Poverty: Definition and Measurement

Poverty has been defined in various ways by different authors; some have defined it simply as a condition of powerlessness. To others, it is a process of unequal access to the bases of social power. These bases of social power are defined to include: knowledge and skills, social and political organizations, good physical health and the tool of production, relevant information, social networks and financial resources or services (Friedman, 1980, Kokor, 2001).

Poverty is a condition or state of livelihood that can best be defined by the account of those who experience it (Dzradosi, 2001; Dinye, 2002). It refers to a circumstance of deficiency or lack of something physical and/or intangible and amounting to a status of inferiority or low self-esteem. It manifests itself in various forms, which collectively or individually impact negatively on the sufferers. It breeds apathy and lethargy amongst them and prevents them from realising their potential (Dinye, 2002). The significant manifestation of poverty include material deprivation, lack of assets, isolation, vulnerability, lack of decision making powers, constrained freedom of choice and opportunity in matters of production, consumption, employment and socio-political representation (Appiah, 2000; Dinye, 2002).

According to the UNDP (1990) human poverty is more than inadequate income or access to what is necessary for material well-being. It is the denial of choice and opportunities that are the basis to human development; which is leading a long, healthy, creative life and enjoying a decent standard of living, freedom, dignity, self-esteem and the respect of others (quoted by Kokor, 2001). Similarly the Asian Development Bank (1999) defines poverty as a deprivation of essential assets and opportunities to which every human is entitled. Everyone should have access to basic education and primary health services. Poor households have the right to sustain themselves by their labour and be reasonably rewarded, as well as have some protection from external shocks. Beyond income and basic services, individuals and societies are also poor - and tend to remain so - if they are not empowered to participate in making the decisions that shape their lives.

From the foregoing it is obvious that the definition of poverty has evolved significantly over time. Today poverty is no longer viewed as solely an economic phenomenon, based on consumption or income measures alone. Poverty is seen as multidimensional with

complex interactive and causal relationships between the dimensions – (it is an unacceptable physiological and social deprivation), encompassing both income/consumption dimensions and other dimensions relating to human development outcomes, insecurity, vulnerability, powerlessness (included none involvement in decision making and lack access to basic social services), and exclusion (Kes and Swaminathan, 2006, p. 13).

In practice the evidence of poverty is captured with an array of indicators with reference to illiteracy and access to basic education, prevalence of debilitating diseases, life expectancy, levels of house income, employment and access to basic needs amongst others. On the basis of the single indicators, the poor can be characterised for instance in terms of designations such as the income poor, the education poor, and the health poor as the case may be. Also a composite index can also be obtained involving a combination of indicators.

To obtain measures of poverty, two broad approaches are employed in the definition of poverty – ‘relative’ poverty and ‘absolute’ poverty’. In this regard, two poverty lines are applied to the distribution of standard of living measure(s). Poverty dimensions are concerned about the censored distribution of persons below the poverty lines. The World Bank defines poverty as the inability to attain a minimum standard of living in a particular country (World Bank, 1990). Following from the that absolute poverty is the inability to secure the minimum basic needs for human survival according to standard so low that they are rightly labelled as beneath any concept of human decency (Serageldin, 1989). Relative poverty refers to the situation whereby the minimum basic needs for human survival are barely met. It is a standard measure of deprivation by which people at the bottom of society whatever their lifestyles are adjudged to be disadvantaged in comparison with the nation as a whole (Dinye, 2002). Absolute and relative poverty are both defined by lines set in relation to average expenditure and income or the cost of a bundle of goods assuring basic consumption needs.

Relatively, poverty is endemic and chronic even in the world’s richest countries. Hence to have a policy target of poverty eradication or elimination is a vague concept and far-fetched in the future for criticism or evaluation of commitment. The disadvantage of the concept of poverty alleviation, poverty amelioration or mitigation is that they tend to focus

on or tackle the effects of poverty. They are termed as cosmetic, treating the symptoms rather than the causes and having an inadequate impact. The advantage of the concept of poverty reduction is that, it is subject to objective and rigorous measurement consistent with needs of policy design, monitoring and evaluation. The added advantage of poverty reduction is that, it is functional from even the political viewpoint. Politicians are usually well advised to target the possible because it increases chances of the success (Tribe, 2000; Dinye, 2002)

2.1.3 Perspectives and Dimensions of Poverty

The evidence from literature suggests that poverty is perceived as a multidimensional social phenomenon. Definition of poverty and its causes vary by gender, age, culture, and other social and economic context. For example, in both rural and urban Ghana men associate poverty with a lack of material assets, whereas for women poverty is defined as food insecurity. Generational differences emerge as well. Young men in Ghana consider the ability to generate an income as the most important asset, whereas older men cite as most important the status connected to a traditional agriculture lifestyle (Narayan et al, 2000, p. 32)

In late 2000, when the United Nations (UN) tried to come out with goals to eradicate poverty problems, they came out with a Declaration that has come to be known as the Millennium Development Goals (MDGs). In this Declaration the UN considered poverty as having eight clear dimensions and according to the declaration countries were supposed to focus on these eight dimensions if poverty is to be reduced by the year 2015. These eight dimensions include: the twin issue of extreme poverty and hunger. The second dimension is universal primary education – this seeks to address issue of illiteracy. The third dimension is the promotion of equality in terms of gender and thereby empowering women. The fourth is the reduction of child mortality. The fifth is the improvement of maternal health. The sixth is the combating of HIV/AIDS, malaria and other diseases. The seventh is ensuring environmental sustainability and finally, the eighth is developing global partnership for development (Todaro and Smith, 2006).

Six dimensions feature prominently from the above discussion of perspectives of poverty. First, poverty consists of many interlocked dimensions. Although poverty is rarely about the lack of only one thing, the bottom line is always hunger – the lack of food. Second,

poverty has important psychological dimensions, such as powerlessness, voicelessness, dependency, shame, and humiliation. Third, poor people lack access to basic infrastructure – roads (particularly in rural areas), transportation, and clean water. Fourth, while there is a widespread thirst for literacy, schooling receives little mention or reviews. Fifth, poor health and illness are dreaded almost everywhere as a source of destitution. This is related to the costs of health care as well as to income lost due to illness. Finally, the poor rarely speak of income, but focus instead on managing assets – physical, human, social and environmental – as a way to cope with their vulnerability. In many areas this vulnerability has a gender dimension (Narayan, 2000).

For the purpose of this study the dimensions of poverty will be reconstituted into three broad groups – monetary dimension, non-monetary dimension and the multiple deprivation dimensions. The monetary dimension includes consumption poverty and income poverty. The non-monetary dimension includes education and literacy poverty, health and nutrition poverty, and food insecurity. Finally, the multiple deprivation dimension – described as the deprivation trap by Chambers (1983) includes five clusters of disadvantages interlocked. This is variously described as the vicious circle of poverty, the syndrome of poverty and the poverty trap. Linking the five clusters (poverty, physical weakness, isolation, vulnerability, and powerlessness) gives 20 possible causal relations, which in their negative form interlock like a web to trap people in their deprivation.

2.2 THE NATURE AND SCOPE OF POVERTY IN GHANA

From the various Ghana Living Standards Surveys (GLSS) conducted up to the fifth round poverty levels have been falling. Results from this survey provide quantitative data on the trends in poverty in more recent years. The proportion of Ghanaians described as poor in 2005/06 was 28.5 per cent falling from 39.5 per cent in 1998/99. Those described as extremely poor declined from 26.8 per cent to 18.2 per cent.

The decline in poverty and extreme poverty between 1998/99 and 2005/2006 was more evenly distributed than in the earlier period of 1991/92 to 1998/99. All the localities and regions with the exception of Greater Accra and Upper West Region experienced declines in poverty. While the city of Accra experienced an increase in poverty, Greater Accra Region experienced a decline in poverty from 15.2 to 11.8 per cent between 1998/99 and 2005/2006, although extreme poverty worsened, implying that areas in the region outside

the city witnessed significant declines in poverty. The Central and Eastern Regions experienced the largest decline in poverty of about 28.5%; these declines may be attributed to the concentration of programmes implemented under the President's Special Initiatives on cassava, pineapples, and oil palm in the Central Region and export crops of pineapples and cocoa in the Eastern region.

The general decline in poverty can be attributed to the high growth rates achieved during the period of implementation of the GPRS I and GPRS II. The growth has come from high growth in cocoa production benefiting from government intervention. Thus the benefits of the growth are seen in the more significant reductions in poverty in the cocoa producing localities and Regions. Had income inequalities not worsened more in the rural areas than the urban areas during the 1998/99 to 2005/2006 period, the improvement in poverty reduction through growth would have been better for the rural areas than in the urban areas. Poverty incidence declined in female headed households from 43 to 19 percent between 1991/92 and 2005/2006 compared with poverty incidence in male-headed households from 55 to 31 percent.

Poverty trends in Ghana also differ among the various economic sectors. Poverty is particularly evident in two sectors in Ghana: agriculture and the informal sector, with the agricultural sector being the worse affected. Next to agriculture, 29 per cent of those in micro and small enterprises live below the poverty line (National Policy Group, 2005). It was also observed that there is a general decline in the incidence of poverty for all groups. The absolute figures indicate that food crop farmers are the poorest compared to people engaged in other activities. They recorded the highest poverty incidence-68 percent in 1991/92 but it fell to 46 percent in 2005/06.

2.3 THEORETICAL BASES OF POVERTY REDUCTION

There are three main schools explaining how mass poverty can be reduced. The first is the modernisation school, which believes that the solution of mass poverty lies in an essentially capitalist strategy of rapid economic growth and the modernisation of traditional institutions. The adherents of the second school, international structuralism or dependency theory and its various Neo-Marxist reformulations, believe that the causes of underdevelopment and mass poverty are to be found not in traditional backwardness but in the exploitation of the poor countries by the rich and the continued impoverishment of their

people. The third school consists of a number of interventionist or welfarist strategies designed specifically to deal with the problem of mass poverty within the framework of planned economic development. Its adherents included the proponents of redistribution with growth, unified planning, intermediate technology, basic needs and similar approaches.

The welfare, redistribution and the developmental school or theory provides a suitable theoretical basis for this study. The developmentalists reject the idea that economic growth and the spread of capitalism have, significantly reduced the incidence of mass poverty in the Third World. They also reject the belief that economic growth will of itself eradicate mass poverty. Although they accept that sustained growth may eventually result in the abolition of mass poverty, this is unlikely in any but a few developing countries in the foreseeable future. Because of this the developmentalist call for concerted state intervention and adoption of a comprehensive range of economic and social policies which focus specifically on the problem of poverty and inequality as well as the many other social problems which afflict the poor of the Third World (Margaret and Midgley, 1982).

The problem of mass poverty was reiterated in McNamara's now celebrated speech to the governors of the World Bank in 1972 which proposed that in future the Bank's lending policy should seek to bring real benefit to the poorest 40 per cent of the population of developing countries. At a World Employment Conference in 1976, the International Labour Organisation returned to the issue of mass poverty and its associated social problems by calling member states to adopt the 'basic needs' approach as a strategy for development (International Labour Office, 1976; Streeten, 1977; Streeten and Burki, 1978). Although basic needs is often regarded as a new approach to development policy, its tenets do not differ in essence from those of the developmental school.

The developmentalists share several common elements, these include among others a belief in interventions, growth, egalitarianism and welfare. In spite of their criticisms of conventional growth economics, most developmentalists recognise the importance of growth but question the 'trickle-down' assumptions and emphasis on growth through industrialisation in modernisation theory. They believe that growth may be fostered in other ways and many have argued for the adoption of policies which increase output in agriculture rather than industry, especially in the early stages of development; they argued

that capital investment for industry which is obtained usually through foreign borrowing has not only failed to bring about growth and a structural transformation of the economy but has plagued many developing countries into serious debts.

Developmentalists also believe that in order to stimulate economic growth investment in human as well as physical capital is required, and many have justified expenditure on social services such as health and education on this ground. They argue also that governments should intervene in the economy both to encourage and direct economic growth through planning and other measures (Hardimam and Midgley, 1982).

The developmentalists are keen egalitarians not out of envy of the rich but because they believe that the excessive concentration of wealth hinders economic development. They argued that the rich of the Third World do not readily invest their wealth in the domestic economy but by squandering much of it on luxury imports and by hoarding and banking abroad, thereby draining the nation's resources. The concentration of wealth in the hands of the few also excludes the participation of the majority in development and contributes to lower outputs. They argued that a reduction in inequality resulting in higher incomes among the poor would increase demand and provide a greater stimulus for production.

The policy instruments of this egalitarianism include measures which seek not only to redistribute wealth and income but to raise the incomes of the poor. Asset redistribution, particularly through land reform, is a major element in this approach and the developmentalists place a similar emphasis on progressive income, wealth and inheritance taxes as well as duties on imported luxuries and on foreign ownership of the economy. Attempts to increase the incomes of the poor are made both through economic and social services. For example, state sponsored agricultural projects which provide irrigation, expertise, credit, technology and access to markets are strongly advocated by most developmentalists.

Social services such as free education, public health projects, food subsidies, nutritional supplements and the provision of safe drinking water and sanitation are also supported not only because they raise the productivity of the poor but because, as income subsidies or 'social wages', they raise their level of living. It is for this reason that proponents of the

developmental school claim that their welfarism is not based primarily on an altruistic concern for the underprivileged but on sound economic reasoning.

2.4 POLICY FOCUS AND STRATEGIES FOR POVERTY REDUCTION

2.4.1 Global Policy Focus and Strategy for Poverty Reduction

In recent times poverty reduction has become a major challenge for the international community and practitioners of development. The increasing attention to poverty reduction as the central goal of development has highlighted the need for an improved understanding of how policies affect the poor. Its importance stems from the fact that it (i.e. poverty reduction) has become an important and necessary condition for international and regional development assistance as well as multilateral and bilateral assistance. Poverty reduction has officially remained the first priority for the World Bank since the publication of the 1990 World Development Report. That report focussed on a strategy to reduce poverty that had the following core elements:

- Broad-base economic growth; according to the World Bank, there are five areas in particular that are crucial for ensuring that the poor are able to maximise the benefits of growth: providing the necessary framework for broad-based growth; ensuring access to essential assets; increase the productivity of the poor; making sure that markets work for the poor; and overcoming discrimination against the poor.
- Developing human capital of the poor; the evidence is now overwhelming that increasing the human capital of the poor is one of the keys to reducing poverty. The capacity to earn income is clearly a major factor in lifting families out of poverty. In order to earn income, however, people need health, strength, and education. Thus investing in the poor is vital to ensure that they participate fully in the growth of the economy and that they can become productive members of society.
- Social safety nets for vulnerable groups; as well as promoting broad-base economic growth and investing in the human capital of the poor, the provision of safety nets for vulnerable groups is an important element in the strategy to reduce poverty. Accordingly, the bank has become increasingly involved in the analysis and design of safety nets for the sick, the old, the disabled, those in the poorest regions, and those suffering from temporary

economic setback. In the mid-1980s the bank supported few safety net operations. Ten years later it was providing approximately two million United States dollars in support of safety net operations. This support ranges from analysis and technical assistance to investments.

The United Nations Millennium Declaration and the Millennium Development Goals (MDGs), as adopted at the Millennium Summit in September 2000 and reaffirmed at the World Summit in September 2005, guide the work on poverty reduction by the United Nations and the donor community. The Millennium Declaration emphasises the importance of human rights, democracy and good governance for development and poverty reduction. The Millennium Development Goals recognize that it is important to address not only the lack of income and the occurrence of hunger (Goal 1), but also gender inequality (Goal 3), the lack of access to services such as education (Goal 2), health care (Goals 4, 5 and 6), and adequate water supply and sanitation, and the degrading natural environment (Goal 7) in order to improve the living conditions of the poor.

2.4.2 Ghana's Policy Focus and Strategy for Poverty Reduction

There have been a series of plans which placed emphasis on poverty reduction and human development. The first was the report entitled Making People Matter: A Human Development Strategy for Ghana (1991) followed by the National Development Policy Framework (1994) a twenty five year development perspective and Vision 2020: the First step (1995), a five year policy statement later developed into the First Medium Term Development Plan 1996-2000, (MTDP). This was followed by the Interim Poverty Reduction Strategy Paper (I-PRSP) from 2000 to 2002.

The policy framework guiding Ghana's poverty reduction efforts from 2003 to 2005 was the Ghana Poverty Reduction Strategy (GPRS I): an agenda for growth and prosperity. The main goal of the Ghana Poverty Reduction Strategy is to ensure sustainable equitable growth, accelerated poverty reduction and the protection of the vulnerable and excluded within a decentralized, democratic environment. Considering the dimensions of poverty in the country the objective of the strategic framework included the attainment of: a reduction in the incidence and depth of poverty in both the urban and rural areas; the strengthened capacity of the poor and vulnerable to earn income; reduced gender, geographical and

socioeconomic disparities in the incidence and depth of poverty; and a healthier value added and productive population.

The underlying strategic framework for the realisation of the goal of GPRS I included: ensuring economic stability for accelerated growth; increasing production and promoting sustainable livelihoods; facilitating direct support for equitable human resource development; providing special programmes in support of the vulnerable and excluded; ensuring gender equity; ensuring good governance and the increased capacity of the public sector; and the active involvement of the private sector as the main engine of growth and partner in nation building.

Based on the positive results of implementing the GPRS I, especially in the area of attaining relative stability in the economy, and some progress made towards achieving the objectives of human development including the MDGs, a successor national development policy framework was formulated in 2006. This is called the Growth and Poverty Reduction Strategy (GPRS II: 2006-2009). While GPRS I focused on Poverty Reduction programmes and projects, the emphasis of GPRS II is on policies and programmes that will bring about growth of the economy, support wealth creation and poverty reduction.

The overarching goal of GPRS II is to attain middle income status (with a per capita income of at least US\$1000) by the year 2015 within a decentralized, democratic environment. This is to be complemented by the adoption of an overall social protection policy, aimed at empowering the vulnerable and excluded, especially women to contribute to and share in the benefits of growth of the economy, thus ensuring sustained poverty reduction.

The underlying strategic direction for realisation of the goal of GPRS II included pursuance of the following priorities: continued macroeconomic stability; accelerated private sector-led growth; vigorous human resource development; and good governance and civic responsibility. All geared towards placing emphasis on changing the structure of the economy by developing the private sector, diversifying the export base and increasing agricultural productivity and rural incomes.

Generally, most of the poverty reduction effort in Ghana sought to among others: promote access to opportunity; facilitate empowerment of the vulnerable and excluded groups; and enhancing security. Disproportionate emphasis has been placed on economic issues. Among the crucial areas tackled included, limited access and control over income generating assets stands out. These are the vital facets which enable individuals and households to escape or move out of poverty. But there is much evidence that ‘poverty is not (only) economic’ (Charles A. Dzradosi, 2001: p, 7). A purely economic based approach is inadequate to resolve the issue of poverty against a background of the underlying causes, which are socio-cultural, political and environmental (Dinye, 2002)

2.5 MICRO PROJECTS CONCEPT

The Lomé IV Convention defines Micro Projects Programmes (MPP) as an instrument of the cooperation between the European Community and African Caribbean and Pacific (ACP) countries meant for financing at local level micro-projects that “have an economic and social impact on the life of the people; meet a demonstrated and observed priority need; and will be undertaken at the initiative and with the active participation of the local community which will benefit from it”. MPP’s relevance must therefore be assessed with respect to two dimensions: their contribution to socio-economic development at grassroots level, and the active involvement of local communities in the identification of needs and implementation of project (ADE, 2006)

2.5.1 Definition of a Micro Project

In Ghana, the Micro Projects Programme (MPP) is a collaborative effort between the Government of Ghana (GOG) and the European Union (EU) to provide facilities that will enhance development and also improve upon the living standards of the rural communities in Ghana. It is essentially a rural development programme with the beneficiary rural communities actively involved in the implementation of the programme (MPMU, 2000)

A micro project is a small-scale community-based project initiated and executed by the community and must have the active participation of the community. A micro project is expected to have a positive socioeconomic impact on the lives of beneficiaries. A macro project receive a tacit government support, which is expected to dovetail into the overall national development goals, although they are initiated by communities (MPMU, 2000)

2.5.2 Principle of Partnership

A micro project is undertaken on the principle of ‘partnership’ between the community, the District Assembly and the MPP - sponsored by the GOG and the EU. The principle of partnership underscores the need for ‘self-help’ spirit on the part of the beneficiary community. Consequently, MPP requires that at least one-fourth of total project cost be provided from local resources, with a maximum of three-fourths being provided from micro project’s finance. As a manifestation of a community’s commitment to its initiated project, it is obligatory on the community to provide its one-fourth contribution either in cash or in kind to match the GOG and EU contribution provided under the MPP.

2.5.3 Scope of Micro Projects

Micro projects finance can be used to support project in a wide range of social and socioeconomic activities. Thus projects are not restricted to a few categories of development activities but may cover any feasible identifiable need of a community. Micro project can be under the following scope of activities: social infrastructure projects involving the construction of schools, clinics, water and sanitation (hand-dug wells, boreholes and KVIPs); socioeconomic projects involving the construction of markets stalls, butcher’s shops, feeder roads; business initiatives involving pottery, poultry, handicrafts, agro-based industries; and environmental projects involving growing woodlots, controlling erosion and site degradation.

2.5.4 The Institutional Framework for Implementation and Management of MPP

The institutional framework for implementation and management of the MPP are at four levels; national, zonal/regional, district and community level.

i) National Level

The Micro Projects Management Unit (MPMU) in Accra manages and supervises the nationwide physical implementation of the programme. The government is represented on the programme by the Minister of Finance and Economic Planning who is also designated as the National Authoring Officer (NAO). The NAO has overall responsibility for the programme and works in close co-operation with the Delegation of the European Commission in Ghana. The two officers are responsible for policy formulation that guides the implementation process. The MPMU is supported by local consultancy firms to provide training, supervise the implementation of the works and financial controls. A

national Micro Project Steering Committee holds quarterly meeting, in which all relevant sectors ministries, the NAO, the EU Delegation, the MPMU and other relevant bodies are represented, allows sector ministries to ensure conformity of the programme with their national policies.

ii) Zonal Level

There are six zonal offices (also termed regional offices) in total headed by Zonal MPP Co-ordinators. The following are the location of the said zonal offices: Central Zone – Cape Coast; Eastern Zone – Koforidua; Volta Zone – Ho; Northern Zone – Tamale; Upper East Zone – Bolgatanga; and Upper West Zone – Wa.

iii) District Level

Each district working with the programme establishes a District Implementation Committee (DIC), which is effectively the body that directs and supervises all of the programme's activities in the particular district. The membership is as follows: the District Chief Executive; the Presiding Member of the District Assembly; the District Co-ordinating Director; the Planning Officer; the Budget Officer; the District Community Development Officer/District Social Welfare Officer; the District Works Superintendent/Foreman; the District Finance Officer; and the Heads of Decentralised Government Departments who would be invited as ex-officio members when projects pertaining to the sectors are considered. One of the DIC members, usually the District Planning Officer is named as the District Micro Projects Co-ordinator.

The District Assemblies are directly responsible for the physical implementation as well as monitoring roles in the management of the micro projects programme in each district. Engineering consultants assist with the technical supervision of works while auditors and the MPMU also support the District Assemblies in the supervision of projects. Decentralised departments at the district and regional levels, especially health and education, and the District Water and Sanitation Team are involved in the project selection and making of budgetary commitments for staffing, furnishing and maintenance of facilities constructed.

iv) Community Level

At this level, the projects are organised and supervised by the Community Implementation Committee (CIC). The CIC's membership is expected to comprise the following: the local chief or his representative; the Assemblyman of the community; the chairperson of the town/village development committee/unit committee; a professional representative of the facility being provided (for instance a teacher for a school project or a nurse for a clinic project); a representative of a community based organisation; a representative of women; and a literate person chosen from the community to act as secretary of the CIC. It is important to note that, once a project is approved, the community must appoint a CIC to organise and supervise the project implementation. The members and hired artisans undertake the actual construction.

2.5.5 The Focus of the MPP's Interventions

The MPP is mainly an infrastructural provision project that focuses on increasing the availability of quality infrastructure and reducing distances by constructing new infrastructure and side-facilities (like staff houses) or by rehabilitating old ones. Social infrastructure is the main area of MPP intervention, followed by economic infrastructure and income generating activities. In social infrastructure, the focal sectors for MPP are education facilities, water systems and health facilities. Economic infrastructures are mostly a low priority in the MPP and in some countries they do not feature at all (refer to appendix 6 Table A6.1 for detailed primary allocations structure).

Table 2.1 Primary Allocation of the MPP (%)

Primary Allocation	Percentage
Social Infrastructure	66
Economic Infrastructure	10
Income Generating Activities	10
Capacity building/Training	7
Other (rural development and environment)	7
Total	100

Source: Compiled from ADE (2006) Final Report

On the whole about 76 per cent of all primary allocation of the programme goes into infrastructure provision. Table 2.1 is a presentation of the primary allocations of MPP.

However the functioning of the infrastructure provided depends largely on government's provision of complementary inputs (like staff and equipment).

2.6 SUMMARY AND CONCLUSION

This chapter has operationalised the major concepts employed in the study with a view to reducing the ambiguities that might arise in the use of terminologies. Concepts that have been discussed here are those considered relevant for achieving the objectives outlined in chapter one. The policy focus and strategy for poverty reduction, nature and scope of poverty, and the MPP concept as well as MPP approach to poverty reduction are thought to be the main issues to be investigated in order to determine the contribution of MPP approach to poverty reduction in the northern zone of the project area (that is the northern region of Ghana).

CHAPTER THREE

RESEARCH DESIGN AND METHODOLOGY

3.1 INTRODUCTION

This chapter provides an elaboration on the processes and methods employed in; investigating the problem, selecting instruments for analysing the problem and how conclusions were arrived at. In effect, it is a guide for understanding how the research was conceived and carried out. The methodology was selected in response to particular framework conditions and specific context of the region under study – Northern Region.

3.2 RESEARCH DESIGN

A research design can be described as the logical sequence that connects the empirical data to the study's initial research questions and ultimately to its conclusions. It is defined as a plan which guides the investigators in the process of collecting, analysing and interpreting observations, and a logical model of proof that allows the researcher to draw inferences concerning causal relations among the variables under investigation (Inkoom, 1999). The main objective of the research design therefore, is to ensure that the evidence collected addresses the initial research question.

3.2.1 Rational for Selecting the Case Study and Comparative Study Approaches

(a) The Case Study Approach

When the studied phenomenon is essentially a contemporary (as opposed to historical) one which is operating within specific context, (Yin, 1981, 1993) the case study method is preferred to other possible social science research methods such as surveys, experiments, histories or archival studies, (Inkoom, 1999). Poverty and/or poverty reduction is one of the current development challenges facing Ghana (GOG, 1997, 2003 and 2006) even though the origins can be traced to history.

Besides, the case study method was selected because of the complexity of the phenomenon of poverty and/or poverty reduction due in part to the large number of interest in poverty reduction by both the governmental and nongovernmental sector; at the local, national and

even the international level. In addition, the problem of poverty is linked to several issues such as access to basic social services, and household socioeconomic and cultural activities among others. These issues are continually evolving within space and time. Because the problem of poverty is not monolithic, one needs context specific cases and several sources of evidence in order to study the phenomenon in detail as that will improve the quality of data for the study as it allows for validation of one source of data by another source.

Also, the case study method provided a basis for an empirical enquiry which allowed the researcher to investigate and understand the dynamics of poverty reduction efforts in the Northern Region. Again it afforded the research an opportunity of studying poverty and poverty reduction related issues within a real life situation.

Furthermore, once the researcher has very little control over the phenomenon under investigation the case study design comes in as a handy approach to employ for the study. Finally, this approach enabled the researcher to learn from practice, as it ensured a better understanding of the underlying theories of poverty reduction based on practice.

Even though case studies have the problem of generalising beyond the case, as-opposed to the survey research, it is still possible to do analytical generalisation beyond the case (Yin, 1993 and Inkoom, 1999). The complexity of the problem of poverty reduction, however, makes case studies the most appropriate research method. To do justice to such complexity, Glesne and Peshkin (1988) cited in Inkoom (1999) note that:

‘Qualitative researchers immerse themselves in the setting of lives of others, and they use multiple means to gather data. They thereby give credence to the contextual nature which both researchers and their research phenomena abide, and also the fact that …, both are shaped by and embody passions and values that are expressed variable in time and place’

This case study was both descriptive and explanatory

(b) The Comparative Research Approach

In order to effectively assess the contribution of the MPP to poverty reduction in the study area, the researcher complemented the case study method with the comparative research method. This provided a basis upon which, the researcher established whether there has

been change and the degree of the change that could be attributed to the MPP's interventions. The comparative research approach for the study was operationalised by the 'with' and 'without' and the 'before and after' approaches which are all forms of comparative research.

The 'with' and 'without' approach, was applied by selecting six project communities and three non-project communities and comparing them to establish whether project communities were better off than non-project communities based on a common set of variables. The second being 'before' and 'after' approach, which was limited to only the six project communities, where the researcher tried to establish whether there has been any improvement in identified variables with interventions of the MPP.

However, the impact study method is quite weak in terms of internal validity and strong in terms of external validity. According to Inkoom (1999), internal validity is ensuring that causalities established are inherent not accidental. Several steps will be taken to ensure the internal validity of the study. These include data triangulation (collecting data from a variety of sources and converging them on an issue of the study), checking the data against existing literature, and consistently checking data collection against stated objectives of the study.

3.3 KEY VARIABLES OF THE STUDY

The key variable of a study helps the researcher to move from a conceptual level to an empirical level. Variables are like the key elements of the research problem or topic and ensure that the researcher remains focused on the key elements of the research, thus avoiding unnecessary deviations from the core issues of the research. Kreuger and Neuman (2006) defined a variable as a concept that varies – this implies that a variable may take on two or more values. The value or the categories of a variable are its attributes. Babbie (2007) also puts it that variables are logical grouping of attributes. He describes attributes as characteristics or qualities that describe an object.

From the foregoing, a variable is an empirical property that can change either in quantity or quality. In the case of this study, the key variables included -, dimension of poverty, range of social and economic infrastructure, range and availability of social services, and range

of project interventions. These constitute the data categories that were assembled for the study.

Variables may be classified in two main categories: first, is the dependent variable, considered as the variable that is the effect or the result or outcome of another variable. Simply put it is the variable that is to be explained. Second, is the independent variable, this is considered as the cause variable, or the one that identifies forces or conditions that act on something else. In other words they are considered as variables that explain the dependent variable.

3.4 UNIT OF ANALYSIS OF THE STUDY

Determining the unit(s) of analysis in a case study research is not a simple task (Inkoom, 1999). Several authors however, provide hints as to how this could be done effectively. Patton (1987), discussing the choice of unit of analysis, points out that the key factor for making the decision about the appropriate unit of analysis rests on what unit the author wants to say something about or draw conclusions from at the end of the study. According to Babbie (2007), a unit of analysis is what is being studied or the unit of observation. It has also been described as the most elementary part of the phenomenon to be studied. Some will term it the basic unit to 'be investigated', while others will term it as the basic unit along which information/data is collected. Also Mikkelsen (1993) argued that units of analysis could be defined as: individuals, groups or communities; whole programmes or their components; organisations; critical incidents; and time periods.

In effect, there can be one or more units of analysis depending on the scope and complexity of the research questions one is trying to answer. The units of analysis also determine which kind of case study design is most appropriate. This study has five main units of analysis: selected District Assemblies, selected project communities, selected non-project communities, households from both project and non-project communities. The embedded case study design was applied, as opposed to a single unit of analysis, where a different design would have been preferred.

The study design adopted facilitates the examination of the phenomenon being studied in operational detail, and avoids the tendency of the research being done on the abstract level.

Besides, it also served as an important device for focusing on case study enquiry, where several sub-units are involved (Yin, 1984; Inkoom, 1999)

3.5 CRITERIA FOR SELECTION OF STUDY AREAS

Due to financial and material resource constraints as well as the limited time frame for the research, three districts namely Savelugu-Nanton, West Mamprusi and Tolon-Kumbungu were selected out of the 13 districts that existed as at 2001 for this study. In selecting these districts the following selection criteria was followed:

1. Firstly, all the five districts that (namely East Gonja, Bole, Nanumba, West-Gonja and Gushiegu-Karaga) were re-demarcated into two districts were excluded from the list of district considered.
2. Secondly, all districts that gained Metropolitan and Municipal status by 2008 were excluded from the list of districts for consideration.
3. Finally, out of the remaining six district (namely East Mamprusi, Saboba-Chereponi, Savelugu-Nanton, West Mamprusi, Tolon-Kumbungu, and Zabzugu-Tatale) three districts were randomly selected after consultations with the regional MPP Co-ordinator revealed that all the six districts under consideration had similar characteristics in terms of the implementation of the MPP.

3.6 SOURCES OF DATA

Both published and unpublished data were relied on for secondary data. This consisted of information from training manuals, workshop papers, library, and the World Wide Web. Metropolitan and District Medium Term Plans also serve as important reference points. Primary data was obtained through questionnaire administration, community meetings, focus group discussion, and community gatekeeper's interviews.

(a) Secondary Source; a myriad of documented materials were consulted for information related to the subject matter of the research. This ensured a broad understanding and conceptualisation of the subject matter under consideration. Textbooks, magazines, journals, articles, reports, periodicals, weekly and daily papers were the main secondary sources referred to for data, to review literature on the research topic.

(b) *Primary Sources*; a combination of data collection techniques were employed for gathering data on the research topic. This was necessary due to the nature of the research. The techniques employed included structured and semi-structured questionnaire administration, focus group discussions, and community gatekeeper's interviews. These sources were primarily used to collect household data, institutional data and community data, specifically on their perceptions and opinions of the contribution of the MPP intervention in reducing poverty in the study area.

3.7 DATA COLLECTION INSTRUMENTS

There are various instruments for collecting data. However, for this study, household survey/interviews (questionnaires), community gatekeeper's interviews, and focus group discussions were the primary instruments used for data collection. These instruments ensured a thorough examination and understanding of the phenomenon investigated and dynamics of poverty as well as its functional relationship with the MPP interventions and its effect on reducing poverty in the study area from different sources and perspectives. In addition, the instruments served as quality check on each other through the principle of triangulation to test for consistency and reliability of data collected.

The household survey employed the structured interviewing approach – referred to as a formal interview with written questions in the form of questionnaires. The household survey/interviews involved administering questionnaires to sampled households and institutions in the study area – these questionnaires consisted of both closed ended and open-ended items/questions. The closed ended items were only applied when responses to a given question is limited, or when the question deals mainly with quantitative and factual issues. On the other hand where it was obvious that the responses required to a give question were unlimited and could not be precisely determined or where the responses dealt mainly with qualitative and opinion related issues opened ended items were applied.

The remaining instruments (i.e. community gatekeeper's interviews, and focus group discussions) made use of both the unstructured and semi-structured interviews formats to collect data. An unstructured interview also termed as conversational interview is an informal interview not involving the use of questionnaires but rather a checklist and may focus on both facts and opinions. An unstructured interview leaves room for improvisation on the part of the researcher to elicit the desired information. A semi-structured interview

on the other hand is a guided interview where only some of the questions are predetermined and new questions come up during the interview (CEDEP, 1995). Specifically, the:

(a) *Focus group discussions*; these involved discussions with 5 to 10 women (including elderly women). The focus group discussions were limited to only women because it was discovered that all the sampled households were headed by men (including elderly men) and hence the focus group discussion presented an opportunity to capture the opinions and perceptions of women about the MPP and how it has affected the poverty challenge. In all nine focus group discussions were organised, one in each community, of this six were in project communities and three in non-project communities.

(b) *Community gatekeeper's interviews*; Community gate keepers are the power brokers of a community and their opinions and suggestion are rated very highly in the community. The community gatekeepers interviewed included: community elders, Assemblymen, Unit Committee Chairmen, Women leaders ('magazia'), youth leaders. Specifically 15 community gatekeepers' interviews were conducted to elicit information on the perspective of the community on the subject of the MPP's contribution to poverty reduction.

3.8 DETERMINATION OF SAMPLE SIZE FOR HOUSEHOLD SURVEYS

The research employed the mathematical sample determination approach to determine the sample size (n) that was studied out of a total of 1924 households which formed the sample frame (N) of the study; the margin of error (α) allowed for the study was 6.5 per cent. Based on that the mathematical sampling model was applied as follows:

$$n = N \div [1 + N (\alpha)^2]$$

Where:

n	=	the sample size (?)
N	=	the sample frame (1924)
α	=	the confidence interval (0.065)

Substituting the above given information into the model results into the following as the sample size for the study.

$$n = 1924 \div [1 + 1924 \times (0.065)^2] = 210.8 = 211$$

Table 3.1 indicates that data was collected in nine communities which included six project and three non-project communities. A total of 211 households were surveyed of which 78.7 per cent were project community and 21.3 per cent were non-project communities.

Table 3.1 List of Districts, Communities and Sample Households Surveyed

Districts	Communities	Number of households	Surveyed household	Community gatekeepers	Focus group discussions
Savelugu-Nanton	Tarkpaa	189	20	2	1
	Pong-Tamale	501	35	3	1
	Zoggu-Silimboma*	31	15	1	1
West Manprusi	Bulibia	142	25	2	1
	Tampulungu	355	30	2	1
	Banawa*	46	15	1	1
Tolon-Kumbungu	Nyankpala	383	31	2	1
	Nwodua Zoonayili	224	25	1	1
	Limgbuma-Gunda*	53	15	1	1
Total		1924	211	15	9
* Non-project communities					

Source: Author's Field Survey, May 2009

3.9 SAMPLING TECHNIQUE

The research employed the multi-stage sampling technique. This technique involved the use of a combination of various sampling techniques at different levels/stages of sampling – this technique could either be non-probability or probability at various stages of sampling. At the district level the three MPP intervention districts within the study area were selected based on the defined selection criteria above. Table 3.1 is a representation of the list of districts and communities surveyed.

The beneficiary communities were purposively sampled, this technique was particularly useful as it provided the researcher the room to ensure that the survey covered a cross section of the MPP's intervention in the study area. Similarly the non-project communities were also purposively selected with the assistance of the District Planning Officers who doubled as Micro-Project Co-ordinators.

Sampling at the household level was based on the systematic sampling technique – which involved selecting households from a sample frame in a systematic rather than a random fashion. This technique involves selecting the first household based on the principle of simple random sampling and the subsequent households based on a determined K^{th} term which is expressed as a ratio of the sample frame to the sample size. Table 3.2 shows the K^{th} term for each of the sampled communities.

Table 3.2 Determination of the K^{th} Term for each Sampled Community

Districts	Communities	Number of households	Surveyed household	$K^{\text{th}} = N/n$
Savelugu-Nanton	Tarkpaa	189	20	9
	Pong-Tamale	501	35	14
	Zoggu-Silimboma	31	15	2
West Manprusi	Bulibia	142	25	6
	Tampulungu	355	30	12
	Banawa	46	15	3
Tolon-Kumbungu	Nyankpala	383	31	12
	Nwodua Zoonayili	224	25	9
	Limgbuma-Gunda	53	15	4
Total		1924	211	
N: Number of households, n: Surveyed household				

Source: Author's Field Survey, May 2009

3.10 INDICATORS FOR MEASURING IMPROVEMENT

An indicator is a quantitative or a qualitative factor or variable that provides a simple and reliable basis for assessing achievements, change, improvement, or performance. A unit of information measured over time that can help show changes or improvements in a specific condition. A given goal or objective can have multiple indicators (NDPC, 2006). According to Babbie (2007) an indicator is an observation that we choose to consider as a reflection of a variable we wish to study. Thus for this study there were two main categories of indicators with sub-indicators as follows (refer to Appendix 3 for the operational definitions of the indicators used in this study):

1. Economic indicators; these include – employment generation, income and consumption levels, feeder road connectivity and access to market.
2. Social indicators; these include; (a) education related indicators like enrolment, physical, economic and cultural access; (b) health related indicators like physical

and economic access, turn-around time, and the nature of service provided; (c) food security related indicators like farm output levels, adequacy of output, marketing/distribution and access to modern production methods; and (d) empowerment related indicators like levels of economic and political participation, community participation in decision making and power over economic resources

3.11 ANALYTICAL TOOLS

Basically the study employed descriptive analysis approach for comparing changes in poverty before and after project intervention as well as in project and non-project communities. Also, actual changes in poverty situations was assessed and compared. The study also employed a qualitative scale which was collectively defined and agreed upon with surveyed communities to measure three levels of impact namely: ‘no improvement’, ‘moderate improvement’ and ‘high improvement’. Table 3.3 is a presentation of the operational definitions of the three levels of impacts.

Table 3.3 Operational Definitions of the Levels of Measurement

Level of Measurement	Operational Definition of Levels of Impact
No improvement	No improvement is where the intervention have had no positive effect on the variable being measured and even without the intervention in question the situation would have been the same.
Moderate improvement	Moderate improvement is where the intervention have had an average effect in a positive way on the variable being measured; however there still exist more potential for further improvement and hence the is the need for the intervention to be reengineered to yield greater impact
High improvement	High improvement is where the intervention have had a significant effect in a positive way on the variable under consideration and even without further intervention in a year to two the improvements gained will be self sustaining

Source: Author's Field Survey, May 2009

The study also examined the perception of project impact at four levels namely household, community, District Assembly and regional or zonal level. The research employed simple

descriptive statistical tools to analyse and present the data including percentages and averages.

The ‘with’ and ‘without’ comparative analysis approach provided a basis for drawing conclusions about the contribution of the MPP’s interventions to poverty reduction in the study area. This is due to the lack of baseline data establishing the situation before MPP’s interventions, hence in the assessment of the MPP’s contribution to poverty reduction the results of communities with intervention are compared with those of communities without intervention and where improvements in communities with intervention is greater than communities without interventions such improvements are attributed to the MPP.

3.12 RESEARCH LIMITATION

The study like any other study had a few challenges prominent among these is the difficulty in obtaining sufficient and accurate information from respondents. The low level of literacy among respondents was a challenge as the researcher had to engage the services of interpreters to translate questions to respondents, which might have affected the accuracy of responses. The busy schedule of management of the MPP Zonal officers, and the District Assembly staff made the process of gathering data from them quite challenging as well.

The researcher adopted the following measures to ensure that the quality of the study is not compromised in any way. First, the researcher ensured that all research assistants engaged were taken through basic training to ensure that: they understood the purpose of the study; they had basic information about the study population; and they understood every question in the questionnaire in a standard and consistent way. Secondly, each research assistant was trained - in how to ask questions; how to obtain and sustain an interview; how to check accuracy of responses; how to probe for further details where necessary and how to record responses accurately. These measures helped motivate respondents to readily volunteer information required for the study as a result of MPP’s interventions.

Yet another challenge of this research related with the definition of ‘poverty’ and how to measure or assess changes in terms of the level or degree of any reduction in poverty as a result of the MPP. This is largely because the concept ‘poverty’ is highly a subjective and perceptive, and may be defined and measured differently by different people/societies. The

researcher dealt with this challenge through extensively reviewing literature on various perspectives and measurement of poverty as a basis of coming out with a qualitative scale with three levels of measurement to measure the level of improvement in the key variables of the study.

Furthermore, there was the problem of attribution of achievements – that is to what extent would any level of reduction in poverty or improvement in access to social services in the study area be attributed to the MPP and not some specific government policies or interventions by other development partners or Civil Society Organisations. Mindful of this challenge the researcher also employed both the ‘with and ‘without’ and ‘before’ and ‘after’ approach in estimating improvements/achievement in poverty reduction that could be attributed to the MPP’s interventions.

Finally, there is the challenge of lack of baseline data before MPP’s interventions in all the MPP beneficiary districts in the Northern Region. This made it quite difficult to assess the impact of MPP’s intervention on poverty reduction in the study area. In managing this problem the researcher employed the ‘with’ and ‘without’ approach which enabled the research to measure improvements due to the MPP on a set of common indicators applied to both communities with interventions and communities without interventions.

CHAPTER FOUR

THE CASE STUDY CONTEXT: THE NORTHERN REGION OF GHANA

4.1 INTRODUCTION

This chapter examines the physical, social, and economic characteristics of the Northern Region of Ghana in relation to the general well-being of the people. Also discussed in the chapter is the poverty situation in the region with particular emphasis on the levels of poverty within regions; incidence of poverty within the Northern Region; access to basic education; illiteracy level; access to health services and nutrition and food security.

4.2 PHYSICAL SOCIAL AND ECONOMIC CHARACTERISTICS OF THE STUDY AREA

4.2 1 Location and Size

The Northern Region, which occupies an area of about 70,383 square kilometres, is the largest region in Ghana in terms of land area. It shares boundaries with the Upper East and the Upper West Regions to the north, the Brong Ahafo and the Volta Regions to the south, and two neighbouring countries, the Republic of Togo to the east, and La Cote d'Ivoire to the west. The land is mostly low lying except in the north-eastern corner with the Gambaga escarpment along the western corridor. The region is drained by the Black and White Volta and their tributaries, Rivers Nasia, Daka, etc.

4.2.2 Climate and Vegetation

The climate of the region is relatively dry, with a single rainy season that begins in May and ends in October. The amount of rainfall recorded annually varies between 750 mm and 1050 mm. The dry season starts in November and ends in March/April with maximum temperatures occurring towards the end of the dry season (March-April) and minimum temperatures in December and January. The harmattan winds, which occur during the months of December to early February, have considerable effect on the temperatures in the region, which may vary between 14°C at night and 40°C during the day. Humidity, however, which is very low, mitigates the effect of the daytime heat. The main vegetation is classified as vast areas of grassland, interspersed with the guinea savannah woodland,

characterised by drought-resistant trees such as the acacia, baobab, shea nut, dawadawa, mango and neem.

4.2.3 Demographic Characteristics

The total population of the region in 2000 is 1,820,806, representing 9.6 per cent of the population of Ghana. The Tamale metropolis accounts for 16.0 per cent of the total population of the region. Each of the other districts accounts for less than 10.0 per cent of the total population. The age distribution depicts a very young population with over 45.0 per cent below age 15 years. This pattern is common to all the districts of the region although the proportion below age 15 years varies from about 41.0 per cent in the Tamale metropolis to almost 50.0 per cent in the East Mamprusi District. The predominant ethnic group in the region is the Mole Dagbon, making up 52.2 per cent of the population. The predominant religion is Islam, which accounts for 56.2 per cent of the regional population and over 60.0 per cent in seven of the 18 districts.

4.2.4 Social characteristics

The proportion of households headed by females (14.1%) is not very different from the national average (11.0%); however, there are substantial differences between districts. The average size of households is around seven for the region, with a spread among 6.0 and 10.0 for the districts. At the household level, income or more broadly, financial wealth is related to parental occupation, which in turn depends to some degree, on level of education. Improved education is a prerequisite for wider development and contributes significantly to better health. It enhances people's capacity to care for themselves and their families, and to use community services more effectively.

There is a wide gap in educational attainment between the country as a whole and the region. At the national level, 38.0 per cent (33.1% males and 44.5% females) of the population six years and older have never been to school compared with 72.3 per cent (66.6% males and 77.9 females) in the Northern Region. The district with the lowest percentage of the population that has never been to school is Tamale with 50.8 per cent (42.5% males and 59.0% females). On the other hand, Gushiegu-Karaga has the highest proportion (84.3%) of the population that has never been to school (79.3 per cent males and 89.0 per cent of females).

Of the population who have ever attended school, 47.5 per cent, made up of 43.6 per cent of males and 53.5 per cent of females, have attained primary school level. About a fifth (21.7%) made up 22.2 per cent of males and 21.1 per cent of females, have attained Middle/JSS level. Those who attained Secondary/SSS level account for 13.3 per cent (15.7% of males and 10.4% of females) and an additional 4.8 per cent (3.7% males, 4.2% females) attained vocational/technical/commercial school level. About the same percentage of both males and females have attained post-secondary school and tertiary levels; the corresponding proportions being 5.1 per cent and 5.5 per cent for males, and 3.9 per cent and 4.6 per cent, for females, respectively. On the whole, the highest educational level attained by majority of the educated in the region, is the primary school (43.6% of males and 53.5% of females).

4.2.5 Economic Characteristics

Agriculture, hunting, and forestry are the main economic activities in the region. Together, they account for the employment of about 67.2 per cent of the economically active population, aged 15 years and older. Less than a tenth (7.0%) of the economically active people in the region are unemployed. The rest (28.8 per cent) are engaged in the service (21.6 per cent) and industrial (7.2 per cent) sectors. Among the districts, Zabzugu-Tatale has the highest proportion in agriculture (87.7 per cent). In contrast, the majority of the workforce in the Tamale Metropolis (53.9 per cent) is engaged in the service related activities (40.4 per cent) and industrial related activities (13.5 per cent). The Tamale Metropolis also has the lowest proportion of workers in agriculture (29.1 per cent) and the highest proportion of Professional/Administrative/Managerial, and Clerical workforce (15.2 per cent)

4.3 POVERTY SITUATION IN NORTHERN REGION

The incidence of poverty in Northern Region of Ghana declined slightly from 63 per cent in 1991 – 92 to 52 per cent in 2005 – 06 compared with the national situation which fell from 52 per cent to 29 per cent around the same period. Poverty is particularly high in the agriculture sector and highest among food crop farmers. Food crop farmers recorded the highest poverty incidence of 68 per cent in 1991/92 falling to 46 percent in 2005/06, with over 70 per cent of the active labour force of the region engaged in agriculture and agriculture related activities provides a cursory view of poverty in the region.

4.3.1 Levels of Poverty within Regions

The GPRS II used a three way classification of poverty for each district. Districts are classified as either non-poor (NP), poor (P) or very poor (VP). A district was considered non-poor if the incidence of poverty was lower than the national average of 40 per cent. It was considered as poor if the incidence of poverty was more than 40 per cent but less than 75 per cent. If it had 75 per cent or more, it was considered as very poor. The levels of poverty by district in each region are given in Table 4.1.

Table 4.1 Levels of Poverty within Regions in Ghana (%)

Region	No. of Districts	Overall			Rural			Urban		
		NP	P	VP	NP	P	VP	NP	P	VP
Greater Accra	5	3	2	0	2	3	0	5	0	0
Western	11	8	3	0	8	3	0	11	0	0
Ashanti	18	4	14	0	1	17	0	17	1	0
Brong-Ahafo	13	2	10	1	0	7	6	11	2	0
Volta	12	1	11	0	1	11	0	9	3	0
Eastern	15	6	8	1	5	7	3	12	3	0
Central	12	1	11	0	0	12	0	3	6	3
Northern	13	0	1	12	0	0	13	0	8	5
Upper West	5	0	0	5	0	0	5	5	0	0
Upper East	6	0	0	6	0	0	6	3	3	0
All Districts	110	25	60	25	17	60	33	76	26	8
NP: Non-poor P: Poor VP: Very Poor										

Source: Compiled from GPRS II, 2009

Ignoring the rural-urban divide, it is noted that only 25 (23 per cent of) districts could be considered as non-poor. The remaining 85 districts had a poverty incidence that was greater than 40 per cent. Of the poor district, 25 were classified ‘very poor’. The significance of the ‘Northern’ poverty situation is brought into focus when one takes a closer look at Table 4.1. Almost all the districts that are classified as ‘very poor’ are from the Northern, Upper East and Upper West regions. Twenty-three of the 24 districts in the three northern regions were in the ‘very poor’ category. The only exception was the Tamale District, which had an incidence of about 59 per cent. The other two districts,

which were outside of the three northern regions but were classified as ‘very poor’ were in the Eastern Region (Afram Plains with an incidence of 83 per cent) and Brong-Ahafo (Sene, with an incidence of 83 per cent.

4.3.2 Incidence of Poverty within the Northern Region

The incidence of poverty in the Northern Region is very high relative to the average national incidence of poverty of 40 per cent. Table 4.2 is a presentation of the incidence of poverty in the then 13 districts in the Northern Region. A cursory examination of Table 4.2 shows a minimum incidence of 59 per cent and a maximum incidence of 92 per cent in the Tamale and Gushiegu-Karaga Districts respectively.

Table 4.2 Poverty Incidence by District in the Northern Region (%)

District in Northern Region	Overall	Rural	Urban
Tamale	59	87	43
Savelugu-Nanton	77	91	51
East Dagomba	84	92	63
East Gonja	85	92	41
Bole	87	92	50
West Mamprusi	87	92	52
Nanumba	88	88	90
Saboba-Chereponi	88	90	69
East Mamprusi	88	89	80
West Gonja	89	94	43
Zabzugu-Tatale	89	89	94
Tolon-Kumbungu	90	90	98
Gushiegu-Karaga	92	92	95

Source: compiled from GPRS II, 2009

4.3.3 Access to Basic Education

Access to basic education is operationalised by the Ghana Statistical Service (GSS, 1998/99) as having a facility within one kilometre radius from one's place of residence. The national access to basic education stands at 85.4 per cent as at 2003. There are however regional differences in access to primary school. Regions in the southern sector of the country have greater access to primary education than the northern sector. The Upper

East Region has the poorest access to primary education (61.9 per cent) followed by the Upper West Region (67.1 per cent) and the Northern Region (80.1 per cent).

The factors that account for the low access to primary education in the three northern regions include sparse population distribution, poverty and the general deprivation in most areas. Access differs from urban to rural locations. Urban areas have better access to primary education than rural areas (93.2% compared to 81.0% respectively). The picture is grimmer with respect to access to secondary education. The national average for access to secondary school is 43.3 percent, but it is even worse for the northern regions which average 15.5 per cent.

Apart from the north-south disparities, there exist differences between rural and urban areas. Access to secondary education is higher in urban areas (62.6%) than in rural areas (28.8%). Moreover, the quality of education in the rural areas is poorer. Similar explanatory factors of poor infrastructure and poverty, coupled with the tendency for more qualified secondary teachers to refuse posting to rural areas. Thus, in terms of education and related personal self-fulfilment and advancement, northern Ghana in particular and also the remote rural areas are increasingly excluded.

4.3.4 Illiteracy Level

In Ghana, 42.6 per cent of the total population are illiterates; at the regional level Greater Accra has the lowest illiteracy rate (18.4 per cent), while the highest illiteracy levels are found in the three northern regions of Ghana - 76.2 per cent for Northern, 76.5 per cent for Upper East and 73.4% for Upper West. Statistics also indicate that illiteracy is much higher in rural (55.6 per cent) than urban (26.9 per cent) areas and in both areas females have higher illiteracy levels (34.2 per cent urban and 64.5 per cent rural) than males (19.2 per cent urban and 46.4 per cent rural).

4.3.5 Access to Health Services

According to the Core Welfare Indicator Questionnaire (CWIQ) II, 57.7 percent of Ghanaians have access to a health facility within 30 minutes of their places of residence. This is also linked to the distribution of health facilities in the country. Urban localities generally enjoy good access to health compared to rural areas as urban areas tend to have a

relatively better concentration of health facilities and better road networks as well as other factors that enhance access.

Access to health facilities in the rural areas, therefore, becomes a major challenge for rural inhabitants as they have to travel for considerable distance for health care. Among the regions, Greater Accra and Ashanti enjoy relatively better access to health facilities having almost half of the total number of health facilities between them (81.2 and 69.1 per cent respectively). The Northern (35 per cent) Upper East (20.9 per cent) and Upper West (30.4 per cent) Region enjoy the least. Thus, in terms of access to health care in Ghana, a sizeable proportion of rural areas and northern Ghana generally are excluded.

Child mortality in Ghana remains very high although some improvements have been achieved over the years. Over the period 1983-1998, infant mortality and under-five mortality rates declined from 77 and 155 deaths per 1000 live births, respectively to 57 and 108 deaths per 1000 live births, respectively. Since 1999 infant mortality has increased to 64 deaths per 1000 births while under-five mortality increased to 111 in 2003.

The situation is worse in the case of the Northern Region where infant mortality and under-five mortality rates stand at 83 and 133 deaths per 1000 live births respectively in 2006. This is partly as a result of low level of immunisation of children in the north before their first birthday coupled with the incidence of diarrhoea. Records indicate that over 30 per cent of children in the north are not fully immunized before their first birthday. This situation is further exacerbated by the high levels of poverty and deprivation, malnutrition, poor access to basic education, health services and the resurgence of malaria and tuberculosis as well as unhealthy conditions during the time of birth. Malaria alone accounts for an average of 22 percent of all mortality cases among children under-five years (Asante and Asenso-Okyere, 2003).

4.3.6 Nutrition and Food Security

Food security is defined by the Food and Agriculture Organization (FAO) as "access by all people at all times to enough food for an active, healthy life." Ghana is classified as a low income, food-deficit country. The agricultural sector serves as the bedrock of food security and nutrition in Ghana (Asante, 2004). Most lands in Ghana have poor fertility and poor physical properties with low organic matter content.

The country's overall performance in terms of agricultural production and productivity remains inadequate and Ghana has failed to make progress in food security. One in every twelve households (8.7 per cent) in the Northern Region has difficulty in meeting their basic food needs, compared to the national average (12.8 per cent). The proportion of households with difficulty meeting their food needs is more than double the regional average in three districts, namely; Zabzugu-Tatale (37.6 per cent), East Dagomba (23.6 per cent) and Bole (22.4 per cent). Households in West Gonja (1.4 per cent) and Tolon-Kumbungu (1.8 per cent) are the least likely to have difficulty in meeting their basic food needs.

The slow growth of agriculture in the Northern Region is due to a combination of factors that reduce farmers' incentives to invest and produce. These include inappropriate policies, lack of technological change, and poor basic infrastructure. Inadequate and at times impassable road links between the urban and rural areas and vice versa create a situation of rural glut and urban scarcities of food. About 20-30 percent of production is lost due to the poor traditional post harvest management of food crops (MOFA, 2000).

4.4 SUMMARY AND CONCLUSION

From the foregoing, it has become apparent that the poverty situation in the region in terms of the levels and incidence of poverty, access to social services and food security lags behind the rest of the country with the exception of Upper East and Upper West Regions. This therefore, gives credence to the argument made by various development practitioners at different platforms that ‘…… if the three northern regions were calved out of Ghana, Ghana will achieve the Millennium Development Goals within the stipulated time frame …….’ This statement signifies that there is an urgent need for re-doubling our efforts at fighting poverty in the Region.

CHAPTER FIVE

AN EXPERIENCE OF THE POVERTY REDUCTION EFFORTS OF EUROPEAN UNION MACRO-PROJECT PROGRAMME IN THE NORTHERN REGION

5.1 INTRODUCTION

The Northern Region first participated in the MPP in 2001 under the fifth edition (5th MPP). Some of the other regions namely Brong Ahafo, Western, Ashanti, Central and Upper West Regions which have benefited from the previous programmes (i.e. the 1st, 2nd, 3rd, and 4th) also benefit from 5th MPP. In all 56 districts were catered for under the 5th MPP in beneficiary regions across the country. In the Northern Region, all the then 13 districts (namely, Bole, West Gonja, East Gonja, Nanumba, Zabzugu-Tatali, Saboba-Chereponi, East Dagomba, Gushiegu-Karaga, Savelugu-Nanton, Tamale, Tolon-Kumbungu, West Manprusi and East Manprusi districts) benefited from the programme. A total of 47.2 billion cedis (about 4.7 million new Ghana cedis) was invested in the 13 districts.

This chapter examines the outcomes of poverty reduction efforts in the Northern Region, with particular reference to the experiences of the MPP. Specifically, the chapter focuses on three key areas namely; an examination of the extent to which the MPP is coherent with national policies/programmes of poverty reduction; an analysis of the contribution of the MPP to poverty reduction in the Northern Region; and finally an identification of the key challenges that hinder poverty reduction efforts of the MPP.

The study employed both the descriptive and comparative research approaches in examining the level of conformity of the MPP's approach to poverty reduction to the national and local poverty reduction initiatives. The study also compared the effect of the MPP on poverty reduction 'before' and 'after' the project's interventions. The study further employed the 'with' and 'without' approach which facilitated the comparison of project and non-project communities as a basis for determining the level of the outcome of poverty reduction that may be attributed to the MPP's interventions.

5.2 THE MPP AND HOW IT FITS INTO THE NATIONAL POVERTY REDUCTION FRAMEWORK

This section examines in detail how the MPP fits into the poverty reduction policies and programmes of Ghana with a view to establishing the role of the MPP in complementing government's efforts at reducing poverty in the medium to long term. This is in line with the first objective of the research, as it will serve as a basis for establishing the linkages between the MPP and the national poverty reduction framework and the Medium Term Development Plans of the District Assemblies in the region. This assessment is done at two levels namely: the national level; and the regional/zonal and district level.

5.2.1 National Level

The overall objective of the MPP is to reduce poverty; through improving living conditions of people and integrate local communities in the development process. All beneficiary countries including Ghana have Country Strategy Paper with the European Commission; this implies that Ghana subscribes to MPP's global objective (i.e. reducing poverty) and the immediate objective of improving people's living conditions. With respect to MPP's immediate objective of integrating local communities in the development process (or in other words empowerment of local communities), Ghana refers to this objective in the GPRS I documents. For instance in the GPRS I emphasis has been placed on the empowerment of all Ghanaians to participate in wealth creation and partake in the wealth created (GPRS, 2003).

The Country Strategy Papers of the European Commission generally refer to national policies of the beneficiary country expressed in the Poverty Reduction Strategy Papers. In Ghana, the 5th MPP introduced the major elements of the government sector policies related to the MPP, as well as a presentation of the main sectoral features. Moreover, the assessment of national sector policies undertaken prior to the start of the latest programme mentions that the priorities of Ghana Poverty Reduction Strategy are: (1) increased investments for the enhancement of basic social services (education, health, water and sanitation); (2) improvements in road infrastructure; (3) modernisation of agriculture on the basis of rural development; (4) support for the private sector; and (5) strengthening the rule of law. The MPP is designed to directly support the first, third and fourth objectives. The MPP is designed to assist the national sector education policy as it will allocate resources to providing good quality educational facilities. In the health sector MPP

concentrates on improving housing conditions for health staff in remote areas to stimulate staff retention within the health services sector (Landel, 2004).

5.2.2 Regional/Zonal and District Level

Discussions were held to provide an insight into the extent to which the MPP fits into the regional and district poverty reduction initiatives, goals and objectives with the Regional Micro-Project Unit and selected District Micro-project Implementation Committee and the District Planning and Co-ordinating Unit. According to the interviewees the MPP and DMTDPs have similar objectives that identify basic education, primary health care, water and sanitation, feeder roads to link rural communities and improved marketing of agricultural produce as key elements in the campaign against rural poverty. More so, the MPP seeks to complement government efforts to improve access and utilisation of good quality basic social and economic infrastructure in rural areas.

The interviewees added that MPP is a community based programme undertaken on the basis of partnership between the community, the District Assembly and the MPP – sponsored by the government of Ghana and the European Union. Consequently the MPP requires that at least 25 per cent of total project cost is provided from local resource by beneficiaries and 75 per cent by European Development Fund (EDF), hence for the DA to be able to fulfil its part of the partnership it captures all such projects under MPP in the DMTDPs to be able to secure resources for their timely execution and delivery to beneficiary communities.

Furthermore, the interviewees pointed out that the MPP like the DMTDPs of the DAs is geared towards improving the living conditions of beneficiaries through the provision of socioeconomic infrastructure. Again, that the MPP's interventions like the DMTDPs of the DAs are supposed to be responsive to the felt needs of the people. Finally, both MPP and the DMTDPs are united by a common principle that projects to be undertaken are at the initiative and with the active participation of the local community which will benefit from the intervention of the project. This procedure clearly conforms with the decentralised planning principle of Ghana which seeks to ensure that beneficiaries of interventions are in the forth front of planning and implementing the intervention in question.

For the desired effect of the project to be felt by beneficiaries, the MPP concept is underpinned by the need to initiate a participatory process that promotes true involvement of various groups in beneficiary communities and service providers at the district level in the selection of micro-projects, their design and planning. This participatory planning process is to enable District Implementing Committees and Community Implementing Committees to select and implement micro-projects that are responsive to the expressed needs of the communities. The process should thus help create the atmosphere in which people are encouraged to select, implement, own and utilise the micro-projects of their choice.

5.3 CONTRIBUTION OF THE MPP TO POVERTY REDUCTION IN THE NORTHERN REGION

In keeping with the second objective of the study, this section analyses in detail the MPP's contribution to poverty reduction in the study area. This section is in two parts. The first part is devoted to an assessment of the specific project interventions in sampled communities. The second part is devoted to analysing in detail the views of households, communities, districts and the zonal level on the contribution of the MPP to poverty reduction in the study area.

5.3.1 An Assessment of the MPP Interventions in Sampled Communities

In chapter two it was discovered that the MPP was primarily an infrastructure provision project that focuses on increasing the availability of quality infrastructure and reducing distances, thus improving physical access to socioeconomic services in intervention areas. In this part the focus of the discussion would be an assessment of the extent to which the availability of infrastructure enhanced access (physical) to socioeconomic services. The assessment was based on only sampled projects.

i) Education infrastructure

The study revealed that there was a three unit classroom block each in Tarkpaa, Pong-Tamale and Nyankpala and a teacher's quarters in Nyankapla (all in communities with interventions) and none in communities without interventions. A follow up investigation of the average time spent walking to the nearest school revealed a better picture in communities with interventions comparing with the picture in communities without interventions.

For instance in communities with interventions 66.3 per cent indicated they could access the nearest school within 30 minutes, 27.9 could access the nearest school within 45 minutes, 4.7 per cent within 1 hour and 1.2 per cent within 1 hour 30 minutes. Compared with the situation in communities without intervention where only 8.9 per cent and 11.1 per cent respectively indicated that they could access the nearest school within 30 minutes and 45 minutes. However 44.4 percent and 35.6 per cent of the respondents indicated that they accessed the nearest school within 1 hour and 1 hour 30 minutes respectively.

This situation translated in 87.7 per cent of children of school going age enrolled in school in communities with interventions compared with 68 per cent enrolled in school in communities without interventions. The low enrolment in community without intervention was partly as a result of the long distances children walk to the nearest school. As a result only the older children who are considered strong enough are allowed to go to school.

The provision of the teachers' quarters helped in solving the teacher accommodation challenge which has over a long period discouraged teachers from accepting posting to the community. Even those who accepted posting to the community commuted all the way from Tamale to the community (Nyankpala in the Tolon-Kumbungu District). This according to the District Education Office resulted in a high teacher absenteeism averaging between two and three days per week. Also teacher-pupil contact hours was badly affected as teachers reported late to school.

ii) Health Infrastructure

On the question of availability of health infrastructure it was observed that there was one clinic in Pong-Tamale in the Savalugu-Nanton District (a community with intervention) and none in any of the communities without intervention. An assessment of the time spent to get to the nearest health facility revealed that 40 per cent of the respondents indicated that they could access a health facility within 30 minutes, 37.1 per cent accessed within 45 minutes, 17.1 per cent accessed within 1 hour and 5.1 per cent accessed within 1 hour 30 minutes in the community with intervention.

Comparing the above situation to the situation in communities without intervention it was observed that 4.4 per cent accessed the nearest facility within 30 minutes, 11.1 per cent within 45 minutes, 24.4 per cent within 1 hour and 60 per cent within 1 hour 30 minutes.

From the foregoing it is obvious that the MPP has enhanced access to health service point with the provision of the clinic.

iii) Sanitary Infrastructure (KVIP Latrine)

The study revealed that there was one sanitary infrastructure facility in the community with intervention (precisely Nyankpala in the Tolon-Kumbungu District) and none in any of the communities without intervention. A further assessment of household access to toilet facilities revealed that 67.7 per cent of respondents in communities with intervention indicated that they had access to toilet facilities compared with 24.4 per cent in communities without intervention.

iv) Market Infrastructure

One market infrastructure is located in Bulibia in the West Manprusi District and none in any of the communities without interventions sampled. This resulted in a reduction in travelling time to market centres in project communities compared with the longer travelling times in the non-project communities.

The survey results indicated that 48 per cent of respondents in the community with intervention could access a market within 30 minutes, 36 per cent within 45 minutes, 12 per cent within 1 hour and 4 per cent over 1 hour. Compared with the case of communities without intervention where only 4.4 per cent and 15.6 per cent could access a marketing centre within 30 minutes and 45 minutes respectively. However 17.8 per cent and 62.2 per cent respectively indicated that they could only access marketing centre within 1 hour and over 1 hour.

v) Feeder Road Connectivity

A culvert each was provided in Tampulugu in the West Manprusi District and Nwodua-Zoonayili in the Tolon-Kumbungu District. None was found in any of the communities without intervention. As a surrogate to determine the surface accessibility to and out of the communities respondents were asked to rank the condition of the major road to and out of the community on a scale of 'very bad, bad, fair, good, and very good'.

Comparing the responses of communities with interventions and communities without interventions it was clear that the condition of the major roads to and from communities

with interventions is better than those to and from communities without interventions. Responses from communities with interventions are as follows; 3.6 per cent and 7.2 per cent indicated that the condition was very bad and bad respectively compared with 37.8 per cent and 33.3 per cent respectively in non-project communities. Also 24.1 per cent of respondents from project communities felt the condition of the major road to and from the community was fair compared with 17.8 per cent in communities without interventions.

Furthermore, 32.5 per cent felt the condition of the major road to and from the community was good, the same proportion of respondents felt it was very good compared with 8.9 per cent and 2.2 per cent indicating that the condition was respectively good and very good in communities without interventions. It was also found out that the communities with interventions are accessible all year round compared with the case of most of the communities without interventions which are only accessible during the dry season and become very difficult to access during the raining season.

From the discussion so far in this part, it is very clear that the MPP has to a very great extent contributed towards improving access (physical) to socioeconomic services through the provision of a wide range of socioeconomic infrastructure. This has helped to a very large extent in reducing access related poverty.

5.3.2 An Analysis of Perspectives on the contribution of the MPP to poverty Reduction

These perspectives are analysed at four levels as follows: household; community; district; and zonal/regional levels.

a) Household Level

The perception of what households consider as the contribution of the MPP to poverty reduction is important in a study of this nature, as it provides a basis for assessing the extent or level of improvement brought about by the MPP's interventions. This section focuses on households' opinions about the contribution of the MPP in reducing poverty through improving the local: economic, education, health, food security, empowerment of women and community participation/involvement in the process of project planning and implementation.

i) *Local Economic Situation*

The respondents argued that any intervention that impacts directly or indirectly on employment, income, consumption, feeder road connectivity and access to market by local producers contributes towards improving the economic situation of the people, hence impacting positively on reducing economic related poverty. The survey gathered information on people's perceptions of how far projects implemented under the MPP in their communities impacted their living conditions. The results are presented in Table 5.1

Table 5.1: Level of Improvement in Economic Related Indicators (%)

Economic Indicators	Level of Improvement					
	No*		Moderate *		High*	
	CWP	CWOP	CWP	CWOP	CWP	CWOP
Employment	89.1	91.1	10.9	8.9	0	0
Income levels	90.3	91.1	9.7	8.9	0	0
Consumption levels	93.9	93.3	6.1	6.7	0	0
Feeder road connectivity	37.6	62.2	41.8	33.3	20.6	4.4
Access to markets	30.9	66.7	50.9	31.1	18.2	2.2
CWP: Responses from Communities with MPP's Interventions CWOP: Responses from Communities without MPP's Interventions, *As was defined in chapter three.						

Source: Author's Field Survey, May 2009

Table 5.1 depicts that the improvement occurring in the employment, income and consumption levels are quite insignificant in both project and non-project communities. However, it was observed that feeder road connectivity and access to market in project communities had improved quite significantly compared with the situation in non-project communities. This could be associated with the fact that the MPP's interventions are infrastructure related. However, in the medium to long term it is likely that the feeder roads and market infrastructure provided will boost intercommunity economic activities and marketing of agriculture related products.

ii) *Education Service Delivery*

The emphasis here is to examine the availability of schools for school-going age children in the study area to be able to determine if the schools, as presently organised and distributed in space (as a result of the MPP interventions in providing educational infrastructure) are serving the school going age population in terms of improved access to

education. Table 5.2 presents the survey results collated on people's perception of how the projects implemented under the MPP in their communities impacted on children's access to education.

Table 5.2 shows that enrolment and physical access have improved significantly in project communities compared with the situation in non-project communities. This could be partly due to the fact that enrolment and physical access to education relates quite closely with the availability and distribution of classroom infrastructure. Respondents from project communities explained that the school blocks provided under the MPP have also reduced distance travelled by children to school, thus improved physical access and enrolment level. On the other hand respondents from non-project communities lamented that in most cases children spent over an hour walking to the nearest school community accounting for the relatively lower improvement in enrolment levels.

Table 5.2: Level of Improvement in Education Related Indicators (%)

Education Indicators	Level of Improvements					
	No *		Moderate*		High *	
	CWP	CWOP	CWP	CWOP	CWP	CWOP
Enrolment	6.7	46.7	16.4	15.6	77	37.8
BECE performance	86.7	86.7	13.3	13.3	0	0
Physical access	11.5	55.6	16.4	42.2	72.1	2.2
Economic access	9.7	26.7	31.5	31.1	58.8	42.2
Cultural access	26.7	42.2	38.2	31.1	35.2	26.7
CWP: Responses from Communities with MPP's Interventions, CWOP: Responses from Communities without MPP's Interventions, * As was defined in chapter three.						

Source: Author's Field Survey, May 2009

A further analysis of Table 5.2 shows that 86.7 per cent of the respondents from both project and non-project communities felt that BECE performance had not improved, this could be explained with the fact that BECE performance does not directly relate to the provision of school infrastructure but rather relates to other factors like the deployment of qualified and motivated teachers coupled with an efficient teacher supervision mechanism put in place to enhance effective teaching and learning in schools.

A cursory view of Table 5.2 shows that there has been a general improvement in education in both project and non-project communities. This observation respondents explained was partly due to government policies and programmes geared towards improving access and enrolment levels of children of school going age which included the school capitation grant, school upgrading and improvement programme, as well as various incentive packages provided by other development partners like UNICEF, Catholic Relief Services, World Food Programme and more to encourage high enrolments in schools. This reinforces the fact that the MPP's intervention in the educational sector and government/other development partners education policies and programmes complement each other.

iii) *Health Service Delivery*

A key objective of the MPP towards the provision of health related infrastructure is to improve access to basic health care and ensure that the health sector plays an essential role in the poverty reduction process. The survey gathered information on people's opinions of how far the projects implemented under the MPP in their communities have impacted on health service delivery. The results are presented in Table 5.3

Table 5.3: Level of Improvement in Health Related Indicators (%)

Health Indicators	Level of Improvement					
	No*		Moderate *		High*	
	CWP	CWOP	CWP	CWOP	CWP	CWOP
Physical access	13.9	77.8	17.6	17.8	68.5	4.4
Economic access	21.2	26.7	64.8	62.2	13.9	11.1
Turn-around time	20.0	77.8	53.3	17.8	26.7	4.4
Nature of service provided	80.6	82.2	14.5	13.3	4.8	4.4
CWP: Responses from Communities with MPP's Interventions, CWOP: Responses from Communities without MPP's Interventions, * As was defined in chapter three.						

Source: Author's Field Survey, May 2009

Table 5.3 indicates that the economic access to health services according to respondents in both project and non-project communities have significantly improved with 64.8 and 62.2 per cent of the respondents respectively indicating that there have been moderate improvements while 13.9 and 11.1 per cent indicated that there have been high improvements. This significant improvement in economic access to health services in both

communities was mainly attributed to government's National Health Insurance Policy, the free health care for pregnant women and nursing mothers after the first three months after birth as well as the free health care for children less than eighteen years of age.

Also observed from Table 5.3 is the fact that respondents from project communities indicated that physical access to health services (68.5 per cent) and time spent at health institutions (53.3 per cent) had improved highly and moderately compared with the relatively lower changes of 4.4 per cent and 17.8 per cent (high and moderate improvement respectively) in non-project communities. On the nature of services provided by the health institution frequently visited by respondents, responses from both project and non-project communities clearly indicated that the changes are quite insignificant (with 80.6 and 82.2 per cent respectively indicating that there are no improvements in the nature of services provided). This clearly is an indication that provision of physical infrastructure does not necessarily guarantee improvement in quality of services delivered. The quality of service in addition to the infrastructure depends on other variable like qualification and number of health personnel, as well as how motivated they are among others.

iv) Food Security

Food security is defined by the Food and Agriculture Organization (FAO) as "access by all people at all times to enough food for an active, healthy life." Ghana is classified as a low income, food-deficit country. The agricultural sector serves as the bedrock of food security and nutrition in Ghana (Asante, 2004; GOG and UNDP, 2007). Table 5.4 is a representation of survey results gathered from people on their perceptions of how far the projects implemented under the MPP in their communities have impacted on food security.

Table 5.4 clearly shows that respondents (85.5 and 86.7 per cent respectively) from both project and non-project communities felt that 'adequacy of farm output' had not improved over the last five years and this they attributed to the lack of adequate storage facilities and the high levels of post harvest losses. This, they explained has negatively affected their ability to adequately provide the food requirements of their households.

It was also observed that responses on issues of farm output levels and access to modern production methods were found to be very close, with project communities found to have had better marginal improvement than non-project communities in relative terms. This was

attributed to the erratic nature of the rains in the north and lack of technical and input support from government and the non-governmental sector.

However, on the issue of marketing/distribution there were significant differences between project communities (with 52.7 and 12.1 per cent moderate and high improvements respectively) and non-project communities (with 6.7 and 4.4 per cent respectively). This situation is understandable because the MPP is mainly an infrastructure provision project. Respondents from project communities attributed this improvement to the fact that the marketing centres provided under the MPP are virtually within walking distance compared with the relatively longer distances covered by respondents in non-project communities.

Table 5.4: Level of Improvement Food Security Indicators (%)

Food Security Indicators	Level of Improvement					
	No*		Moderate*		High*	
	CWP	CWOP	CWP	CWOP	CWP	CWOP
Farm outputs levels	51.5	53.3	35.2	33.3	13.3	13.3
Adequacy of output	85.5	86.7	9.7	8.9	4.8	4.4
Marketing/distribution	35.5	88.9	52.7	6.7	12.1	4.4
Access to modern production methods	58.2	60	28.5	26.7	13.3	13.3
CWP: Responses from Communities with MPP's Interventions, CWOP: Responses from Communities without MPP's Interventions, * As was defined in chapter three.						

Source: Author's Field Survey May, 2009

v) *Empowering Women*

The empowerment measure measures gender inequality in three fundamental dimensions of empowerment namely; economic participation, political participation, decision-making and power over economic resources. Table 5.5 is a presentation of data collated on the perception of people of how far the projects implemented under the MPP in the communities have impacted on enhancing empowerment of women.

Table 5.5 indicates that of all the empowerment variables presented only decision making shows significant difference between responses from project community and non-project communities. For instance, 55.2 and 26.1 per cent of the respondents indicated that there had been moderate improvement and high improvements respectively compared with 33.3

and 8.9 per cent respectively of respondents in non-project community. This was largely attributed to the reserved place for women representation in the CIC.

However, the variable that showed least improvement in both project and non-project community was related to women's power over economic resource. It is important to note that the whole question of empowerment ought to begin with changes in the social relations, thus empowering the female members of households to own personal assets such as land and capital to reduce their vulnerability thereby enabling them to increase their investment in education, housing, land and more.

Table 5.5: Level of Improvement in Empowerment Related Indicators (%)

Empowerment of women (through participation) Indicators	Level of Improvement					
	No*		Moderate*		High*	
	CWP	CWOP	CWP	CWOP	CWP	CWOP
Economic participation	57.0	62.2	27.3	26.7	15.8	11.1
Political Participation	55.2	60	32.1	31.1	12.7	8.9
Decision making	18.8	57.8	55.2	33.3	26.1	8.9
Power over economic resources	70.3	71.1	24.8	24.4	4.8	4.4
WP: Responses from Communities with MPP's Interventions, WOP: Responses from Communities without MPP's Interventions, * As was defined in chapter three.						

Source: Author's Field Survey May, 2009

vi) *Level of Community Participation and Involvement*

In keeping with the key principles of the MPP which include: (1) principle of collective benefit by which a micro-project is undertaken to benefit the community as a whole; (2) principle of contribution, which requires a significant degree of participation by the partners (in kind or in cash); and (3) principle of appropriation, which assumes that a micro-project will be undertaken at the initiative of its beneficiaries and managed by them. The survey gathered information on people's opinions of how participatory the projects implemented under the MPP in their communities have been. The results are presented in Table 5.6.

Table 5.6 indicates that the level of community involvement in project planning and implementation had not improved with the exception of provision of communal labour

which 53.9 per cent respondents felt had improved moderately and 32.7 per cent felt had improved highly. Respondents attributed this phenomenon to the fact that most often than not District Assembly officials and a few members of the CICs initiate and plan project for the community. The community members are only brought in when issues of land, community contribution and communal labour are required as a way of demonstrating community commitment to see to it that the project succeeds.

On the question of project financing, respondents explained that the level of participation had not improved due to high poverty levels coupled with harsh economic conditions and ever increasing household needs. Yet another group of respondents explained that similar projects are executed by government and other agencies free of charge hence they do not see why they should contribute for the provision of a facility they consider is the responsibility of the Assembly to provide. From the discussions so far it is obvious that the MPP approach had less impact on community participation.

Table 5.6 Level of Community Participation and Involvement related Indicators (%)

Community Participation Indicators	Level of Improvement		
	No*	Moderate*	High*
Project initiation	72.7	18.2	9.1
Project planning	77	20	3
Project financing	63.6	25.5	10.9
Provision of labour	13.3	53.9	32.7
Project monitoring	72.7	18.2	9.1
Project maintenance	72.7	18.2	9.1
*As defined in chapter three			

Source: Author's Field Survey May, 2009

vii) *Summary of the Main Indicators*

Table 5.7 presents a summary of the opinions of households on how far the projects implemented under the MPP in the communities impacted on their living condition. An analysis of table 5.7 indicates that education had the most improvement in project communities (71.8 per cent) compared with the situation in non-project communities (48.5), this was immediately followed by health where an average of 53.1 respondents in project communities felt that the project has enhanced the health status of the people

compared with 33.9 per cent in the case of non-project communities. It is important to state that it has been observed that education and health policies of government and other development partner programmes and projects complemented MPP's interventions.

Also, observed from Table 5.7 is that the least improved indicator is the local economy with 31.7 per cent of respondents from project communities indicating that the project had brought some improvement compared with only 19.7 per cent from non-project community had improved even without any intervention. Following local economy from the bottom is food security with a similar pattern of responses from both project and non-project communities.

Table 5.7 Average Level of Improvement in the Main Indicators (%)

Summary of Key Indicators	Improvement							
	No		Moderate		High		Mod + High	
	WP	WOP	WP	WOP	WP	WOP	WP	WOP
Local economy	68.4	80.9	23.9	17.8	7.8	1.3	31.7	19.1
Education	28.3	51.6	23.2	26.7	48.6	21.8	71.8	48.5
Health	46.8	66.1	29.2	27.8	23.9	6.1	53.1	33.9
Food security	57.7	72.2	31.5	18.9	10.9	8.9	42.4	27.8
Empowerment of women	50.3	62.8	34.9	28.9	14.9	8.3	49.8	37.2
Community Participation	62		25.7		12.3		38	

Source: Author's Field Survey May, 2009

A critical examination of Table 5.7 indicates that the indicators that were closely related to infrastructure provision were deemed to have significantly improved with the interventions of MPP compared with the indicators that were not or that were remotely related to infrastructure provision. This is understandable because the MPP is mainly an infrastructural provision project.

Finally, Table 5.7 indicates that comparing the performance of all the indicators in project communities and non-project communities one would observe that the level of improvement in project communities is relatively better than the situation in non project communities. This gives the indication that holding all other things constant the project communities are better off than the non-project communities.

b) Community Level

At the community level the perceptions and opinions of various groups of persons including community gatekeepers (Assemblyman, women's leader ('Magazia'), Unit committee chairman, CIC chairman, and a community elder), women/women groups and some minority groups (fulanis) were sought on how far the projects implemented under the MPP in their communities have impacted on their living conditions.

Generally, all the groups including the focus group meetings seem to share in the views and perception expressed by respondents at the household level as discussed above. The only addition to those perceptions was the concept of communal poverty which was related to infrastructure and service provision; hence a community may be deemed as poor when it lacks key infrastructure for the entire community for example, water points, schools, clinics, roads, sanitary facilities and lack of security. A comparative analysis of opinions from both project communities and non-project communities revealed that the stock of socioeconomic infrastructure like schools, clinics, water and sanitation facilities, market stores/stalls, feeder roads and culverts have increased in project communities compared with the situation in non-project communities.

An additional point raised by community gatekeepers and during the focus group discussion on the question of community participation that needs to be considered is the fact that after the project had been initiated and planned by the district authorities, the District Assembly only involve the community in determining where to site the project as a means of getting access to land to facilitate the execution of the project. On how one becomes a member of the CIC, respondents explained that membership of the CIC is subject to the determination of the district authorities and power brokers in the community.

c) District Level

An interaction with District Implementing Committees (DIC) revealed that the project had contributed immensely to poverty reduction through massive provision of socioeconomic infrastructure thereby enhancing access to social services such as education, primary health care services, safe drinking water and sanitation. These basic social and socio-economic infrastructure more or less serve as a form of income subsidies or 'social wages' for the rural poor as it raises their level of living.

On the issue of the level of community participation officials of the District Assemblies explained that the projects were organised and supervised by the CIC in the communities. They added that membership of the CIC was determined by the communities with some assistance from the District Assembly to ensure that CIC reflects the standard composition prescribed in the guidelines of the 5th MPP. However, the assembly officials noted that generally communities ignore their responsibilities under the MPP, which requires that communities contributed 25 per cent of the total project cost either in cash or in kind. As a result of this the Assembly ends up providing a greater proportion of the communities' contribution to ensure that the project succeeds.

Clearly, from the above submissions members of the DIC, DPCU and some personnel of District Assembly it became apparent that the districts had no monitoring system in place to track the impact of the projects implemented under the MPP on the living conditions of the people. A follow up to validate this suspicion revealed that the districts merely kept records on number of projects executed and are in use. This was to enable beneficiary District Assemblies report to the national MPMU and the financiers of the programme (the European Union).

d) Zonal/Regional Level

Data from the MPMU revealed that under the 5th MPP, the Northern Region (covering all the 13 districts) benefited from a total of 355 projects. Appendix Table A5.1 is a summary of all micro-projects executed in the Northern Region under the 5th MPP. The table indicates that 78.0 per cent of all the projects executed are social infrastructure, and 22.0 per cent are economic related infrastructure. Apart from the provision of feeder roads and markets, there are no other direct project interventions to help boost the agricultural sector. Considering that Ghana is predominantly an agricultural country with over 70 per cent of its rural population engaged in agriculture, the sector has not benefited much from the MPP interventions. This according to Ahadzie (2002) lends support to Nsiah Gyabaah's assertion that a greater portion of the MPP 2nd, 3rd and 4th programmes went into construction related activities instead of promoting direct productive activities.

Discussions with staff of the Zonal Micro-Project Management Unit indicated that the construction industry benefited tremendously from the MPP and government's decentralisation programme. The staff explained that the decision to award government

contracts at the district level itself means local contractors who are normally registered with the District Assemblies have the chance of getting jobs in the district. This created a job cycle for construction workers, material suppliers and food vendors who set up local canteens at construction site.

The interviewees noted that although the Northern Region is believed to be deprived, there are over 429 registered building contractors and artisans currently operating in the region (Ministry of Works and Housing Classification of Building Contractors, 1998). Though there is no evidence to support that all 429 registered contractors are directly involved in construction, there is no doubt that those who win contracts from the District Assembly are modestly helping in creating jobs and thus improving living standards at the district level and for that matter the region as a whole.

Again the interviewees pointed out that the use of the MPP to strengthen the decentralisation process has also contributed modestly. Through the MPP, local artisans (especially masons, plumbers, carpenters) have earned income and also acquired new skills thus enhancing their capacity. The MPP has also demonstrated that communities are willing to take control of improving their living standards if given the necessary support.

It was found out from management that the Zonal Micro-Project Management Unit had not instituted any poverty reduction monitoring and evaluation system to assess periodically the extent to which projects implemented under the MPP are impacting on the living conditions of people. It was further revealed that the monitoring systems in place was merely to track the period when a project was awarded on contract to when it was completed and handed over to the beneficiary community through the District Assembly.

5.4 CHALLENGES OF THE MPP

The third objective of this study is to identify some of the key challenges of the MPP's efforts at poverty reduction. This section is an attempt to identify some of these challenges. The main challenges are then discussed.

One of the biggest challenges of the MPP's efforts at poverty reduction according to the Zonal and District Co-ordinators of MPP has been the undue delays in the release of funds

to facilitate timely execution of project. These delays have resulted in generating some mistrust between project beneficiary communities and the project co-ordinating bodies.

Another challenge is how apathetic beneficiary communities are towards project execution. This had a negative impact on the success of projects. Under the MPP approach beneficiaries are expected to be involved in project selection and financing through contributing a quarter of the total project cost in cash or by way of providing communal labour and provision of land as well as other local materials such as sand, stones and water.

More so, the high poverty levels in the Northern Region is another challenge as most communities are unable to contribute a quarter of the total project cost and even where communities are willing to contribute it takes a long time to mobilise these contributions thus unduly delaying project execution. To forestall such a problem District Assemblies mostly take up the community's portion of the project cost. This turns to defeat the key objective of the MPP which seeks to develop a sense of ownership among beneficiaries thereby ensuring project's sustainability.

Furthermore, timing of project initiation and implementation has been quite problematic in most instances. This according to the programme co-ordinators is partly a result of the late release of funds from project financiers with schedule of implementation that fails to factor in the schedules of beneficiary communities especially during the farming seasons. Thus defeating the participatory planning principle of the MPP as most beneficiary communities will rather pay attention to their farms at the expense of participating in the project planning and execution.

Finally, programme beneficiaries (86.0 per cent) argued that the range of project choices are limited under the MPP implying that the areas of intervention under the MPP are predetermined; hence all that is left is for interested communities to pick from a range of projects available. This they explained results in projects failing to respond to the felt needs on the ground.

5.5 SUMMARY AND CONCLUSION

The analysis so far brought three critical issues to the fore. One, it has been made clear that the MPP is basically an infrastructure provision programme, hence its impact on poverty is mainly access related rather than quality of services. Two, the analysis shows that with the right package of complementary policies and programmes by government and other stakeholders the interventions of MPP would have greater impact as seen in education and health which saw a dramatic improvement as a result of complementary government policies. Three, the research also revealed that effective monitoring and evaluations systems are required to assess the impact of the project on poverty reduction. It could be concluded from the foregoing base on the ‘with’ and ‘without’ comparative analysis approach that the MPP has contributed to poverty reduction in the region through improving access to social and economic services as a result of the social and socio-economic infrastructural facilities it provided.

CHAPTER SIX

SUMMARY OF KEY FINDINGS, RECOMMENDATIONS AND CONCLUSION

6.1 INTRODUCTION

Following the presentations and discussions of the results from the field in chapter four, this section presents a summary and synthesis of key findings from the study, the recommendations and the conclusion drawn based on the results of the study.

6.2 SUMMARY OF KEY FINDINGS

This section summarises the key findings of the study as regards; how the MPP fits into national and district poverty reduction programmes; the contribution of the MPP to poverty reduction in the Northern Region; and finally the key challenges encountered by MPP in its effort at contributing to poverty reduction.

6.2.1 The MPP and how it fits into the National Poverty Reduction Framework

From the analysis it was found that the MPP was compatible with both the national poverty reduction framework and the various DMTDPs of the sampled districts. The areas of intervention of the MPP coincided with government's medium term priorities under the GPRS I including infrastructural development and modernised agriculture based on rural development to enhance increased production and employment; increased investment in education, health, and sanitation to enhance delivery of basic social services.

6.2.2 Contribution of the MPP to Poverty Reduction in the Northern Region

The major findings under the contribution of the MPP included amongst others the following:

a. The 'with' and 'without' approach indicates that the MPP contributed to poverty reduction in the region

The results of the study revealed that the MPP has contributed to the reduction of access related poverty through the provision of socioeconomic infrastructure like schools, clinics,

culverts to link up communities and also open up production areas to marketing centres, markets and more.

The ‘with’ and ‘without’ approach also indicates that the project has also contributed significantly to the reduction of communal poverty. Communal poverty here is related to the ‘lack of key infrastructure for an entire community’, for example schools, clinics, markets, roads and more. From the results of the study it was obvious the MPP has helped increase the stock of basic social and economic infrastructure in all project communities and the region.

b. The ‘with and ‘without’ approach indicated that MPP’s impact on poverty reduction was constrained by the nature of infrastructural investment

The projects impacts were found to be higher on physical access rather than quality of services provided. As an infrastructural provision project it focuses on increasing the availability of quality infrastructure and reducing distances by constructing new infrastructure and supporting-facilities (like staff houses) or by rehabilitating old ones.

c. The MPP lacked monitoring and evaluation systems that could track the impact of the project on poverty reduction

The study also revealed that the district and regional levels lacked comprehensive monitoring and evaluation systems that would enable them track the actual contribution of MPP to poverty reduction. This affected the adequacy and quality of the data base of the districts and region on the contribution of the MPP to poverty reduction.

d. The ‘with’ and without’ approach indicate that MPP had a limited effect on community participation.

From the result of the study it was found out that the MPP’s influence on community participation was very minimal. This manifested in the fact that project initiation, planning and implementation were top-down rather than bottom-up as prescribed under the key principles of the MPP. Again the study revealed that the communities were only informed about the plan to execute a project and what the responsibilities of the communities were under the project.

e. The MPP Intervention Targeted Provision of Public rather than Private Goods

It has also been found that the MPP interventions are mainly limited to provision of public goods like provision of schools, clinic, markets, roads and sanitary facilities.

6.2.3 Challenges of the MPP

The following were found to be the major challenges faced by the MPP in its efforts at helping to reduce poverty in the Northern Region;

- a. There were delays in the release of funds for project implementation
- b. The beneficiaries were found to be apathetic towards projects and not willing to contribute their share of the total project cost
- c. The timing of project execution was also found to be problematic as it coincides with periods that beneficiary communities are quite busy on their farms.
- d. Finally, the range of interventions was found to be limited and only related to the provision of social and socio-economic infrastructural facilities.

6.3 RECOMMENDATIONS

The focus of this section is to make policy recommendations that would enhance the effectiveness of project interventions in reducing poverty as well as help improve the MPP's capability to deal with its challenges in a manner that will maximise project benefits. The possible policy intervention areas that could help improve the MPP's interventions and poverty reduction effort in the Northern Region include the following:

a. Review the Project design

The range of project interventions under the MPP should not be limited to infrastructure provision. Where it is limited, there should be a complementary project responding to other developmental needs. Furthermore, the project interventions should not be limited to the provision of public goods only. The MPP should also consider provision of private goods like provision of shea butter and ground nut oil extraction equipments for various women groups. Again beneficiary participation should be considered as the most important prerequisite for any intervention under the MPP. Finally, beneficiary communities should be given the free hand to constitute the CIC and the membership to the committee should not be ascribed to the position one holds in the community or the DA.

b. Enhance Community participation

The MPP should develop approaches which encourage effective community participation. This must be based on the notion of empowering the people, now not as consumers or customers, but as citizens who must act directly in the process of developing their locality. They must, for example, be involved in defining their own development needs, be at the centre of planning decisions and translating those decisions into action.

c. Establish Monitoring and evaluation Systems

The MPP should establish monitoring and evaluation systems to ensure that projects focus on their original objectives of improving the availability and access to quality social service as well as improving the living conditions of beneficiary communities through poverty reduction.

The monitoring system should be an internal tool capable of continuously delivering structured information concerning the actual status of the project to all persons involved in the implementation process, including the targeted groups and beneficiaries. It should be an ongoing system that is capable of checking to ensure that the correct procedures, practices, timeframe, resources and targets are followed and achieved. The monitoring system should focus on the performance and impact of the project. It should also indicate the levels of monitoring and who would be responsible for each level.

The evaluation system on the other hand should be an external tool for periodic assessment of the relevance, performance, efficiency and impact of the project in the context of its stated objectives. The purpose of the evaluation system should be on establishing the strengths of MPP, pinpointing the shortcomings and their causes, and proposing suitable recommendations. It is recommended that each edition of MPP is evaluated at the mid-term to help improve the project performance during the rest of the implementation period, at the end of the project to assess the performance of the project and help identify successor projects and after the project (ex-post) undertaken a few years after the project to assess the project's impact on poverty reduction.

d. Government should Provide Complementary Programmes and projects

This recommendation is based on the premise that one project cannot adequately address all the problems of poverty in a region. The MPP is found to be an infrastructure related

project which seeks to increase the stock of key infrastructure facilities and also improve access to social services. However, the functionality of infrastructure depends on certain factors, including government provision of necessary inputs (staff and equipment) and organisation of local communities for the management of the infrastructural facilities provided.

For enhanced impact of the MPP, complementary government programmes and projects are required to ensure that the infrastructural facilities provided under the MPP are functional. This has been clearly demonstrated in the analysis where government policy of improving access to basic education and health services complemented the interventions of MPP resulting into a significant increase in physical access to education and health services in project communities.

Furthermore, the various DAs and decentralised agencies like the District Directorates of Education, Health and Agriculture among others should be encouraged to provide the complementary support required to enhance the impact of the MPP. It is also recommended that measures be put in place to ensure that interventions by other development partners are complementary to each other rather than duplicating each other to ensure the desired project effect of enhancing the living conditions of beneficiary communities.

e. Suggested recommendation from respondents

It is clear from the foregoing that the respondents are aware of the poverty situation in their respective communities and are prepared to help in the fight to improve their living conditions in the medium to long term. It was suggested that the MPP should be more transparent and responsive to local needs rather than presenting to communities a list of projects to choose from. Respondents further identified some specific areas including support for crop and animal farming, groundnut oil processing and shea butter processing, for consideration by management of the MPP for intervention as they felt those areas will have a greater effect on poverty reduction.

6.4 CONCLUSION

This study has assessed the poverty reduction efforts in Ghana with particular emphasis on the experience of the European Union MPP in the Northern Region. Issues investigated were the extent to which the MPP is compatible and consistent with national and local poverty reduction initiatives, the contribution of the MPP to poverty reduction in the Northern region and finally an identification of some of the key challenges that inhibit the MPP's effort at poverty reduction.

It was realized that MPP's interventions were quite in line with the traditional and contemporary notions of the developmentalist school which advocates that social services such as free education, public health projects, food subsidies, nutritional supplements and the provision of safe drinking water and sanitation are also supported not only because they raise the productivity of the poor but because, as income subsidies or 'social wages', they raise their level of living. It is for this reason that proponents of the developmental school claim that their welfarism is not based primarily on an altruistic concern for the underprivileged but on sound economic reasoning.

The theoretical model discussed in chapter two is relevant to understanding the MPP's approach and thus its contribution to poverty reduction. In particular the developmentalist believe that in order to stimulate economic growth investment in human as well as physical capital are required, and many have justified expenditure on social services such as health and education on this ground. They argue also that governments should intervene in the economy both to encourage and direct economic growth through planning and other measures (Margaret and Midgley, 1982).

Numerous benefits were cited as emanating from the project based on the results of the 'with' and 'without' approached. They include improved access to education; health services; and general access to key socio-economic infrastructure. A cursory look at the above issues gives an indication that because the focus of the projects' interventions are infrastructure related the resultant improvement are in areas that relate directly with infrastructure.

Finally, the study has demonstrated that social infrastructure are not ends in themselves but rather a means to an end, implying that the infrastructure themselves do not reduce poverty but rather the resultant improvement in access to quality social services is the bane of the issue. This clearly brings to the fore the need for collaboration with state and non-state agencies in the fight against the scourge of poverty to ensure that social infrastructure are made functional and effectively utilised.

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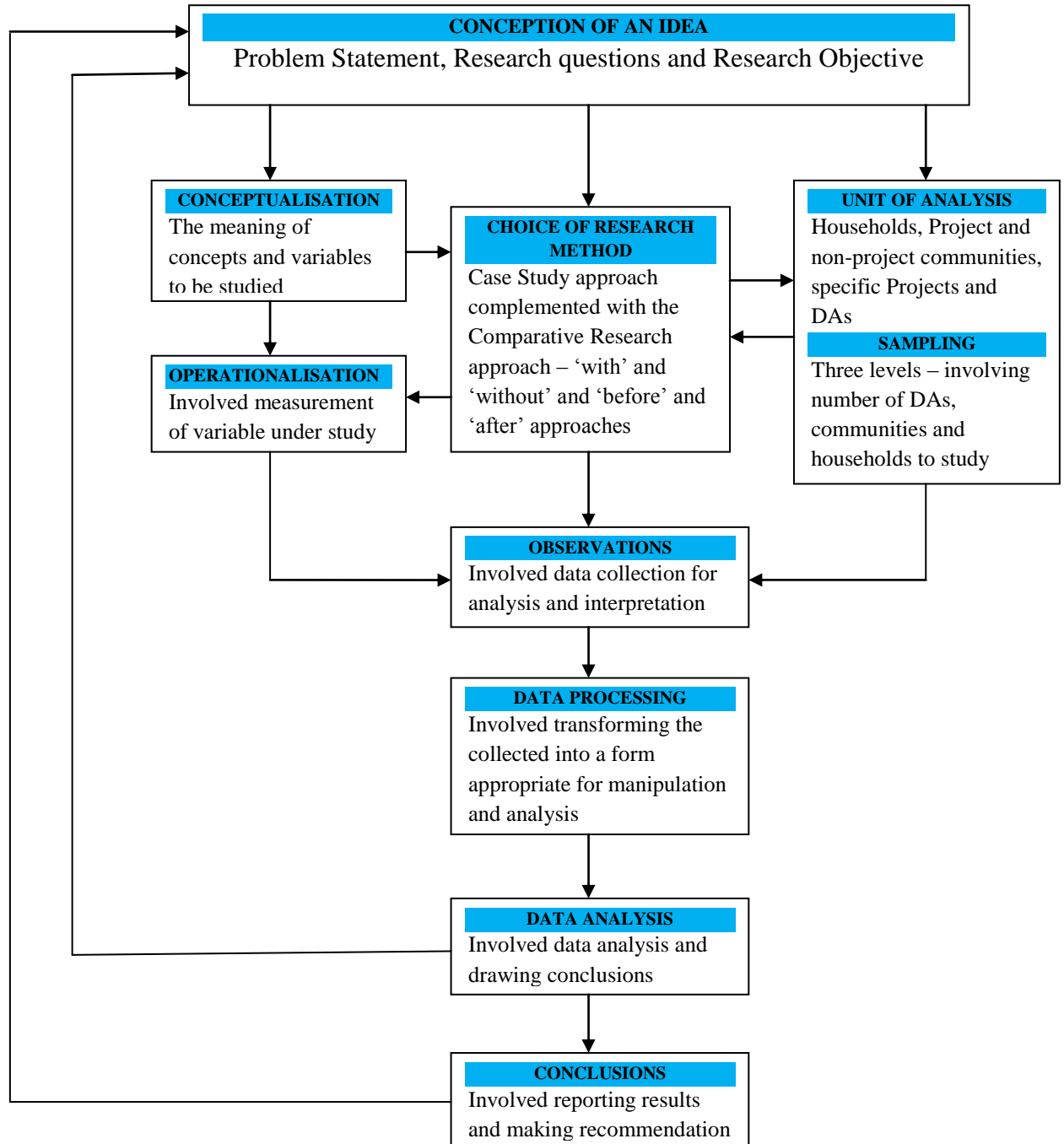
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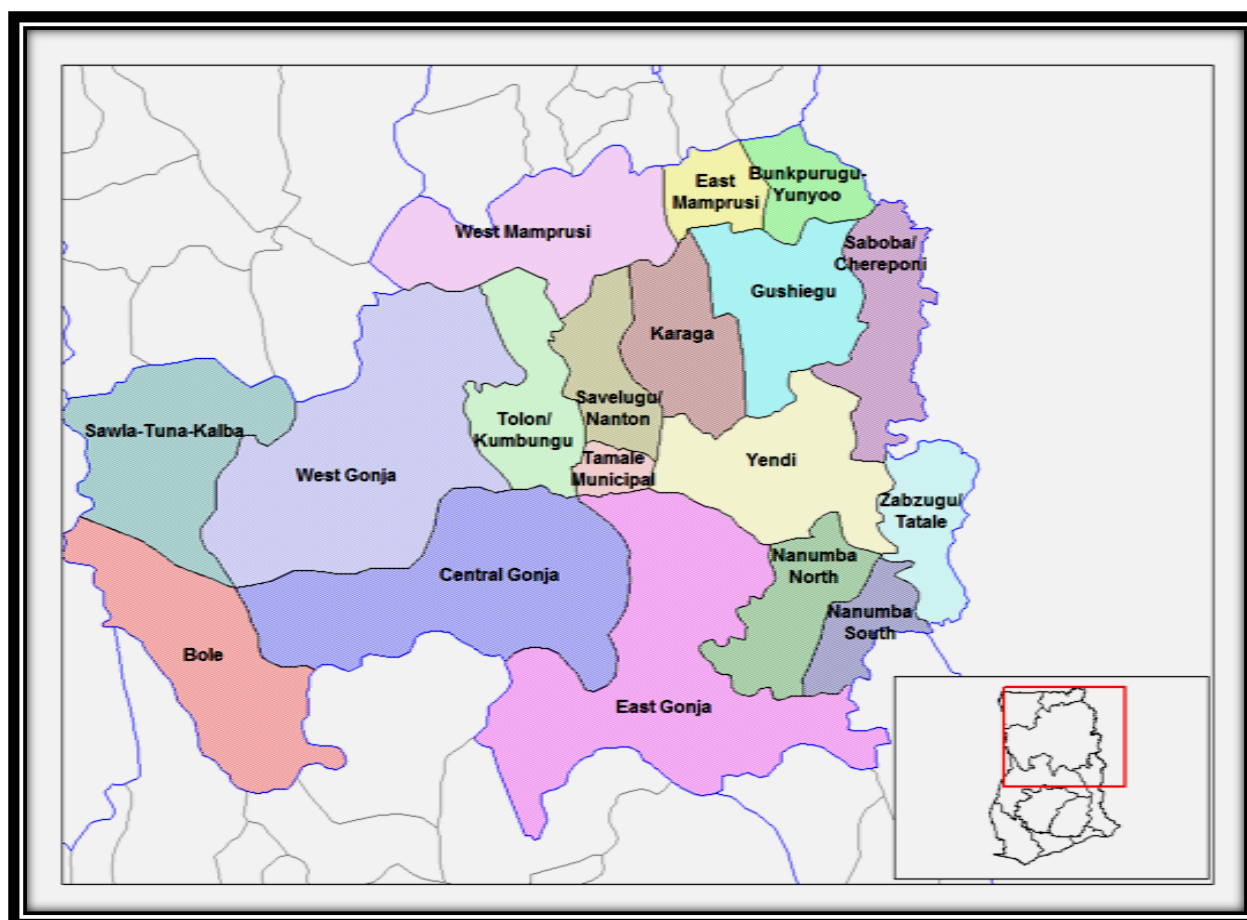
APPENDICES

Appendix 1: Schematic Presentation of the Research Process



Source: Student's Construct based on Babbie Earl (2007)

Appendix 2: Northern Regional Map with an Insert of the Northern Region in the National Context (not Drawn to Scale)



Source: Adopted from Wikipedia (2006) the Free Encyclopedia

Appendix 3: Operational Definitions of the Key Indicators of the Study

Key Indicators	Operational Definitions
<u>Economic Related Indicators:</u>	
Employment generation:	Denotes the jobs generated (directly and indirectly) as a result of interventions of the MPP
Income levels:	Denotes employees compensation either in cash/imputed in kind or income derived either explicitly from the sale of crops or livestock/implicitly from the consumption of home grown agriculture produce or all incomes from own account activities other than those that are agriculture based.
Consumption levels:	Denotes expenditure of food, housing expenditure and other expenditure like expenditure on clothing, footwear, household management, etc.
Feeder road (inter-community) connectivity:	Denotes the ease with which one travels from a given location(s) to another to access a given facility or a service. This is measured in terms of the time spent travelling between the two locations, which in turn depends on distance and the rout condition.
Access to markets:	Denotes the extent to which households are close to or how easily they can travel from their location to the market square. This is measured in terms of the time spent travelling between the two locations, which in turn depends on distance and the rout condition.
<u>Education Related indicators:</u>	
Enrolment:	Denotes the extent to which children of school aging age in a community are enrolled in school.

BECE performance:	Denotes the extent to which JSS 3 students pass the BECE and gain admission into SSS and other related institutions
Physical access:	Denotes the extent to which a school is close to pupils' home and how easily they can move from one to the other. Specifically, consideration is given to: distance travelled; means of transport; time taken to travel between home and school. Physical access here is defined as children who reside less than 30 minutes from the nearest primary school, not necessarily the one they currently attend (CWIQ, 2003)
Economic access:	This addresses the issue of schools that may be inaccessible to some children because of financial scarcity. Schooling is tuition-free in Ghana, but there are other elements of finance that may affect schooling. These are PTA levies, school uniform, transport cost, food and other related items.
Cultural access:	This addresses the issue of equality of opportunity for both the boy and the girl child to schooling

Health Related indicators:

Physical access:	Denotes the extent to which a health facility is close to peoples' home and how easily they can move from one to the other. Specifically, consideration is given to: distance travelled; means of transport; time taken to travel between home and a health facility. Access to health service is classified as good for persons who live less than 30 minutes away from a health facility
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Economic access:	The current National Health Insurance Scheme is free to the extent that individuals pay their annual premiums. Hence economic access depends on; ability to pay annual premium; distance travelled; and cost of travelling to the nearest health facility.
Turn-around time:	Denotes the average duration an individual spends on arriving at the health facility to the time the person is attended to and leaves the facility. This depends on the attendance level at the facility, the number of health personnel at post and to some extent on the attitude of health personnel to patience.
Nature of service provided	Denotes the quality of service provided including patient-health workers relationship

Food Security Related indicators:

Farm outputs levels:	Denotes annual yield from farm
Adequacy of output:	Denotes whether the farm yield could sustain the household food needs all year round and other related household needs
Marketing/distribution:	Denotes the ease with which farm produce are moved from the farm to the marketing centres
Access to modern production methods:	Denotes access to extension services, improved seeds, and mechanised methods of production.

Empowerment (Women) related indicators:

Economic participation:	Denotes women's right to entitlements like owning personal assets such as land and capital
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Political Participation:	Denotes women's involvement in local political activities
Decision making:	Denotes women's involvement in development related decision making
Power over economic resources:	Denotes women's right over land, capital and labour

Appendix 4: Background Data on Surveyed Households

Table A4.1 Age Distribution of Respondents

Age of respondent	CWP		CWOP	
	No.	%	No.	%
30 - 39	92	55.4	30	66.7
40 - 49	56	33.7	5	11.1
50 -59	7	4.2	6	13.3
60 - 69	7	4.2	2	4.4
70 - 79	4	2.4	2	4.4
Total	166	100	45	100
Mean Age	40.9		41.4	

Source: Author's Field Survey, 2009

Table A4.2 Educational Attainment of Respondents

Level of education	CWP		CWOP	
	No.	%	No.	%
Never been to school	82	49.4	24	53.3
Up to Primary	55	33.1	12	26.7
Up to Middle/JSS	23	13.9	5	11.1
Up to Second cycle	6	3.6	4	8.9
Total	166	100	45	100

Source: Author's Field Survey, 2009

Table A4.3 Number of Wives per Respondent

Number of Wives	CWP		CWOP	
	No.	%	No.	%
One wife	31	18.7	4	8.9
Two Wives	44	26.5	12	26.7
Three Wives	44	26.5	19	42.2
Four Wives	39	23.5	8	17.8
Five wives	8	4.8	2	4.4
Total	166	100	45	100
Mean No. of Wives	2.7		3.2	

Source: Author's Field Survey, 2009

Table A4.4 Number of Children/Dependent per Respondent

Number of Children/ Dependents	CWP		CWOP	
	No.	%	No.	%
1 to 3	15	9.0	4	8.9
4 to 6	25	15.1	12	26.7
7 to 9	98	59.0	19	42.2
10 to 12	22	13.3	8	17.8
13 to 15	6	3.6	2	4.4
Total	166	100	45	100
Mean No. of Chn./Dep't	7.6		7.5	

Source: Author's Field Survey, 2009

Table A4.5 Respondents Occupational Status

Occupation of respondent	CWP		CWOP	
	No.	%	No.	%
Crop farming	61	36.7	15	33.3
livestock rearing	41	24.7	12	26.7
Trading	24	14.5	6	13.3
Weaving	15	9.0	5	11.1
Masons	10	6.0	4	8.9
Carpenters	15	9.0	3	6.7
Total	166	100	45	100

Source: Author's Field Survey, 2009

Table A4.6 Occupation of Respondent's Wife

Occupation of respondent's wives	CWP		CWOP	
	No.	%	No.	%
Crop farming	12	7.2	5	11.1
livestock rearing	15	9.0	8	17.8
Trading	18	10.8	6	13.3
Groundnut oil processing	61	36.7	12	26.7
Shea butter processing	60	36.1	14	31.1
Total	166	100	45	100

Source: Author's Field Survey, 2009

Appendix 5: Interventions under the 5th MPP in the Northern Region and Sampled Districts and Communities

Table A5.1: Distribution of MPP's Interventions in the Northern Region under the 5th MPP

Area of Intervention	Project Type	Number	Percentage
Education	Primary Schools	87	24.5
	JSS	16	4.5
	Teacher's Quarters	29	8.2
Health	Rural Clinics	22	6.2
	Nurses Quarters	26	7.3
Water and Sanitation	Borehole	42	11.8
	KVIP latrine	55	15.5
Economic	Market Stalls/Stores	34	9.6
	Butchers Shops	12	3.4
	Warehouses	13	3.7
	Culverts	19	5.4
Total		355	100

Source: Compiled from Zonal MPMU Records May, 2009

Table A5.2 Number of Micro-Projects per Sampled District

Infrastructure Provided	Sampled District and Number of Project			
	SND	WMD	TKD	all
Three unit classroom block	5	6	1	12
Teachers quarters	2	5	2	9
Clinic	1	0	0	1
Nurses quarters	1	0	0	1
Toilet facilities	0	5	4	9
Market stalls/stores	4	2	0	6
Warehouse	0	1	1	2
Culvert	1	2	3	6
Total	14	21	11	46
SND: Savelugu-Nanton District, WMD: West Manprusi District TKD: Tolon-Kumbungu District				

Source: Compiled from Surveyed Districts, 2009

Table A5.3 List of Micro-Project in Sampled Communities

Districts	Sampled Communities	Type of project	Number of projects
Savelugu-Nanton	Tarkpaa	3-unit classroom block	1
	Pong-Tamale	A clinic and 3-unit classroom block	2
	Zoggu-silimboma*	No MPP Intervention	0
West Manprusi	Bulibia	Market stalls	1
	Tampulungu	Culvert	1
	Banawa*	No MPP intervention	0
Tolon-Kumbungu	Nyekpala	3-unit classroom block, Teachers quarters and a Ten seater KVIP laterin	3
	Nwodua Zoonayili	Culvert	2
	Lingboma-Gunda*	No MPP Intervention	0

Source: Author's Field Survey, 2009 *Non-project communities

Appendix 6: Primary Allocation Structure of the MPP

Table A6.1 Primary Allocation Structure of the MPP

Areas of Interventions	Percentage
Education	25
Water and Sanitation	18
Health	13
Other social infrastructure	10
Economic Infrastructure (Including transport)	10
Income Generating Activities	10
Capacity building/Training	7
Other (rural development and environment	7
Total	100

Appendix 7a: An Interview Schedule for the Micro-Projects Management Unit, the Northern Zonal Office

Introduction

This is a study being conducted as a partial fulfilment of the requirement for the degree of Masters of Science in Development Policy and Planning on: *Poverty Reduction Efforts in Ghana: the Experience of the European Union Micro-Projects Programme (MPP) in the Northern Zone*. The northern zone has been selected as the case study area; I am therefore appealing to you to answer the following questions as candidly as possible.

A Guide for Completing the Interview Schedule

Where alternative responses have been provided ring the code letter/number that applies in your case only. For questions without alternatives please write your response in the space provided.

Thank you in anticipation of your usual cooperation.

- 1 Date of the interview
- 2 Name of respondent
- 3 Position of respondent in the organisation
- 4 What is the purpose or goal of the EU MPP?
- 5 What are the specific objectives of the EU MPP?
- 6 Are the EU MPP's objectives compatible with the DMTDP's objectives? Yes/No
 - a. If yes, specify how
 - b. If no, why?
- 7 Complete the tables below with the appropriate information:

Fifth Micro-Projects Programme			
Objectives	Target	Achievement	Remark

- 8 Indicate the specific components of the 5th MPP implemented in this region

9 Please, provide a detail list of project interventions under the 5th MPP as indicated in the tables below

Fifth Micro-Projects Programme Intervention				
Specific project intervention	Beneficiary District Assemblies	Extent of completion	Current condition of facility	Population served

10 Please, indicate the total expenditure expended per year on the EU micro-projects in the region in the tables below:

Fifth EU Micro-Project Programme			
Year	Planned Expenditure	Actual Expenditure	Remark

11 In your estimation, has the EU MPP helped in any way towards poverty reduction in region? Yes/No

- If yes, specify how
- If yes, also indicate the aspect of poverty the EU MPP has helped reduce
- If no, indicate why

12 Which of the projects really contributed to poverty reduction in this district? Please list them in order of priority?

- Please, explain why you consider your list of projects above as projects that really contributed to poverty reduction

13 Generally, how do you assess the extent of poverty reduction?

14 What are some of the challenges associated with implementation of the EU micro-projects in this region?

Appendix 7b: An Interview Schedule for District Assembly

Introduction

This is a study being conducted as a partial fulfilment of the requirement for the degree of Masters of Science in Development Policy and Planning on: *Poverty Reduction Efforts in Ghana: the Experience of the European Union Micro-Projects Programme (MPP) in the Northern Zone*. Your district has been selected as one of the districts for this study; I am therefore appealing to you to answer the following questions as candidly as possible.

A Guide for Completing the Interview Schedule

Where alternative responses have been provided ring the code letter/number that applies in your case only. For questions without alternatives please write your response in the space provided.

Thank you in anticipation of your usual cooperation.

- 1 Date of the interview
- 2 Name of respondent
- 3 Mobile phone number of respondent
- 4 Position of respondent in the organisation
- 5 Since when has the district been implementing EU micro-projects programme?
- 6 What are the specific objectives of the EU MPP?
- 7 Are the EU MPP's objectives compatible with the DMTDP's objectives? Yes/No
 - c. If yes, specify how
 - d. If no, why?
- 8 Did this district benefit from any or all of the following, indicate by ticking/circling what apply in your case:
 - a. Fifth Micro-Projects Programme
 - b. Sixth Micro-Projects Programme
- 9 Indicate the specific components of the 5th MPP implemented in this district

10 Please, provide a detail list of project interventions under the 4th MPP as indicated in the tables below:

Fourth Micro-Projects Programme Intervention				
Specific project intervention	Beneficiary communities	Extent of completion	Current condition	Population served

11 Please, indicate the total contribution per year in monetary terms by each of the stakeholders of EU projects in the tables below:

Fourth Micro-Project Programme				
Year	Stakeholder Contribution Towards Project Implementation			
	European Union	Government of Ghana	District Assembly	Community

12 Please, complete the table below with the relevant information:

Year	Actual Amount Expended on Poverty Reduction per Year under the GPRS I	Total expenditure of the District Assembly per Year under the GPRS I
2003		
2004		
2005		

13 Please, complete the table below with the relevant information:

Year	Actual Amount Expended on Poverty Reduction per Year under the GPRS II	Total expenditure of the District Assembly per Year under the GPRS II
2006		
2007		
2008		

14 Please complete the following table by;

(a) Indicating with a tick (✓) the level of changes that have occurred as a result of the European Union 5th MPP's interventions.

(b) Indicate with a statement the way in which the change have occurred.

Type	Indicator	Level of Changes			In Which Way?
		No	Mode rate	high	
Economic	Employment				
	Income levels				
	Consumption levels				
	Feeder road connectivity				
	Access to markets				
Education	Enrolment				
	BECE performance				
	Physical access				
	Economic access				
	Cultural access				
Health	Physical access				
	Economic access				
	Turn time				
	Nature of service provided				
Food security	Farm output levels				
	Adequacy of output				
	Marketing/Distribution				
	Access to modern production methods				
Empowerment of women	Economic participation				
	Political participation				
	Decision making				
	Power over economic resources				

- 15 In your estimation, has the EU MPP helped in any way towards poverty reduction in this district? Yes/No
- d. If yes, specify how
 - e. If yes, also indicate the aspect of poverty the EU MPP has helped reduce
 - f. If no, indicate why
- 16 Which of the projects really contributed to poverty reduction in this district? Please list them in order of priority?
- b. Please, explain why you consider your list of projects above as projects that really contributed to poverty reduction
- 17 Generally, how do you assess the extent of poverty reduction?
- 18 What are some of the challenges associated with implementation of the EU micro-projects?

Appendix 7c: Household Interview Guide for Project Communities

General Background

1. Date of the interview
2. Name of respondent
3. Mobile phone number if any
4. Age of the respondent
5. Sex of respondent, indicate whether male or female
6. Level of education of the respondent
7. Marital status of respondent
8. If married, also indicate whether polygamy/monogamy
9. If polygamy, indicate number of wives/rivals
10. Number of children/dependents catered for by respondent
11. Number of children/dependents in school
12. Number of children/dependents earning income
13. Occupation of the respondent
14. Occupation of the respondent's wife/wives

Contribution of the European Union Micro-Projects Programme to Poverty

Reduction

- 15 Have you heard of the EU Micro-Project? Yes/No
 - a. If yes, what in your opinion is EU Micro-Project about?
- 16 How many micro-projects have been implemented in this community?
- 17 What are the specific projects that have been implemented in this community?
- 18 Who are the beneficiaries of the projects in question?
- 19 Have you been involved in any way in the selection of the projects? Yes/No
 - a. If yes, what specifically did you do?
 - b. If no, what are your reasons?

20 Please complete the following table by;

(c) Indicating with a tick (✓) the level of changes that have occurred as the result of the European Union MPP's interventions.

(d) Indicate with a statement the way in which the change have occurred.

Type	Indicator	Level of Changes			In Which Way?
		No	Mode rate	high	
Economic	Employment				
	Income levels				
	Consumption levels				
	Feeder road connectivity				
	Access to markets				
Education	Enrolment				
	BECE performance				
	Physical access				
	Economic access				
	Cultural access				
Health	Physical access				
	Economic access				
	Turn time				
	Nature of service provided				
Food security	Farm output levels				
	Adequacy of output				
	Marketing/Distribution				
	Access to modern production methods				
Empowerment of women	Economic participation				
	Political participation				
	Decision making				
	Power over economic resources				
Community participation	Project initiation				
	Project planning				

	Project financing				
	Provision of labour				
	Project monitoring				
	Project maintenance				

21 Have the projects been helpful to your household? Yes/No

a. If yes, specify how helpful it has been to your household?

b. If no, what are your reasons?

22 Have the project helped in any way to reduce poverty in this community? Yes/No

a. If yes, specify how

b. If no, what are your reasons?

23 What do you suggest need to be done differently under the EU micro-project to deal with the problem of poverty in poverty in this community?

24 How will you describe your living condition before the interventions of the EU micro-projects?

25 How will you describe your living condition after the EU micro-project interventions?

Appendix 7d: A Focus Group Discussion Guide for Women in Project Communities

Date

Name of Community

Have you heard of the EU Micro-Project?

What in your opinion is EU Micro-Project about?

How many EU micro-projects have been implemented in this community?

What are the specific projects that have been implemented in this community?

Who are the beneficiaries of the projects in question?

Have you been involved in any way in the selection of the projects?

What specifically did you do?

If response is no, find out why they were not involved?

Have the projects been helpful in any way to the development of this community?

How helpful have the projects been to the development of this community?

If response is no, find out what the reasons?

What do you suggest need to be done differently under the EU micro-project to deal with the problem of poverty in this community?

How will you describe your living condition before the interventions of the EU micro-projects?

How will you describe your living condition with the EU micro-project interventions?

Please complete the following table by;

(a) Indicating with a tick (✓) the level of changes that have occurred as the result of the European Union MPP's interventions.

(b) Indicate with a statement the way in which the change have occurred.

Type	Indicator	Level of Changes			In Which Way?
		No	Mode rate	high	
Economic	Employment				
	Income levels				
	Consumption levels				
	Feeder road connectivity				
	Access to markets				

Education	Enrolment				
	BECE performance				
	Physical access				
	Economic access				
	Cultural access				
Health	Physical access				
	Economic access				
	Turn time				
	Nature of service provided				
Food security	Farm output levels				
	Adequacy of output				
	Marketing/Distribution				
	Access to modern production methods				
Empowerment of women	Economic participation				
	Political participation				
	Decision making				
	Power over economic resources				
Community participation	Project initiation				
	Project planning				
	Project financing				
	Provision of labour				
	Project monitoring				
	Project maintenance				

Appendix 7e: An Interview Guide for Community Gate Keepers in Communities with project

Date:

What is your name?

What is the name of your community?

What is your role in this community?

Have you heard of the EU Micro-Project?

What in your opinion is EU Micro-Project about?

How many EU micro-projects have been implemented in this community?

What are the specific projects that have been implemented in this community?

Who are the beneficiaries of the projects in question?

Have you been involved in any way in the selection of the projects?

What specifically did you do?

If response is no, find out why they were not involved?

Have the projects been helpful in any way to your community?

How helpful have the projects been to your community?

If response is no, find out what the reasons?

What do you suggest need to be done differently under the EU micro-project to deal with the problem of poverty in poverty in this community?

How will you describe your living condition before the interventions of the EU micro-projects?

How will you describe your living condition with the EU micro-project interventions?

Please complete the following table by;

(a) Indicating with a tick (✓) the level of changes that have occurred as the result of the European Union MPP's interventions.

(b) Indicate with a statement the way in which the change have occurred.

Type	Indicator	Level of Changes			In Which Way?
		No	Mode rate	high	
Economic	Employment				
	Income levels				
	Consumption levels				

	Feeder road connectivity				
	Access to markets				
Education	Enrolment				
	BECE performance				
	Physical access				
	Economic access				
	Cultural access				
Health	Physical access				
	Economic access				
	Turn time				
	Nature of service provided				
Food security	Farm output levels				
	Adequacy of output				
	Marketing/Distribution				
	Access to modern production methods				
Empowerment of women	Economic participation				
	Political participation				
	Decision making				
	Power over economic resources				
Community participation	Project initiation				
	Project planning				
	Project financing				
	Provision of labour				
	Project monitoring				
	Project maintenance				

Appendix 7f: Household Interview Guide for Non-Project Communities

- 1 Date of the interview
- 2 Name of respondent
- 3 Mobile phone number if any
- 4 Age of the respondent
- 5 Sex of respondent, indicate whether male or female
- 6 Level of education of the respondent
- 7 Marital status of respondent
- 8 If married, also indicate whether polygamy/monogamy
- 9 If polygamy, indicate number of wives/rivals
- 10 Number of children/dependents catered for by respondent
- 11 Number of children/dependents in school
- 12 Number of children/dependents earning income
- 13 Occupation of the respondent
- 15 Occupation of respondent's wife/wives
- 14 Please complete the following table by;

(e) Indicating with a tick (✓) the level of changes that have occurred in the socioeconomic indicators in the table below

(f) Indicate with a statement the way in which the change have occurred.

Type	Indicator	Level of Changes			In Which Way?
		No	Mode rate	high	
Economic	Employment				
	Income levels				
	Consumption levels				
	Feeder road connectivity				
	Access to markets				
Education	Enrolment				
	BECE performance				
	Physical access				
	Economic access				
	Cultural access				

Health	Physical access				
	Economic access				
	Turn time				
	Nature of service provided				
Food security	Farm output levels				
	Adequacy of output				
	Marketing/Distribution				
	Access to modern production methods				
Empowerment of women	Economic participation				
	Political participation				
	Decision making				
	Power over economic resources				

15 What do you suggest need to be done to facilitate the process of reducing poverty in this community?

Appendix 7g: A Focus Group Discussion Guide for Women in Non-Project Community

Date

Name of Community

Are there any interventions in this community? Yes/No

If response is yes, find out what the specific interventions are.

If response is no, find out why.

Please complete the following table by;

(a) Indicating with a tick (✓) the level of changes that have occurred in the socioeconomic indicators in the table below

(b) Indicate with a statement the way in which the change have occurred.

Type	Indicator	Level of Changes			In Which Way?
		No	Mode rate	high	
Economic	Employment				
	Income levels				
	Consumption levels				
	Feeder road connectivity				
	Access to markets				
Education	Enrolment				
	BECE performance				
	Physical access				
	Economic access				
	Cultural access				
Health	Physical access				
	Economic access				
	Turn time				
	Nature of service provided				
Food security	Farm output levels				
	Adequacy of output				
	Marketing/Distribution				
	Access to modern				

	production methods				
Empowerment of women	Economic participation				
	Political participation				
	Decision making				
	Power over economic resources				

What do you suggest need to be done to facilitate the process of reducing poverty in this community?

Appendix 7h: An Interview Guide for Community Gate Keepers in Non-Project Communities

Date:

What is your name?

What is the name of your community?

What is your role in this community?

Are there any interventions in this community? Yes/No

If response is yes, find out what the specific interventions are.....

If response is no, find out why.....

Please complete the following table by;

(a) Indicating with a tick (✓) the level of changes that have occurred in the socioeconomic indicators in the table below

(b) Indicate with a statement the way in which the change have occurred.

Type	Indicator	Level of Changes			In Which Way?
		No	Mode rate	high	
Economic	Employment				
	Income levels				
	Consumption levels				
	Feeder road connectivity				
	Access to markets				
Education	Enrolment				
	BECE performance				
	Physical access				
	Economic access				
	Cultural access				
Health	Physical access				
	Economic access				
	Turn time				
	Nature of service provided				
Food security	Farm output levels				
	Adequacy of output				

	Marketing/Distribution				
	Access to modern production methods				
Empowerment of women	Economic participation				
	Political participation				
	Decision making				
	Power over economic resources				

What do you suggest need to be done to facilitate the process of reducing poverty in this community?