## COMMUNITIZATION OF INSTITUTIONS AND SERVICES IN NAGALAND

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**Abstract:** The communitisation of institutions and services in Nagaland is a unique concept and initiative for empowering and involvement of community in infrastructure development, social change and delivery of public services. The initiative has been widely recognized as a model of development and social change. The concept of communitization was first introduced in 2002-03 and after enactment of the Nagaland Communitisation of Public Institutions and Services Act, 2002, the state government, in phase wise manner, handed over ownership and management of education, health care, water supply, electricity, tourism and bio-diversity conservation to the communities. Present paper highlights the rationale, concept and imperatives of community driven change besides assessing the impact of communitisation of institutions and services in Nagaland.

**Keywords:** communitisation, communities, Panchayati Raj

### Introduction

In India, the 73rd and 74th Constitutional Amendments aim at promoting the 'decentralized democracy'. These legislations aimed at strengthening local governance through peoples" participation and a greater degree of accountability at the local level. Significant transfers of resources and responsibilities to Panchayati Raj institutions at district, block and village levels were envisaged in the legislation. Ensuring transparency and accountability in the delivery of public services was envisaged as the other important responsibility of the local governments. The developing world is increasingly turning towards the practice of decentralization to assure democratic governance for human development. Decentralized administration has gained roots in several tribal societies of India. Democratic decentralization envisages re-designing the structure of public administration and citizen participation in decision making for effective public service delivery.

Nagaland is one of the seven sisters of North-East. It is predominantly tribal state. The state has an area of 16579 sq. km., constituting 0.5 per cent of the country's geographical area with a population of 19.81 lakh in 2011. The population of the state has likely decline from 2001. There are 11 districts, 114 sub-districts, 26 towns and 1428 villages. About 29 per cent population of the state has been reported to be living in urban areas. The level of urbanization in the state is lower as compared to the national average. However, state has been experiencing the high rate of urbanization during the last

decades. The urban growth in Nagaland is a relatively recent phenomenon. Bagga, (2011). According to the 2001 census, 17.74 per cent of the urban population of the state lived in 9 urban centres. The capital city of Kohima and Dimapur are the two major cities that observed about 60 per cent of the total urban population of the state. The major reason for declining of population in the state has been outmigration from the smaller states. It is because of the fact that the smaller towns have inadequacy of urban infrastructure and employment opportunities. There has been substantial migration to larger cities like Dimapur and Kohima as the status of urban infrastructure and services are comparatively better and they provide employment opportunities to the masses.

As per NSSO 55th Round of Survey (1999-2000) 32.67 per cent of the state's population lives below the poverty line. As for urban poverty is concerned, the Planning Commission, Government of India has reported that only 3.3 per cent of urban population lives below poverty line in the state. However, the number of BPL urban population has substantially increased as per survey of State Government during 2003. As per survey, the total number of BPL households in the state is 17758 and 90951 persons living below poverty line.

## Communitization in Nagaland

Communitization of public institutions and services in Nagaland has been well recognized as a best model of community empowerment and development. The model has been well appreciated by Dr. A.P.J. Abdul Kalam, former President of India who visited the state on 26th October, 2002. He remarked that

'decentralization such as communitization in Nagaland is very important. I hope the experiment that is being tried out in the field of education and healthcare will be immensely successful and would be a path breaking experience for other sectors and development to follow'. Shri Atal Bihari Bajpai, former Prime Minister of India, on a visit to Kohima on 28th October, 2003, also observed that 'I would like to commend the state's reform efforts, particularly the communitization of social services and institutions such as schools and rural health centre'. Communitization is about substantially improving the quality and delivery of public services such as the elementary school, the rural health centre, power distribution and the grassroots by harnessing the age-old social capital prevailing in the community (Singh and Jha, 2009). Shri R.S. Pandey, former Chief Secretary, Government of Nagaland who introduced the concept, called it as a unique partnership between the government and the community having a joint stake in the services, and involves empowerment and capacity building within a legislative framework. The programme was implemented in Nagaland with the enactment of the Nagaland Communitization of Public Services and Institution Act, 2002.

## Rationale

A massive investment in development of infrastructure and public services was made in the state of Nagaland. The institutional arrangement and system was also made for the delivery of public services. However, effective and efficient delivery of public services could not be ensured in the state due to various factors. The involvement of

community in the planning and delivery of public services was also reported to be negligible. Thus, it was felt that the existing model of development is not appropriate to deliver the desired results. The experiment of community development was evolved from the need to revitalize the massive welfare infrastructure and vast network of delivery services systems by the government which had become ineffective and dysfunctional. It is based on the philosophy of communitisation as an alternative to privatization as well as management by government. This philosophy attempts to combine the best of both approaches by substituting the private profit motive with enlightened collective self interest. It holds among other tenets, that when the empowered are not adequately motivated to perform, it makes sense to empower the motivated. In a sense it was an attempt to reinvent the welfare state. The model was introduced with a view to improve the delivery system on the basis of partnership between the government and community, involving transfer of ownership of public resources and assets, control over service delivery, empowerment, decentralization, delegation and building capacity( Government of Nagaland,2004).

## Concept of Communitisation

Communitisation consists of a unique partnership between the government and the community involving transfer of ownership of public resources and assets, control over service delivery, empowerment, decentralization, delegation and building capacity – all with the aim of improving the delivery of public utility systems. Communitisation therefore involves transfer of

government assets to the community, empowerment of community through delegation of governmental powers of management and supervision of day-to -day functioning of employees to grass root level committees. It also demands ensuring accountability of government employees posted at the service delivery level to local communities and control of government assets by the committees including the responsibility for maintenance, amelioration and augmentation of assets. As such communitisation is based on triple 'T' approach. Trust the user community. Train them to discharge their newfound responsibilities and Transfer governmental powers and resources in respect of management. The new model of development led to a new approach in governance, different both from governmental management and from privatization. It is another way of governance as it is a kind of privatization but in the hands of user community (GoI-UNDP, 2009 )

## Policy Parameters

The first important feature of the Act was to provide for the constitution of Boards or Committees to represent the community which uses the particular facility set up by the government in the area of education, health and sanitation, water supply and so on ( Government of Nagaland ,2003). The second comprised delegation of powers and functions of the state government to such authorities to manage such public utilities, transfer of government assets to such board, creation of fund for such authorities to which salary and other grants from the government would be credited for running and development of those

utilities and imposition of responsibility on the government to provide to such authorities. Rules under the Act were promulgated for each sector and communitisation of elementary schools and health centers was initiated in the initial year.

**Communitisation of Education**

Communitisation empowers the village community to own and to develop the government primary and middle schools as its own. The Village Education Committee is the local legal authority to manage the elementary education in the village. Salary amount for government employees in the schools is deposited in advance into the Village Education Committee account and the Village Education Committee disburses the salary. The Village Education Committee is required to ensure discipline and regularity of teachers with powers to enforce 'no work, no pay' principle. Funds for key purposes such as purchase of text books, furniture, construction and repair of buildings etc. are deposited by the government in Village Education Committee account (Government of Nagaland,2003 ). Village Education Committee was also given the powers to make inter-school utilization of teachers and select and recommend appointment of substitute teachers against long – term vacancies. Village Education Committee was also made responsible for universal enrolment. In the health care sector, as in the case of education, rules were promulgated prescribing powers and functions of the committees and authorities of the government and providing for constitution of Village Health Committees in both rural and urban areas with powers similar to Village Education Committees( GOI-

UNDP,2009 ) Under the communitization framework, a Village Education Committee constituted by the Village Council takes responsibility of the management and supervision of school within its jurisdiction, including the implementation of a 'no work no pay' policy for errant teachers. The purpose and functions of the Village Education Committee range widely at the administrative, academic and financial levels . In order to raise awareness of the communitization programme, the state government conducted publicity activities. In 2002, on a pilot basis, 205 elementary schools in 90 villages were identified for the project. In 2003, 197 additional schools in 182 additional villages were incorporated voluntarily into the system. During 2009, 1773 schools in the state were communitized. A study of 199 Village Education Committees, covering 400 communitized schools submitted their report. The compilation of inferences drawn out from these reports highlighted that there has been substantial positive impact of communitization in education sector. The enrolment rate students attendance has increased y 90 per cent while drop-outs reduced by 75 per cent. Significantly, academic performance increased by 80 per cent alongwith teachers attendance while community contribution was ensured in all the schools. The nature of outcome of communitized schools is shown in Table 6.

**Communitisation of Electricity Management**

The experiment with communitisation entered a more complicated arena in 2003 when the government decided to move beyond the social sector and leave the management of electricity

supply at the grassroots to the community. It is complicated because Nagaland like many other north eastern states has been plagued by resource gap in the energy sector, huge transmission and distribution losses and mounting electricity dues making the management of power supply and revenue administration in rural areas neither easy nor a pleasant proposition. The 2002 Act envisages the formation of Village Electricity Management Boards who are given the task of monitoring the availability of power supply, collecting electricity dues, supervising the electricity board staff and the power to check theft of energy and recommend punitive action. But they were also given a 20 per cent rebate on the electricity sold/consumed in their area. The Village Electricity Management Boards were authorized to use the money collected from the rebate in such welfare projects like providing street lights and adding power amenities.

**Communitisation of Health Services**

The state government has established hospitals and health centres of various categories all over the state; however, it was found that these health units have not been able to provide services as expected. It was felt that health services delivery can be improved to a great extent if there was participation and ownership by the user communities. Towards this end, harnessing rich social capital in the state, process of communitisation of health services delivery was initiated in the state during 2002. Under the concept, Village Health Institutions, Urban Health Committees, Common Sub-Centre Health Committee and Health Centre Management Committee were constituted in order to

facilitate and strengthen the process of communitisation. During the period of 2002-2008, 450 sub-health centres, 63 PHCs and 21 CHCs were communitised in the state. The communitisation improved the staff attendance availability of medicine, timely disbursement of staff salaries, regular reporting from health centres and better understanding of health issues by the user community. During the year of 2007-08, state government decided to strengthen the process of communitisation through continued capacity building at all levels, ensuring availability of manpower at the health units, periodical publications of activities and achievements of various health committees and providing grants for development of infrastructure and monitoring of activities by user communities ( GoI- UNDP,2009 ). The state government was committed to revitalize the ailing public institutions systems to enable every individual, family and community to attain self-sufficiency, self-reliance and good health (GoI, UND, 2009). The state government formulated The Nagaland Communitization of Health Sub-Centres Rule, 2002, laying down the framework for constitution and guidelines of various Health Committees, in order to implement communitization in health sector. A series of intensive awareness, campaigns, training and sensitization of Committee/Board Members, teachers and department officials, preparation of handbooks and setting up of Monitoring Committees at various levels were undertaken to sensitize and build the capacity of the stakeholders. The Village Councils were empowered to constitute a Village Health Committee in their respective villages and a

Common Health Sub-Centre Committee at the sub-centre level. At the level of Community Health Centres and Primary Health Centres, the Village Councils/Town Committees of the constituted villages and towns constituted a Health Centre Management Committee. The state government launched the communitization in health sector in 2002 by communitizing 302 sub-centres. The communitization was extended in a phased manner to all rural-based health facilities. Overall, 397 Sub-Centres and 21 Community Health Centres and also 63 Primary Health Centres were communitized while 1278 Village Health Committees were formed . A study of Mopungchuket Village of around 400 households, located about 15 km. from district headquarter of Mokokchung district of Nagaland highlights that there has been substantial increase in the number of patients treated at the Health Centre (Table 8). There has been increasing trend of local contribution towards medicine fund. This is because of the fact that communitization in health sector has mobilized the community for community participation and improving the delivery of health care services . The communitization of health has improved the condition of public health system by harnessing the community spirit. The impact of assessment of the project reveals dramatic improvements in health care delivery services.

**Communitisation in Urban Areas**

Urban development was the part of the Planning Department under the control of Development Commissioner till 2005-2006. But with the increased activities due to a large scale of migration from rural to urban areas and growth of urban population, it was felt that full-fledged Department to manage the urban development affairs is imperative. In view of this, Department of Urban Development was created in 2006-2007. During the last years, Department has taken up a few initiatives and programmes for the community development and delivery of public services. Neighbourhood Development Programme for Kohima has been launched under the Act of Nagaland Communitisation of Public Services and Institutions, 2002. It is to be noted here that centrally sponsored scheme of SJSRY launched in 1997 and revamped in 2009 also envisages formation, strengthening and effective functioning of community development structure for effective implementation of the scheme. This is an innovative programme formulated and initiated to empower communities to take up various development works at local level and improve their immediate surroundings by providing necessary funds directly to them. Since its inception in 2004-05, the programme has received good response from the beneficiaries and has succeeded to a certain extent in promoting communitisation as an effective mechanism for active public participation and to achieve more effective coverage and sustainable development of assets at local level. In order to ensure proper utilization of funds, 'Guidelines for Communitisation Programme' were formulated which provides for constitution of 'Neighbourhood Development Committee' in the selected colonies with representatives from local panchayat, municipal member, youth body, women body and senior citizens. The Committee is responsible for identification of projects, execution and monitoring of all

works while the Department is the main facilitator and co-ordinates and oversees all aspects of the programme. Various projects for improvement of footpaths, drainages, community wells, toilets, etc. were successfully taken up by the concerned communities based on collective decision. Besides these, few innovative projects were also taken up successfully largely due to active involvement of the public such as road widening works in Agri Farm, Forest Colony and New Minister's Hill, new approach road in Kitsubozou, widening of footpaths in congested slum areas of Porter lane, etc. Since the quantum of works achieved under communitisation is generally higher as compared to normal contrast works system, more public benefits are being generated under this scheme. Rs. 240.00 lakhs were released under this scheme upto 9th March, 2009. This scheme has been taken up in a phase manner. It was proposed to take up the scheme during 2008-09 with an amount of Rs. 200.00 lakhs. High School, Old Ministers Hill, Midlane A.G. Colony, Hospital Area, PWD Jail/P.R. Hill, Chandmari colonies of Kohima were selected for community development (Annual Report, 2010, Deptt. of Urban Development). Under the State Plan scheme launched by the Department whereby funds were provided directly to the community for better coverage of infrastructure facilities in their neighbourhoods and promotes effective public participation. In order to ensure proper utilization of funds, 'Neighbourhood Development Committees' are constituted for identification, execution and monitoring of all works as per approved guidelines. During 2008-09, eight neighborhoods in Kohima town

were covered under this scheme. Neighbourhood development scheme under State Plan scheme launched so far made integrated provision of basic infrastructure facilities at neighbourhood level. Necessary funds were provided directly to the community to improve their immediate surroundings by taking up various infrastructure development works as per collectively identified needs. The scheme has been implemented as per approved guidelines which provide for constitution of 'Neighbourhood Development Committees' in the selected colonies/wards that shall be responsible for selection, execution and supervision of the schemes. The programme is being implemented in all wards of Kohima town at present and has provided an effective mechanism for better coverage of infrastructure facilities, substantial creation of public assets along with more effective public participation. During 2009-10, six wards of Kohima town were covered under this scheme.

**Impact of Communitization**

The implementation of programme has shown good results. The bogus and proxy employees were identified and weeded out expenditure on pay and allowances were also reduced. The employees started receiving pay and allowances in time. It improved the attendance, regularity and commitment of employees. The enrolment in schools improved drastically with the increased level of attendance and students retention. It also improved the academic performance and reduced in dropout of students. The user community could avail medicines in time and healthcare services. The resources at the community level were also mobilized and community participation and contribution in

cash and kind for community development was made visible. The awareness and sensitization towards energy conservation was created among consumers while the functioning of State Electricity Management Board was made more effective. An impact assessment of the programme was carried by Organizations Development and Excellence Consultants, Chennai during June-July, 2004 under the auspices of UNICEF. The study highlighted that communitisation was welcomed by the communities both in rural and urban areas. The formation and functioning of various committees improved conditions of health centres, schools by galvanizing voluntary contribution of materials, labour and funds. The delivery of public services such as education, health and power was made more effective and efficient with the creation of community ownership and participation. The overall quality and continuity of services was also noticed significant improvement. Additional resources were generated by various concerned departments while cost effective and sustainable community development was ensured with the community involvement and participation in development planning and implementation. The programme could success in the state of Nagaland due to existence of traditional social capital and bonds in both rural and urban areas. The local development needs and their prioritization was also ensured with the community involvement. The state government also emphasized on capacity building at all levels by the concerned departments. The communitisation  of institutions and services in Nagaland   is the best example of

community driven change and social development. The initiative of CDC needs to be promoted by the academicians and social scientists while the analytical framework of CDC should be applied in other development models and initiatives in India too.

## Conclusion

 The village council is not a new institution in Naga society. There existed a system where the whole village was under the guardianship of the tribal chief. Now, the modern mode of social living and more democratic pattern of society have led to creation of development forums like the village council, the village development board, etc. where the members are elected.  Village councils are very vibrant in whole north east region and particularly in Nagaland. The implementation of Communitisation of Institutions and Services Act  in Nagaland has been very successful and it has long lasting impact on society, governance and polity. It has been well appraised and awarded as model of decentralized governance and best practice in community development and empowerment of tribal community. The Capacity building should not only be for the grass root level but for all, including the Heads of Departments, particularly for sensitization on communitization policy. Communitization is a policy of the government and not a programme which has to be sensitized to all the stakeholders. It is imperative to  have a structural system for overseeing the communitization policy of the government; incentives/rewards on annual basis for the best performing committees. It is also suggested that all communitised programmes should be through the VDBs while its rules

and guidelines must be reviewed based on priority of the community. The monitoring and supervision for all programmes should be made mandatory in terms of accountability and transparency. It is recommended that guidelines should be evolved and penalty clause inserted in the rules for non performance/non-compliance. Increase in VDBs deposit based on performance may also be encouraged.

### References

Bagga, U. (2011), Developing Infrastructure Through Communitization – Nagaland Experience, Nagarlok, Vol. XLIII, No. 1, January-March, 2011.

GOI-UNDP (2009), Communitization and Health: The Nagaland Experience, A Thematic Report, Department of Planning and Coordination, Government of Nagaland, Kohima.

GOI-UNDP (2009), Communitization of Education: The Nagaland Experience, A Thematic Report, Department of Planning and Coordination, Government of Nagaland, Kohima.

Government of India (2001), Communitization of Public Institutions and Services Act, 2001, Ministry of Communication and Information Technology, Nagaland State Centre, Kohima.

Government of Nagaland (2002), Handbook on Communitization of Elementary Education, Directorate of School Education, Government of Nagaland, Kohima.

Government of Nagaland (2003), The First year of Communitization of Elementary Education in Nagaland, 2002-2003, Department of Education, Government of Nagaland, Kohima.

Government of Nagaland (2004), Nagaland State Human Development Report, Department of Planning, Government of Nagaland, Kohima.

Government of Nagaland ( 2010) Annual Report, Deptt. of Urban Development, Government of Nagaland, Kohima

Mungleng Toreiphi (2016) Communitisation Programme of Elementary Education in Nagaland : A Study of VEC, International Journal of Multidisciplinary Research, Vol. 2(6) , June

Singh, K. and K.K. Jha (2009), Communitization of Public Institutions and Services in Nagaland, IDS Bulletin, Vol. 40, Issue 6.