



AN EVALUATION OF NIGERIA'S PERFORMANCE IN INTERNATIONAL DEVELOPMENT OBJECTIVES

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Abstract

The objective of this study is to evaluate how Nigeria performed in the international development objective of the Millennium Development Goals (MDGs) using microeconomic indicators of health and education. Specifically, this study measures how effective was the Conditional Grants Scheme (CGS) on these indicators. Adopting an ex post facto research design and using Nonparametric test (Wilcoxon Signed-Ranked); the study indicates that investments channelled via CGS caused significant and positive changes in maternal and child mortality rates as well as primary school enrolment rates, which invariably affected Nigeria's performance in achieving the international development objective of the MDGs. The study concludes by recommending that in spite of implementation challenges, CGS experiences should not be discarded as her lessons affect the operationalization and achievement of the Sustainable Development Goals (SDGs) before the 2030 target date. Furthermore, such expansion should include investments in 'soft social infrastructure' alongside the existing hard infrastructure.

Key Words:Conditional Grants, Development, MDGs, Nigeria, SDGs

JEL Codes: D04, H11, I18, I38

Introduction

Nigeria did not meet some (if not all) of the Millennium Development Goals (MDGs) (Amakom, 2014)(Okere, 2013). While donor evaluation and official records that assessed Nigeria's performance in the MDGs revealed Nigeria continued to fall behind in her efforts to achieve the MDGs, few studies have shown how these MDGs programmes/projects performed towards meeting such international development objectives. In view of this, the Department for International Development (DFID) rated Nigeria "off track" on the following indicators: Proportion of population living below 1.25 dollars a day (PPP); Net

enrolment in primary education; Maternal Mortality; Improved water source (DFID, 2012). Apart from international ratings, the Office of the Senior Special Assistant to the President on MDGs (OSSAP-MDGs) admitted that for Nigeria to meet the MDGs in 2015, increased effort was needed (OSSAP-MDGs, 2013). Despite such fears, a snapshot of Nigeria's scorecard on the MDGs reveals that by 2015, Nigeria was off-track on extreme poverty and hunger objectives (Goal 1). However, she made significant progress on universal basic education (Goal 2) while attempting to meet the ratio of boys and girls in

secondary school enrollment (Goal 3). The scorecard also indicated that Nigeria made slow but steady progress on maternal and child mortality ratios (Goal 4 and 5) and stabilized/reduced the prevalence of HIV/AIDS (Goal 6). Surprisingly, she could not meet international objectives on provision of clean and improved sanitation (Goal 7) while doubling Overseas Development Assistance (ODA) within the MDGs period (Goal 8) (OSSAP-MDGs, 2013). Such performance indicators beg the question as to what government-instituted processes actually worked since some positive records existed during the MDGs implementation period.

During the MDGs period and as part of effort to improve Nigeria's standing on the MDGs, the Conditional Grants Scheme (CGS) was introduced in 2007 as a platform for counterpart funding between the Federal and State governments. The programme extended to the local government systems in Nigeria (under the CGS-LGA Track) in 2010. This programme was born out of the need to increase investments in social infrastructures specifically in health, education, women and youth as well as sanitation, thus ensuring improvements within these sectors geared towards fast tracking the MDGs and reducing poverty in Nigeria. The CGS programme was hailed as a unique social investment system, both domestically and internationally. Indeed, in the view of several stakeholders, it was the most direct investment from the government that has affected the lives of the rural poor and the most vulnerable in Nigerian society. Unlike investments through mainline government ministries, the CGS was not encumbered with many bureaucracies or other responsibilities, thus increasing ability of implementers to focus easily on the singular objective of improving the MDGs (SPARC-DFID, 2010). These investments were huge and the gaps they filled were immense. However, Nigeria's overall performance on most of the MDGs was still not as sterling.

It appeared that since the inception of the CGS-LGA Track (in 2010) and that of its elder brother (the CGS-State Track) in 2007, Nigeria continued to lag behind in her performance for meeting the MDGs. For instance, the *National Demographic and Health Survey* also showed that Nigeria continues to face challenges in "Health and Alpha numeric skills" despite the machineries of development programmes instituted under the CGS-State and CGS-Local Government Tracks (NPoC, 2013). In addition, poverty rate within this period still stood at 42.7 per cent (despite MDGs effort) and continued to increase (even in rural areas) at an average of 15 per cent (World Bank, 2016). Furthermore, the 2013 MDGs Report contends that poverty headcount was at 62.6 per cent against the 2015 target of 21 percent while infant mortality rate was about 61 per 100 live births in 2005, against the 2015 target of 30.3. In addition, under-five mortality rate stands at about 94 per 1000 live births against the target of 63.7 by 2015 (OSSAP-MDGs, 2013).

With such available data, one could conceive that programmes introduced in a bid to meet the international development objective of the MDGs did not record much success. Consequently, available literature is critical of both Nigeria's (and other developing countries) performance and programmes introduced (like the CGS) mostly considering the amount of money spent (Kenny & Summer, 2011). After years of implementing the CGS, over 190 Billion NGN was committed to the CGS-State (2007-2014), while over 107 billion NGN was committed to the CGS-LGA (2011-2014) (OSSAP-MDGs, 2013). Once this money is added to myriad development assistance (both financial and technical) offered to Nigeria by various international development partners, it would not be wrong for one to ask to what level did the conditional grants scheme support Nigeria's effort towards meeting the MDGs. This research therefore intends to answer the research question of how significant was the conditional grants scheme on four

microeconomic indicators in health and education sector. The hypothesis (H_1) put forward by this research is 'The Conditional Grants Scheme improved Nigeria's performance on the MDGs.'

The study achieves this by access the before and after effects/impact of one of the machinery used towards achieving the MDGs in Nigeria –i.e. the CGS. By so doing, this research attempts to solve an 'un-answered question' of the before and after effects of the CGS on Nigeria's performance in international development objectives, which represents a veritable nature of social problem in development research. As such, this research demonstrates the need for timely programme evaluation of progress and performance in international development objectives (e.g. the MDGs or SDGs) which is always welcomed when such objectives are time-bound.

The overall objective of this research is to evaluate Nigeria's performance in the MDGs using the mechanism of the Conditional Grants Scheme (CGS). It intends to assess the before and after effects of investments from the Conditional Grants Scheme on four indicators namely under-five mortality rates, infant mortality rates, net primary school enrolment and on net secondary school enrolment. This study is significant to policy process in Nigeria mostly since the MDGs have ended and it is assumed that Nigeria did not make significant progress on many targets of the MDGs. Thus, for the current set of global development goals –the SDG (Sustainable Development Goals), more attention should be paid to Nigeria's programmes driving the attainment of international development objectives. Specifically, the outcome of this research will help national (MDGs/SDGs) policy makers carry out other impact-assessment on development programmes (like the CGS). Furthermore, this would allow for proper rectification in development programme implementation. This research would also guide proper policy formulation and advocate for

better ways to re-integrate the concept impact-assessment and evaluation within the context of international development objectives; and eventually to a broader national policy on development institutional framework.

Review of Literature

According to available literature, the idea behind the type of social investment in the Conditional Grants Scheme (CGS) stems from an archetype designed by the United Nations in the Millennium Villages Project (MVP). The project was designed to create a pathway to achieve MDGs in the poorest regions of rural Africa; and offers a road map to 2015 and was described as Africa's largest systematic and scientific effort to achieve the MDGs (Shiram & Sachs, 2018). Accordingly, Buse, Ludi and Vigneri, considers that the mechanism of the MVP meeting the MDGs, appears to be possible across a range of disadvantage rural communities in low and middle income countries at a cost of 120 USD per capita for five years. This was within the ambit of then aid commitments as well as the timeline set for the MDGs (Buse, Ludi, & Vigneri, 2008). Sanchez, Palm, Sachs, & Denning, (2007) in a close examination of the MVP observe that this project covers approximately 500,000 rural people in 80 villages across 14 sites in 10 African countries – each representing a different agro-ecological zone. Furthermore, they identified and suggested budget allocations for intervention in areas that the MVP covers as 30 percent for health; 20 percent for infrastructure; 20 percent in education; 15 percent in agriculture and nutrition; and 15 percent in water, sanitation and environment. It is also imperative to note that the theoretical literature on grants and aids (like (Sender, 2018) (Roodman, 2006) and (Roodman, 2007) have rightfully pointed to link between quality of financial assistance (like aid) and institutional/policy dimensions as reflected in Nigeria's institutionalization of the CGS in 2007. In these analysis, the above scholars

theorized that on the policy side, behaviour and responsibilities of recipients can adversely affect the impact aid would have on development programmes (like the MDGs). Furthermore, the institutional framework in place at the time the aid was delivered also goes a long way on eventual outcomes. In light of this, the Conditional Grants Scheme, just like the MVP, rests on the understanding that there is need to review the institutional set-up in Nigeria (across all tiers of government) as well as ensuring that policies are in tandem with the grants directed towards improving the general lives of the poor across the country.

Theoretical literature examining the philosophical foundation for these investments into social infrastructure centers on the Big Push theory. The idea is that the CGS, just like the MVP, relies a lot on the 'Big Push' premise to overcome poverty traps. Consequently, for the MDGs to break the vicious circle of poverty (and other socio-economic traps) and for developing countries like Nigeria to achieve international development objectives, massive injections of capital are required. Hence, only with the big push in investments supported by foreign aids will lagging countries and regions surpass critical income threshold above which growth can then take off (Cabral, Farrington, & Ludi, 2006).

According to Abuzeid (2009), he maintains that such assistance/grants are long standing tool for overcoming the savings gap in developing countries. This perspective is based on the assumption that the Third World countries are poor because they lack the capital necessary for making income-generating investments. To this, mainstream economics literature suggests that financial assistance in form of aids and grants can help developing countries by closing this financial gap that otherwise leaves them stuck in 'poverty trap.' One scholar who has famously encapsulated this idea clearly is 'celebrity economist' Sachs, (2005) who prescribes a comprehensive package of massive aid transfers and

widespread reforms that aim to tackle socioeconomic pathologies quickly and simultaneously. Considering these views with regards to the Conditional Grants Scheme, one can see, that debt relief obtained by Nigeria from the Paris Club in 2005 reflects this same financial assistance discussed by aid literature geared towards enabling widespread reforms. The overall aim thus is to escape poverty trap via these social investments.

In tandem with the Big Push theory are the tenets of the Basic Needs Development Theory, for which the subsistence and provision of socio-economic development needs remains a right for all humans. Scholars like Emmerij (2010) contend that the origin of this theory is traceable to the middle of the 1970s, when the International Labour Organization (ILO) was in the midst of preparing for the World Employment Conference. He further states that the incipient origin is traceable to psychology literature of the 1940s, and more specifically in an article by Albert Maslow in the *Psychological Review* of March, 1942. In this article, Maslow distinguished a hierarchy of five needs starting with psychology and ending with self-actualized needs. Later in India in the 1950s, Pitambar Pant of the Indian Planning Commission developed the concept of "minimum needs". What eventually brought the theory to its current positions was a publication by the Dag Hammarskjöld Foundation titled *What Now* in 1972. This was in collaboration with the ILO which maintained in this report that it was clear that employment creation was not an end in itself but serves to fulfil the basic needs of individual human beings. Consequently, efforts targeted at improving human basic needs center directly on their ability to live a fulfilled life. As such includes the provisions of employment, social amenities, education (but to mention a few) were essential considerations national governments had to make. Literature agrees to the practicality.

The World Bank had implemented similar programmes centered on the provision

of basic human needs. The Basic Development Needs programmes were introduced in the late 1980s as a research and development project in a few villages in Somalia. Since then, it has steadily evolved and more than 200 countries across different regions of the world are implementing this approach to achieve inclusive development. Interventions using the provisions of this theory have been directed towards better health outcomes for individuals and families by alleviating poverty, creating awareness,

building capacity, enhancing literacy, ensuring adequate nutrition and providing essential health services.

The empirical literature tends to corroborate these theoretical dimensions for social investments in basic sectors with the intent to push countries to achieve their development objective and goals particularly those focused on social investments. Table 1 is a summary of various empirical literatures that covers the subject area.

Table 1: Summary of Empirical Literature

Researcher(s)	Study Description	Methodology	Empirical Findings	Gap in Literature
Ogunlela & Ogungbile(2006)	Used indicators of poverty, education and health to compare across countries in Sub-Saharan Africa		The research revealed that there has been an improvement in education impressively when compared to the level of education improvements in sub-Saharan African (SSA) countries like Burundi, Madagascar, Rwanda, Samoa, Sao Tome, Principe, Togo and the United Republic of Tanzania while Nigeria is still behind. The work therefore recommended that Nigeria should invest on huge transformation to refurbish, rehabilitate and restructure the infrastructural facilities.	The study took a general overview of education and health sectorial investments in Nigeria and without capturing the specificities of basic and(or) secondary education as well as maternal and child mortality rates. Furthermore, the study did not relate Nigeria's performance to the MDGs as this was the period of the study.
Aribigbola(2009)	Studied the institutional constraints to achieving the MDGs in Africa, using the example two Millennium Village Projects (MVPs) in Ondo State, Nigeria	Descriptive Statistics using Chi-square data analysis	He discovered that the problems which programmes are design to solve are still widespread and lack adequate conceptualization of the project militate against full implementation of the project. He identified lack of conceptualization and understanding both by the implementers and the will be beneficiary (people at the grass root), over-politicization by the government, lack of interest on the part of grass root. He recommended collective participation that will carry	The study did not relate discovered challenges to different sectors of the MDGs, it therefore adopted a one-size-fits all analysis for all sectors, which was the concern of the MDGs. Furthermore, the study did not examine other institutions and mechanisms (like the CGS) that worked in tandem with the MVP towards the operationalization of Nigeria's performance in the MDGs.

			the community along in project design, and implementation as crucial to achievement of the MDGs cum complete removal of civil service bureaucracy.	
Lawal, Obasaju, & Rotimi (2012)	Examined the extent to which the MDGs have been achieved in Nigeria	Non-parametric statistical test	The study observed that the degree of achievement recorded in Nigeria is convincingly bellow expectation due to poor funding, lack of conceptualization and understanding both by the implementers and the would be beneficiary (people at the grass root), over-politicization by the government, lack of interest on the part of grass root would-be beneficiary/ community and inadequate funding and capacity underutilization, poor technical capacity in formulating, implementing and monitoring the operational MDGs based Poverty Reduction Strategy Process (PRSPS)	The study did not align the Debt Relief Gains (DRG) funds towards the performance of the MDGs in Nigeria. Such funds granted after the Paris Club debt relief constituted an important aspect of funding for Federal and State governments in their attempt to achieve the international development objective of the MDGs in Nigeria.
Asogwa, Ezeani, & Urama (2014)	An impact and process evaluation of the Conditional Grants Scheme (CGS) in Delta State, Nigeria	Survey method and Content analysis	The study recognized that community engagements and quality of infrastructure must be thoroughly addresses to ensure the sustainability of the Conditional Grants Scheme.	The study was case specific and results could not be generalized to cover other States and performance indicators beyond Delta State.
Yusuf & Hulme (2019)	Analyses design and implementation of the CGS to LGAs	Process-tracing	Finds that initial success was linked to national-level political and bureaucratic leadership commitment as capacity implementation of local government agencies improved to then to constitutional responsibilities, however political changes in 2011 significantly altered the direction and level of overall success of the programme.	Attributed few success of the MDGs in Nigeria to political processes and motivations without consideration for other socio-economic factors which impacted on the process and performance of Nigeria's attempt towards meeting the MDGs.

Methodology

Since the overall objective of this study is to ascertain the extent and significant change which was occasioned by the implementation of the Conditional Grants Scheme to Nigeria's performance on the MDGs, it is important to state that such appraisal or evaluation seems to be an uphill task considering myriad challenges in research methodology for impact evaluation in social sciences. However, this study made use of MDGs macro indicators of development such as net enrolment in primary schools, drop-out rate in primary schools, under-five mortality rates, and infant mortality rates to determine the before and after effects of the CGS. Furthermore, the hypothesis (H_1) of if 'The Conditional Grants Scheme improved Nigeria's performance on the MDGs' was tested using these indicators. To measure the impact of the CGS in the above indicators, the study compared the average value for the seven years before the programme introduction (-7 to 0) with the seven years after the programme was implemented (0 to +7). For this analysis, 2007, which was the introduction date of the CGS was chosen as the base year (i.e. 0). Results from these indicators within the period of 2000 to 2014 were tested using t-test and the two-tailed Wilcoxon signed-ranked test to ascertain the significant changes in the observed variables before and after the CGS implementation.

Succinctly put, the Wilcoxon signed-ranked test was used to test for the mean and median differences in Nigeria's performance of the MDGs under the CGS and ascertain how significant the change was after the CGS. According to Frey(2018), Wilcoxon signed-ranked test applies to two-sample involving repeated measures, matched pairs, or before and after measures. Frey (2018) also believes, the Wilcoxon Signed-Ranked test is usually more powerful in detecting the difference between two populations even under conditions appropriate to the paired *t*-test as the Wilcoxon Signed-Ranked test is almost as powerful.

The motivation to use this methodology was because data available for this study corroborated with the basic assumptions of the Wilcoxon signed-ranked test. Firstly, two samples of indicators -i.e. before CGS (2000-2006) and after CGS (2008 – 2014) –are dependent observations of cases while accounting for individual differences in the base year. Secondly, although the Wilcoxon signed-ranked test ranks the differences according to their size, it assumes that the measurements are continuous in theoretical nature. In tandem, MDGs indicators have been the same and continuous since 2000 when they were first introduced, thus adequate for this study. Finally, Wilcoxon signed-ranked test was adopted for this study based on the assumption that differences between measures to be ranked are comparable, thus for every difference of observation, it was clear which one is greater of both observations.

This study utilized secondary data analysed using SPSS. The following secondary data was useful for this study and analysis: World Bank's 2015 World Development Indicators, Statistical Bulletin from the National Bureau of Statistics (NBS) covering relevant years of the study, Publications from the Office of the Senior Special Assistant to the President on MDGs (OSSAP-MDGs), Scholarly publications and information from International Development Partners. The data set covered the period 2000-2015.

Results Presentation and Analysis

Below is the summary of the results. The results presented below were arrived at using the indicators presented at Table 2 below. This table represents the year-on-year figures of MDGs indicators before and after the introduction of the CGS in 2007, (e.g. U5MRPR-Under five-mortality rate Pre-CGS (2000-2006) and U5MRPO –Under five-mortality rate Post-CGS (2008-2014).

Table 2: MDGs Performance Indicators (Goal 2 and 4)*

U5MRPR	U5MRPO	MRINPR	MRINPO	NPSEPR	NPSEPO	NSCEPR	NSCEPO
175.9	132.4	112.4	87.8	64.5	70.5	74.5	74.5
169.8	127.9	109.3	85.1	64.5	70.5	74.5	74.5
163.9	123.7	106.1	82.6	64.5	71.5	74.5	74.5
158.2	127.1	102.9	80.1	65.5	72	74.5	74.5
152.5	123.68	99.7	77.8	66.5	72.5	74.5	78.5
147.1	120.58	96.7	72.97	67.5	73.5	74.5	78
141.9	117.74	93.6	74.09	68	74.5	74.5	75

Note: Before CGS Period (-PR) is from 2000 – 2006; after CGS period (--PO) is from 2008 – 2014

*Goal 2: Achieve universal basic education; Goal 4: Reduce child mortality

Under Five Mortality Rate

Within the pre-CGS period (i.e. 2000 – 2006), the mean of under-five mortality rate in Nigeria stood at 158.47, while with the period after the CGS was implemented (i.e. 2008-2014) the mean was at 124.73, thus representing a significant change (mean change of 33.74). On the other hand, median under-five mortality was at 158.2 before the implementation of the CGS. The median change stood at 34.5 because the median after the CGS was at 123.7. This shows that there was a significant decrease in under-five mortality rate after the introduction of the CGS. The study confirmed (using both t-test and Wilcoxon test) that there was a

significant change in under-five mortality rate after the Conditional Grants was implemented to meet the MDGs target. Wilcoxon Signed-ranked test showed that with an investment of over one hundred and twenty-six billion naira within 2007- 2015, this elicited a statistically significant change in under-five mortality rates in Nigeria. (i.e. W-test = -2.366, p = 0.018). The median of differences between Under-Five mortality rate (before CGS) and Under-Five mortality rate (after CGS) equals to 0. As such, the decision rule was to accept the hypothesis (H_1) (i.e. The Conditional Grants Scheme improved Nigeria's performance on the MDGs).

Table 3: Under-five Mortality Rate

Mean (Median) b/4 CGS	Mean (Median) after CGs	Mean Change	Median Change	t-test	Wilcoxon Statistics	p-value of Wilcoxon test
158.47 (158.2)	124.73 (123.7)	33.74	34.5	11.238	-2.366***	0.018

*Indicates the level of significance

Source: Researcher's Computation from Table 2 and SPSS

Infant Mortality Rate

Infant mortality rate refer to the number of an infant before his or her first birthday. Nigeria before implementation of the CGS recorded a mean infant mortality rate of 102.9. After 2007 when the CGS was introduced, the mean infant

mortality rate was at 80.06; thus the study confirmed a mean change of 22.89. Also before the CGS period, median infant mortality rate was at 102.9 which reduced to 80.1 after the CGS was implemented. Consequently, the study confirmed a median change in infant mortality

rate at 22.8. T-test and Wilcoxon statistics, which was calculated, further confirmed the change in infant mortality after the introduction of CGS in 2007. Wilcoxon statistics showed that this change was significant (i.e. W-test = -2.366, with p value = 0.018). With a significant

value of 0.05 the median of difference between Infant Mortality rate before the CGS and Infant Mortality rate after CGS equals to 0; thus the research retains the hypothesis (H_1) the Conditional Grants Scheme improved Nigeria's performance on the MDGs.

Table 4: Infant Mortality Rate

Mean (Median) b/4 CGS	Mean (Median) after CGS	Mean Change	Median Change	t-test	Wilcoxon Statistics	p-value of Wilcoxon test
102.95 (102.9)	80.06 (80.1)	22.89	22.8	34.841	-2.366***	0.018

*Indicates level of significance

Source: Researcher's computation using Table 2 and SPSS

Net Primary School Enrolment

Net primary school enrolment indicator of the MDGs, focus on the number of children (male and female) of school age who are actually enrolled in primary schools. Before the implementation of the Conditional Grants Scheme (CGS), the mean net enrolment rate was at 65.857 and after the CGS was implemented, the mean of Net Primary School enrolment was at 72.143 thus the study records a mean change of -6.28. On the other hand, median value of net primary school enrolment

from 2000 – 2006 was at 65.5 and recorded a median change of -6.5 after CGS was introduced to make the median -6.5. In calculating effect of change, t-test and Wilcoxon statistics showed that this change was significant (i.e. W-test = -2.414, p = 0.016). With a significance level of 0.05, the study also accepts the hypothesis (H_1) and contends that the CGS affected Nigeria's performance in Net primary school enrollment indicator for the MDGs.

Table 5: Net Primary School Enrolment

Mean (Median) b/4 CGS	Mean (Median) after CGS	Mean Change	Median Change	t-test	Wilcoxon Statistics	p-value of Wilcoxon test
65.857 (65.5.)	72.143 (72.0)	-6.28	-6.5	-42.274	-2.414***	0.016

*Indicates level of significance

Source: Researcher's computation using Table 2 and SPSS

Net Secondary School Enrollment

Calculating MDGs indicator of net secondary school enrollment attempts to show the level transition rate from primary school into secondary school thus having an idea about the drop-out rates in schools. Before the Conditional Grants Scheme was introduced, mean net enrolment in secondary school was at 74.5 while after the CGS programme, mean secondary enrolment was at 75.643. The study

shows a mean change of -1.143. Unfortunately, the study also shows that there was no median change between the before the CGS and after the CGS in terms of net secondary school enrolment. Wilcoxon Sign-ranked test calculations shows that the change in net secondary school enrolment after the CGS was introduced in Nigeria (since 2007) was not significant (i.e. W-test = -1.604, p = 0.109). As a result to this, the study rejects the

hypothesis(H_1) and states that the Conditional Grants Scheme did not affect Nigeria's

performance on net secondary school enrolment indicator of the MDGs.

Table 6: Net Secondary School Enrolment

Mean (Median) b/4 CGS	Mean (Median) after CGS	Mean Change	Median Change	t-test	Wilcoxon Statistics	p-value of Wilcoxon test
74.5 (74.5)	75.643 (74.5)	-1.143	0	-1.683	-1.604	0.109

Source: Researcher's Computation using Table 2 and SPSS

Discussions

Within the period of 2000 to 2006, which was before the Conditional Grants Scheme was introduced and 2008 to 2015, after the programme was introduced, it is expected that the indicators measured to check the before and after effects of the CGS should improve steadily. Overall, this should affect Nigeria's performance on meeting the international development objective of the MDGs. However, using the Wilcoxon signed ranked test, this study determined the significance of this change to four (4) MDGs indicators.

In the first indicator, under-five mortality rate, a significant change and steady reduction was recorded in Nigeria's performance. It can be contended that during the CGS period a major part of the grants was devoted to the improvement of primary health care across Nigeria. It is also imperative to note that most States with high under-5 mortality rates were encouraged by the Office of the Senior Special Assistant to MDGs (OSSAP-MDGs) to invest in healthcare, which was necessary to improve their standings. Specifically, within the CGS to State (introduced in 2007) all State government in Nigeria worked in tandem with the National Primary Healthcare Development Agency (NPHCDA) to improve the condition of children by providing adequate health coverage and presence. Furthermore, with the introduction of the CGS-LGA track in 2010, this further improved the health status of Nigerian children living in rural areas. Specifically, debt relief gains within the ambit

of the CGS were utilized to recruit, train and equip Community Health Extension Workers across the participating local governments in Nigeria. This was also accompanied with investments in health infrastructure across the 36 States and select local governments. As such, mothers in these areas could easily access healthcare and consult whenever their children were sick, thus reducing the number of children who died before their fifth birthday.

The indicator of infant mortality rate recorded the same improvement with under-five mortality. Infant mortality rate reduced in Nigeria significantly after the Conditional Grants Scheme was introduced. Such reduction could be attributed to the same fact that the main objective of the CGS was on primary healthcare. Emphasis had been placed on this area (as reflected in the Implementation Manual – (See (OSSAP-MDGs, 2012). Since, 2007, as the number of States that participated in the CGS-State Track of the MDGs increased, these States focused on safe motherhood and ensured that women, mostly in rural areas (who were most porous) had increased access to the services of skill birth attendants. Within 2007 – 2014, Nigeria had invested over seventy-six billion naira in the improvement of primary healthcare across the country. To further drive home its objective, when the CGS-LGA was introduced, it also focused on the provision of skilled birth attendants. As at 2014, with over thirty percent of the entire local governments in Nigeria participating, funds were availed to recruit retired nurses and midwives and resend them to numerous primary health centers, health

posts, and cottage hospitals across participating local governments. In addition to this, these community health workers were provided technical support from the Earth Institute of Columbia University, New York and learnt from experiences of the Millennium Village Projects (MVPs) across Africa. Furthermore, the CGS also focused within its implementation period, on capacity building for pregnant mothers, antenatal care, and domesticating international best practices for safe motherhood in local communities across Nigeria. This was achieved with partnership with States' Ministries of Health and the National Primary Health Development Agency (NPHCDA) in Nigeria.

In addition to this, investment from the CGS towards primary health also focused on the provision of additional health facilities and necessary drugs needed for operations. According to one study, within the CGS period (specifically the CGS to State), over four thousand health facilities had been constructed, renovated and equipped for operations (Eze, Pondell, & Agu, 2015). Also, the study contends that in counting the successes and benefit of the CGS in the health sector, over five thousand five hundred health workers were trained across the over ten newly constructed health training facilities. Added to this was the constant provision and training on how to use Insecticide Treated Nets and drugs across all LGAs in Nigeria. These investments from the CGS towards the health sector, according to the same study, benefited over forty-five million Nigerians, thus driving both under-five mortality and infant mortality rates further downwards during the CGS implementation. Furthermore, and additional forty million rural Nigerians have also had improved health lives as a result of CGS investments in infant and under-five mortality.

Apart from direct gains which the CGS recorded in the health sector, the CGS (within the years of implementation) improved and sustained sub-national ownerships on MDGs

deliverables. From 2007 to 2015, the Federal Government funded MDG-related projects at the State level through the CGS. The intention was to increase MDGs investment at sub national level through States and LGAs direct cash counterpart contribution as well as using the CGS mechanism to leverage additional resources from State federation accounts receipts and internally generated revenue to fund MDG-related projects/programmes. The UNDP in its working paper notes: "the CGS experience has also established that a grant mechanism anchored on consultative participation and mutual cooperation among partners can be effective in leveraging resources for financing development projects" (Collen & Oboh, 2013, p. 45). The report's records also show improved State Governments' commitment to the payment of counterpart funding of CGS activities has helped to promote State ownership and to ensure sustainability of the projects. This situation further ensured that the tiers of government tried to live up to their constitutional responsibilities.

This study also shows significant improvement in the indicator of net enrolment of pupils in primary school within the post-CGS period. As part of its objective, CGS investment within the period under review covered the primary education. As such, investments from the debt relief were targeted at improving the overall enrolment rates in Nigerian primary schools. Since the study showed a significance change in net primary school enrolment, it can be opined that investments such as building new blocks of classrooms, renovation of old and dilapidated classrooms, and the supply of classroom equipment (desks, chairs and teaching aids) succeeded in improving overall net enrolment rates in Nigerian primary schools. Specifically, such improvement might have been recorded due to a significant investment made towards improving the status of primary schools in Nigeria. The CGS investments alongside investments from the Universal Basic Education (UBE) programme have targeted

developing social infrastructures in primary schools. In the CGS LGA track alone (i.e. from 2012 – 2014) over six thousand classroom blocks were either newly built or renovated (OSSAP-MDGs, 2011). The CGS-LGA Track also focused on training of new teachers and Education Extension Workers who were deployed to communities in participating local governments. Furthermore, significant improvement in enrolment in primary schools, considering gender perspectives, was also because of investments in improved sanitary conditions in primary schools. Studies have shown that sanitary conditions significantly affect the enrolment of girls in schools and as such, within the CGS period, investments targeted building of Ventilate Improved Pit (VIP) toilets and the provision of motorized boreholes in most primary schools. Significant improvement in net enrolment in primary school because of CGS investment was because the CGS by improving social education infrastructure succeeded in benefiting an additional fifteen million children of school age in Nigeria. Furthermore, investments from the CGS filled an institutional gap that had existed in primary education in Nigeria (lack/absence of teachers). By the training, re-training and deployment of teachers, CGS investments succeeded in ensuring that qualified individuals staffed these infrastructures; thus reducing the overall enrolment rates.

Unfortunately, the research shows that despite the investments from the CGS, net enrolment in secondary school, it did not record a significant change. Although the focus of CGS investment was mainly on primary education, but the fact that enrolment rates in secondary school did not significantly improve could mean that most pupils either failed to complete primary school (high dropout rates) or did not get to continue schooling in secondary schools. However, despite CGS focus, the overall education status in Nigeria has been the objective of the MDGs. Consequently, in some States investments targeted improving

secondary education at the same time. For instance, in Anambra State, the former Governor desired to develop all sectors simultaneously and thus made investments from the MDGs into both primary and secondary education. Such effort by the State Government reduced primary school dropout rates and improved secondary enrolment. Since the study shows that secondary education CGS investments failed to improve Nigeria's performance on secondary school enrolment, it might be necessary to reconsider the overall focus of education investments in Nigeria. As such, in the new set of goals –i.e. the SDGs– direction and effort has to be made towards this indicator.

Further Discussions and Policy Recommendations

As the Millennium Development Goals (MDGs) has ended, it is important to learn from the lessons for its implementation period in Nigeria (and other developing countries). More so, by clearly identifying those programmes that worked rightly and succeeded in moving Nigeria closer to achieving these international development objectives, understanding them could further help in a post-2015 environment and the operationalization of the Sustainable Development Goals (SDGs) which are already in-play. The CGS no doubt, was the flagship of MDGs implementation in Nigeria. This research showed that specific programmes introduced under a tripartite partnership across the three tiers of government succeeded in improving Nigeria's performance in some of the indicators of the MDGs. Consequently, the researcher identified areas of further improvement of the CGS in a post-2015 era while recommending areas for policy change needed to achieve international development objectives like the MDGs.

Firstly within the area of improving the CGS, it should not be discarded as evidence points to its success and impact. Rather those challenges that hindered its operations should be

reviewed. For instance, the issue of where the CGS unit should be housed. The CGS unit across the 36 States in Nigeria was under the Governors' Office. Policy evaluators have recommended that this should not continue, rather the CGS unit should be under the different Ministries of Planning and Economic Development. This would allow for proper integration of the CGS process into State systems. Also based on discussions above, there was an un-parallel gap between investment in physical infrastructure and investment in people needed to man these physical infrastructures across the country. Over the years, resources were put into setting up structures - hospital blocks, school buildings, water facilities, etc. These interventions were based on robust geographical data (the National MDGs Information System -NMIS) that showed areas of lack with focus on rehabilitating dilapidated structures and planting new ones in areas that never had. Certainly, there was serious infrastructural decay at the grassroots, which the CGS set out to tackle.

Eight years down the line and with much infrastructure (re)construction already done, the challenges are changing. Investment decisions rooted in approaches that are more scientific are now needed. It is not clear that utilization of the infrastructures built under the CGS has been as high as desirable. While data on utilization may not be available and reliable, indications are that a significant number of such physical infrastructures are not sufficiently manned and adequate provisions are not provided in recurrent budget. There is overwhelming agreement among development enthusiasts that absence of manpower to engage installed facilities is a critical need. This is particularly the case for health facilities where lack of qualified personnel hinders full utilization in many communities. Given that the rate of investment in physical infrastructure has been relatively high compared to the rate at which professionals are provided, such imbalance is understandable. This is more so given that while

a large proportion of CGS facilities are in rural areas, there have not been deliberate efforts under the programme to increase incentives for qualified personnel to take up residence in remote areas. Two major issues emerge from the foregoing.

First, even now, indications are that the decay in physical infrastructure has not been fully rectified. Consequently, investments in physical infrastructures in the social sector were and will continue to be useful. Second, there is need to deliberately complement investments in physical infrastructure with plan for personnel and consumables that will make them functional. The CGS needed to move beyond investing in hard projects and deliberate invest in soft infrastructure. For example, in some cases, educating women on the essence of using modern health facilities or adolescent girls on the need to remain in school and not get into early marriages may be more critical than the need for more facilities. This can be achieved using two channels. (1) Direct investment in training personnel that will operate the facilities in partnership with other government agencies; and (2) seeking out and collaborating with advocacy and non-government groups involved in activities that support utilization of installed facilities in education, health and water where the CGS has considerably invested over the last couple of years. This implies specifying as part of the CGS manual conditions, options for engaging such groups and under what terms to ensure that their activities synergize with the goals of the CGS. It is equally important to specify what kind of support they are to receive where necessary.

As the CGS entered into the SDG epoch, which has broader goals, targets, objectives and indicators, there is the need to expand its investment focus to cover areas that have been under-played during the MDGs period. Understandably, resources for such investments are lean and cannot be over-stretched considering the current economic situation in Nigeria, but sectors like secondary education,

need to be considered for investment, as this would improve the overall equality of education quality in Nigeria. Investments in secondary education (and other aspects) could focus firstly on those objectives which can be achieved quickly and speedily (i.e. what policy analyst call 'low hanging fruits') before expansion can be carried out.

Fourthly, one important lesson which the Conditional Grants Scheme brought to the fore during the MDGs period in Nigeria was that via an effective partnership, States and Local Governments in Nigeria can live up to their constitutional responsibilities. Furthermore, since the CGS created a platform for extending technical support from the Federal Government to all States and Local Governments in programme planning and implementation, it becomes necessary to retain such arrangements in the SDGs period and for other international development objectives related to social improvements (Okere & Okeyika, 2016). However, this research shows that investments have been one-sided (mainly in healthcare and education) as a result of the gap in these sectors; But within the post-MDGs period, more planning and proper management of these grants is necessary.

The study recommends stronger partnership with relevant stakeholders and international development partners to ensure appropriate tracking and documentation of data. This is would be necessary to ensure that progress on different indicators of the MDGs (and now the SDGs) can be tracked and reviewed when necessary. The rationale for this borders on the fact that the MDGs were time-bound, and such failure to timely track progression could ensure Nigeria falls beyond stipulated objectives and targets. In the SDGs dispensation, this study recommends for

appropriate data collection from the MDGs period to data to allow for academics, researchers and policy makers to utilize for policy change and adjustment.

Conclusion

The Conditional Grants Scheme (CGS) has been a very useful tool towards achieving international development objectives, specifically the MDGs in Nigeria. It has proved to be a very potent channel for (re)establishing a footing for social services at the grassroots following the infrastructural decay of the 1980s and 1990s. It clearly outperformed expectations compared to other similar programmes in Nigeria and is deservedly the flagship programme of the OSSAP-MDGs. However, as the target date for the realization of the MDGs ended, the programme needs a review to work with other international development objectives which have similar focus on social economic development. Affirmation for the programme to continue is quite strong from practitioners, beneficiaries and several others who have interfaced with the programme. However, concerns were also expressed on the need to strengthen programming and planning, monitoring and evaluation as well as oversight of the programme. This study examined before and after effects that the CGS had on overall performance of meeting the MDGs in Nigeria. The study contends that the CGS remains relevant going forward in a post-2015 environment. Specifically, in respect of the post 2015 Sustainable Development Goals as stakeholders foresee a possible expansion of the scope of the programme, but notes that it will then need stronger interface with the broader development planning framework in the country.

References

- Abuzeid, F. (2009). Foreign aid and the "Big Push" theory: lessons from sub-saharan Africa. *Stanford Journal of International Relations*, 11(1), 16-23.
- Amakom, U. (2014, June 15). Main outcomes of the United Nations Conference on Sustainable Development and the Sustainable Development Goals. Lecture on Millennium Development Goals [PowerPoint slides]. Institute for Development Studies.
- Aribigbola, A. (2009). Institutional constraints to achieving the millennium development goals (MDGs) in Africa: The example of Akure millennium city and Ikaram/Ibaram villages in Ondo state, Nigeria. *World Bank Policy Paper*, 7-9.
- Asogwa, O., Ezeani, A., & Urama, M. (2014). Empirical analysis of conditional grants scheme in Delta State. *IOSR Journal of Humanities and Social Science*, 19(1), 13-18.
- Buse, K., Ludia, E., & Vigneri, M. (2008). *Sustaining and scaling up millennium villages: Beyond rural investments*. Overseas Development Institute.
- Cabral, L., Farrington, J., & Ludi, E. (2006). The millennium villages projects -A new approach to ending rural poverty in Africa? *Natural Resources Perspective*. 4-5.
- Collen, Z., & Oboh, V. (2013). Effective partnerships for accelerating the millennium development goals (MDGs) at Sub-national Level: Evidence from the implementation of Nigeria's conditional grants scheme. *UNDP Working Paper 4*.
- DFID. (2012). *Nigeria's performance in the millennium development goals (MDGs)*. Department for International Development.
- Emmerij, L. (2010). *The basic needs development strategy*. World Economic and Social Survey, United Nations.
- Eze, C., Pondell, G., & Agu, C. (2015). *CGS strategic options: Making CGS work for post-2015 development*. Office of the Senior Special Assistant to the President on MDGs.
- Frey, B. (2018). Wilcoxon signed ranked test. In B. Frey (Ed), *The SAGE encyclopedia of educational research, measurement and evaluation*. Sage Publishers.
- Kenny, C., & Summer, A. (2011). More money or more development: What have the MDGs achieved? *Center for Global Development Working Paper*, 278.
- Lawal, A., Obasaju, B., & Rotimi, M. (2012). Towards achieving millennium development goals (MDGs) in Nigeria: prospect and challenges. *Journal of Economics and Sustainable Development*, 3(9), 74 -82.
- NPoC. (2013). *National Demographic Health Survey 2013*. National Population Commission.
- Ogunlela, A., & Ogungbile, B. (2006). Revisiting performance trends of MDGs indicators in Africa. *Journal of International Social Research*, 4(7).
- Okere, A. (2013). Lessons from the millennium development goals (MDGs): A comparison of Nigeria and her sub-saharan neighbours. *UJAH: Unizik Journal of Arts and Humanities*, 14(3), 18-32.
- Okere, A., & Okeyika, K. (2016). Nigeria's conditional grants scheme in the light of the sustainable development goals: Lessons and policy options in a post-2015 era. *International Journal of Innovative Research and Development*, 5(9), 174-185.
- OSSAP-MDGs. (2011). *The review and performance evaluation of the millennium development goals*,

- conditional grants scheme for 2007, 2008, and 2009 in the 36 States and the FCT. Office of the Senior Special Assistant to the President on MDGs.
- OSSAP-MDGs. (2012). *Conditional grants implementation manual*. OSSAP-MDGs.
- OSSAP-MDGs. (2013). *Nigeria millennium development goals report 2013*. Office of the Senior Special Assistant to the President on MDGs.
- Roodman, D. (2006, January). Aid project proliferation and absorptive capacity. *WIDER Research Paper 2006/04*, 79-113.
- Roodman, D. (2007). The anarchy of numbers: aid, development, and cross-country empirics. *The World Bank Economic Review*, 21(2), 255-277.
- Sachs, J. (2005). *The end of poverty: how we can make it happen in our lifetime*. Penguin.
- Sanchez, P., Palm, C., Sachs, J., & Denning, G. (2007). The African millennium villages. *Proceedings of the National Academy of Sciences of the United States of America*.
- Sender, J. (2018). Reassessing the role of the World Bank in sub-saharan Africa. In J. Pincus, & J. Winters (Ed), *Reinventing the World Bank (185-202)*. Cornell University Press.
- Shiram, M., & Sachs, J. (2018). The millennium villages projects: A retrospective, observational, endline evaluation. *The Lancet Global Health*, 6(5), 500-513.
- SPARC-DFID. (2010). *Improving lives through the millennium development goals conditional grants scheme*. State Partnership for Accountability, Responsiveness and Capacity (SPARC).
- World Bank. (2016). *Poverty reduction in Nigeria in the last decade*. World Bank.
- Yusuf, B., & Hulme, D. (2019, April). Service delivery reform in Nigeria: The rise and fall of the conditional grants scheme to local government areas (CGS-LGAs).
- Effective States and Inclusive Development Working Paper 114, 1-34.