

**AMERICAN UNIVERSITY OF ARMENIA**

INTEGRATED COMMUNITY DEVELOPMENT: THEORY AND APPLICATION IN  
ARMENIA

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## CHAPTER 1: INTRODUCTION

### **Background of the Problem**

International development efforts in the past several decades have had varying levels of success, but in the grand scheme have seen relatively more failure than success — success defined as the full realization of the initially intended outcome. The causes behind partial or complete failure are numerous and diverse ranging from deficiencies in the development approach, methodology or implementation design, to inadequate application of the methods planned, to breakdowns in ongoing operations.

In the 1970s, the World Bank attempted to change the paradigm behind prior development approaches, creating Integrated Rural Development (IRD) as a method meant to address the multifaceted reality of poverty around the world. Since then, many programs have sought to apply the concept of IRD to development and, as before, have had varying levels of success. IRD was not the only new method developed with the aim of addressing shortcomings in previous methodologies. In the late 1980s into the 1990s a more refined methodology was developed which expanded on the same principles of IRD but targeted more than just rural communities. It was built upon the same fundamental tenets, following a holistic approach to development, but was not relegated to rural targets exclusively. This method, Integrated Community Development (ICD), is currently being implemented by various organizations including the United Nations Development Program (UNDP) throughout the world. Understanding Integrated Development approaches requires an explanation of the motivations behind their inception; the methodological background behind what they are specifically meant to address.

## **Statement of the Problem**

ICD has become a widely applied methodology in many parts of the developing world. The theories it entails display an advance in the understanding and appreciation for the different focus areas of development, including human psychology, fostering leadership, and economics among many others. Nevertheless, problems persist where ICD is applied. Development is still too often slow and economically or socially unsustainable — communities in developing regions still do not feel confident without continued intervention.

If there is still room for improving development strategies program implementers must be able to hone in on where failures occur in current application. If the theory behind ICD is comprehensive the shortcomings must be in the methodology with which it is applied. However, if the methodology with which ICD is applied is accurate and holistic then the problem must lay within the theoretical framework. In either case, or in some mid-point in between, ICD may have room for improvement and attempts to advance it should be considered.

## **Purpose of the Study**

The general purpose of this study is to examine the sustainability of ICD. More specifically, the aim is to test both theory and methodology in an attempt to pinpoint possible weaknesses. This study aims to prove whether ICD leads to sustainable development and, more specifically, if the shortcomings or failures of Integrated Development are due to a particular facet of initial preparation and planning, namely the lack of an '*exit strategy*'; this concept/phase is not always explicitly stated but can be identified from examining the planning stages and finding if, for example, the depth of community capacity development or the intended project's duration are appropriately planned during program design. This raises further questions related to sustainability. For example, does the missing '*exit strategy*' lead to dependency of beneficiaries and thus undermine the sustainability and overall purpose of

development? Some of these questions are simpler to answer while others require more thorough research.

After laying the framework required to understand ICD this research examines a specific case where ICD has been applied. Whereas studying theory allows for academic scrutiny, studying a case examines its methodology and application.

### **Research Hypotheses**

This study is designed around the following two hypotheses.

H<sub>1</sub>: Integrated Rural Development is a viable sustainable development methodology.

H<sub>2</sub>: Integrated Rural Development promotes development by breaking the mentality of dependence and changing the "problem-filled" mindset.

The first hypothesis addresses theory, testing the components of ICD so as to understand how each problem (historically) facing development efforts is handled by this particular theory. The second hypothesis addresses application; not exclusively but with greater emphasis on application than theory. Capacity development in a social and psychological sense is of the utmost importance to sustainability. In proving this hypothesis this research will explore whether and how community capacity development is being put to practice and the effect it is having on development in general.

### **Importance and Scope of the Study**

Definitions, assessments, and critiques reveal a general sense of the scope of development. International experience with the different approaches of Integrated Development is abundant and indicates that there are common problem areas. For Armenia, the reasons behind the need for development are not unique. As a newly independent former Soviet country Armenia has struggled with development efforts and especially with



intervention projects targeting the rural poor. So far Integrated Development has yet to be fully applied in any more than a few areas, making its assessment challenging.

This research is an attempt to understand both the value of ICD and its use in a specific context. As there are many gaps to be filled this research will use a mixed method with surveys, and content analysis of interviews and hard copy sources. Asking the “why” and “how” questions related to ICD and “what” its specific challenges and advantages are within the larger scope of rural socio-economic development.

Failed development efforts are not just a waste of time and resources, though these factors are not to be ignored. Failure in development often has an exponentially negative effect on developing communities. As the second hypothesis of this study suggests, capacity development involves breaking the mindset of dependency, vulnerability, and weakness. When a development intervention is unsuccessful a community begins to identify itself as prone to failure. This idea will be expanded on later but its significance to the importance of this study is that if ICD can be proven as sustainable and as able to break the mentality of failure and dependency, especially as evidenced in the case study, then this research may be used to support or reject further ICD applications.

## CHAPTER 2: REVIEW OF THE LITERATURE

### **Defining the Concept**

Integrated Rural Development was created as a response to the lackluster results of progress in the developing world. An explanation of the history behind development leading to the advent of IRD is provided by Kuhnen who identifies the cause of failure in design, explaining that the “unsatisfactory results of past development efforts” lie in the basic approach, that is, “an attempt to promote development by applying economic principles derived from experiences in developed countries” (Kuhnen, 1977). He explains that there was a lack of understanding of the different and changing conditions in developed versus developing countries citing factors such as: the rate of population increase, the degree of international communication, education level, the availability of new technologies, and the value system of the population, among others.

IRD was developed in reaction to the realization of these disparities and was an attempt to address rural poverty, as Kuhnen describes, from the basis of several assumptions including: rural development as part of overall socio-economic development; development as a system of interrelated social change; the multitude of functions of agriculture in the development process; and agricultural development as one aspect of rural development. The latter means that agricultural development cannot take place without a simultaneous development in other sectors. The underlying thought behind these assumptions is that continued poverty is caused by the detachment of under-developed communities from the overall socio-political and economic development of the larger community, i.e., district, country, and region. Furthermore, that the rate of development within rural areas is uneven among the rural populace creating dysfunction and isolation for the most impoverished. Finally, that there are imbalances in the use of agriculture caused by failure to recognize its potential as important to gaining/forming secondary and tertiary markets, capital formation,

and community development in general. Parker provides further explanation of the motivations behind developing an integrated approach based on agriculture. He explains that IRD typically “contained similar components and emphasized increased agricultural productivity as the basis for raising rural incomes, while recognizing the synergistic contribution of better education, health and other basic services to further improvements in people’s quality of life and their overall productivity” (Parker, 1995). The idea is echoed by Morris, who explains that a focus on agriculture as the production center for rural areas entails numerous complex factors: extension, research, credit, inputs, and marketing (Morris, 2004).

Given the central importance of agriculture to rural areas and the realization that development of other sectors hinges on improvements to the agriculture sector, IRD was intended to take a “multipronged approach to an interlocking problem,” attempting “to combine interventions to raise agricultural productivity (inputs, irrigation and advice),” parallel to “improvements in health care, education, and access to credit” (Maxwell & Conway, 2000). Kostov and Lingard examine the multidimensional nature of integrated development by referring to “spillovers” as primary objects of interest. They discuss sustainability as a crucial facet of integrated development pointing to the necessity of analysis, including network analysis, links to institutions, and a combination of the former into a synergy approach (Kostov & Lingard, 2004). The first, network analysis, concentrates on linkages and interactions; the second complements the former by taking into consideration institutional and organizational characteristics (involved in both development implementation and in regard to the receiving community); and the last combines the prior two, taking a “synergy view” to social capital which is defined by “the norms and the networks that enable people to act collectively” (Kostov & Lingard, 2004).

The synergy view has been embraced by several development theories building upon the understanding that integrated development, though able to focus on certain demographics in a given community in secondary or tertiary stages, must ultimately produce benefits for the entire community. In this vein practitioners of Integrated Community Development have taken the philosophy underlying IRD (Integrated Development in general), and amended it so that the rural aspect does not take particular precedence in development strategies. This regards the point raised earlier in the discussion; the preservation or creation of cohesion or the reduction of exclusion or marginalization among various community demographic groups, formed by employment, skill-set, age, etc. This, in turn, has led to what has become a focal point of Integrated Community Development, used in the sense of capacity building for sustainability.

In virtually all instances, cohesion and capacity development are pursued in two ways: through community-wide development projects in the initial phase ("first pool"), followed by more concentrated efforts with particular demographics ("second pool"); and community-based and community-initiated project design and monitoring. The following is a partial list of excerpts of strategic objectives/methodologies employed by various Integrated Community Development programs which illustrates these points.

- Soros Foundation Integrated Rural Development – Romania
  - Strategy/Objectives (community-wide): Infrastructure projects, economic development, education etc. are valuable and sustainable only if they are part of a long-term plan. The healthy development of a community with the consultation and the involvement of all its members, no matter their religion, ethnic appurtenance, economic status etc.
  - Strategy/Objectives (focused): Dedication to defining concrete and realistic solutions for solving local priorities on housing, education, health and economic development.

- Strategy/Objectives (design & monitoring): The involvement of the Roma ethnics as “first-hand citizens” within the community life helps in raising their self-esteem reduces the gap between them and other ethnics and brings long-term benefits for the entire community. (Soros Foundation, 2009)
- Community Integrated Development Initiatives (CIDI) – Uganda
  - Strategy/Objectives (community-wide): To increase access to clean and safe water, hygiene and sanitation services; to improve people's health and welfare and contribute to the health sector's interventions in promoting a healthy and economically productive society.
  - Strategy/Objectives (focused): To develop capacity, skills and technologies in agriculture for improved food security and sustainable environment for agricultural production.
  - Strategy/Objectives (design & monitoring): To improve and sustain Information Management Systems including Monitoring and Evaluation. (CIDI, 2013)
- CARE ICDP (Integrated Community Development Program) – Papua New Guinea
  - Strategy/Objectives (community-wide): Strengthening local level organizations; strengthening learning environments and opportunities; improved physical and social environment.
  - Strategy/Objectives (focused): Capacity building of local organizations.
  - Strategy/Objectives (design & monitoring): Joint design and development of program activity plans; effective program learning and management. (CARE, 2011)
- Integrated Community Development International (ICDI) – Central African Republic (CAR)
  - Strategy/Objectives (community-wide): "We start with water," well drilling, rehabilitation, preventative maintenance.

- Strategy/Objectives (focused): Using the gains made in water to pursue broader community development goals in agriculture, AIDS/HIV, and development radio programming.
- Strategy/Objectives (design & monitoring): Hire, train, learn from Central African staff; continuous meetings with villages. Tablet-based reporting throughout CAR, increasing transparency with automatic picture uploading, GPS coordination, time stamps. (ICDI, 2010)

The cases above exemplify, at least, an agreement on the theoretical basis of Integrated Development methodology among the wide gamut of international ICD projects. To reiterate, this entails a fundamental agreement on the importance of locals in the development process as the tools and recipients of development. Furthermore, the cases show that integration of all levels of a target community is key to both social and economic development. Lastly, the cases acknowledge the need to eventually focus development (assistance) on specific individuals, groups, and organizations as catalysts for further change.

This alludes to another more recent focal point of international development, the search for local development "leaders" or, as is more commonly phrased, "entrepreneurs." While local entrepreneurship is encouraged for long-term economic benefit, local elected (or appointed) leaders are targeted for training in their specific fields of leadership, e.g., management or budgeting training.

Entrepreneurial development has come to the forefront of Integrated Development as the emphasis of treating locals as stakeholders and development catalysts has evolved. This is the natural extension of capacity development; the simultaneous stimulation of different socio-economic groups down to particular individuals. In addition to directly inducing community development the focus on local entrepreneurs, of whatever magnitude, fosters a

flexibility in the development process itself; a remedy to the failures of earlier efforts which attempted mechanical applications of development methodologies.

The Asian Productivity Organization (APO) highlights the importance of the development of both entrepreneurial and local governance development in the APO Handbook of ICD. It explains that among the various challenges of development projects the disconnect between all stakeholders— local residents, local governors, regional and national governments, international organizations, etc. — is caused by a combination of unfamiliarity with local nuances by international organizations, and recent shifts in the focus of national governments. In the latter, processes of decentralization leave more decision-making power to local governments that are ill-equipped to handle the task (Dhamotharan, 2009, p. 1). Thus, both directly and indirectly, communities are being encouraged to take leadership roles in their development and actively seek necessary support from both national governments and external agencies.

The APO outlines Integrated Community Development through the following elements: capacity development, sustainable development, productivity enhancement, integration, and people's participation (Dhamotharan, 2009, p. 7). The aim of capacity development is to build the confidence that will motivate and mobilize communities for collective action. As the accompanying diagram depicts

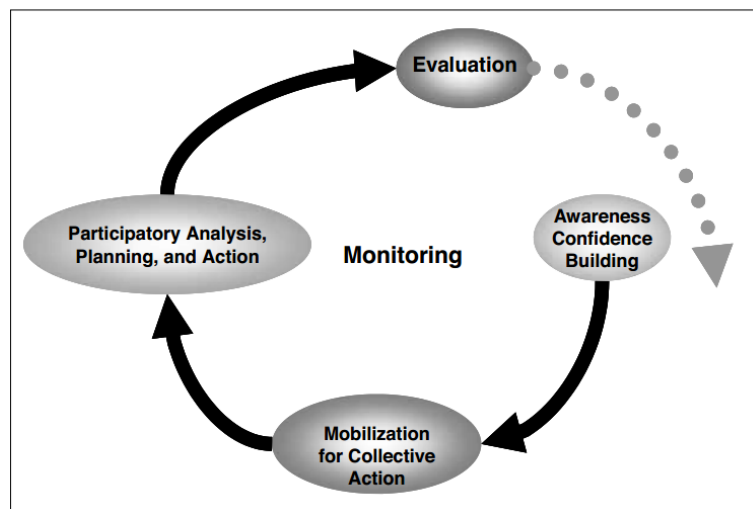


Figure 1: Cyclical Community Participation

(Dhamotharan, 2009), this will encourage participatory analysis, planning, and action, and will also allow self-evaluation and monitoring. This process is intended to be cyclical in that

it is to be continued indefinitely by the community itself but, more importantly, a self-perpetuating cycle in which community capacities are continuously increased as locals learn "to discover or rediscover their resources and abilities and to identify clearly their potentials and challenges" (Dhamotharan, 2009, p. 11). Again, this enables a community to improve conditions in the community itself while simultaneously "improving the ability or organizations and individuals to support communities in the development process" (Dhamotharan, 2009, p. 21).

There are several other approaches built into APO's ICD methodology. Two that are particularly notable are *Kaizen* and Solution Based Brief Therapy (SFBT). To briefly explain, these methods advocate processes of gradual evolution spurred by brief interventions by external agents (Dhamotharan, 2009, pp. 39, 52). SFBT, built on theories of social constructivism and practices in therapy (e.g., psychiatric), addresses the apathy or lack of motivation and confidence prevalent in many developing communities. The method advocates a solution-based focus as opposed to a problem-based focus which is meant to alleviate or eliminate the client's (individual or community's) self-definition as a problem-based entity (Dhamotharan, 2009, pp. 40-41). Instead, the client is helped to develop a vision —not goal or target — of success which the client will use to search for the resources to achieve it. Then, the client is induced to take small steps toward that solution. In a similar vein, the *Kaizen* approach aims for incremental changes with available resources (Dhamotharan, 2009, pp. 52-53). The key concept, incremental changes and gradual evolution, acknowledges that communities in underdeveloped areas are wary of failure and hesitant to affect change. With gradual evolution each step is small enough to be undeterring to the wary individual (or group), at the same time the repercussions of failure are not



devastating enough to undo the progress (psychological or tangible) that has been made.

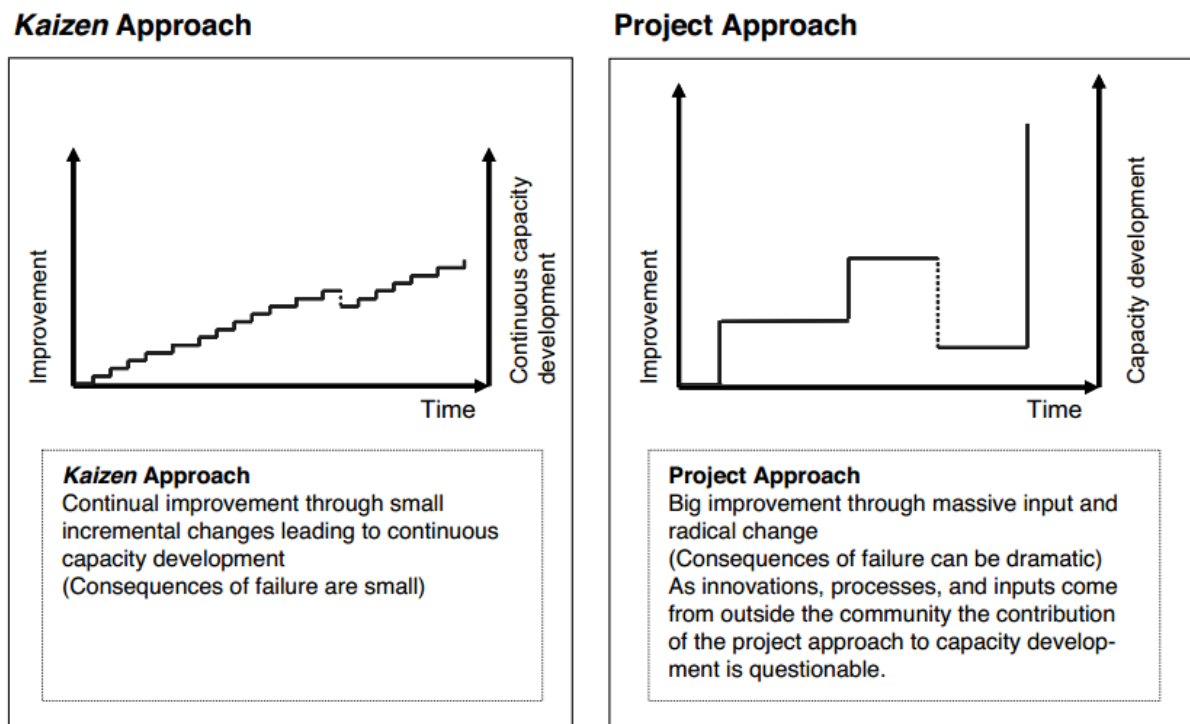


Figure 2: Kaizen Approach

Whether based on an individual or group, short-term or long-term goals, the reinvention or reinvigoration of local communities has come to the forefront of development strategies. Development of local capacities is considered, by many, the starting point for Integrated Development but also a function that must be continually readjusted. For the United Nations Development Program (UNDP) in particular, Integrated Community Development begins with capacity development. Its importance has led to the formation of a process cycle focusing on capacity development alone.

The UNDP captures the following five-step process cycle to that effect: (1) engage stakeholders on capacity development;(2) assess capacity assets and needs;(3) formulate a capacity development response;(4) implement a capacity development response; and(5) evaluate capacity development (UNDP, 2008, p. 8). Like other development processes this capacity development model is cyclical. It is also flexible to temporal and program/project adjustments. Furthermore, the capacity development process is promoted as a self-

perpetuating cycle with limited intervention from the UNDP or other external agents. UNDP advocates support for the process on different levels depending on specific contexts. It may support "the entire cycle or parts of it," and may work "alone or in partnership with national and international development partners" (UNDP, 2008).

The UNDP's general principles of capacity development reflect similar themes and combine similar methods to the topics discussed above formulating ten default principles that help establish and ensure capacity development. They are: (1) don't rush, (2) respect the value system and foster self-esteem, (3) scan locally and globally; reinvent locally, (4) challenge mindsets and power differentials, (5) think and act in terms of sustainable capacity outcomes, (6) establish positive incentives, (7) integrate external inputs into national priorities, processes and systems, (8) build on existing capacities rather than creating new ones, (9) stay engaged under difficult circumstances, (10) remain accountable to ultimate beneficiaries (Lopes & Theisohn, 2003, pp. 3-11).

These methodologies and processes applied in the fundamental stages of Integrated Development — and continually fostered as appropriate —are intended to address the "exit strategy" and dependency problems of failed development efforts. A properly conducted capacity development campaign should, in theory, enlist local potential in community development and encourage this to a point at which implementing agencies (international or national) can confidently disengage from the community and the community can, in turn, break the mentality of dependence on outside actors as the necessity to their development. Though this methodology appears sound in theory its difficulties will be elaborated upon in the next section.

Though Integrated Development is widely applicable to communities, regions, and countries of widely varying levels of development the particular nuances of underdeveloped areas offer a unique challenge. Extended periods of social, economic, or cultural devastation

have in many places generated an aura of hopelessness, confusion, and fear. Integrated Community Development seeks to remove these deficiencies while at the same time offering traditional forms of external assistance. By simultaneously resolving economic and social/psychological issues the cycle of uncertainty and apathy can be removed and developing communities can gain the confidence, skills, and foresight to become agents of their own development.

### **Application and Methodology Assessments**

Several sources identify the potential weaknesses in Integrated Development methodology. Parker discusses Integrated Rural Development methodology and he moves on to point out failures in its application. Given the necessity of cooperation among the communities and between each community and program implementers he notes that difficulties in project implementation have emerged early on. In particular, regarding coordination between development organizations and beneficiary governments, Parker cites ineptitude, technical incompetence, and philosophical conservativeness as barriers to implementation. Furthermore, in regard to the holistic approach of IRD he explains that while the focus turned to increasing agricultural productivity, insufficient attention was paid to the “wider context of national macroeconomic policy,” as well as the “failure to develop technological packages that were sufficiently flexible to deal with local conditions,” and “the lack of attention to socio-cultural and institutional factors” (Parker, 1995). He cites the World Bank’s own 1987 IRD review in which a range of problems were identified, including: adverse policy environments, lack of government commitments, lack of appropriate technology, neglect of institutional development, lack of beneficiary participation—referring to the top-down approach that left beneficiaries out of the decision making process; and the complexity or lack of coordination which emerged as a consequence of delegating subprograms to government bureaucracies with their own and often dissimilar objectives.

Even ICD methods, which call attention to the marginalization of locals by external agents have inherent, the likelihood of "domination by external experts in designing project plans, and allowing community people only a limited role in planning and decision-making process" (Dhamotharan, 2009, p. 26).

Morris' research, focusing mainly on the agricultural base of IRD, reveals another set of issues. His analysis cites inhospitable economic situations, insufficient knowledge of crop systems, overoptimistic yield assumptions, unattractive proposals to farmers, marketing and price policies, increased size of extension staff, and inadequate management of complex and multi-sector projects as major hindrances to successful agricultural intervention (Morris, 2004).

Several other authors discuss the over-generalization/rigidity and overextension problems in early IRD efforts. Maxwell and Conway affirm this referring to Crener's identification of reasons behind IRD failure which are particular to planning, those being that projects are conceived in a rigid manner and that there is inefficiency and ineffectiveness of new and old organizational structures in project management (Maxwell & Conway, 2000). Similarly, Nemes argues that there is a lack of integration and divergence of interest caused by the top-down implementation process (Nemes, 2005/6). Though "new rural development" was a response to the old paradigm, Nemes claims that its roots are still embedded in the old paradigm. In particular, he refers to the lack of bottom-up participatory project design and implementation necessary for actual development. Nemes later mentions that the persistence of top-down administration, especially in rural areas that have suffered extended periods of hardship, may negatively affect the already weak culture of entrepreneurship and erode the ability of "backward areas to recognize and efficiently express their needs and to attract aid and financial resources" (Nemes, 2005/6). Again, with regard to ICD, the APO notes the

persistence of these same challenges: low motivation and self-confidence of communities, and insufficient collaborate reflection (Dhamotharan, 2009, p. 35).

In response to the recognition of the above mentioned shortcomings of early IRD applications more recent efforts, while maintaining the spirit of a holistic approach, have attempted to take a gradual approach that targets different sectors of development (within the same community/project) at different times so as to avoid overextension and work around barriers created by large top-down measures like those enacted by less than accepting governments or traditional rural cultures, as evidenced by the SFBT and *Kaizen* methods of ICD.

In regard to problems in agricultural intervention — also applicable to IRD at-large — Morris provides several “lessons learned” to help prevent the problems mentioned above. He notes that there needs to be increased support in terms of discrete projects for the agricultural research institutions; research accompanied by assessments of the financial attractiveness of technological proposals; and the practice of using a phased approach or pilot projects in order to test project feasibility and design before full implementation. Morris also encourages appraisal of smallholder agricultural projects including a farm’s cost-of-production and financial viability, properly incorporating the imputed costs of changes in farm family labor; adopting appropriate marketing and price policies critical for project success before full implementation; and recognizing that integrated plans for rural development should cover multi-sectors, it is generally more fitting to generate single-sector and single-function projects which should be implemented separately but according to the priorities of the overall development plan. Emphasis should be placed on improving the effectiveness and productivity of existing institutions rather than on creating new ones; and a robust M&E system should be adopted that enables effective feedback and checking of expected results from start of project to completion of implementation (Morris, 2004).

While Morris' suggestions consider sustainability from a project feasibility perspective Parker offers "decentralization" as an essential component of IRD, emphasizing power transfer, i.e., transferring project ownership and long-term responsibility to the community. This includes deconcentration, delegation, devolution, and privatization, which refer to the transfer of power from the central government in the first step to the local community, and on to the private sector in the last step (Parker, 1995). Parker is specifically discussing government-held power but this concept is applied to all external agents in the ICD methodology. This is the fundamental concept of this research that investigates the eventual transfer of responsibility necessary for building social capital and for fundamentally changing the impoverished mindset.

Many researchers of rural development and Integrated Development in particular reiterate the transfer of power/responsibility concept and allude to what Wijayaratna specifically mentions as the "psychology of dependency." Here especially, the top-down implementation approach is responsible for contributing to the "dependency of local communities on direct external assistance, especially from the central government through donor-funded projects." Wijayaratna adds that in addition to support received from the government or bilateral and international donors and development agencies, another "major dilemma in the public provision of these services is the tendency to put inadequate emphasis on user maintenance and cost recovery (Wijayaratna, 2004). The author explains that the perpetuation of a dependency syndrome occurs when development implementing bodies act as "providers," "owners," or "managers," effectively preventing the rural community from developing as "a valuable human resource," and thus adversely affecting the development of "human capital." This can occur in ICD as well, but beginning from a different angle. Though ICD implementers are tasked with creating or rekindling a spirit of self-worth,

inadequate reflection of communities' own resources and knowledge is a challenge that persists (Dhamotharan, 2009, p. 34).

Even when theories address every facet of community evolution (capacity development) pitfalls still exist in practice. The UNDP's capacity developers have identified the following challenges: ineffectiveness in inculcating in people and institutions of capacity to sustain development; excess emphasis on short-term projects with finite impact, rather than on investment in human capital, leading to poorly sustained results; focusing mainly on government organizations rather than on the society as a whole, which has not strengthened the capacity of local people and communities to participate in development processes; and excess dependence upon foreign experts, leading to a lack of ownership and sustainability (Dhamotharan, 2009, p. 23).

Wijayaratna posits that the pattern of weak communities is even more common “in countries with long traditions of dependency on government services,” which creates great difficulties in the creation of institutional capacity within communities for achieving self-reliance. He argues that proper intervention “requires potential members (of the developing communities) to promote association, interaction and cooperation with each other; develop their perception of problems and needs; and then begin a process of exploring how these needs could be met.” However, if a balanced approach is not induced by program implementers an "erosion of social capital" may pervade (social) community development efforts. Simply put, the chance for short-term financial gains, even in the face of the community's welfare, "has led to increased disparity and tension within communities" (Dhamotharan, 2009, p. 35).

Wijayaratna proposes that a planned community intervention is needed to carefully select “well-trained catalysts or change agents” to make such interventions successful — a task that could be accomplished by committed NGOs (Wijayaratna, 2004). These are often

the entrepreneurs discussed earlier, however, the use of the support they receive must be carefully scrutinized so as to ensure that it is not used to undermine the community's social capital (Dhamotharan, 2009, p. 35). That is, the entrepreneur who is receiving aid for his part in community development must not use the grant resources for other purposes, capital (tangible or intellectual) meant to serve the community must stay within it lest the community's least fortunate be further alienated.

In summation, one of the fundamental questions of this research is whether or not, and to what extent, a given ICD effort attempts to break the cycle of dependency; a characteristic that can only be cultivated if integrated into the foundation of a development strategy.

### **(Rural) Development in Armenia**

The previous section presented analyses by development experts based on Integrated Development experiences from around the world. This section will contain two parts: first, a description of the condition of Armenian rural communities and the main reasons for their decline and, second, a brief examination of development efforts in Armenia to provide a basis with which to analyze further development initiatives. Since ICD in Armenia is relatively untested this research explores whether prior methods show inattention to sustainability or creating social capital so as to test the viability of correctly applied Integrated Community Development. Thus, this research will determine the validity of ICD in practice and as a viable development approach for future efforts. If in regard to Armenia evidence can be found that shows inadequate or shortsighted achievements in development resulting from the lack of integrated approaches, ICD will be advised as a useful methodology. However, as the second hypothesis of this research is to determine whether ICD creates self-sustaining communities, an analysis of a case is necessary; and one portion of the paper will be dedicated to that.



As to the post-independence condition of rural Armenia, agriculture has remained a significant portion of the national economy. Between 1996 and 2006 the specific weight of agricultural employment grew steadily from 40.82% to 46.16% while the specific weight of agriculture in GDP fell by nearly half (34.80% to 18.65%). In addition, income derived from agriculture dropped or remained steady, decreasing overall from 74.70% to 61.10% in the same period. What is more striking considering the prior figures, is that labor productivity as a percentage of non-agricultural productivity decreased sharply from 77.37% to 25.60% in those same two years (Government of the Republic of Armenia, 2008). The conditions that these figures depict, complemented by ongoing hardships and lack of industrial employment in urban communities, have influenced the large numbers of labor migration from rural areas. Though work was consistent and relatively productive in these areas (prior to the global financial crisis of 2008), rural employment remained constant, absent any diversification within the sector or into other sectors. Most communities contained small farms that were small and family-operated, which decreased employment security derived from larger diversified operations.

In addition, modern and efficient production and service infrastructures in the agricultural sector were and continue to be far below adequate levels (Government of the Republic of Armenia, 2008). Thus, despite double-digit economic growth fueled in part by agriculture, the 2008 financial crisis caused economic catastrophe for Armenia's rural population and, in turn, for the entire country. Though agricultural production has slowly begun to increase and is projected to increase further, its frailty has been exposed. Hence, any development method must take into account the sizeable portion of the national labor force engaged in agriculture and the importance of reducing vulnerability through diversification and the growth of private enterprise.

The International Fund for Agricultural Development (IFAD) has initiated and completed many development projects in Armenia. A 2012 Project Performance Assessment discusses the creation of the Rural Finance Facility which stimulated rural banking, improved access of rural small and medium entrepreneurs to short, medium and longer-term loans, which facilitated some capital infusion and increased employment in rural areas. The same report provides a self-assessment of the projects completed, explaining that “the project could have had better pro-poor targeting design ... as its main beneficiaries were rural medium-size enterprises,” and “the gender aspect was addressed in the project only nominally,” and recommending that “IFAD operations in Armenia should further support the value chain approach and include additional awareness activities.” As part of its sustainability objective, IFAD invested in infrastructure and crop diversification in addition to the above mentioned Finance Facility (Independent Office of Evaluation - IFAD, 2012).

The project also included entrance and exit dates and acknowledged that further steps could be taken to support institutional and policy reforms that would continue providing the financial instruments and services that the project initiated. The report also noted that further IFAD operations should include additional awareness activities about the project and the types of services it provides. If the former point (supporting institutional and policy reforms) is not eventually accomplished, the sustainability of the project may be compromised as potential customers will be unable to progress independently without such intervention projects. If the latter point (awareness activities) is not continued along with the former, the rural populace may only associate the benefits of the project with a specific donor and may not demand the same services once the project is completed.

As part of the suggestions with respect to institutional change, IFAD later (2012) approached the Government of Armenia with a list of recommendations. The Government’s response was that “it is hardly realistic that our banks would go into business term

loans.”Subsequently, with IFAD financing a special foundation was established, the FREDA, which provides venture investments to enterprises working in these fields (Independent Office of Evaluation - IFAD, 2012). This response foreshadows what may be a pitfall of IFAD’s development efforts. If IFAD continues to be an instrument of financing as a third party outside of the community and Armenian banks, it may be unable to leave as the government is not willing to encourage banks to take over the donor’s duties, which will undermine building social capital.

## CHAPTER 3: RESEARCH METHODOLOGY

### **Research Methods**

There are abundant cases of Integrated Community Development around the world and facets of some may be applicable to others in practice. However, in order to properly gauge the discussed methodologies this project will explore an Armenian case in particular.

The UNDP has conducted several development projects and programs in Armenia under the umbrella of Integrated Community Development. At the time of writing this research some were completed, some are in process, and others are being planned. This research delves into one particular case which is one part of four on-going Integrated Community Development Projects in Armenia — it should be mentioned that though the four are independent there are areas of overlap between them, such as financing. The project is part of the UNDP Community Development Aid for Trade project in the community of Lusadzor.

Typical of ICD approaches elsewhere, the UNDP's approach in Armenia involves providing tangible assistance such as renewing and rebuilding infrastructure and providing specific equipment for particular development projects, but also intangible aid, such as training community leaders and residents in proper usage of the equipment provided and learning to function independently without outside assistance. Of the utmost importance and the focal point of this research is community capacity development, which in the UNDP methodology is the key component of program inception. All programs begin with community meetings and focus groups which serve to provide program implementers with valuable insights that only locals can provide but, more importantly, begin to instill, rekindle, or develop a community's sense of ownership, decision making power and project initiation capacity.

What follows is a description of the UNDP's ICD project in Lusadzor; the setting and the program in detail.

## **Lusadzor**

Lusadzor is located in Tavush *Marz* (province), in the north-east of the Republic of Armenia. The *Marz* comprises four regions: Ijevan, Dilijan, Noyemberyan, and Berd (Shamshadin). In the south it borders Gegharkunik and Kotayk *Marzes*, and in the West, Lori



**Figure 3: Tavush Map**

*Marz*. In the north it borders Georgia and in the east, Azerbaijan, sharing 50 km of interstate border with the former and 350 km with the latter. The total area of Tavush *Marz* is 2,704km<sup>2</sup>— 270,393 hectares — of which 105,931.2 hectares (39.2% of the total area) is used for agrarian purposes. The *Marz* comprises 9.1% of the Republic of Armenia's total area. The population density is 50 people per km<sup>2</sup> with the populace spread through five urban (Ijevan, Dilijan,

Noyemberyan, Berd, Ayrun) and 62 rural communities. Tavush contains many large and small rivers and a relatively mild climate which offers oxygen-rich fresh mountain air, curative mineral waters, woods, and highlands rich in herbs; particularly in the Agstev Valley region.

The agricultural economy is comprised of farming, animal husbandry, vegetable gardening, apiculture (beekeeping), and fodder growing. The region is relatively poor in mineral resources but has deposits of bentonite, clay, limestone, lithographic limestone, dolomite, and felsite—resources of industrial significance. The region also hosts river(s) in the Agstev river valley which are rich in mineral water; in the city of Dilijan there are two functioning mineral water plants. The region contains mixed forests which occupy 51% of

the total area and are distinguished by a variety of flora and fauna and unique monuments of natural heritage. In the Agstev Basin in Dilijan National Park, a National Reserve — Dendropark — serves as a venue for natural preservation and the enrichment and generation of new species in local conditions. The combination of natural and historical sites (churches, fortresses, monasteries, etc.) serves to make the region a popular destination for vacation, rehabilitation, and international tourism (UNDP Armenia, 2009a).

Lusadzor is found in the north-east of Tavush *Marz*, just seven kilometers outside of Ijevan and 145 kilometers from Yerevan. Until 1990 the community was part of a single governed unit with the neighboring communities of Khashtarak and Lusahovit. Lusadzor is rich in water resources with the Agstev River at its base. It sits on 626.3 hectares of which 462.0 (73.8%) are arable/used for agriculture. As of 2007 (most recent UNDP data available) the community consisted of 218 households, of which 197 were present in the village at that time. There were 696 residents (725 present) of whom 359 were men and 365 were women. There were 517 adults, of whom 76 retired and 33 disabled persons. The community had seven single mothers and twelve "large" families (defined as families with three or more children) (UNDP Armenia, 2007). By 2006 Lusadzor was in its second year of population decline. In that year, 60 people from 38 households had migrated abroad for work; consistent seasonal labor migration persists until the present. It should be added here that at the time this research was conducted (2013) the community had 709 residents, as reported by the local Municipality, about half of whom were present in the community, i.e., not abroad.

In general the community's population has a relatively high education level but most of the population continues to be employed in agriculture; 243 people at the time of the original survey. In that same period, 82 people were employed in government or other work in the locality (local specific), nine people were in the army, and eleven were enrolled in universities.

## **UNDP ICD Methodology – Program in Lusadzor**

In 2006, the United Nations Development Program (UNDP) began a community-based revitalization and development program in Lusadzor. The concept used the integrated approach from the outset, attempting to engage the community in active participation from the initial planning stage to subsequent monitoring and evaluation. Through community meetings and focus groups the UNDP promoted an open and transparent atmosphere in which community suggestions were gathered and came to form the 2007-2008 Integrated Community Development program for Lusadzor (UNDP Armenia, 2007). However, community involvement did not end after the planning stages. Community meetings were encouraged to continue so that residents felt at ease in providing continued input in the community's development process. This input serves several purposes in theory, as has been discussed earlier. Tailoring programs by residents' criteria means they will not be disengaged from the development process, they will see a tangible link between their participation and the future of their communities, and will develop the will — capacity — to take the community's advancement into their own hands.

### **Details of Project**

In general the UNDP's ICD methodology consists of a dual approach when entering a community. Early on, large-scale renovations, namely infrastructure, are initiated so as to grow the community's capacities for further development. Later, waves of specific projects are targeted to individuals or households depending on certain factors derived from the community meetings and focus groups conducted in the very first stages of the process. This process will be elaborated in a subsequent section but the relevance here is the implementation of what is, by method, Integrated Community Development.

In line with this program, the government of Italy provided € 500,000 and an additional € 34,000 was financed by the UNDP (UNDP Armenia, 2009). As discussed earlier

the UNDP approach entails projects with a community-wide impact and other projects targeting individuals. In Lusadzor, the projects were the following:

- Construction of a natural gas distribution network; installing 4.8 kilometers of piping. More than 180 families in Lusadzor benefited from this installation— for heating, cooking, and other needs. The total cost of this project was € 45,351.
- Reclaiming land for agricultural use. Untended lands with naturally growing hay were sown with roughly seventeen tons of high quality wheat seed that were distributed to 136 households in addition to fertilizer and diesel fuel. The result was 52 hectares of arable lands which produced 100 tons of wheat and raised annual income by € 77 per family (€ 10,200 total). The total cost of the project was € 10,000.
- Planting of red orange gardens and distribution of saplings. In the first wave 5,575 saplings were distributed in the community and in the following year, by request of the residents, 5,500 were distributed; 146 households benefited. Due to the particular climate of the area there is a higher rate of success for growing red oranges. In the next 34 years Lusadzor is expected to produce over 500 tons of red oranges, which is expected to increase the community's income by € 49,000 (€ 335 per family). The total cost of the program was € 7,000.
- Livestock breeding. One-hundred and twenty households in the community maintain livestock. To increase the genetic quality of cows and quality of milk the community was provided with special equipment and materials. The village veterinarian also received appropriate training. Beneficiary households are expected to see an increase in income of € 360. The total cost of the program was € 3,504.



- Renewal of the Community Center. An effort to stimulate the community life by rebuilding the 1962 Community Cultural Center. Three-thousand books and ten computers were added to the library (inside the Center) and connected to the internet. As part of the rebuilding, the Center's community hall was refurbished, providing a venue for community meetings, cultural events, and supporting the general cultural life of the community. The total cost of the project was € 77,454.
- Rebuilding the community's potable water infrastructure. The community had old and dilapidated piping and no reservoir. The community's water needs were served via natural springs which were not treated. Of this, about 75% of the water supply was lost. The project constructed 6.2 kilometers of water pipeline, a new treatment station, and a new pumping station which now allow the entire community to receive a constant supply of clean water. The total cost of the project was € 233,129.
- Providing greenhouses. The local climate is conducive to the development of greenhouse crops. Initially 28 households received greenhouses, each co-financing 5%. The greenhouses allow for agriculture production from early summer to late autumn. The total cost was € 66,324.
- Establishing an agro-production Cooperative. Due to UNDP's intervention in Lusadzor fruit production in the community increased dramatically. Thus, it became a necessity to build a processing station to further increase residents' incomes. The station provided the means for production, packaging, and labeling of certain goods in producing diverse agricultural commodities. The Cooperative facility has means for bread production, dried fruit production, a cold storage facility, and a truck for taking goods to market. Bread production reached an

annual fifty tons and dried fruit totaled an annual 4.5-5 tons (UNDP Armenia, 2009a).

### **Data Collection Instruments**

The purpose of this research is to test the hypotheses that Integrated Development is a viable methodology for development and second, that ICD promotes capacity development by breaking the mentality of dependence by way of ensuring the long-term sustainability of development projects. Therefore, the research instruments were aimed at measuring the integration of these two fundamental components of ICD methodology.

As the survey questionnaires were designed for the community's residents the areas of interest were: level of participation and input; locals' knowledge of program details and understanding of project procedures; increased capacity (confidence) with the passage of time; and community takeover of implemented projects and methods (e.g., meeting outside of the auspices of UNDP).

The subjects for data analysis were the program implementer (UNDP), community leadership in Lusadzor, and development documents supplied by UNDP. Semi-structured interviews were conducted with the former two to be analyzed for content. In addition, UNDP booklets and other documents were analyzed for content using a set of descriptors emanating from the research questions.

### **Pilot Testing of Instruments**

The survey to be administered to Lusadzor's residents was tested in a small business in downtown Yerevan. After a first round of testing the original survey, which contained many open ended questions, was changed. Several of the open ended questions were split into two or three more specific questions meant to be deliver responses on a Likert scale. The questionnaire was thus more focused with less room for digression in responses or

instrumentation. The interview questions were tested on peers — fellow students — and were understood clearly; but again, some questions were separated into parts to guarantee responses focused on relevant topics. The survey questionnaire and the interview questions can be found in the Appendices A through C.

### **Data Analysis**

The survey responses, 62 in total, were analyzed with IBM SPSS software. The topic areas mentioned above (level of participation and input; locals' knowledge of program details and understanding of project procedures; increased capacity (confidence) with the passage of time; and community takeover of implemented projects and methods) were designed so as to reveal evidence of proper ICD methodology true to the definitions from the literature review.

The interviews and documents were analyzed using a priori coding. Categories and subcategories were established before conducting the interviews and acquiring relevant documents. The categories were defined and divided by subject-relevance to ICD methodology. The target areas of analysis were the following:

Category: Candidate selection(*selection of communities, groups from within the community, and individuals from those groups*)

Category: Tailoring methods

Subcategory: Building on local capacities and assets

Category: Cohesion

Category: Capacity/confidence building

Subcategory: Local input

Subcategory: Local monitoring and evaluation

Category: Sustainability

Subcategory: Finding "leaders"

Subcategory: Post-intervention planning

The categories were divided so as to give equal weight to each entry. Word, phrase and concept frequency were counted according to context and placed into the categories above for frequency count. While in some instances entries were mutually exclusive across categories in other instances they served as evidence for various areas of interest and thus were repeated and counted across the different headings.

### **Assumptions of the Study**

Pertaining to the investigation of the case-community and the research instrument used in that regard (the survey) the major assumption was the depth at which community members were genuinely affected by the UNDP ICD intervention. For an accurate understanding of the depth of application a larger sample would be necessary. Also, the time between the UNDP's first entry and the community were assumed (required) to be adequate so that measurable effects would be seen.

Finally, considering that the survey instrument relied solely on the knowledge, opinions, and ideas of residents, a level of trust and honesty was taken for granted between researcher and subject.

### **Limitations of the Study**

The nature of this topic — Integrated Development —inherently has several limitations for research. First, when applying development theory to practice there are several variations in application driven by the local cultural or historical nuances. Thus, some room for maneuver was granted between the theory-methodology gap, and the methodology-application gap, i.e., divergences were allowed moving down the theory-practice chain. Another limitation with a more direct impact was the turnaround time between the implementation of the project analyzed (UNDP in Lusadzor) and the results measured. The measure of success for Integrated Community Development methodology is

two-fold. While improvements in a locality's socio-economic situation are an immediate priority, community capacity development is required to meet the criteria of the theory but, more importantly, to ensure sustainability of development impacts. In regard to this research the time between completing the major projects in the case-locale and the time of analysis were not long enough to adequately measure the second component of ICD mentioned above. While tangible benefits were visible and obvious, the psychological component of capacity development requires more a longitudinal study that would capture noticeable differences that develop in time.

## CHAPTER 4: RESEARCH FINDINGS

### Survey Analysis Results

Of the four areas of interest described above, two (level of participation and input, and locals' knowledge of program details and understanding of project procedures) were analyzed

Descriptive Statistics		
	Mean	Std. Deviation
How aware are you of the UNDP project?	3.84	.632
Community Input	1.00	.000
Infrastructure Development	.97	.178
Pooling residents for project phases	.53	.503
Implementation	.24	.432
Water infrastructure	1.00	.000
Land reclamation	.32	.471
Natural gas infrastructure	.87	.338
Livestock breeding	.44	.500
Sapling distribution/garden planting	1.00	.000
Community Center	1.00	.000
Greenhouses	1.00	.000
Cooperative	1.00	.000

Figure 4: Program Awareness

by taking the frequencies and means of responses received. The variables relevant to these areas reveal the depth at which the UNDP project assimilated local input into project design and implementation and kept locals engaged in each step of the project. Questions were posed to citizens who asked their level of familiarity with the UNDP program as a whole. The results revealed that on a Likert scale of 1 (not at all aware) to 5 (very aware), the community average

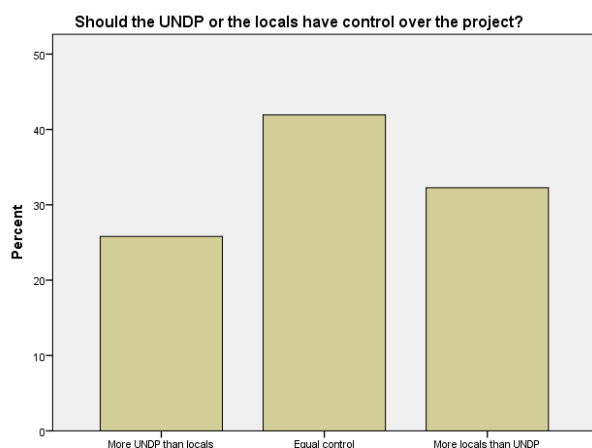
was 3.84 i.e., almost a 4 (aware). A later follow-on question asked respondents to specifically name the components of the UNDP program, testing the depth of their awareness even further; every time a respondent named one of the component, that component was given a score of 1 (if it was not named by the respondent, it got a score of 0). While the majority of locals were aware of major infrastructure projects many were not able to identify the more focused (second-pool) projects that did not affect them directly. Or in several instances, they were not aware that certain projects were implemented by the UNDP specifically. These results reveal a generally positive outlook. Successful ICD implementation must entail locals' knowledge of project details so as to gradually embed community development processes into local thinking, and this was evidenced in the survey

results. However, the survey also revealed that citizens that saw no benefit from particular projects, also could not identify them (with some exceptions).

Another set of questions relevant to this area of interest asked the frequency of individual input in the development program. Each respondent was asked if they were consulted before the program began, a positive response was given a score of 1, otherwise 0. A mean of .69 reveals that most locals did participate in the initial community meeting(s). It is also important to note here that many of the women in the community expressed that generally speaking the men (fathers, husbands) in the family were the ones who attended the meetings. Nevertheless, when asked whether respondents felt that their inputs were adequately considered most female residents responded positively. On a Likert scale of 1 (very inadequate) to 5 (very adequate), a mean of 3.98 expressed the community's feelings that they were consulted adequately. Many women noted that they and their families' inputs were communicated through their husbands and/or fathers who were more likely to frequent the meetings or focus groups.

In the next section of the survey, locals were asked about how they weighed the importance of local input in community development interventions. On a Likert scale of 1 (not at all important) to 5 (very important), the community average was 4.16 or slightly more than *important*, indicating a higher level of interest and the necessity for building local capacity.

However, when asked how control of projects should be split among implementers and residents, the results revealed that the idea of complete independence was growing but not yet fulfilled. The question posed was, "Should



**Figure 5: Program Control**

the UNDP or locals have control over the project?" The possible choices were 1 = UNDP completely, 2 = more UNDP than locals, 3 = equal control, 4 = more locals than UNDP, and 5 = locals completely. The graph shows that, on the average, locals favored an even distribution of control between UNDP and locals. Here the mean is 3.06 with a standard deviation of 0.765.

The most startling result was in response to the final survey question. Respondents were asked how they thought the community would do if the UNDP were to leave the community. On a Likert scale of 1 (very bad) to 5 (very good), 100% of residents surveyed responded *very bad*. They were not explicitly asked why that was the case, but most volunteered explanations that were recorded and subsequently summarized in the order of the intensity of the response: associated success with intervention; villagers have no direction without UN/intervention; progress without oversight is impossible; and external financial assistance is a necessity. A few locals were more specific noting that direction, oversight, or financial assistance was a requirement for a small community to survive and thrive.

In contrast, the respondents did not identify their success — that which they had cultivated with initial UNDP assistance but built on their own— with their independence. Community outlook was generally positive, in response to two questions asking to rate the optimism of the future of their families and the community as a whole, the analysis reveals a significant correlation with Spearman's  $\rho$ .417 (two-tailed test at a 0.01 level of significance) between optimism for family and optimism for community. At the time of the survey, the UNDP project had virtually concluded and was reduced to annual or biannual check-ins by UNDP personnel. However locals still felt the UNDP's presence as a guarantor of their success despite growing independence. Not only have many received material assistance (55%) or training (44%) but the community has instituted general meetings and focus groups as a staple of local life. Analysis reveals that there is a positive correlation of



.318 (two-tailed test at a 0.05 level of significance) between the importance placed on local input into intervention projects and the frequency of community meetings independent of the UNDP. Locals continue to meet to discuss issues vital to development and communicate with local leadership to coordinate minor assistance from UNDP, as necessary. Although even in these cases many residents take it upon themselves to remedy small problems that may arise.

Of the four areas of interest in constructing the survey, sustained community ownership of implemented projects and methods entails two important ICD principles; community capacity development and sustainability. The results depict a community which is quick to learn and apply what it has been given(material and training), is implementing development methods in voicing community opinion and maintaining focus groups and communal oversight, and increasingly independent of financial and technical assistance, but does not recognize it. The most viable explanation or justification for this result is that residents simply do not want to discourage other development/assistance interventions in their community.

### **Interview Content Analysis Results**

As previously described the interview subject areas were divided into categories and subcategories in which all responses were given equal weight. The first interview was conducted with the UNDP Social Development Specialist and the following frequencies were counted. Under *candidate selection* there were nine mentions of ICD methodology being applied in Armenia. In the category *cohesion*, that is, integrating entire communities into the development process, seven counts were recorded. In the category *building on local capacities and assets* there were eight counts. In the subcategories *local input* and *local monitoring and evaluation*, there were eight and five counts, respectively. Under the *sustainability* category, the subcategories of *finding leaders* and *post-intervention planning*,

there were seven and five counts, respectively. This illustrates a relatively balanced application of the main category-areas of ICD theory. Since the interviewees were questioned as to ICD methodology across the entire implementation schedule, the balance across sectors characterizes the holistic approach necessary for true application of ICD methodology.

The interviews with the Mayor of Lusadzor and the Deputy Mayor were tailored to gather information on the implementation of the local ICD project, as well as to get a good account of the beneficiary community. The UNDP strategy, as a rule, must include local leaders. Leaders play a specific role between the UNDP and the community as they take the helm of development after the intervention has concluded. Thus, they must have a higher awareness of intervention programs than do residents, and must act as a catalyst for development.

Regarding the first category, *candidate selection*, local leaders have a slightly different responsibility. While the UNDP must weigh communities as candidates at first and then weigh individuals among communities, local leaders only focus on the latter as at that point in the process the community for intervention has been selected. In the first category the Mayor's and Deputy Mayor's interviews produced six and four counts, respectively. For the category *building on local capacities and assets*, the Mayor and Deputy Mayor mentioned four indicators each, though different ones. For *cohesion* the Mayor mentioned five indicators and the Deputy Mayor, three. In the subcategories *local input* and *local monitoring and evaluation*, the Mayor highlighted eight for the former and one for the latter; the Deputy Mayor mentioned three for the former and the same one for the latter. For the subcategory "finding 'leaders'" the Mayor indicated five and the Local Leader, four. For *post-intervention planning*, the Mayor mentioned one and the Deputy Mayor, two.

There is an important note as to the frequencies from the above interviews. The initial conversations with both interviewees were their summarizations and explanations of the

UNDP project as a whole. That is, the information communicated was a direct restatement of the project details. This initial part of the interview was not used for frequency counts. After the opening discussion the questions tested the Mayor and Deputy Mayor's understanding of UNDP's methodology, as opposed to their knowledge of program details; that is the portion that was used in the content analysis. That being said the results of the interviews with the Mayor and Deputy Mayor indeed demonstrate the depth of UNDP's engagement and the level at which the community's leadership absorbed the logic of ICD methodology. Despite emphasis on certain categories all the areas of interest were mentioned.

### **Document Content Analysis Results**

Four documents were analyzed according to the same criteria as the interviews. These documents were chosen because they were specific as to the implementer (UNDP), the methodology (ICD), and the content (specific projects). Given that the documents describe real cases, the time of their publication in relation to the project's initiation exhibited different foci; that is, program documents written before a project began have greater emphasis on the earlier stages of development whereas reports (annual reports) show greater emphasis on post or near-post project considerations.

The first document is the specific program plan for the case that was studied. The counts across the categories show an emphasis on candidate selection, building on local capacities, and local input, although the remaining categories have nearly equal weight among them. A specific component important for the *local input* and *post-intervention planning* categories is worth pointing out. UNDP program documents describe project steps in a given community. An important idea explained in the literature review, Solution Based Brief Therapy (SFBT), was present in the earliest stage of developing a community plan; the creation of a community *vision statement* not created through problem identification but by goal visualization and the setting of positive incentives.

UNDP Lusadzor Community Development Program Document(UNDP Armenia, 2007)	
Candidate Selection	12
Tailoring Methods	
Building on Local Capacities and Assets	17
Cohesion	8
Capacity Development/Confidence Building	
Local Input	15
Local M&E	6
Sustainability	
Finding "leaders"	10
Post-intervention planning	8

Figure 6: Lusadzor CDP Content Analysis

The second document, similar to the first, is the program plan for the Pambak Community of Gegharkunik Marz. Perhaps due to the later date of publication (i.e., implementation) the Pambak plan is more balanced across categories than that for Lusadzor; it should also be noted that the document is much longer. Again, the *vision statement* required for UNDP methodology and evidence of the SFBT component of capacity development was clear in this community plan.

UNDP Pambak Community 2009-2012 Integrated Development Plan(UNDP Armenia, 2009b)	
Candidate Selection	14
Tailoring Methods	
Building on Local Capacities and Assets	15
Cohesion	14
Capacity Development/Confidence Building	
Local Input	21
Local M&E	13
Sustainability	
Finding "leaders"	18
Post-intervention planning	13

Figure 7: Content Analysis of Pambak Development Plan

The next document is a UNDP Progress Report for projects across Armenia and thus discusses a wider array of objectives pertaining to the UNDP Community Development Project. In this document *fostering democratic governance* and *reducing poverty and regional disparities* complement the community level areas of interest such as *fostering economic activities* and *turning economic development opportunities into income generation opportunities*(UNDP Armenia, 2011a). Since the report addresses these various topic areas the

sections allocated to the criteria specific to community level projects (e.g., local input) are relatively less prominent.

UNDP RoA Annual Progress Report(UNDP Armenia, 2011a)	
Candidate Selection	8
Tailoring Methods	
Building on Local Capacities and Assets	8
Cohesion	17
Capacity Development/Confidence Building	
Local Input	9
Local M&E	10
Sustainability	
Finding "leaders"	11
Post-intervention planning	24

**Figure 8: Content Analysis of RoA Annual Progress Report**

The last document is a report on one specific project under UNDP Armenia's general Integrated Community Development program: the Vocational Education and Training (VET) Annual Report. As a component of medium and long-term sustainable national development the UNDP supports reforms in the VET process for the purposes of meeting labor market requirements. One main topic area discussed is “private-public partnerships in target areas to provide alternative livelihood opportunities and improved service provision”(UNDP Armenia, 2011). In addition work-plans, gender disaggregated VET enrollment, and rehabilitated VET Centers are mentioned. Thus the document is weighed towards end-processes in the Integrated Development chain, as the table below illustrates. Those end-process categories are represented more frequently than the initial — input — categories.

UNDP Vocational Education and Training (VET) Annual Report (UNDP Armenia, 2011b)	
Candidate Selection	8
Tailoring Methods	
Building on Local Capacities and Assets	8
Cohesion	17
Capacity Development/Confidence Building	
Local Input	9
Local M&E	10
Sustainability	
Finding "leaders"	11
Post-intervention planning	24

**Figure 9: VET Annual Report Content Analysis**

## **CHAPTER 5: CONCLUSIONS AND SUGGESTIONS FOR FUTURE RESEARCH**

### **Summary**

A history of mixed results motivated several reassessments in development methodology that resulted in increasingly comprehensive approaches. Integrated Community Development is a culmination of these reassessments and has come to address the multifaceted nature of developing communities. This study was intended to find out whether ICD, from theory to practice, is the most appropriate approach available. The hypotheses of this research addressed the two fundamental ideas of development: sustainability and capacity development.

An exploration of ICD theory reveals a level of depth and detail that is intended to address the persistent problems facing global development. Given the nuances of different countries, regions, and communities, this research delved into the application of ICD in one specific case with the intention of accepting or rejecting the methodology in a wider national context.

Given that ICD uses a top-down and bottom-up process, this study engaged both implementers and beneficiaries simultaneously, using a mixed evaluation design, and testing the extent of application and quality of subsequent results. Ultimately, this study supports the credibility of ICD. The theory proved comprehensive and the application proved thorough.

### **Conclusions**

Since this research was intended to explore ICD methodology through a case study the first criterion tested was the case study implementer's adherence to ICD theory. An analysis of UNDP content (interview and documents) affirmed that the method in practice was true to ICD. The required components, as reviewed by the literature on the topic, were present throughout program design.

The second criterion focused on the effectiveness of the capacity building component of the methodology. A survey of residents revealed that the capacity building piece was inherent from program's initiation. More importantly, the practices required for capacity development have been absorbed by the community and penetrate the local mindset; a significant change in mentality was indicated by residents' responses to a variety of questions. However, a specific inquiry into their thoughts on eventual independence — from any outside intervention — showed the opposite result. Despite the locals' increased abilities for realizing economic growth and social cohesion, survey respondents in the community revealed that they could not envision a future without outside assistance. However, as discussed before, this is attributed to the respondents' apparent assumptions that this research was directly connected to the community development program. Residents responded so as to not discourage future intervention programs.

In summation, the first hypothesis, ICD as a viable development methodology is accepted. The theory is holistic and comprehensive and has produced significant tangible results in community development; the economy has significantly improved and the community has received the physical infrastructure needed for further development. The second hypothesis, the ability of ICD to change the dependent and "problem-filled" mindset, is partially accepted. Residents in the case community have acquired skills for economic independence and have incorporated ICD's input structures into local governance. They are optimistic about their future and operate with decreasing outside assistance. Nevertheless, and most likely due to their understanding of the justifications for this study, they express the opposite.

### **Suggestions for Future Research**

This study was limited by two main factors. First, as to both the economic and psychological sustainability of ICD, a higher turn-around period between the end of

implementation and the survey period might be more revealing as to the sustainability of the project. Regarding the final survey question and residents' thoughts on eventual independence from intervention, the tone of that response would likely change as the community takes note of its increased autonomy and power of self-determination.

Second, though local differences in various (global) regions add difficulty to the generalizability of any specific intervention methodology, an application of this study to various development sites, in Armenia specifically, would further support the generalizability of the methodology in a national context.

Sustainability is only measured by success over time and thus further research is required to expand on the veracity of the claims made. The foundations for sustainable development are evident in ICD but the rate of development needs to be explored over time. This would affirm the worth of ICD as an affective — possibly the most effective — theory of sustainable development.



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## APPENDICES

### **Appendix A: Survey Questionnaire**

1. Age
  - 1: 10-20
  - 2: 21-30
  - 3: 31-40
  - 4: 41-50
  - 5: 51-60
  - 6: 61-70
  - 7: 71-80
  
2. Gender: 1 = male, 2 = female
3. Size of household (how many members):
4. Members of family abroad:
5. Do you work (consistent employment)?:
6. How would you rate the situation in Lusadzor up to 10 (7-10) years ago?
  - 1 = Very Bad
  - 2 = Bad
  - 3 = Neither good nor bad
  - 4 = Good
  - 5 = Very good
  
7. How would you rate the situation in Lusadzor now?
  - 1 = Very Bad
  - 2 = Bad
  - 3 = Neither good nor bad
  - 4 = Good
  - 5 = Very good
  
8. How aware are you of the UNDP project? [question 19 follows up on this with specifics]
  - 1 = Not at all aware
  - 2 = Not very aware
  - 3 = Somewhat aware
  - 4 = Aware
  - 5 = Very aware
  
9. How did you feel initially about the UNDP project?
  - 1 = Apathetic
  - 2 = Skeptical
  - 3 = Neutral (unsure)
  - 4 = Optimistic

5 = Very optimistic

10. How do you feel about it now that it has progressed? (1-5)

1 = Apathetic

2 = Skeptical

3 = Neutral (unsure)

4 = Optimistic

5 = Very optimistic

11. Were you consulted about the project before it began?

1 = yes

0 = no

12. Were you part of the community meetings/focus groups?

1 = yes

0 = no

13. How would you rate the level that the community as a whole was consulted?

1 = Very inadequate

2 = Inadequate

3 = Neither

4 = Adequate

5 = Very Adequate

14. Do you feel that you were consulted adequately?

1 = yes

0 = no

15. How important is the input of locals in these projects?

1 = Not at all important

2 = Not important

3 = Neutral

4 = Important

5 = Very important

16. Should the UNDP or the locals have control over the project?

1 = UNDP completely

2 = More UNDP than locals

3 = Equal control

4 = More locals than UNDP

5 = Locals completely

17. Have you been consulted about progress in the project (process)?

1 = Not at all

2 = Very little

3 = Somewhat

4 = Often  
5 = Very often

18. Have the UNDP projects affected you directly? (Yes/No to each of the following)

In terms of:

- Benefits from infrastructure
- Material assistance (equipment)
- Training (educational courses)

19. What do you know about the phases of the project? Can you describe them? (Check which the respondent could come up with by himself/herself)

- Community Input \_\_\_\_\_
- Infrastructure development (general) \_\_\_\_\_
- Pools of residents for project phases \_\_\_\_\_
- Implementation \_\_\_\_\_
- Water infrastructure \_\_\_\_\_
- Land reclamation \_\_\_\_\_
- Natural gas infrastructure \_\_\_\_\_
- Livestock breeding \_\_\_\_\_
- Sapling distribution/garden planting \_\_\_\_\_
- Community Center \_\_\_\_\_
- Greenhouses \_\_\_\_\_
- Cooperative \_\_\_\_\_

20. Do you (people in the community) meet independently to discuss these things/the progress?

- 1 = Never
- 2 = Almost never
- 3 = Sometimes
- 4 = Often
- 5 = Very often

21. How do you feel about you and your family's future?

- 1 = Bad
- 2 = Pessimistic
- 3 = Unsure
- 4 = Optimistic
- 5 = Very optimistic

22. How optimistic are you about the future of Lusadzor?

- 1 = Pessimistic
- 2 = Unsure
- 3 = More good than bad
- 4 = Optimistic
- 5 = Very optimistic

23. How do you think the community will do after the project has completed and the UNDP has left?

1 = Very bad

2 = Bad

3 = Neither good nor bad

4 = Good

5 = Very good

24. If good or bad, why? (question was not asked explicitly but an abundance of the below answers led to coding as follows)

1 = Associate success with intervention [most general answer]

2 = Villagers have no direction without UN (intervention)

3 = Progress without oversight is impossible

4 = External financial assistance a necessity

## **Appendix B: Interview Questions to UNDP Development Specialist**

(After an introduction to UNDP projects was given by the Specialist)

1. What theories or methodologies does UNDP Armenia base its program designs on?
  - a. What specific methods have been applied in past interventions in Armenia?
2. What types of pre-intervention steps are taken? Is situation analysis conducted?
3. How are communities chosen for intervention?
4. Are time frames defined concretely before intervention or is there a loose structure?
5. How are all stakeholders defined and engaged?
6. How is community input implemented?
7. How is sustainability built into project methodology?
  - a. How is community input sustained beyond the project implementation period?
8. Are their consistent methods (across locales) for capacity development?
9. How are candidates for individual intervention chosen?
10. What are the funding mechanisms?
11. Discuss the balance of monitoring between implementers and locals.
12. What practices are in place to shift decision making power from implementers to locals?
13. Is there a reflection period between projects?
14. What about locals who are better off in the community, are they ignored at the cost of placing more emphasis on the most destitute?
15. What types of roadblocks exist and how are they addressed within the definitions of Integrated Development methodology.
16. Discuss some current ICD projects in Armenia [this question was intended to reveal how ICD methods were put into practice in Armenia but was removed as every answer above was elaborated on with examples from current projects].

## **Appendix C: Interview questions for Lusadzor Mayor and Deputy Mayor**

1. Describe the UNDP program in this community.
2. What was the community's role in the development stage?
  - Why was each step conducted?
3. What was your role in the community's input process?
4. How was/is community input received?
  - What were the stages of input?
  - Why the specific stages?
5. Who is responsible for control over the development program?
6. What are the communication mechanisms between yourself, the community, and the UNDP?
7. What problems were confronted in the initial stages and how were they remedied?
  - Who solves problems as they arise?
8. How was the community engaged initially, and how has that process continued?
  - How were community assets identified? How were they used?
9. Who is singled out for second-pool intervention?
10. What measures are in place to ensure sustainability as UNDP intervention recedes?