A Strategic Management Review of the UNFPA 7th Country Program in Indonesia (2006-2010)

FIRST DRAFT

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FOREWORD

This strategic review of UNFPA Indonesia Country Programme was undertaken in the milieu of new aid environment globally and especially in Indonesia. The call for strategic investment in international development at the Millennium Summit and its resonance at the Paris Declaration warrant new approaches to aid management. Indonesia is passing through a rapid decentralization and democratization process. This has opened up new opportunities and challenges to fund and programme development initiatives in the country. The main purpose of this review is to create a space for intelligent debate for the development partners to steer and direct the Country Programme to achieve its goal.

Three independent consultants—Scott Fritzen (Team Leader), Venkatesh Srinivasan and Budi Setiyono took the challenge to perform this review. The result of their great work is a rich, analytical report that calls for short- and medium-term strategic renewal of the Country Programme. I am to the highest degree thankful to them. It would be now up to the Government of Indonesia, civil society organizations and UNFPA to review the report decisively and create an atmosphere at all levels of the Country Programme to revisit it strategies and activities.

I thank Ibu Nina Sardjunani, Deputy for Human Resources and Cultural Affairs, Bappenas for her enthusiasm, encouragement and support for this review. I also thank all the stakeholders who made their valuable time available to the consultants and provided incredible insights. The task manager for this review was Bastiaan van de Loo, UNFPA M&E Officer who has done a superb job in coordinating the whole process. Special thanks to Sultan Aziz, Director of Asia and the Pacific Region and to the senior management of UNFPA for their encouragement and support to carry out this independent work.

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EXECUTIVE SUMMARY

This review examines the 7th Country Program (CP) of the United Nations Population Fund (UNFPA) in Indonesia from a broad, ‘strategic management’ perspective. It explores four areas:

- **Context:** How have changes to UNFPA’s global strategy and programming process and to Indonesia’s institutional environment in the post-Suharto period, combined to shape a new, challenging Country Program environment?
- **Strategy:** How effective is the current strategy for deploying the limited resources of the UNFPA CP for achieving a significant, and sustainable, impact?
- **Management:** How transparent and cost-effective are current mechanisms in the Country Program for critical management functions, such as overall program planning, coordination, technical assistance and monitoring?
- **Reform:** How might the Country Program assistance strategy - both for the remainder of the current CP and beyond - be repositioned, and resources managed, for improved overall cost-effectiveness, impact and sustainability?

The review was conducted by a team of three independent consultants over approximately a one-month period, drawing on extensive key informant interviews, focus group discussions, document analysis, and field visits to four provinces and seven districts.

The changing country program context

Indonesia’s changing country context has profoundly shaped the strengths and weaknesses of the current CP strategy, and the opportunities and threats it must negotiate in moving forward.

Indonesia is the fourth largest country in the world in terms of population; its scale, diversity and complexity are rivaled by only a few others in the world. The inherent challenges this scale and diversity pose for strategic programming have been accentuated by the far-reaching decentralization and democratization trends buffeting the country since the fall of President Suharto’s New Order regime in 1997.

So-called ‘big-bang’ decentralization over the last 10 years in Indonesia has seen a weakening of vertical authority structures as well as a number of disruptions to the financing, planning and supervision of social services. From a program strategy point of view, the key implications of these institutional changes have included:

- The need to work with a wider range of bureaucratic, political and societal actors, given the fragmentation of authority that the post-Suharto period has brought.
The need to work more prominently with, and indeed to build program ownership at, local levels of government - in particular with districts, to whom the lion’s share of resources and responsibilities fell at least initially in Indonesian decentralization.

The necessity of working to fill gaps in service provision caused in part by the institutional flux decentralization has brought and in part by the differential capacities and resources of local levels of government throughout this diverse country.

Such imperatives have been reflected in several specific areas of the UNFPA CP over the past two cycles. The program has become more oriented over the past ten years on geographically specific programming, with the current CP working in 21 districts. Such a decentralized structure has led to the rapid growth in human resource deployments, including the placement of over 70 UNFPA-supported staff in government agencies at all levels of government. And as the program became more intergovernmental, multisectoral and complex over the past two CPs, the main responsibility for program coordination and management has been assumed by the government planning agency at central and local levels.

Findings: Program design and strategy

The challenge of achieving strategic coherence in a country program is great, given:

- The huge number of stakeholders in any CP, all with different views and sometimes competing interests; and

- The accumulated legacies of previous CPs that may not fit well into current conditions (and yet are difficult to change).

The current UNFPA CP is a reasonable attempt to translate UNFPA’s global mandate into programmatic areas matching Indonesia’s needs. And some components of the CP do show good strategic positioning and potential, and performance varied widely across localities. Overall, however, our findings paint a consistent picture of a CP that is failing to provide strategic focus and coherence to programming activities.

Program investments show a high level of fragmentation. The most striking feature of this CP is the way in which a very modest amount of funding available for program interventions - some $2.95 million per year - is split among a large number of implementing partners (IPs). Small IP allocations, in turn, are used to fund quite a number of disparate activities, adding further to the fragmenting effect of the assistance.

The quality of activity design in the annual work plans appears low across a broad range of IPs. Activities funded through the CP often appear reasonable in
themselves, and broadly consistent with CPAP objectives. Yet even after work plans have been through several iterations, and have passed through multiple levels of the CP hierarchy, it is often difficult or impossible for partners to relate how these activities will link up with others, concurrently or over time, to create any coherent, convincing impact.

_**Awareness and indeed ‘ownership’ of local partners of the outcomes to which activities are supposed to lead are generally low.**_ An alarming number of IPs - perhaps half, based on those interviewed by the team - at all levels seem to view the CP as something extra or additional to their “normal” responsibilities and programs; in fact, they often express UNFPA assistance as literally a “burden”.

How can we account for this combined picture of a fragmented, poorly ‘owned’, and not very results-oriented set of activities in the current CP? There are two key causes of poor performance.

_**Conceptual and operational ‘roadmaps’ linking activities to broader strategic objectives are missing from the CPAP and other program documentation, and probably poorly thought through in many cases.**_ A number of ‘models’ are mentioned more or less in passing within the CPAP, but they are never elaborated on; and there is little evidence that key partners at the local level actually have a working understanding of the models, how they interrelate, and the sequencing of investments necessary to realize their potential.

_**There is poor ‘localization’ of the CPAP design and strategy.**_ Local governments have great difficulty ‘finding themselves’ in the broader CPAP framework, for a number of reasons. First, no broader, multi-year planning framework for assistance to districts was articulated in this CP. Second, a functional baseline analysis linked to key intended programming outcomes and outputs does not exist, so that it would be difficult for anyone to say how close or distant a particular IP or district is from the intended end-state, in which various program inputs are presumably integrated and having a synergistic impact.

**Findings: Program management**

Our assessment of program management focused on the logical follow-up question to program design: how well is strategy being implemented in practice? Here, too, a range of serious shortcomings in the current CP were noted. Core functions of the management structure and processes were found to be underperforming relative to needs and expectations.

Most importantly, _**the annual programming process - so critical in the current CP, since multi-year programming frameworks are left very flexible by design - is ‘broken’, both in terms of the quality of work plans produced and the efficiency**
and transparency of the process. On the substantive side, annual programming is out of sync with the government’s own planning and budgeting process, making it very difficult, if not impossible, for annual work plans to:

- Reflect government priorities (e.g. in medium-term sectoral plans);
- Synergize with existing investment plans;
- Achieve significant co-financing; or
- Benefit from efficiencies in the planning process itself.

Annual work planning has also suffered from low levels of role clarity among stakeholders regarding the process by which AWPs are to be formulated and approved.

Second, regular monitoring mechanisms in the CP are characterized by multiple, overlapping reporting frameworks and channels, and a critical lack of follow-up. Monitoring is “everyone and no one’s” responsibility.

Finally, there is little evidence that the program is being actively or effectively ‘steered’ at present; “steering committees” established at central and provincial levels to fulfill this function are not operating well. As a result, the kinds of strategic deficiencies and more structural problems noted in the review (such as persistent difficulties processing decentralized work plans) have been left unaddressed, and the potential to make linkages to policy debates is weak.

There are three primary causes of the above problems. The first is the ‘over-structure’ and ‘under-clarity’ of the CP management framework as a whole. The current CP’s management structure could be fairly straightforward in theory, but is probably in practice too complex and top-heavy when applied to such a small CP (in terms of actual investment levels).

The second, and related, cause is the lack of coherence in the approach to deploying UNFPA-financed, nationally executed staff at all levels. UNFPA-supported staff placed in government agencies are critical actors in the technical assistance chain. But they complain, justifiably, of a lack of clarity in their roles and effective lines of reporting, limited support and training, and (at times) strained relations with government colleagues. As a result, these staff are (at least at present) largely incapable of playing the decisive technical assistance and problem-solving roles that are being de facto thrust upon them by a leadership deficit from other spheres of the CP management structure.

The third cause is poor conceptualization of provincial roles in the management structure, something that mirrors a general weakness in institutional design in the current CP. Essentially, the default position that has emerged is one in which provincial-level activities overlap substantially with those implemented at district level; provinces are treated more or less as “big districts”, both in the size of their allocations and in the type of activities these allocations fund. In this sense, the CP mirrors and in
its own way reinforces, rather than helps to solve, the problem of vertical fragmentation in the current governance arrangements of the country.

**Poor monitoring and problem-solving systems in the current CP leave it vulnerable to a host of more or less serious risks.** One is outright abuse of CP funds. A related risk is to the cost-effectiveness of program investments, risks heightened by the combination found in the present CP of:

- Relatively high management overheads, including human resource costs;
- Weak technical assistance performance; and
- An investment profile that is dominated by meetings, workshops and associated costs under the rubric of “capacity building”.

Another risk heightened by poor communication and problem-solving lies in the area of stakeholder relationships. Looking across the CP, **several of the management and structural challenges noted above have translated into somewhat strained relationships between important stakeholders of the CP**, such as relationships between central and local actors, and among members of the central coordinating agencies themselves.

**Patterns of program management result in a mixed set of signals with respect to “national ownership”.** On the positive side, bureaucratic stakeholders, in particular the planning agency at all levels, are clearly in the driver’s seat with respect to CP management; if anything, UNFPA’s “voice” is too muted when important decisions (such as the criteria guiding subnational allocations each year) are made. And the current CP can be considered bold in the way in which it is attempting to decentralize the ownership of key processes, such as annual work planning, to district partners, reflecting an awareness of their importance in this era of Indonesian decentralization.

On the other hand, **political, judicial and civil society stakeholders are generally underrepresented in program decision-making, as in overall program allocations.** The program is also not yet benefitting in a clear way from incipient attempts to harmonize donor operations, although pressures and possibilities for doing so are growing.

**Toward strategic renewal: Some considerations**

Achieving greater strategic focus, and improved management performance, are essential if this and future country programs in Indonesia is to have an acceptable level of impact on the national scene. In presenting some suggestions about what kind of direction the CP might move in, our intention is to stimulate a necessary conversation rather than providing a blueprint or some supposed ‘answer’.
In the **short-term** (i.e. for the remainder of the current CP), we suggest attempting to mend some obvious ‘broken fences’ in the CP, particularly with respect to management processes. Our three groups of recommendations for the short-term include the following:

1. **Take proactive measures to improve annual work plan quality and coherence and clarity among stakeholders regarding their roles in and expectations of planning process.**

   In the short term - by all means before the formal results of the mid-term review of the CP, waiting for which would result in the loss of another year - it may be possible to do the following to improve both coherence and efficiency in annual work planning:

   - Sketch out a ‘roadmap’ of some of the key interventions likely to build up to a more integrated, cohesive impact in the remaining 2-3 years of the CP;
   - Invest substantial technical assistance resources in a series of ‘strategic programming’ workshops for districts to communicate and localize the ‘roadmap’ of activities for a 2-3 year period; and
   - Improve the clarity and improve communication on the process and roles of different actors in the planning process.

2. **Improve monitoring and problem-solving.**

   The monitoring framework emerged as “everyone and no one’s responsibility” in our review. Yet it is critical because it ends up taking up a large amount of time in the current system - time that is, given the lack of follow-up and poor observed activity quality - largely wasted. For this reason:

   - Properly resource, on an urgent basis, the NPCU, and conduct a review of its intended and actually fulfilled functions.
   - Place renewed emphasis on Technical Team (TT) meetings as a key source of participatory, and strategic, decision-making in the CP.
   - Conduct a rapid review of current monitoring arrangements, identifying areas of overlap and poor process design, and reasons for poor managerial follow-up.
   - Consider scaling up the UNFPA ‘focal point’ concept, assigning a small team of individuals to work with a group of 5-7 districts each both on the strategic programming review noted earlier and follow-up technical assistance.

3. **Adjust CP investments on the margin.**

   We believe an attempt to significantly overhaul current investment patterns in the CP would distract from the broader reexamination proposed in the next section, without adding much value in the short term. But on the margins some interventions may be warranted:
- Increase, and improve flexibility, in CP support for the IFPPD, which emerged as one of the bright spots of the current CP.

- Improve the stability of assistance to other NGOs, doing everything possible to stabilize support expectations for these partners over the remainder of the CP.

- Consider downscaling the community empowerment program to free up a flexible source of funding for some of the above activities.

With respect to the last point, our review of program documentation and field activities in two localities suggested that this well-intentioned attempt to improve community participation in CP activities is unlikely to have any meaningful, sustainable impact on any of the outcome areas intended in the CPAP. The degree of technical assistance that the CP can consistently mobilize to inform local level programming is simply too weak, funding levels too low (and fragmented), and monitoring too sketchy for these investments to collectively warrant the funds being put into them.

The medium-term focus (i.e. inclusive of the formulation of the next CP, set to begin within a year) should be more ambitious. The current review found a number of serious problems in the CP, foremost among them a fundamental lack of strategic focus and quality programming across a range of interventions. Redressing this issue will, we believe, require significant changes to the way the UNFPA CP is positioned in Indonesia - changes in terms of how it attempts to pursue UNFPA’s global agenda in the context of Indonesia’s specific needs, and changes in terms of how resources are mobilized and management structures aligned to effectively pursue that strategy.

The first, critical step is to put the strategy and intended outcomes into clearer focus. The highest value-added dimensions of strategy for the UNFPA CP, we believe, are those that would position it:

- To enrich policy debates and national program development,

- Through a combination of advocacy, policy-oriented research, network-building and the contribution of ‘lessons learned’ from small-scale, information-intensive, experimental field interventions.

What is significant about this definition is the capacities it would require to do well, and what it leaves out. To fulfill these functions well, the Country Program needs to substantially upgrade three ‘critical capabilities’:

**Design of programs and projects as ‘policy experiments’, including with grounded institutional ‘ownership’ and potential for dissemination of findings.** Program interventions would have to evince a very careful, deliberate design, with the technical and substantive involvement of experts from all levels. Much more coordination of interventions horizontally (i.e. deliberately trying different arrangements in different field locations, to meet different challenges or to find out
what works best in different contexts) would be called for. And fewer activities would be necessary or desirable than at present: quality and strategic selection over quantity.

**Well-mobilized technical assistance and very strong program information systems.** The former will allow effective work with local actors to bring the nuanced program design into play; the latter, ability to track, learn-by-doing, modify and credibly communicate the resulting lessons.

**Mobilization of a broad network of actors.** The UNFPA CP possesses excellent ‘convening’ and networking power, making it potentially well placed to serve as a bridge linking a range of local programming experiments and innovations to the broader context of policy development.

Although the CP is by no means starting from scratch in terms of the above capacities, it will still have quite a road to travel in building them up. In particular, **three obstacles in the existing system will have to be overcome:**

- **The assumption that the CP can have a significant impact by achieving local targets linked to valued CPAP goals,** and by primarily serving (whether acknowledged or not) as a form of budget support for social activities at the district level. Making a sustained contribution in this way is unlikely due to insufficient funding, and the fragmentation of funding that the above assumption usually leads to. In short - and this may be a controversial point - we believe the road to a sustainable impact for the CP lies through advocacy and model-development, not through ‘going-to-scale’ in any significant way in some sub-set of districts, however high need they are.

- **The ‘something-for-everyone’ and ‘divide-the-cake-equally’ mindset** - which may have become more pronounced in recent years through the expansion of local stakeholders, and which is making it ever more difficult to focus limited resources onto potentially high-value areas.

- **The CP’s cumbersome management structure,** which may seem straightforward in theory (in the diagrams of the operational manuals), but is far too top-heavy and complex when applied to such a small CP (in terms of actual investment levels). Its main consequence is to make the program increasingly process-oriented - the shuffling of papers from one office to another, the convening of one meeting to another - rather than results-oriented and nimble.

Taking action on the above agenda would require CP leaders to **sustain a dialogue in the coming months on the question of how to reposition CP assistance for enhanced impact in Indonesia,** recognizing that significant changes are warranted by the current review. On one level, the conversation will have to revolve around the overall vision and principles for strategic renewal in the next CP. But it may prove to be difficult to agree in the abstract on these changes. More concretely, it will be necessary:
To scan the policy, program and institutional environment for potential high-value areas in which the CP can work; and

To achieve greater programming focus, by narrowing the number of areas in which the CP is to work, and by further elaborating those areas.

The UNFPA CP has significant assets and strengths as well as weaknesses and threats to the achievement of its mission. We believe the CP should increasingly aim to focus its investments in the areas in which its strengths match the opportunities posed by the Indonesian environment - by focusing on a relatively small number of well-targeted advocacy initiatives and the development of field-level innovations that can contribute to national policy debates and programs. Making this shift will require difficult decisions to tighten the number of activities and to build more streamlined management structures that can operate more nimbly.

Few of the reform ideas presented in this review are totally new; there are already elements of the CP that reflect the orientation described above. Yet, it is likely that a CP refocused on these priorities would have a very different look from the one at present. We predict that the steps needed to be taken will require significant and sustained leadership, and that these steps will be justified by the promise of a more exciting, high-impact, meaningful Country Program in the coming years.
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Acronyms:

ARH - Adolescent Reproductive Health
AWPMT - Annual Work Plan Monitoring Tool
Bappeda - Badan Perencanaan Pembangunan Daerah/Regional Development Planning Agency
Bappenas - Badan Perencanaan Pembangunan Nasional/The National Development Planning Agency
BKKBK - Badan Koordinasi Keluarga Berencana Nasional/Nat. Family Planning Coordinating Board
BPS - Badan Pusat Statistik/BPS-Statistics Indonesia
CCA - Common Country Assessment
CP - Country Program
CPAP - Country Program Action Plan
CPSC - Country Program Steering Committee
DAK - Dana Alokasi Khusus - Special Allocation Fund
DPC - District Programme Coordinator
DPCU - District Programme Coordinating Unit
DPR - Dewan Perwakilan Rakyat
DPRD - Dewan Perwakilan Rakyat Daerah
ERHS - Essential Reproductive Health Services
FP - Family Planning
GBV - Gender-based Violence
GCA - Government Coordinating Agency
GDP - Gross Domestic Product
GSI - Gerakan Sayang Ibu
HIV - Human Immunodeficiency Virus
ICPD - International Conference on Population and Development
IEC - Information, Education and Communication
IFPPD - Indonesian Forum of Parliamentarians on Population and Development
IP - Implementing Partner
LoI - Letter of Intent
LoU - Letter of Understanding
M&E - Monitoring and evaluation
MMR - Maternal Mortality Ratio
MOH - Ministry of Health
MOHA - Ministry of Home Affairs
MOWE - Ministry of Women’s Empowerment
NGO - Non Governmental Organization
NPCU - National Programme Coordination Unit
NTB - Nusa Tenggara Barat/ West Nusa Tenggara
NTT - Nusa Tenggara Timur/ East Nusa Tenggara
PCM - Programme Component Manager
PEDUM - Pedoman Umum/ General Guidelines
PKBI - Indonesian Planned Parenthood Association/Perkumpulan Keluarga Berencana Indonesia
PPC - Provincial Programme Coordinator
PPCU - Provincial Programme Coordinating Unit
RH - Reproductive Health
RPJM - Rencana Pembangunan Jangka Menengah/ Mid Term Development Plan
SEDTA - Sekretariat Daerah/Provincial or District Secretariat
STI - Sexually Transmitted Infection
SWOT - Strengths, Weaknesses, Opportunities, Threats
ToR - Terms of Reference
TT - Technical Team
UNDAF - United Nations Development Assistance Framework
UNDP - United Nations Development Program
UNFPA - United Nations Population Fund
UNICEF - United Nations Children’s Fund
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The team welcomes feedback and corrections of fact or interpretation at fritzen@nus.edu.sg (cc to vandeloo@unfpa.org).
1 - INTRODUCTION

1.1 Purpose and scope

This review examines the 7th Country Program (CP) of the United Nations Population Fund (UNFPA) from a broad, ‘strategic management’ perspective. Strategic management here refers to the art of formulating and implementing decisions that enable an organization to fulfill its mission in a sustainable, cost-effective manner.

The challenge of strategically managing a Country Program in a dynamic environment such as Indonesia is huge:

- **Achieving clarity of purpose**: Leaders in several diverse organizations - from UNFPA office to government coordinating ministries to the agencies and implementing partners across multiple levels of government - must gain sufficient clarity and consensus on organizational goals, practically interpreted, among all the various actors associated with the program.

- **Selecting a strategy**: They must find cost-effective means for using scarce resources to fulfill those goals, from among many competing possible approaches, and in the presence of significant informational deficits.

- **Mobilizing resources**: They must align the structures and management processes, and deploy human resources, to execute the chosen strategy effectively.

- **Learning**: Not least given high uncertainty that is typically faced by actors in a dynamic institutional environment, leaders must facilitate organizational learning about what is working and what is not, making (sometimes painful) course corrections where necessary.

How leaders perform these functions, and balance the need for both a stable framework on the one hand, and nimbleness in seizing new opportunities and fixing what is broken, on the other, is critical to the success of the Country Program.

The current review looks at three basic areas consistent with the challenge noted above (and see Annex A for the full Terms of Reference):

The changing Country Program context (chapter two). Both Indonesia and UNFPA have experienced significant changes over the past ten years - in Indonesia’s case, of course, on a dramatic scale. These changes have underlined the rationale for a strategic rethink of the Country Program, in two ways.

First, the changes have brought some dysfunctionalities to the current assistance modalities; some things just are not working well in Indonesia’s newly decentralized setting, for instance, and the answers for addressing the problems decentralization has brought are far from obvious.
Second, the changing environment has also brought new opportunities for fulfilling UNFPA’s mandate in creative, high-impact ways.

Chapter two of the review thus examines the following question:

*How have changes to UNFPA’s global strategy and programming process, and to Indonesia’s institutional environment in the post-Suharto period, combined to shape a new, challenging Country Program environment?*

**Country Program design and strategy** (chapter three). Any UNFPA Country Program is essentially an answer to the question: “If you have some $X million dollars in resources for country Y to try to promote an ambitious mandate of ensuring ‘that every pregnancy is wanted, every birth is safe, every young person is free of HIV/AIDS, and every girl and woman is treated with dignity and respect’,” how best to go about it?

While there are many facets to UNFPA CP design and strategy, from the adequacy of the overarching Country Program Action Plan (CPAP) document to the effectiveness and sustainability of individual interventions and activities on the ground, chapter three’s focus can be summarized as follows:

*How effective is the current strategy for deploying the limited resources of the UNFPA CP for achieving a significant, and sustainable, impact?*

**Country Program management structure and processes** (chapter four). Planning for, managing and monitoring a CP with such a broad range of stakeholders and activities is bound to be highly complex. Yet nothing will cripple strategy as quickly as poor execution due to unclear responsibilities, ham-fisted planning, weak coordination and poor information and accountability systems. The job of a management structure is to reach decisions and deploy program resources as efficiently, effectively and transparently as possible in service of the selected strategy, giving it essentially the best possible chance of success.

Chapter four of the review puts the existing management structure and processes to the test of meeting those criteria. It asks:

*How transparent and cost-effective are current mechanisms in the Country Program for critical management functions, such as overall program planning, coordination, technical assistance and monitoring?*

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Recommendations (chapter five). Not surprisingly, the review of program context, design and management will suggest areas in which the Country Program is either ‘out of alignment’ - with the changing institutional environment in Indonesia or its own stated objectives - or may not have yet capitalized fully on emerging opportunities. The final chapter represents the review team’s contribution to a discussion, already begun with the launch of the review itself and supported by key leaders in the UNFPA country office and government, on the following question:

**How might the Country Program assistance strategy – both for the remainder of the current CP and beyond – be repositioned, and resources managed, for improved overall cost-effectiveness, impact and sustainability?**

Figure 1 provides one way of visualizing the interrelationships among the questions posed above:

The formal design and strategy of the program, rooted in an analysis of the environment and the agendas of the various organizations involved in the CP, form the foundation of the review. Design relevance - i.e. whether the impacts intended would be achieved if the concrete outputs were properly delivered - and the effectiveness of the program in achieving those effects and outcomes, become the critical yardsticks for design aspects of the program.

What then happens as the financial and human resource inputs to the CP are processed into tangible outputs (such as workshops), immediate effects (such as increases in knowledge or aptitudes) and ultimate impacts (such as changes in behavior or the results thereof) is heavily influenced by management processes and the quality of the original design intentions. Efficiency and effectiveness, as well as operational sustainability - which in the current CP is best understood as how effectively capacities are built - are the key criteria here.
Figure 1: Analytical framework for review

- Annual workplan quality
- Annual workplanning process;
- Monitoring and problem-solving
- Communication, culture of decision-making
  (all chapter four)

Design and strategy coherence, impact and sustainability
  (chapter 2-3)
1.2 Methods

Methods. The review was conducted by a team of three consultants with no previous involvement with the Indonesia Country Program, and who brought a range of both complimentary and partly overlapping skills to the table: general program management and evaluation, Indonesian institutional analysis and the UNFPA assistance modalities.

Fieldwork in Jakarta, four provinces and seven districts, was carried out from late November and to mid-December 2007, followed by several days of analysis and report writing (see Annex B for the review schedule). Figure 2 shows the provinces supported in the current CP, along with those provinces and districts visited by the team.

Figure 2: Geographical focus of 7th Country Program, with fieldwork sites shown

The primary methods used in the review were as follows:

- **Key informant interviews and focus group discussions.** The team met and conducted semi-structured interviews with a broad, representative range of stakeholders of the current CP.
- **CP document and financial analysis.** A wide range of documents from the current and previous Country Program, including action plans, annual work plans, reviews and evaluations, and budget tabulations, were analyzed for their consistency with observed practice, UNFPA procedures and mandate, and for their internal coherence.

- **Legal and administrative analysis.** One team member drew on stakeholder interviews, legal documents and administrative guidelines to analyze recent changes in the governmental institutional and administrative framework affecting local planning, the roles and resources of different levels of government and the coordination of foreign aid.

- **Special surveys.** Two special purpose surveys proved to be valuable to the team. One collected basic perceptions data on UNFPA-supported staff in various government agencies and supported NGOs, and was designed and conducted by the UNFPA Country Office, just prior to the team’s arrival (see Figure 7 on page 46 for one example of results). Another, designed by the team and collected by project-supported district managers, surveyed the budgetary landscape and planning process of the implementing partners at the local level (e.g. see Table 2 on page 20).

  **Assessment.** Thanks to excellent cooperation of all involved and the tireless facilitation of the evaluation manager, the team was able to gain access to an impressive range of information and stakeholder perspectives in a brief period. The breadth of exposure to stakeholders and aspects of the CP enabled the team to achieve the kind of holistic and interconnected ‘helicopter’ view of the CP necessary to assess its overall context, design and strategy.

  Some caveats and limitations of this study should be kept in mind. The sheer complexity of the information to be processed, and wide scope of the evaluation, meant that the team was often unable to ‘drill down’ sufficiently into the programmatic details on which, of course, much of the story and interpretation hinge. We are confident of the ‘big picture’ interpretation we offer in this review. Yet while we comment on a number of specific programs (e.g. the Community Empowerment Programme) and processes (e.g. annual work planning), the current review was not intended to, and indeed cannot:

  - Substitute for a proper evaluation of specific program components; nor
  - Offer a detailed blueprint for the redesign of complicated, interlinked processes.

  We attempt, in contrast, to suggest criteria against which program components can be analyzed in a broader, strategic context, and to underline principles, priorities and directions for the reform of management systems and processes.

  The diversity of local conditions throughout the country and the CP also implies that for most general statements found in the evaluation, counter-examples can be
legitimately found and pointed to. Wherever possible, we have tried to capture this
local variability as part of the picture painted, but we have also chosen to cast some of
our findings in strong language for the sake of clarity of the ‘big picture’ and to provoke
useful discussion.

Finally, while the review was originally intended to cover financial and accounting
systems, a team member focusing on these areas could not be recruited in time for the
review, and as a result these questions of the Terms of Reference (mainly the sub-
section labeled “use of resources” in Annex A) were dropped with the consent of the
UNFPA Country Office.

Uses. Given the above, the review is best seen as a resource to help frame the
broader discussion that has just begun, and that needs to be sustained and deepened,
over the current state and future direction of the Country Program. We have chosen
the term “review” for this study rather than the more formal “evaluation”, to
emphasize that its value lies in the debate it seeks to frame rather than in specific
findings. The fact that 2008 will see the formal mid-term review process for the CP
initiated and, shortly after that, preparations for a new CP, suggests an excellent
opportunity for the kind of strategic ‘rethink’ that this review was designed to support.
2 – THE CHANGING COUNTRY PROGRAM CONTEXT

2.1 Overview

This chapter assesses the broad context of the Country Program. We distinguish broadly between two sets of influences on the CP. The first is the changing Indonesian country context, particularly brought about by profound and far-reaching decentralization and democratization trends. The second is the inheritance of previous UNFPA Country Programs along with the shifting pressures and mandates on UNFPA’s future direction, globally and within the Indonesian context. These components combine to profoundly shape the strengths and weaknesses of the current CP strategy, and the opportunities and threats it must negotiate in moving forward.

2.2 The Indonesian context

Indonesia: the fourth largest country in the world in terms of population; a sprawling archipelago comprising several thousand islands, several major (and dozens of smaller) ethnic groups, languages and religions; a country whose scale, diversity and complexity are rivaled by only a few others in the world.

After achieving independence from Dutch colonial rule in 1945, Indonesia experienced a rapid pace of state-directed development, in terms of both economic and most social indicators, under the stable, technocratic, centralized and authoritarian Suharto regime. By the early 1990s Indonesia was widely celebrated for both its economic transformation, marked by a relatively broadly-based pattern of growth throughout the Javanese countryside in particular, and assisted by astonishing gains in agricultural productivity. At the same time, the cost in terms of civil liberties of Suharto’s alternately hard and soft authoritarian rule were also hotly debated.

Exit the ‘New Order’

The 1997 East Asian financial crisis precipitated a political crisis that resulted in the downfall of the Suharto regime. Suharto’s successor, B.J. Habibie, oversaw a program of sweeping political liberalization and decentralization that was accelerated under the next two presidents. The political system that has evolved over the nearly ten years since Reformasi began has featured the active contest for political office among a proliferation of parties at central, provincial and district levels; direct elections for the presidency (since 2004); and radical changes in center-local government relations towards administrative, fiscal and political decentralization. The mass media has
experienced significant liberalization, as has the legal basis for non-governmental organizations, including many dedicated to such controversial issues as corruption control and human rights. Such developments are seen optimistically by a number of donors and some external analysts, who interpret them as signs of Indonesia’s political normalization. A different group of analysts paint a more pessimistic or cautious picture in which the institutional forms have changed, but power relations have not. Some argue that Indonesia’s ‘democratic transition’ continues to be plagued by ‘money politics’ and, more generally, a wide gap separating the democratic forms of post-New Order political and social institutions from actual practices.²

Enter the era of ‘big-bang’ decentralization

Such stark differences in the reading of Indonesia’s contemporary political experience color analyst perceptions of the practice and potential contributions of one of the key Reformasi reforms - decentralization. The ‘optimist’ camp sees decentralization as making a contribution to an incremental process of transforming local power relations. Donors such as the World Bank view decentralization as helping to “reach down into communities, enable informed input into public decisions, and provide incentives to local governments to empower local communities and be accountable to their input,” and thus to facilitate both “improved governance and greater equity”.³

What few doubt is the scale of the decentralization phenomenon in Indonesia. For over three decades, dated from 1966 to 1998, Indonesia experienced heavily centralized governance in which regional and local government bodies had little independent authority, functioning merely to support the power of the central government.

In contrast, Laws 22/1999 and 25/1999, which then were revised by Law 32/2004, provide the framework for political and public management devolution whereby the provinces, districts and cities are possessing new responsibilities that previously belonged to the national government. Numerous laws and regulations have seen a wide range of public service delivery functions devolved to the regions. The regulations also provide the regional parliaments (DPRD) with more powers to supervise and control the regional administrations.

The general feature of current decentralization situation under law number 32/2004, which is defined further by government regulation (GR-Peraturan Pemerintah) number 38/2007, can be summarized as follows:

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The role of central government is to focus on seven sectors or functions: (1) foreign policy, (2) defense and security, (3) security, (4) judiciary, (5) monetary and fiscal policy, (6) religion, and (7) ‘other role’, such as macro-level national development planning and monitoring, fiscal distribution, the state administrative system, and national standardization.

Provincial governments are assigned authorities that are necessary for inter-district projects or coordination, or which are otherwise assigned by the central government.

The authorities of district governments are impressive, including primary responsibility across 36 sectors, e.g.: public works, health, culture and education, agriculture, transportation, industry and trade, social welfare, investment, environment, land management, small- and medium-scale enterprises, labor relations, etc.

The transfer of authority from the central to district governments should be, and in practice is, accompanied by the transfer of significant financial resources, facilities and infrastructure, along with human resources that are appropriate to the aforementioned sectors.

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**Box 1: The role of the Ministry of Home Affairs**

This ministry generally functions as a supervisory and advisory body for local governments, holding various authorities, including (among others):

- Providing authorization for the formation of new local government;
- Receiving reports from Governors and Majors/Bupatis in regard of the management of their local government performance, at least once a year;
- Appointing temporary officers to take over the job of Governors and Majors/Bupati when they were not functioning;
- Providing authorization for DPRD when they want to impeach Governor or Major/Bupati;
- Legalizing the termination of Majors/Bupati and DPRD members;
- Legalizing and inaugurating new elected Governors, Majors and Bupati;
- Coordinating the supervision and direction of local government’s civil servants;
- Regulating the exploration of natural resources, DAU (Dana Alokasi Umum—general budget allocation), DAK (Dana Alokasi Khusus—special budget allocation), and tax sharing;
- Supervising and controlling local government budget;
- Resolving dispute among local governments;

Further, the key position of MoHA in the decentralization context is emphasized on GR 38/2007 article 9, which stipulates that “the determination of norms, standards, procedures, and criteria [e.g. for service delivery] ... should involve interrelated stakeholders in coordination with Minister of Home Affair.”

*Source: legal review by Budi Setiyono, 2007.*
Decentralization has led to a situation in which the central, provincial and district levels of government stand - for better or worse - as relatively separate entities. Central agencies in many cases have seen their authority over lower levels much diminished, making both vertical and horizontal coordination more difficult. The only central government institution that still possesses a strong, multifaceted authority over provincial and district governments is the Ministry of Home Affair (MoHA; see Box 1 for an analysis).

As suggested by this summary, districts have been the biggest beneficiaries of the decentralization process. Provinces originally shut out of the main thrust of decentralization due to concerns some would be large enough to possibly push for secession, have gained greater resources and authority under recent regulations. Figure 3 summarizes the basic picture.

**Figure 3: Institutional framework under decentralization**

*Source: adapted from “Indonesia and Decentralization: Implications for UNFPA’s Country Program”, September 2005*
Not surprisingly, decentralization has brought a range of practical challenges. Most directly, “the provision of health, including reproductive health, and family planning, services has suffered from the decentralization process. Provinces, and particularly districts, now in charge of developing and budgeting their own health plans and family planning programs are struggling due to lack of capacity and little attention paid to reproductive health and family planning activities from local decision makers.”  

This difficulty at the service delivery level reflects cumulative disruptions caused by changes to the financing, planning and supervision of social services in the wake of decentralization. Despite recent improvements noted earlier, the description of roles and responsibilities, planning and management, and coordination among institutions, both vertically and horizontally, has often suffered from “imprecise language, and inconsistent definitions; contradictions between legal instruments (including the constitution), and use of lower legislation to ‘correct’ perceived problems at higher legislation levels; repetition of other legislation rather than simple cross-references; too large a reliance on follow-up regulations on key issues; and late preparation of implementing regulations.” This poor legal framework has created role ambiguities at each level of government; for instance, provincial and district governments share similar 26 functions, with no clear-cut distinction on their relative roles or authorities. Imbalances between authorities assigned and resources allocated to lower levels can also cause problems, particularly for poorly endowed districts.

As elaborated in some depth below, the challenges brought by decentralization have profound implications for the UNFPA country program.

Population issues

While Reformasi provides the general context, population policy issues provide the proximate backdrop for UNFPA’s work in Indonesia. Population issues have gone through at least four phases in Indonesia’s modern history, and these phases strongly influence the context in which the country program now finds itself.  

1950s: early launch of the population movement. A small group of medical personnel, often trained in the West, took up the cause of maternal health, family planning and population control generally as a means to promote develop and secure individual rights, and “called on the government to support the provision of

4 RDEP, 2005
5 See DRSP (Democratic Reform Support Program), 2006, Stocktaking on Indonesia’s Recent Decentralization Reforms. Jakarta: USAID
6 Government Regulation No. 38 /2007 on Distribution of functions/authorities between central, provincial and district/city government (pembagian urusan pemerintahan antara pemerintah, pemerintahan daerah provinsi, dan pemerintahan daerah kabupaten/kota), article 7 point 2.
7 This section is based on Hull, T. and Hull, V. (2005) “From family planning to reproductive health care: a brief history”, in Hull, T. (ed) People, population, and policy in Indonesia Singapore: ISEAS.
contraception through the public health system.” Due to sensitivity over not wanting to be seen to “advocate mass programs that would be identified with immorality,” President Sukarno was reluctant to back the agenda strongly. Yet the movement did gain a quiet foothold over the period, which saw the establishment of the Indonesian Planned Parenthood Association (Perkumpulan keluarga Berencana Indonesia - PKBI) in 1956.

**The early ‘New Order’**. President Suharto was fairly rapidly converted to the cause of population control as a pro-development measure. One of the first acts of President Suharto’s new government was to sign the World Leaders’ Declaration on Population in 1967, and to launch the predecessor of the National Family Planning Coordination Board (Badan Koordinasi Keluarga Berencana Nasional - BKKBN) in 1968.

The BKKBN then grew dramatically in resources, scope of activities and prestige over the following two decades. It quickly became associated with:

- a massive grassroots network of collaborators;
- ambitious quantitative targets, for which local government leaders would be held accountable, for increasing the number of ‘akseptors’ of contraceptive services; and;
- competent management.

**The 1980s-90s**. While Indonesia’s efforts in population control came to be seen as a model in many developing countries, these decades saw the intensification of some critiques of the prevailing model and the emergence of new issues. The critiques centered on the potential distortionary effects that the numerical targets might have on data quality and, more ominously, on pressurizing women to become ‘akseptors’. Driven partly by the a reemphasis on reproductive health issues more broadly understood, the BKKBN expanded to deliver a wider range of activities related to promoting family welfare. At the same time, the rise of the HIV epidemic highlighted the need for a more integrated response across several relevant ministries.

**Reformasi**. The post-Suharto period has seen the BKKBN struggle to find its place in a decentralizing Indonesia. Initially, BKKBN, like some other non-department boards, “were given a reprieve to maintain their pyramidal structures down through the districts to the sub-district level,” despite the transfer of huge resources to the district level mentioned earlier. Yet by 2002 the district offices of the organization were handed over to the district governments to control; and maintaining organizational unity and even identity of the board has proven challenging ever since, given the differential funding and even organizational homes in which the family planning function has been placed.

While there does not seem to have been a decline in the proportion of women using contraception, a range of challenges continue to confront the population movement, from contradictory laws on abortion, increasing fragmentation in the approach to
sexually transmitted disease and adolescent pregnancy prevention. “In all these
issues,” conclude Hull and Hull, “the rhetoric was expansive, but the action limited and
unrealistic.”

2.3 UNFPA in Indonesia

A range of pressures specific to UNFPA Indonesia are shaping its emerging response to
the turbulent institutional environment noted above.

Programmatic inheritance

Three key ‘inheritance’ of previous country programs influence the shape of the
current CP: resource levels; UNFPA’s broad mandate and strategic focus; and responses
over the years to Indonesia’s changing institutional context.

Assistance levels of UNFPA since 1971, the first year for which data could be
located, are shown in table 1. These allocations have been remarkably constant in per
capita terms over the years, at about 10 cents per person. In 2005, UNFPA assistance
amounted to approximately .2% of ODA and 5% of ODA in health and population.

Against the backdrop of a rapidly rising GDP and an increasing institutional
complexity in Indonesia, the relatively steady and modest level of assistance underlines
the necessity for strategic focus in order to make any difference, a key theme of the
next chapter.

The broad mandate and strategic focus of UNFPA worldwide has shifted over the
years. Its early years saw a focus on family planning methods and significant purchases
of contraceptives for distribution in country. These remain part of the picture, but at
present UNFPA’s primary interests are reflected in the 1994 International Conference on
Population and Development (ICPD). The conference, which UNFPA had a major role in
convening, underscored the fund’s commitment to work towards three broad sets of
goals, which in the language of UNFPA’s newly-launched global Medium-Term Strategic
Plan (MTSP) include:

- Population and development: Systematic use of population dynamics analyses to
guide increased investments in gender equality, youth development, reproductive
health and HIV/AIDS for improved quality of life and sustainable development and
poverty reduction.

\[\text{Source: UNFPA Indonesia, 2005.}\]

\* http://www.oecd.org/dataoecd/63/6/1877921.gif for overall and breakdown of ODA in 2005
Reproductive health and rights: Universal access to reproductive health by 2015 and universal access to comprehensive HIV prevention by 2010 for improved quality of life.

Gender equality: Gender equality advanced and women and adolescent girls empowered to exercise their human rights, particularly their reproductive rights, and live free of discrimination and violence.  

This tripartite focus has apparently been relatively stable in the post-ICPD period, and implies that a Country Program in most of the countries in which UNFPA has a presence will look quite a bit similar in its programmatic focus and activities. On the other hand, headquarters seems to be encouraging countries to specialize within this broad agenda on areas of particular concern to the country context, not least given the limited resources of the fund. The team interviewed one senior official from UNFPA headquarters who emphasized that while UNFPA offices everywhere will represent the organization’s entire agenda, program focus may differ substantially in line with country priorities and opportunities, so long as it reflects some combination of the 13 outcomes falling under the three categories above.

The influences of Indonesian democratization and decentralization noted above have posed great strategic challenges for the last two CPs in particular. These are explored at length through the remainder of the report. From a program strategy point of view, the key implications of these institutional changes have included:

- The need to work with (and for advocacy purposes, to target messages to) a wider range of bureaucratic, political and societal actors, given the fragmentation of authority that the post-Suharto period has brought.
- The need to work more prominently with, and indeed to build program ownership at, local levels of government - in particular with districts, to whom the lion’s share of resources and responsibilities fell at least initially in Indonesian decentralization.
- The necessity of working to fill gaps in service provision caused in part by the institutional flux decentralization has brought (witness the situation of the BKKBN) and in part by the differential capacities and resources of local levels of government throughout this diverse country.

Such imperatives have been reflected in several specific areas of the UNFPA CP over the past two cycles (see Table 1).

Management structure. Two broad shifts can be noted in the overall coordination and management structure of successive CPs. One is the shift from the BKKBN to Bappenas (the planning ministry), a process reflective of the increasing intersectoral

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complexity of the program. The second is the increasing empowerment of local levels of government, with provincial governors becoming formal parties to the Country Program Action Plan in the latest CP, and with annual work plans (AWPs) signed directly by the chief of the district planning boards (Bappeda).

Table 1: Basic data and hallmarks of UNFPA Country Program cycles in Indonesia

<table>
<thead>
<tr>
<th>Country Program</th>
<th>Investment (million US$)</th>
<th>Geographical focus</th>
<th>UNFPA office size</th>
<th>Key government focal point</th>
<th>Key areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>1971-75</td>
<td>$7.5</td>
<td>Primarily national</td>
<td>Not known</td>
<td>BKKBN</td>
<td>Co-financing for one large joint UNFPA/IBRD project (see Box 2) is significant percentage of funding</td>
</tr>
<tr>
<td>CP-1 1976-80</td>
<td>$13.1</td>
<td>Primarily national; one large joint UNFPA/IBRD project</td>
<td>Not known</td>
<td>BKKBN</td>
<td>Provision of contraceptives, training, research, census</td>
</tr>
<tr>
<td>CP-2 1981-85</td>
<td>$16.5</td>
<td>Primarily national</td>
<td>Not known</td>
<td>BKKBN</td>
<td>Same, plus extension of FP to outer islands</td>
</tr>
<tr>
<td>CP-3i 1986-90</td>
<td>$17.0</td>
<td>Primarily national</td>
<td>Not known</td>
<td>BKKBN</td>
<td>Same, plus numerous capacity building grants</td>
</tr>
<tr>
<td>CP-4 1991-95</td>
<td>$15.5</td>
<td>National and four specific provinces (latter about 20% of funds)</td>
<td>Small - a few program officers</td>
<td>BKKBN</td>
<td>Large grants to strengthening FP, management at BKKBN, provinces, development of FP law</td>
</tr>
<tr>
<td>CP-5 1996-00</td>
<td>$19.2</td>
<td>Same provinces, but reduced percentage (about 10%)</td>
<td>Growing - additional staff in central ministries</td>
<td>BKKBN</td>
<td>Much diversified: A range of new elements: HIV, “strengthening religious NGOs”, BPS/MOH, IEC, mother friendly movement, violence against women, gender mainstreaming etc.</td>
</tr>
<tr>
<td>CP-6 2001-05</td>
<td>$21.0</td>
<td>44 districts in four provinces</td>
<td>Increasing central office plus larger numbers of UNFPA-supported staff in ministries and localities</td>
<td>Bappenas</td>
<td>Broadly similar to current focus (see Figure 4)</td>
</tr>
<tr>
<td>CP-7 2006-10</td>
<td>$25.0 (planned)</td>
<td>21 districts in six provinces; much more decentralized planning process</td>
<td>Fairly steady numbers overall due to downsizing number of districts while increasing presence in each district.</td>
<td>Bappenas</td>
<td>(See Figure 4)</td>
</tr>
</tbody>
</table>
**Geographical focus.** In a country the size of Indonesia, perhaps the most concrete program strategy question is *where* to work sub-nationally. Detailed information on earlier CPs could not be obtained, but Table 1 provides some data inferred for earlier CPs from lists of program investments. It seems safe to conclude that CPs have increasingly attempted to concentrate funds and programs sponsored under the CP onto particularly poor provinces and districts, and that the focus has shifted from centralized to more decentralized approach in so doing. Within the greater focus on geographically specific program zones, the current program, working in some 21 districts, marks a shift to concentrate resources to a greater extent than the previous CP (in 44 districts).

**Box 2: The more things change...? UNFPA in 1973**

A literature search turned up a 1973 article from *Studies in Family Planning* that reviewed the first major, joint project between UNFPA and the World Bank, launched in 1972, one that formed a significant percentage of its assistance over the next several years. It is interesting to note how some implementation problems have changed while some have remained quite similar (partly because they are generic challenges in large, complex programs implemented in large, diverse countries like Indonesia). The review noted that by 1973: “...a number of administrative problems were still acute. The problems included: the development of effective systems for communication within the NFPCB and between it and the implementing agencies; the simplification of financial procedures and the creation of ways to speed the payment of salaries and other accounts; clarification of relationships among the NFPCB, implementing agencies, IDA, UNFPA, and other donors; feeding back information about program progress and problems into the decision-making process; adjusting salaries to rising costs of living; administering and supervising a large field staff; and coordinating activities at the various levels of program operations.” (Source: *Studies in Family Planning*, 1973, Vol 4, No. 5, East Asia review, “Indonesia”, by Suwardjono Surjaningrat and Haryono Suyono, p. 104)

**Planning process.** The program planning process for the CP has gone through a significant shift over the years, again linking UNFPA changes from the outside that have nothing to do with Indonesia, with significant local trends. In the past, country programs provided an overall roadmap over a five year period for all project activities, and the project designs were themselves articulated in some detail in project agreements signed primarily with the implementing ministries.

The Country Program Action Plan format, introduced for the current CP in line with global UNFPA practice, serves as a broader framing document that guides the development of annual work plans (AWPs) by a host of implementing partners (IPs) at all levels, and the project design documents have been discontinued.

This has coincided with the decentralization of the planning process as mentioned above; at present, each implementing partner - well over three-quarters of them at district level - develops the AWPs for consolidation and approval each year by higher
levels. The greater managerial complexity this has brought in its wake is a prominent theme of chapter four.

**Human resource deployment.** The UNFPA office was traditionally quite small, with officers directing their attention primarily to central level counterparts in a few ministries - primarily, until the last two or three country programs, the BKKBN. Over the last two CPs, the number of staff supported by the UNFPA office has grown somewhat, but nowhere near as much as the proliferation of UNFPA-funded, nationally-executed staff placed in different central ministries and local governments - some 74 at present. This represents probably a doubling or possibly tripling of the human resources whose salaries are supported through the UNFPA CP, as compared with the situation 10 years ago, for instance, despite the fact that overall assistance has only increased some 30% from the 5th to 7th CP.

The increased number and diversity of placement of CP-related personnel reflect the diversification of program activities and partnerships (especially the importance of working with local governments). They contribute - ironically, given that the key rationale driving the expansion is the need for improved coordination - to increased costs and complexity associated with program management and coordination.

**Changes in the donor environment**

Finally, it should be noted that some of the contextual challenges faced by the UNFPA CP stem from broader changes in the environment in which donors work. Donors are under pressure as never before to demonstrate accountability for results, for their contribution to specific outcomes that can be traced back to their investments and their very existence. This may be tied to the broader ‘accountability movement’ in public administration that is placing a premium on effective donor strategy, and on the monitoring and information systems that can demonstrate the success of any given strategy.

Another growing pressure is for greater aid coordination and harmonization. The 2005 Paris Declaration on Aid Effectiveness emphasized broad principles of national execution and ownership, harmonization of program planning and financial procedures, and integration of donor assistance within overall government systems. The United Nations Development Group (comprising UNDP, WFP, UNICEF and UNFPA as ‘founding members’ of the executive committee) has also been at pains to stress their own need to harmonize procedures, promote national ownership and both speak and work increasingly with one voice in the countries in which they operate.

Yet such goals are by no means easy to accomplish. The mixed success of harmonization efforts to date, and their implications for future UNFPA programming, for an important theme of the current report, taken up at the end of chapter four and in the recommendations chapter.
3 – PROGRAM DESIGN AND STRATEGY

3.1 Overview

This chapter examines one critical question from different angles:

*How well positioned is the CP, in terms of design and strategy, to make a significant and sustainable impact on its intended outcomes?*

The question can be broken down into a couple components. First, is the CP attempting to do the right things? That is a question that goes to *relevance* of the CP design, positioned between UNFPA’s global mandate and Indonesia’s specific needs.

And second, does it have a well-considered strategy for accomplishing these aims? Is the program logically designed so that the major activities and outputs produced by the CP can be expected to lead to the overall impacts desired?

(The chapter that follows this one then goes on to consider the logical follow-on question of whether the CP is actually executing the strategy effectively.)

3.2 Key findings

**Critical weakness: Questionable output quality and sustainability**

We begin with the most concrete expression of CP design - what it actually produces in terms of activities and interventions.

Across a range of activities (but with some exceptions), there is cause for concern that activities and outputs coming out of the CP will fail to add up to a significant, and sustainable, impact. Driving this concern is the assessment of the team that a broad range of activities under the current CP is both quite fragmented and somewhat poorly designed from an impact and sustainability point of view. We address these concerns in turn.

*Program investments show a high level of fragmentation.*

It stands to reason that ‘all other things being equal’, the smaller the per-IP allocation from the CP is:
The higher the average costs of planning, managing and coordinating the assistance (both for UNFPA, government coordinating agencies and the IP);

- The more difficult it may be for the IP to justify allocating significant managerial time and attention onto the area being funded; and

- The harder it may be to demonstrate a discernable impact.

All these may be cause for concern, because the most striking feature of this CP is the way in which a very modest amount of funding available for program interventions - some $2.29 million per year\(^{11}\) - is split among a large number of implementation partners (IP) - including 5 central agencies or ministries, six provinces and 21 districts (where in each case funding is divided among at least five different agencies implementing seven outputs), and over a dozen NGOs agencies. The result is an average amount of funding per district per IP that varies, but in general is strikingly low. All of the outputs at district level save Reproductive Health, for instance, are funded at a level of US$10,000 per year or less, and some central level agencies such as the Central Statistics Board have less than US$50,000 for programming.

Another perspective on assistance levels can be gained by looking at the percentage of the overall recurrent budgets of IPs made up by CP-supported activities. Table 2 reports this figure at somewhere between 1-3.5% for three of four agencies at district level, reaching a substantial percentage (15.3%) only in the case of the local “women’s empowerment” board (which goes by different designations in different districts); the percentages would be much smaller at provincial and central levels.

<table>
<thead>
<tr>
<th>DISTRICTS</th>
<th>BPS</th>
<th>Health</th>
<th>BKKBN</th>
<th>Women’s empowerment</th>
<th>Total district budget (APBD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number surveyed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>median</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>inner-quartile range</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>PROVINCES</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number surveyed</td>
<td></td>
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<td>median</td>
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<td></td>
</tr>
<tr>
<td>min - max</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 2: Percentage of budgets of IPs formed by CP assistance

Source: Field survey

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\(^{11}\) This figure does not include overhead at central levels, nor some activities directly executed by UNFPA; but it does include local programming related to monitoring and evaluation, stationary costs etc. (see Figure 9 on page 65).
Allocations to the IPs, in turn, are deployed to fund quite a number of distinct, and sometimes only loosely related, activities, further fragmenting the overall effect of the assistance. It is not uncommon, for instance, to find that activities for an entire year for a given output in a given district amount merely to a few (separately conceived and executed) training or socialization workshops held - again raising the question of whether such stop-start, isolated activities can really add up to a sustainable impact over time.

A counter-argument to the fragmentation charge would be that some $60,000 to a poor district is not a small sum. Indeed, were it not so, the IPs involved could not be expected to invest any significant effort in implementing the CP-funded activities at all. And the CP activities themselves are in many cases allocated for activities that would be difficult, if not impossible, to fund via normal state budget allocations, which might downplay such areas as socialization workshops or advocacy. Both of the above points are valid.

Yet it is important to note that even for these poor districts, CP-funding is a very small percentage of the total district budget - some 0.10% on average, as calculated for 20 districts in our survey. The argument that the CP is providing any kind of significant budget support, in terms of the overall size of assistance, is clearly not supported by such a figure.

In general, one cannot assume too much just based on the figure of per-IP funding, or the percentage of an IP’s budget funded by UNFPA, alone; it is only when combined with a sense of what the funds are accomplishing - how carefully they are positioned, how well they are designed, how much they are “owned” by those who must carry them forward - that the issue of fragmentation becomes important. This leads to the next finding.
# Table 3: Approved budget ceiling allocations in 2008 by output and level of government

<table>
<thead>
<tr>
<th>PROVINCE</th>
<th>Total Output</th>
<th>Com Devt</th>
<th>TOTAL Allocasi 2008</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>R101</td>
<td>R105</td>
<td>R205</td>
</tr>
<tr>
<td></td>
<td>16.75%</td>
<td>16.75%</td>
<td>16.75%</td>
</tr>
<tr>
<td><strong>FUND ALLOCATED PER OUTPUT</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ears)</td>
<td>12,009.08</td>
<td>12,009.08</td>
<td>12,009.08</td>
</tr>
<tr>
<td>Banda Aceh</td>
<td>8,732.22</td>
<td>8,732.22</td>
<td>8,732.22</td>
</tr>
<tr>
<td>Aceh Besar</td>
<td>8,732.22</td>
<td>8,732.22</td>
<td>8,732.22</td>
</tr>
<tr>
<td>Aceh Barat</td>
<td>9,005.45</td>
<td>6,005.45</td>
<td>9,005.45</td>
</tr>
<tr>
<td>Aceh Jaya</td>
<td>9,005.45</td>
<td>6,005.45</td>
<td>9,005.45</td>
</tr>
<tr>
<td>Sumatera Barat</td>
<td>3,488.31</td>
<td>3,488.31</td>
<td>3,488.31</td>
</tr>
<tr>
<td>Sumatera Selatan</td>
<td>9,005.45</td>
<td>6,005.45</td>
<td>9,005.45</td>
</tr>
<tr>
<td>Jawa Barat</td>
<td>9,005.45</td>
<td>6,005.45</td>
<td>9,005.45</td>
</tr>
<tr>
<td>Jawa Timur</td>
<td>9,005.45</td>
<td>6,005.45</td>
<td>9,005.45</td>
</tr>
<tr>
<td>Jatim</td>
<td>9,005.45</td>
<td>6,005.45</td>
<td>9,005.45</td>
</tr>
<tr>
<td>Bali</td>
<td>9,005.45</td>
<td>6,005.45</td>
<td>9,005.45</td>
</tr>
<tr>
<td>Nusa Tenggara Barat</td>
<td>10,468.93</td>
<td>10,468.93</td>
<td>10,468.93</td>
</tr>
<tr>
<td>Nusa Tenggara Timur</td>
<td>13,953.24</td>
<td>13,953.24</td>
<td>13,953.24</td>
</tr>
<tr>
<td>D.I. Kalimantan</td>
<td>9,005.45</td>
<td>6,005.45</td>
<td>9,005.45</td>
</tr>
<tr>
<td>D.I. Sumatera</td>
<td>9,005.45</td>
<td>6,005.45</td>
<td>9,005.45</td>
</tr>
<tr>
<td>D.I. Kalimantan</td>
<td>10,942.25</td>
<td>10,942.25</td>
<td>10,942.25</td>
</tr>
<tr>
<td>N.Sulawesi</td>
<td>8,732.22</td>
<td>8,732.22</td>
<td>8,732.22</td>
</tr>
<tr>
<td>Maluku</td>
<td>9,005.45</td>
<td>6,005.45</td>
<td>9,005.45</td>
</tr>
<tr>
<td>Maluku Barat</td>
<td>9,005.45</td>
<td>6,005.45</td>
<td>9,005.45</td>
</tr>
<tr>
<td>TOTAL PROVINCE</td>
<td>57,557.19</td>
<td>57,557.19</td>
<td>57,557.19</td>
</tr>
<tr>
<td>TOTAL DISTRICT</td>
<td>160,531.29</td>
<td>160,531.29</td>
<td>160,531.29</td>
</tr>
<tr>
<td>TOTAL CENTER</td>
<td>456,160.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL NGO, Non HIV/AIDS FOR ENTIRE PROGRAM AREA</td>
<td>149,964.00</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Note: see Figure 4, page 25, for description of output categories)
The quality of activity design in the annual work plans appears low across a broad range of IPs.

Across a range of areas of substantive investment and across IPs, the team found few individuals who could weave a coherent story out of the set of activities contained in the annual work plans of different IPs, for different outputs. By ‘story’, we mean the ability to clearly link the activities to a set of goals or outcomes that should be obtained, through a sequence of investments, in particular localities or over time. Activities often appear reasonable in themselves - a workshop on gender-based violence here, a training on statistical methods there etc. - and the team is not in a position to offer a substantive evaluation of individual activities. The point is a more general one: that even after work plans have been through several iterations, and have passed through multiple levels of the CP hierarchy, it is difficult or impossible to say, from looking at them, what goals they will ultimately contribute to, and how the activities link up with others, concurrently or over time, to create that impact.

This is a strongly worded finding, but having discussed this with a broad range of stakeholders in the program, we feel this weakness to be in fact widely acknowledged as accurate. The implication is clear enough: no country program is likely to have a sustainable impact in any area if the set of activities on which it is built are themselves weak. They are the basic building blocks of impact.

Awareness and indeed ‘ownership’ of local partners of the outcomes to which activities are supposed to lead are generally low.

This finding complements the previous one. If it is difficult for outsiders to ‘connect the dots’ of the activities, it is also the case that the IPs themselves often fail to be able to do so themselves, particularly at the lower levels. Yet they are the people on whom success, critically, depends, since they are the ones who in the new planning system from this CP cycle drive the AWP process.

What is more, an alarming number of IPs - perhaps half, based on those interviewed by the team - at all levels seem to view the CP as something extra or additional to their “normal” responsibilities and programs; in fact, they often express UNFPA assistance as something of a “burden” - “something that we take care of after we’re finished with our main activities that we will certainly be accountable for, under the local budget”, as one district-based IP chief put it quite bluntly.

How can we account for this combined picture of a fragmented, poorly ‘owned’, and not very results-oriented set of activities in the current CP? The next sections turn to explanations, which will have to be nuanced, since the picture can be so diverse across districts, IPs and activities. Tracing back to the design stage, we find an overall
consistency of priorities and an admirable poverty focus, but a critical gap in the conceptualization and operational expression of program strategies.

**Key causes (1): Conceptual and operational design (CPAP issues)**

The first place to look for explanations shoots back up from the activity level to the overarching design of the CP, which of course is embodied in the multi-year Country Program Action Plan (CPAP). While it has strengths, we also find some significant causes of poor performance at the activity level to lie in this overall framework.

The first finding is not too great a surprise or a threshold to cross. Nevertheless, it bears mention that:

| The CPAP outcome areas are fully consistent with UNFPA priorities. |

**Figure 4** reproduces the CPAP’s conceptual framework, showing its main outcomes and outputs. It suggests that the CPAP is, first, fully consistent with the Medium-Term Strategic Plan (MTSP) priorities of headquarters (although it was formulated before this document). If anything, the CPAP may err on the side of being *too balanced* in terms of overall coverage, with a ‘something for everyone’ approach; i.e. nearly all of the priority outcomes of the MTSP are represented by some programmatic investments under this CPAP. This broad-brush approach may contribute to the fragmentation noted earlier. (On the other hand, this is likely to be a problem across many UNFPA country offices, as suggested by a senior UNFPA HQ official interviewed by the team.)

It is also important to note that the CPAP reflects well on UNFPA’s stated priority to target relatively poor areas. The selection of provinces and districts in which to work followed a careful process that aggregated and weighted several sets of indicators that were poverty- and need-focused, and that in addition included some consideration of the desirability of building on previous investments. As a result of this process, it can be fairly noted that UNFPA is working in some of Indonesia’s highest-need, poorest districts.
Figure 4: Conceptual Framework of the CPAP - Indonesia

National priority (2006-2010): (a) to create socio-political conditions that enable the poor to fulfill their basic rights and to improve their standards of living; (b) to strengthen the socio-political and economic participation of the poor in public decision making; and (c) to give protection and security to vulnerable groups, including female-headed households.

UNDAN outcome (a) strengthening human development to achieve the MDGs; (b) promoting good governance; and (c) protecting the vulnerable and reducing vulnerabilities.

Reproductive Health

Population and Development

GENDER

RH-CP Outcome 1: An improved policy environment and commitment to promote reproductive rights and comprehensive, high-quality, gender-sensitive reproductive health and adolescent reproductive health information and services at national and sub national levels.

RH-CP Outcome 2: Strengthened demand for high-quality, integrated, client-oriented and gender-sensitive reproductive health and adolescent reproductive health services.

RH-CP Outcome 3: Increased access to high-quality, integrated, client-oriented and gender-sensitive reproductive health and ARH services and information.

PDS-CP Outcome 4: Enhanced understanding of policy makers, planners and parliamentarians at national and sub national levels on the linkages between population, reproductive health, gender, poverty and development through improved availability and increased utilization data on population, reproductive health and adolescent reproductive health, STIs including HIV/AIDS, gender and poverty.

GND-CP Outcome 5: Strengthened institutional mechanisms, socio-cultural values and practices to promote and protect the rights of women and girls and to advance gender equity and equality.

Output 1.1 (R 101): National guidelines and sub national strategies on Reproductive Health, Adolescent Reproductive Health (ARH), Sexually Transmitted Infections (STIs) and HIV/AIDS are developed to ensure access of these services irrespective of marital status, gender, age and sexual orientation.

Output 1.2 (R 105): Increased capacity of lawmakers, decision makers, religious and community leaders, civil society and the media to mainstream issues related to reproductive rights, reproductive health, adolescent reproductive health, STIs, HIV/AIDS and gender into policies and programmes.

Output 2.1 (R 301): Increased awareness and knowledge among women, men and vulnerable groups, of issues related to reproductive rights, reproductive health, adolescent reproductive health, STIs, HIV/AIDS and gender (incl. GBV).

Output 3.1 (R 205): Strengthened maternal and neonatal care, with focus to emergency obstetric care, and increased availability of youth-friendly RH information and services, including those focusing on STIs and HIV/AIDS.

Output 4.1 (P 101): Improved availability and increased capacity to utilize disaggregated data on population, reproductive health and adolescent reproductive health, STIs and HIV/AIDS, gender, poverty and enhanced understanding of planners, policy makers and parliamentarians on their linkages with development.

Main Strategies 1.1: Advocacy and policy dialogue; Revitalize and establish RH commissions.

Main Strategies 2.1: Strengthen capacity of government and NGOs to carry out IEC/BCC; directly support IEC/BCC programmes.

Main Strategies 3.1a: To support the implementation of the national strategic plan on “Making Pregnancy Safer”.

Main Strategies 4.1: Capacity building of implementing partners to provide service statistics timely, comprehensively and well organized.

Main Strategies 3.1b: To support the implementation of the “National Strategy and Policy on Reproductive Health” focusing on ARH and STIs including HIV/AIDS prevention.

Main Strategies 5.1: Strengthen IEC/BCC capacity of strategic government institutions, NGO and CSO and the media to promote women’s rights and prevent VAW and GBV, by utilizing judiciary, customary, religious texts and laws, including culturally sensitive and locally accepted IEC/BCC.

Main Strategies 5.2: Strengthen capacity and partnerships between the government including Law Enforcement Agencies, and NGOs and CSOs in the reduction and management of VAW and GBV and other harmful practices.

Main Strategies 3.2: To support the implementation of the national strategic plan on “Making Pregnancy Safer”.

Main Strategies 4.2: To support the implementation of the “National Strategy and Policy on Reproductive Health” focusing on ARH and STIs including HIV/AIDS prevention.
While the CPAP fulfills its basic function of providing a poverty- and rights-focused program framework consistent with UNFPA priorities, there are three areas in which some weaknesses are evident - weaknesses that may have as much to do with the format of the CPAP itself rather than a shortcoming of the UNFPA country office, for instance.

The CPAP document does not sufficiently contextualize Indonesian priorities and institutional context, particularly with respect to decentralization.

In one or two paragraphs, the CPAP lays out a few aspects of the decentralized and changing institutional framework of Indonesia, but generally speaking the local context is ‘thin’. Also, the CPAP does not appear to contain any sense of the assumptions or program risks that are reflected in the design, and mechanisms to reduce those risks.

The CPAP does not lay out a convincing linkage between geographical-based activities and the national-level impacts to which these are intended to contribute.

As an ‘agenda-based organization’, UNFPA is committed to assisting countries to reach very ambitious goals. Yet its resources are obviously constrained. One of the key tasks for a CPAP is to show how limited funding can make a significant contribution to the national scene, leaving sustainable impacts in its wake.

One can think of a number of ways in which a strategy to produce such broader impacts might convincingly be portrayed:

- Program investments might be so well targeted onto geographical areas with high incidence of a problem in question (say, maternal mortality) that the direct program contribution may itself ‘move’ the national indicators or goal attainment.

- Program investments may initiate a longer-term process of capacity building and advocacy in the selected localities that lead to a broader (but still primarily local) set of efforts to tackle the underlying conditions. The program would be “leveraging” change through limited investments by triggering the contributions and commitment of various actors over the longer run.

- Program investments may seek to overcome deficiencies in the knowledge base about ‘what works’ in the field, thus forming a model for replication elsewhere (by informing national program development or design).

- Program investments may not be geographically targeted at all, but focused on specific problems and actors (such as revision of national laws).
Of course there are other permutations of the above scenarios, and CPs can be expected to employ multiple strategies. The point is that the CPAP should elaborate on its impact strategy.

The current CPAP outcome structure is primarily geographically-based; that is, the “CPAP results and resources framework” (see Table 4 for an example) is primarily (though not exclusively) developed based on the assumption that specific targets will be obtained in specified program localities. The assumption is clearly that target achievement in specific districts will, in turn, contribute to the broader achievement of nation-wide outcomes, such as “strengthened demand for high-quality...reproductive health and adolescent reproductive health services and information.” Yet the CPAP is thin on the broader strategy necessary to ‘leverage’ limited program funds to achieve a significant impact transcending individual districts.

Table 4: Excerpt from results framework of CPAP

<table>
<thead>
<tr>
<th>RH- CP Outcome 3:</th>
<th>Output 3. 1. (R 205):</th>
<th>Output indicators:</th>
<th>Implementing partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased access to high-quality, integrated, client-oriented and gender-sensitive reproductive health and ARH services and information.</td>
<td>Strengthened maternal and neonatal care, with focus to emergency obstetric care, and increased availability of youth-friendly RH information and services, including those focusing on STIs and HIV/AIDS.</td>
<td>3.1.a At least 3 Puskesmas per district providing integrated Essential RH information and service 3.1.b Ten Puskesmas in three selected districts (Tasikmalaya, Indramayu and Pontianak) implementing STIs and FP guidelines 3.1.c At least two Puskesmas in seven districts (Lombok Barat, Lombok Timor, Pontianak, Singakaw, Sambas, Tasikmalaya and Indramayu) providing youth friendly RH services 3.1.d At least 1 Puskesmas with beds per district providing Emergency Obstetric Care (expected to offer 24-hour service) 3.1.e Blood Bank to support comprehensive Emergency Obstetric Neonatal Care available at the selected district hospitals 3.1.f At least one HIV Voluntary Counseling and Testing site established in seven districts</td>
<td>• Ministry of Health; BKKBN; Ministry of Women’s Empowerment; Ministry of Education; BRR; Provincial and district authorities • United Nations agencies • NAC, PAC and DAC • Civil society organizations • NGOs (PKBI Tasik, PKBI LoBar, PKBI LoTim, PKBI Ponti, PKBI Skw, PKBI Sbs, PMI Ponti, PMI Skw, PMI Sbs, PMI NTB)</td>
</tr>
</tbody>
</table>

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12 Such targets were mostly absent until mid-2007; the targets for almost all the indicators were only set during the CPAP revision.
**Essential details about program models are generally lacking from the CPAP document itself.**

A fairly large number of program models and operationalized concepts are mentioned throughout the CPAP; to name but a few examples:

- “Friendly husband-to-pregnant mother (Suami Siaga)”
- “Integrated Essential Reproductive Health (IERH)”
- “Basic Emergency Obstetric and Neonatal Care”
- “Prevention and management of Violence Against Women (VAW) and Gender-Based Violence (GBV)”
- “Community projects focusing on key reproductive health and rights, population and gender issues”.

Such models are clearly critical to the impact model of the CP, mentioned just above. Yet it is essentially impossible for an intelligent non-population specialist in any of the areas to gain a basic sense of what the models actually are - their critical design features and justifications, and their link to national programs and policies. A bevy of acronyms and concepts are simply introduced without elaboration.

In addition, a great majority of interventions or models are framed in terms of “capacity building”, but there is no clear indication of what model of capacity development is implied - of what the destination would like if attained, what capacity gaps currently exist, and how temporary resource provision can actually be expected to plug those gaps in ways that lead to sustainable impacts.

It is possible, even likely, that the critiques made above - that the CPAP spreads itself too thinly; pays little attention to context and therefore looks somewhat ‘generic’; and fails to elaborate on its overall impact model as well as some of the concepts and programs that are key components - could be made of CPAP documents more generally. The important point here is not to single out the Indonesian CPAP as part of some comparative analysis of CPAPs.

It is rather to point out that there may be important consequences to the above gaps. Given the great number of program stakeholders, and also their frequently rapid turnover over a CP cycle, the CPAP gaps are probably contributing to the lack of clarity of programming strategies noted by the team. And the gaps may imply that insufficient thought has actually been put into the models and assumptions themselves.

One program officer freely acknowledged that “key stakeholders at the ministry level working on [one important program model mentioned in the CPAP]” - which is
confidently assumed to be ‘implemented’ in all 21 districts to help achieve a nation-wide impact - “are actually not very clear, or in agreement, on what it means and how it should be implemented.” Such a situation should not be taken as a damning critique of that particular model, but would rather underline that the CPAP does not properly contextualize the kind of conceptual and operational work that needs to go into the model’s development in order for it to be ‘rolled out’ to the districts. The impact model implied in the CPAP design is one of ‘direct contribution to target attainment via district-based implementation’, whereas in fact it is closer to basic model development itself - a much more knowledge- and information-intensive exercise. Such a difference has all kinds of practical implications, including the degree to which centrally-based authorities take an active role in annual work planning (much greater if the goal is careful piloting and learning).

**Key causes (2): Poor localization of the CPAP**

A second set of causes relates to how provinces and districts - the primary drivers of the 6th CP, as noted earlier - ‘find themselves’ in the CPAP. It is essential for them to do so because in the current AWP process (and in contrast to previous programming models) the bulk of activities funded under the CP are driven both in their planning and implementation by local stakeholders themselves based on their understanding of the CPAP. That is true even where this takes place with some input (and, where necessary, correction) by central partners, including the UNFPA office itself.

| **There was little local involvement in the formulation of the CPAP.** |

The 7th CP formulation process was self-conscious about being a break from the centralized CPs of the past; it was the first CP that would take a clear stand on decentralization, most notably in its bold decision to decentralize work planning at the district level itself.

Yet by all accounts, and with a few minor exceptions, there was little substantive involvement of provincial and district stakeholders in the formulation process for the CPAP.13

| **Poor conceptual and operational roadmap to local goal attainment.** |

13 In addition, what involvement with local officials did take place was apparently erratic. For example, as part of the CP formulation process, UNFPA sponsored several Sekda heads to an event in Malaysia to help sensitize them to the CPAP, but one Sekda head noted that shortly after this, all communication with UNFPA suddenly stopped, and the role of Sekda within the CP management structure downplayed.
What guides annual work planning? Of all the activities that could be programmed in a given year, what provides an orientation to IPs as they put together their plans? At the broadest level, the CPAP specifies some of the impacts and outputs that are expected over a five year period. A largely forgotten program document that was elaborated in the first year of the CPAP laid out sample work plan activities across all components over a five year period. And key project personnel at the central level in many cases have a sense of how the program should reasonably unfold over time.

Yet these supports have not been enough to provide IPs with a clear, coherent notion of where they are supposed to drive their program on a year-to-year basis. Generally speaking, there is a ‘strategic vacuum’ where one would expect a well-elaborated framework guiding work planning. Work planning is instead driven by a ‘logic of appropriateness’ - the underlying question for most IPs as they approach the work plan becomes, what kinds of activities are broadly consistent with the CPAP - rather than a ‘logic of program strategy’ - one that would make central the question of what kind of activities would constructively build on those of the previous year and lead to a coherent impact. As a result, activities typically unfold in an ad hoc manner, divorced from a clear conception of how they will bring a district closer to the CPAP goals.

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**Poor baseline and situation analysis.**

One reason for the lack of a coherent roadmap is that one has never been properly formulated. Another is that even if one existed - even if, for instance, an ideal progression for a particular type of district from year 1 to year 5 of a CP (and beyond) had been laid out - districts would have great difficulty in knowing where they were on that map. The kind of situation analysis that would place the 21 districts, for instance, on such a continuum from ‘poor indicators and no program elements realized’ to ‘full intended impact achieved and the final, integrated package of services delivered’ is nearly completely lacking at present. A baseline analysis conducted as part of the CP formulation process turned out to be largely dysfunctional, and was quickly shelved; it is not playing any discernable role in the monitoring and evaluation system. And nothing has yet taken its place.

Chapter four below goes into greater detail on the state of other monitoring efforts; but for the present purpose it suffices to note that efforts to use existing and new monitoring channels to orient local programming efforts (by making them more results-oriented) are still in the initial stages.

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14 Called “Form B”, it is a spreadsheet entitled “Five year main activity (strategy) for each sub-issue in reproductive health, population and development strategies, and gender” which simply notes, for each district, several types of activities that would occur under each output, with an ‘x’ listed in each of the years from 2006 to 2010 in which that activity might occur. It was never updated or refered to in the annual planning process after 2006.
The situation is mixed; some activities show good strategic positioning.

Despite the generally negative picture painted above, there are important exceptions: interventions and activities that show good positioning within the Indonesian context to make a positive impact. One example is the IFPPD, for which the UNFPA CP has served as an important donor over the years (see box below). And even where ‘models’ remain poorly articulated in terms of their conceptual and operational local roadmaps, they often appear to have significant tangible accomplishments as well as unrealized potential. But the point remains that the current overall structure of the CPAP, and the practical interpretation of it (such as it is) among IPs, does not make it easy for program managers to identify which activities are working well and which are not; which are on track to making a substantial contribution to CPAP outcomes, and which are not. Again, this is reflective of weaknesses in the monitoring and evaluation system, but it goes beyond that system to the issue of the strategic clarity and focus of the CP as a whole.

Box 3: The Indonesian Forum of Parliamentarians for Population and Development

This advocacy organization has offices at the national parliament and in all provinces, and some districts, that are supported by the UNFPA CP; it receives a modest amount of support for staff salaries and activities, supplemented at the national level by a few other donor sources. As the name implies, the IFPPD provides targeted, often one-to-one advocacy to individual parliamentarians on a broad range of issues that are virtually perfectly overlapping with UNFPA’s global priorities, such as anti-trafficking of women; reproductive health services; and maternal mortality. It has proven surprisingly successful at all levels in recruiting almost all parliamentarians to formally join its ‘forum’, opening lines of communication and serving as an important means of influencing the legislative agenda.

The IPPFD is piggybacking on the UNFPA CP to begin to establish a subnational structure, which is essential since so much of the legislative action takes place at provincial and district levels. Even where only one IPPFD staff is posted to a province or district, much can and is being done to raise the profile of population activities among parliamentarians. Potentially, a range of synergistic effects with other local programming efforts might materialize; for instance, heightened parliamentarian awareness of reproductive health issues may assist in garnering co-financing that would ensure program sustainability.

While the IFPPD is well positioned to make a difference, UNFPA support to it has not been particularly nimble or well-conceived. Under current rules the IPPFD leadership itself is somewhat hamstrung in the use of CP-provided funds. The CP rules stipulate that these funds support specific staff at specified levels only, hampering the leadership from taking a more organization-wide development approach. The CP assistance has also failed to provide technical assistance to the IPPFD with respect to their rather obvious main concern - diversification of funding and long-term sustainability. Here too, a lack of a strategic approach is thus constraining even a well-positioned CP activity.
Key causes (3): Management-related causes (a preview)

Strategy and management are of course interrelated. The next chapter explores some management-related causes that directly impinge on the program’s strategic focus. These include poor deployment of technical assistance throughout the system - affecting plan quality - and poor integration of CP assistance into the government’s own planning and budgeting cycle - hampering local ownership and commitment to CPAP goals.

3.3 Summary

The challenge of achieving strategic coherence in a country program is great, given:

- the huge number of stakeholders in any CP, all with different views and sometimes competing interests; and
- the accumulated legacies of previous CPs that may not fit well into current conditions (and yet are difficult to change).

The current UNFPA CP is a reasonable attempt to translate UNFPA’s global mandate into programmatic areas matching Indonesia’s needs. Yet because some critical linkages are missing - localities not being able to ‘find themselves’ or map out a clear destination; and models that are insufficiently articulated in their design intentions and operational details - this ‘reasonableness’ is failing to deliver in terms of strategic focus and coherence - essential attributes of an effective CP.
4 – PROGRAM MANAGEMENT

4.1 Overview

This chapter explores Country Program management issues. Its overarching question is:

*How transparent and cost-effective are current mechanisms in the Country Program for critical management functions such as overall program planning, coordination, technical assistance and monitoring?*

Issues of CP “ownership” and stakeholder management are also addressed.

4.2 Management structure and critical functions

We begin by examining three broad areas - critical management functions - in which any CP management structure needs to demonstrate clear value: program steering, planning, and problem-solving.

**Program steering**

Program steering is the process of:

- Formulating the strategies explored in the previous chapter;
- Ensuring that the Country Program is on track to effectively implementing those strategies; and
- Fixing significant, structural problems that may be hampering implementation.

Steering is also the overarching level of management that would make critical linkages between geographically specific program experiments (‘pilots’) and the broader policy context, by ensuring that program ‘models’ are fed into national policy debates and program formulation.

*The steering function in the CP is generally weak.*

There is little evidence that the program is being actively or effectively ‘steered’ at present:
At the operational level, some significant structural problems, such as those evinced in the annual programming process, have gone uncorrected for two cycles.

Policy-level dialogue (e.g. to assess program design issues with a view to facilitating a greater impact) between UNFPA, coordinating agencies at all levels and the IPs seems to be very limited. Formal processes for translating local program experiences into a broader policy debate seem to be generally lacking. This may be particularly true where activities are carried out by non-governmental IPs; there appear to be few substantive contact points between governmental and non-governmental IPs in the CP.

A focal point for impact evaluation of program activities appears to be lacking, as does a broader organizational culture emphasizing the centrality of evaluation activities within the Country Program.

At the same time, there are positive signs recently that the senior leaders in the CP acknowledge the need to improve this function. The CPAP document itself, less than two years old, was revised to reduce the number of declared outputs and hence the number of annual work plans, something that was felt to be plaguing program performance (discussed further below). And the current management review itself is a sign that stakeholders in the CP are willing to take a fresh look at some areas that may be problematic.

One cause of poor steering performance is the inherent difficulty of institutional design in a decentralizing environment.

Rapid decentralization in Indonesia has brought many actors to the table whose institutional strengths and weaknesses are locally variable and often difficult to assess rapidly. And as with the BKKBN, the source of institutional strengths may be changing over time. So involving the right actors, at the right time, in overall program steering is an inherently complex operation.

The primary cause is the failure of the ‘Steering Committees’ throughout the CP to play their roles effectively.

Yet poor performance in this area is also quite directly attributable to a structural failing. Figure 5 presents the basic management structure for the CP. At its head, for each level, is the CP’s aptly named ‘Steering Committee’ (SC). The National Steering Committee membership consists of Echelon I Officials of the Government Ministries/Institutions, and Heads of Non-Government Institutions, who have been appointed through the Decree of State Minister for National Development Planning/Chairman of Bappenas. The Provincial Steering Committee is established
under the chairmanship of the Provincial Secretary (Sekda) and the Head of Bappeda will be the secretary of the provincial SC. The members of SC consist of the heads of provincial offices (Kepala instansi propinsi). According to the pedum, the steering committees have the following key functions:

- The CPSC together with UNFPA will be responsible for reviewing and directing the structure and program orientation to ensure that the program is implemented in line with the national plans and priorities.

- In addition the CPSC will endorse the annual program budget allocation. The meeting will involve the Heads of Provincial SC.

- The committee will meet at least twice a year, one of which is part of the CPAP and UNDAF Review Process: a. to endorse Annual Programme Reports prepared by Programme Component Managers (PCMs) and Provincial Programme Coordinators (PPCs); and b. ensure agreement on recommended changes and adjustments to the structure and orientation of the program for the coming year, if necessary.

The provincial SCs have analogous functions.

Yet the team saw no evidence that the committees are functional for any of these tasks at any level; essentially, even if they do meet (something that is not to be assumed for many localities), the members are not adequately informed or incentivized to play the function intended for them.

The steering committees are failing to perform their roles for three basic reasons. First, although the functions laid out for them are logical enough, in practice there is little understanding or acceptance of their actual roles among the individuals and offices that would have to play them.

Second, there has been poor enforcement of the function. The Steering Committees have probably been dysfunctional for some time without the issue being addressed. (Ironically, fixing this structural problem would be a key function of the National Steering Committee itself.)

Third, it is possible that the design of the steering committee may not be ideal for some of its core purposes. The team was told several times that steering committees are often very passive in the Indonesian administrative context; and that without a direct role in the actual ‘management’ of the program, actors on the steering committee will not feel incentivized or conscientious of their ‘steering’ function.

At the provincial and district level, the key actor that is present on the steering committee - but not in the management function (e.g. technical team; explored further below) - is the Sekretaris Daerah (sekda), or regional sekretariat. It is the body, broadly under Ministry of Home Affairs supervision, that has the formal authority to hold line agencies accountable for performance issues, and to formulate high-level policies
that underpin sectoral planning and budgeting. Figure 6 lays out some key relationships in the government’s structure, emphasizing the importance of the Sekda.

The planning agency, Bappeda, which is the designated government coordinating agency (GCA) for the country program, is, in contrast to the Sekda, of essentially equal rank to the line agencies being “coordinated”, and is primarily responsible within the government’s own framework for planning alone, not for the intersectoral coordination of policy implementation itself.

At the central level, the same may broadly be said of the relationship between the Ministry of Home Affairs and Bappeda. While MoHA has a role on the Steering Committee, it is one that is notable only by its absence in practical terms; it was not even deemed relevant that the team should meet any individuals from MoHA (although a meeting was at the team’s request arranged).

Another potentially neglected actor may be the Coordinating Ministry for People’s Welfare. Its broad function is to coordinate policymaking and implementation across a range of agencies and boards that affect welfare. It would logically serve as an important actor linking pilot project experiments and their replication and upscaling on a regional or national scale.

Given the prominent role of the MoHA in supervising local governments, and the Coordinating Ministry’s role in overarching policy coordination in the social sectors, it is possible that their lack of a role in the CP hampers effective program steering, particularly in terms of addressing some complex structural issues.

Actual program steering performance is more than an issue of the formal actors sitting around the Steering Committee table, however. Some districts visited by the team achieved an impressive level of intersectoral coordination, which appeared to depend critically on the overall commitment and purposefulness of both the Bappeda and the Sekda. The point here is that in the absence of a more ‘functional’ institutional design in this area, the CP is failing to provide a platform for effective institutional capacity building; instead, localities are being thrown back onto their own, often disparate levels of effective coordination.

Poor steering performance may partly be a result of some weaknesses in the CP formulation process, and of a lack of institutional expertise in the office itself.

The team attempted, with only limited success, to review the process of CP formulation through interviews and a set of somewhat disorganized files on record. In general, CP formulation appears to have included the right kinds of considerations and
Figure 5: Management structure for the Country Program

Description: Implementation/Control (→); Reporting (→→→→→→→→→→); Coordination (←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←←→
inputs for effective institutional design. For instance, an institutional stakeholder analysis, and a separate study of decentralization and its implications, were commissioned as part of the process (see box below). And the meeting notes for some of the key preparatory meetings in the process suggest that officials in UNFPA and the
government were actively weighing the pros and cons of different structural configurations for the steering and management of the CP.

**Box 4: An unheeded warning?**

A report entitled “Decentralization and Indonesia: Implications for UNFPA”, written just prior to the start of the current CP in 2005, accurately predicted the difficulties that the CP would face in the coming years:

“Working in a decentralized environment is more complex and requires a considerable commitment of staff time at all stages of the programming cycle. Specifically, additional workload derives from:

- Requirements stemming from UNFPA’s program approach. Although program development procedures seem suitable and sufficiently flexible to respond to varying situations, the country office will probably have to modify/simplify existing procedures to make them functional at the local level;
- The need to negotiate agreements with multiple levels of government and to ensure that good relations are maintained with all government units. The UNFPA country office has to understand the political relationships and pressures between the various social groups and levels of government and maintain a neutral stance;
- A need to maintain a knowledge base of the evolving situation in the country with respect to decentralization;
- The need to devote significant effort to ensure community participation;
- A greater need for advocacy at all levels of government to ensure that support of RH and ICPD goals is maintained;
- The need to meet the demands for program formulation and implementation assistance, which could multiply as the country office must deal with multiple provinces and districts with separate programs or strategies. This could mean that the country office would have to provide ad-hoc training for local officials unfamiliar with UNFPA procedures.

Furthermore, given the lack of formalization at the sub-national levels, donor coordination can be more difficult and time consuming. Additional time and resources are also required in the implementation phase. Countries currently decentralizing have found that lower levels of government lack technical and managerial capacity. This has resulted in a requirement for the UNFPA country office to provide more technical support, as well as do additional financial and program monitoring. The Indonesia country office should be prepared to respond to:

- A proliferation of documents that must be reviewed with respect to reporting as a consequence of the greater number of sub-national units and resulting large number of projects; and
- A much greater need to monitor program and financial outputs and outcomes. This is primarily due to the lack of confidence in sub-national units at least initially, which have often not yet developed the required technical and managerial capacity to implement programs effectively.” (p. 10)

It seems, however, that the report was overly optimistic that the office would be able to handle this complexity - that its own warning was essentially not heeded.

*Source: “Indonesia and Decentralization: Implications for UNFPA’s Country Program”, September 2005*
However, there may have been some weaknesses in the process that could account for some of the problems noted above. Local consultation and consideration of institutional arrangements appear to have suffered from lack of consistency; a more robust role that had been foreseen for the Sekda was apparently abruptly dropped at the last minute due to one government agency’s intervention, for instance. In addition, the formulation process was also poorly documented in general, and the office (like the donor and governmental community more generally) was understandably preoccupied with mobilizing a response to the 2004 tsunami disaster. These facts may have contributed to difficulties achieving a sound institutional design in the current CP.

From a broader pint of view, the UNFPA country office likely does not have the expertise in institutional analysis that could contribute to a more strategic CP formulation process (among other functions). Although all program officers are expected to be monitoring developments in their particular areas, it is difficult to pinpoint individuals whose role it is to actively scan institutional and policy changes that are broadly affecting the CP.

**Annual programming**

The most obvious function of the management structure of a CP, particularly given the shift to the AWP model, is to ensure that activity planning takes place efficiently, transparently and, in effect, *strategically* - with high quality plans contributing to overall CPAP goal and outcome attainment.

> **The annual programming process is out of sync with the government’s own planning and budgeting process.**

The most important sign of problems in this area is that the quality of the actual annual work plans (AWP) themselves is poor. The general lack of coherence over time to activity planning - the lack of clear contribution to longer-term goals - has already been discussed in the previous chapter.

The point here is to emphasize that the plans, and UNFPA assistance generally, are poorly integrated into the governments normal planning and budgeting process. Essentially, the entire UNFPA CP programming process takes place *after* most of the steps of the government’s own process have been completed, making it very difficult, if not impossible, for the AWPs to:

- Reflect government priorities;
- Synergize with existing investment plans;
- Achieve significant co-financing; or
- Benefit from efficiencies in the planning process itself.
Also, the AWP process is not conducted with explicit reference to any of the annual or medium-term district-wide or sector-specific plans of the district; and since the process generally only loosely references the CPAP itself (as noted in chapter 3 above), it is in general “ungrounded”, leading to the appearance and reality that the AWPs are often formulated in a somewhat ad hoc fashion.

Notwithstanding the general difficulties noted above, the process is varied. Some districts, and some IPs, appear to have taken the initiative to anticipate CP assistance within the annual district budgets, so as to provide anticipatory co-financing in ways that may enhance the sustainability of project activities. The more general point is that these are local initiatives that are best described as taking place despite the multiple hurdles created by the CP programming process, rather than because of good process design.

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An important cause of the ‘broken’ annual work planning process is a failure to come to grips with the complexities of decentralized programming.

Two factors have conspired to make the annual programming process extremely difficult to manage. The first is the inherent complexity of working with the increased number of IPs, each of which has been empowered to formulate its own work plan, in the current CP. The complexity is a foreseeable consequence of the commitment of the CP to work in a decentralized manner.

The second is the large number of AWPs to be processed. The shift to the AWP system (in contrast to the previous set-up of activity planning essentially being mapped out for a five year period in the CPAP itself) would probably cause some challenges for any CP initially. But in Indonesia this challenge was accentuated by the decision to have separate work plans for each CPAP output at each level. While this follows standard advice contained in the UNFPA guidelines, it resulted in the need to separately sign and process an astonishing 318 AWPs each year (a number that was reduced by 218 with the reduction in outputs approved by the revised CPAP of 2007). Interestingly, although a full comparative review could not be attempted in the current study, this practice seems also to run counter to practice in several other countries in which UNFPA works; Vietnam and the Philippine’s UNFPA CPs, for instance, are of comparable size, yet operate through less than 20 AWPs.  

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15 “For efficient management of the implementation process, it is strongly recommended that even when a partner is implementing two or more outputs, separate AWPs should be prepared for each output.” UNFPA Policies and Procedures: Programme. Country Programme Implementation: CPAP and AWP P. 7, Feb 2007

16 It is also contrary to UNICEF’s practice in Indonesia, which also roll multiple levels of IPs into the same, large AWP.
While the sheer number of AWPs to be reviewed and processed may strain central capacity at certain points in the year, our findings suggest that this is actually not as critical as initially suspected by the UNFPA country office prior to the review. Rather:

**Poor process design and execution form the management contribution (alongside the strategic vacuum explored earlier) to the problem of poor quality work plans.**

Poor process design here refers to the general lack of clarity among stakeholders regarding the process by which AWPs are to be formulated and approved. The roles of different actors, from the UNFPA-supported staff in the IPs and Bappedas to the provincial project staff to the UNFPA country office itself, have essentially not been agreed to in practice (regardless of the description of the planning process in the operational guidelines manual). For example, by mid-December 2007, the team observed significant consternation in the UNFPA office over the perceived lack of timely, substantive review and provision of guidance with respect to the draft AWPs. This was true even after these had already been passed up multiple screening points in the system:

- from the district- and provincial-based project-supported staff;
- to the project component management in the central IPs; and
- the national project coordination unit (NPCU) in Bappenas.

As a result, for two straight years, the final, approved AWPs have been communicated to IPs late - three months late in the case of 2007. This tardiness significantly affected the ability of IPs to implement approved activities that year.

Transparency of the process has also been low, with most IPs interviewed by the team complaining that they were unclear whether proposed activities would meet with a favorable review at higher levels, and if not, what criteria or constraints underlie cuts and revisions.

Both process inefficiency and tardiness are seen in two examples. Tardiness has partly been caused by a disagreement between the UNFPA office and Bappenas over how plans should be initiated and coordinated. Bappenas was apparently keen to build on the use of provincial level planning workshops in 2006, which brought together a few representatives from each district to establish draft plans that would be further elaborated by the full gamut of district IPs before being forwarded to the center. The UNFPA office declined to fund these workshops in 2007, however, noting that:

- The previous year’s workshops had not have the time or broad participation necessary to establish solid frameworks; and that
The results agreed at the workshops had to be altered so much in practice, following input from the IPs not present at the workshops themselves, that they had little meaning in the end.

In 2007, the process was supposed to have been facilitated by the clearer communication by the center of a standard ‘menu’ of possible activities under each output, which districts could elaborate and customize in formulating their own AWPs. Yet the availability of a ‘menu’ has not solved problems that are rooted in both the lack of strategic focus and poor stakeholder clarity on roles. The menu itself fails to guide linkages that need to be made between previous investments in a district and the long-term achievement of CPAP goals; as noted earlier, it merely substitutes a general ‘logic of appropriateness’ for the much needed ‘logic of program impact’. Indeed, existence of a ‘menu’ may exacerbate poor work planning if some poorly motivated IPs essentially substitute a generic menu-based activity for the more careful planning necessary to build a coherent sub-set of program activities in a district. And in any case, the menu has not been accompanied by the kind of technical assistance that could make actual project design better grounded and informed, as seen in the somewhat chaotic planning process at the end of 2007.

**Monitoring, problem-solving and technical assistance**

The key value that a management structure can add to program implementation is undoubtedly captured by the word ‘coordination.’ Yet the meaning of the word has to be carefully defined. Aside from the annual programming function, the primary meaning of coordination, as we see it, is problem solving, which itself is facilitated by clear information about what is happening (monitoring), and effective flows of communication to those who can, and then do, follow-up to provide assistance and overcome problems in a timely manner.

The basic conclusion of our review in this area can be stated succinctly:

‘**Value-added’ aspects to coordination, including monitoring and technical assistance, are critically weak in the country program.**

We now examine this in terms of the two components, monitoring and technical assistance, of such coordination.

**Regular monitoring mechanisms in the CP are characterized by multiple, overlapping reporting frameworks and channels, and a critical lack of follow-up. Monitoring is “everyone and no one’s” responsibility.**

A thoughtful analysis of current monitoring arrangements was prepared by the UNFPA Country Office. The memo notes that there are a large number of reporting
requirements laid out in the CPAP and other CP stipulations, some originating from headquarters and others improvised locally; by and large, most of these are actually seeing activity - reports are being written and forwarded and filed. Yet the range of shortcomings documented in the memo - and fully substantiated by the field observations of the assessment team - suggest the monitoring system is essentially dysfunctional:

- Quarterly work plan monitoring generally fails to analyze the quality, efficiency or and impact of activities implemented, or to track progress achievement for most indicators.

- While UNFPA Indonesia staff visit provinces and district to discuss program management issues with local partners and UNFPA-supported staff, technical assistance for workshops, meetings or trainings is hardly ever provided, and the coverage of districts on these visits is uneven.

- Central agency partners of the CP generally undertake very few monitoring visits over the course of the year, and these tend to focus solely on addressing program management issues rather than broader quality or effectiveness issues (let alone ‘policy learning’).

- Information from monitoring reports by central and provincial level offices in the CP is, generally speaking, not shared with UNFPA nor with other stakeholders/line agencies.

- Follow-up to monitoring visits is extremely sporadic; for 2007, it was estimated that “less than 10% of all recommended actions” coming out of monitoring reports filed by UNFPA staff were actually undertaken. Across nearly all forms of monitoring in the CP, the picture emerges that the recipients of monitoring reports do not read, analyze, share with others or actively follow-up on reports they receive.

*The deployment of technical assistance and expertise throughout CP activities is poorly coordinated, sporadic, and generally insufficient to address perceived and obvious needs.*

In a program that is premised on the idea of capacity building, the effectiveness with which technical advice is delivered to IPs must be a critical performance indicator for the management structure. In general, the current CP is struggling to find a coherent approach to both technical assistance and capacity building, as evinced by:

- The lack of strategic focus and direction to annual work planning noted in several earlier sections; and
The widespread perception of UNFPA-supported staff at local (district) level, and of IPs at that level, that they are insufficiently supported in carrying out their most ‘technical’ functions.

Figure 7 presents some evidence for the latter problem from the perspective of one of the critical links in the technical assistance chain - UNFPA-financed staff in the district planning offices (Bappeda). The majority of staff interviewed by the team, and surveyed just prior to the assessment by the UNFPA office, reported a need for more support from central officers and better training to assist them in performing their key functions, and only sporadic contact with both the UNFPA office and their provincial level counterparts.

There are three key causes of the above problems. The first is the ‘over-structure’ and ‘under-clarity’ of the CP management framework as a whole.

Consider once again Figure 5, the management structure of the CP (page 37). Perhaps the most critical actors in the technical assistance network would be national and provincial-based sectoral experts based in the ministries / agencies (the PCM), representatives of which together form the Technical Team (TT). According to the pedum, the Technical Team has the following tasks:

- “Describe the policy direction that has been determined by the Steering Committee;
- Provide technical aspect input/s to the National Steering Committee in preparing the policy;
- Provide technical aspect input/s to the Programme Component Manager (PCM), who is responsible for the Programme Component Management Unit (PCMU) in each institution, and to the National Program Coordinating unit (NPCU);
- Harmonize the relation among the three components; and
- Monitor the activity implementation.”

Yet the general impression of the team is that TT experts are not very actively engaged in program development, oversight or problem solving at the level of the implementing partners. Instead, the TT has over the past two years served as the de facto management grouping of the CP. Yet a review of its meeting minutes, direct observation of one meeting and interviews with other participants all suggest that the TT grouping is failing to serve as an effective problem-solving body. Its meetings have suffered from:

- Shifting composition of members (with the PCM’s sending different people to different meetings, some of them poorly informed);
- An understaffed NPCU’s role, one which is operating too passively;
Insufficient participation by a range of the actors, including UNFPA staff.

Figure 7: Frequency of contact between UNFPA-supported local staff and central actors in the management structure

Source: Survey conducted by UNFPA
In addition, the UNFPA office appears to be struggling to define a technical assistance role that it can meaningfully play in the CP. The office has assigned program officers to serve as office-wide focal points for monitoring and problem-solving for specific clusters of districts, for instance; yet a reporting schedule and set of broadly-based monitoring activities for these officers has not been clearly formulated, and the initiative has had only modest success in facilitating a clearer picture, office-wide (let alone CP-wide), of local problems.

In addition, as with monitoring, actors in both the NPCU and PCM, and the UNFPA office itself, seem in some instances to be unclear of the actual role the UNFPA office should play. Is it actually to provide technical assistance to local implementers (or is that primarily the function of the PCM)? Is it restricted primarily to ensuring overall program quality, e.g. by liaising with the Program Component Managers and Bappenas where necessary to help guide overall program steering? The question is far from theoretical, because the various at critical junctures it has been unclear who will take the lead in such areas as monitoring and ensuring high quality work plans reach the desks of the final signatories.

The second, and related, cause is the lack of coherence in the approach to deploying UNFPA-financed, nationally executed staff at all levels.

To summarize the above section, lack of clarity regarding roles, and a general sense of disengagement and/or disempowerment of important actors, have contributed to ineffective monitoring and deployment of technical assistance.

Given this relative vacuum, it is the UNFPA-financed staff - numbering some 74 at various levels, in a dramatic expansion from the last two CPs (see Table 5) - that have been left to shoulder the primary burden of monitoring and problem-solving. There are at least general problems, common to most of these staff in some form and to some degree, that have caused them, collectively, to be less effective in shouldering their overall responsibilities than some in the CP formulation process may have hoped.

Mission creep. The job descriptions for the UNFPA-supported staff are clear enough in the pedum. They include, at the central level (e.g. for project component officers):

- Provide technical assistance to all program activities, particularly those that relate to reporting, documentation, etc.;
- Ascertain that quality and punctuality of annual work plan and its conformity with the Country Programme Action Plan (CPAP) and other agreements, such as study meeting;
- Examine the content of proposed work plan from the field through consultation with the UNFPA National Programme Officer (NPO);
Ascertain that all program activities, as described in the work plan, are executed according to the highest quality standard;

Provide the inputs and comments to the Regional Government in improving the preparation and implementation of the UNFPA Program;

Submit the project progress report and field visit report regularly, and ascertain that annual program progress report and final report on the program analysis have been prepared and submitted on time and according to the highest quality standard;

Coordinate with the Technical Team, National Steering Committee, and National Programme Manager, the Programme Component Officer (PCO) performs the participative assessment on the program performance and progress, to identify the existing problems and ascertain that necessary actions have been taken on time to solve the problems.

And for district project managers (DPM):

Being responsible for program implementation and all aspects of program management at district level;

Supervise the distribution of funds and logistic to the field;

Coordinate the study and development of each output;

Prepare monthly report and budget;

Prepare the progress report;

Prepare the analysis and final program report in writing;

Facilitate meeting with the sectors at district level that led by Bappeda;

Participate actively in the coordination meeting with other bodies that work in health sector in each program location.\(^{17}\)

Yet in practice, these staff are often asked to perform a range of tasks that fall outside of the Terms of Reference. While the situation varies depending on the office, staff are often asked to take a leading role in designing activities and work plans, and in writing activity and financial reports (both of which should actually be done by the IPs themselves); many staff are also regularly asked to devote some percentage of their time to \textit{ad hoc}, non-CP-related activities on behalf of the Bappeda or PCM in which they are based.

\(^{17}\) Both quoted from \textit{pedum} annex.
Table 5: UNFPA-financed, nationally-executed staff in the 7th CP

<table>
<thead>
<tr>
<th>LOCATION</th>
<th>Core Fund</th>
<th>Partnership Fund</th>
<th>Total Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Manager</td>
<td>Assistant</td>
<td>Finance</td>
</tr>
<tr>
<td>Province - South Sumatra</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>1 District - OKI</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Province - West Java</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>1 District - Tasikmalaya</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2 District - Indramayu</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Province - West Kalimantan</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>1 District - Singkawang</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2 Municipality - Pontianak</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>3 District - Sintang</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>4 District - Landak</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>5 District - Sambas</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Province - NTT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 District - West Sumba</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2 District - Kupang</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>3 District - Alor</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>4 District - TTS</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>5 District - Manggarai</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Province - NTB</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>1 District - Lombok Timur</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2 District - Lombok Tengah</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>3 District - Lombok Barat</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>4 District - Dompu</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Province - NAD</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>1 Municipality - Banda Aceh</td>
<td>vacant</td>
<td>vacant</td>
<td></td>
</tr>
<tr>
<td>2 District - Aceh Besar</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>3 District - Aceh Jaya</td>
<td>vacant</td>
<td>vacant</td>
<td></td>
</tr>
<tr>
<td>4 District - Aceh Barat</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>CENTRAL (TOTAL)</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>1 RH Services - MOH</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2 RH Demand Creation - BKKBN</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>3 PCM PDS - BPS</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>4 PCM Gender - MOWE</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>5 BAPPENAS</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>6 IPPPD (central &amp; provs)</td>
<td>vacant</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>7 PKBI</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Puan Amal Hayati</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>9 YKB</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
As a result (and in conjunction with some points below, such as limited support), these staff are fulfilling only some of the roles expected of them, while they are actually being asked to play a number of roles outside of their foreseen mandate.

A key reason for ‘mission creep’ is that the staff are formally paid through, and accountable directly to, the Bappeda office (or PCM) in which they are based, not to UNFPA (despite the fact that the latter was involved in their recruitment and provides the funds for their salary). Government offices write their performance evaluations, and play the most critical role in determining whether they will be hired or re-hired on essentially short-term (one year), temporary contracts under the CP. As a result, staff feel they have little bargaining power to focus their attention back onto core tasks (as defined by the core terms of reference).

Unclear career path and development. The same reason contributes to a weak sense of professional identity among these staff. There is no obvious career path before them; their position gives them special advantage neither to potentially join the civil service nor UNFPA itself. There is essentially no position to which they may be promoted, save perhaps to provincial- from district-level project support, for instance. In addition, most staff express disappointment, and at times some resentment, at their inability to identify themselves as ‘UNFPA staff’ in some way. Although they are clearly hired to serve the country program and its needs, they are not allocated a government or donor email address or even a CP-related name-card, for instance. (Some take liberty on their own to actually create one with a UNFPA logo attached.)

Strained workplace relations and morale. The sense of being “neither here nor there” - neither government nor donor staff, but in between the two and sometimes subject to conflicting and unpredictable demands on their time and conceptions of their role - was felt acutely by many of the staff. This feeling is exacerbated by the fact that these staff enjoy significantly higher nominal salaries than their co-workers (and probably even their supervisors) in the government offices, making them the objects of some (perceived or real) resentment. In one province, for example, some Bappeda staff complained,

“How is it that the proportion of total cost for salary and operational costs of the PPCU could be more or less equal to the total budget for all projects at the provincial level? Not surprisingly, some of us feel we’re only being used to legitimize the UNFPA operation that is benefiting others.”

This may be an extreme expression of the viewpoint, but a sense of resentment may not be uncommon among government colleagues, and may contribute to ‘dumping’ project and non-project functions on the UNFPA-supported staff, further reducing their role clarity and morale.

Inadequate preparation and ongoing training. In terms of recruitment, project-supported staff at the central level appeared in most cases to be well qualified for their work; the picture at provincial and district level appeared to be more mixed, although
the kind of systematic review of staff qualifications and recruitment procedures that would permit a detailed assessment could not be undertaken due to time constraints.

More importantly, however, the training provided by the CP for the roles played by these staff has in general been grossly insufficient to prep them for their roles, particularly more value-added functions of coordination. This training has not gone beyond a short orientation workshop and the provision of some project documentation, and some telephone numbers and email addresses of provincial- and central-level staff that can be reached to help with challenges that may arise. Even in the latter case, the team found that these staff were often somewhat unclear on where they should turn for help with specific issues, with different staff tending to contact different individuals depending as much on their personal connection, regardless of the formal roles.

<table>
<thead>
<tr>
<th>Box 5: UNFPA-supported staff on their jobs</th>
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<tbody>
<tr>
<td>The team conducted focus group interviews with UNFPA-supported staff at all levels to explore how they perceive their work, how well supported they feel, their likes and dislikes on the job etc. Alongside some individual differences, their views held many commonalities across levels of the system. What they most enjoyed in their work included:</td>
</tr>
<tr>
<td>- Flexible working hours</td>
</tr>
<tr>
<td>- Teamwork - good support primarily from their peers (i.e. other UNFPA-supported staff at same level)</td>
</tr>
<tr>
<td>- More at local level: Not too much pressure, fairly relaxed pace of work.</td>
</tr>
<tr>
<td>- More at central level: Sense of being entrepreneurial, of playing the key role of bringing actors together to formulate plans and programs, of “making things happen”.</td>
</tr>
<tr>
<td>What staff expressed displeasure at has already been mentioned above: the sense of not enjoying clear status as working for UNFPA while simultaneously being singled out for extra work and negative attention within their office environments, not being sufficiently supported or trained for their responsibilities, and not enjoying a clear professional identity or career track.</td>
</tr>
</tbody>
</table>

The four general challenges noted above combine to make the work of these UNFPA-supported staff very challenging - as attested by the staff themselves in extensive focus group discussions conducted by the assessment team at all levels (see box below). It should be noted that in most offices, staff interviewed by the team seemed to cope well enough with these challenges, and the assessment team was favorably impressed by the energy and determination of the majority of these staff. But the challenges do underscore two related but distinct points:

- That the full potential value of this staffing structure - which is an important overall component of project overheads - has certainly not been tapped; and

- That these staff are (at least at present) largely not prepared for playing the decisive technical assistance and problem-solving roles that are being de facto
thrust upon them by a leadership deficit from other spheres of the CP management structure.

The third cause is poor conceptualization of provincial roles in the CP, something that mirrors a general weakness in institutional design in the current CP.

The evolving role of the provincial level of the Indonesian administrative system was analyzed in chapter two. The basic finding was that authority and resources bypassed the provincial level in the early phase of decentralization, followed by a more recent attempt to reestablish provincial authority in areas such as the determination and enforcement of minimum service delivery standards, and in overall policy coordination.

| Box 6: Annual work planning at provincial Level - the case of West Kalimantan province |
| Meetings with the senior officials of Bappeda at the provincial level suggest the formal intended role of the province is to coordinate the activities undertaken at the district level. The role of the districts, in turn, was stated to be implementing activities. |
| An analysis of the AWPs at the provincial level was undertaken to review actual activities planned and implemented. Budgetary allocations for the province are higher ($62,598 for West Kalimantan province) than that of districts ($52,053 in the case of Pontianak district). An analysis of the work plans of the province shows that some allocations are for “coordination meetings”; yet others relate to training workshops, e.g. on “decision-making tools for family planning” and “preparation and data collection for evaluation of integrated essential RH services”, that were difficult to distinguish from district activities, e.g. in Pontianak city (the capital of the province). |

Source: Venkatesh Srinivasan’s analysis

Against this fluctuating backdrop, the current CP has struggled to find a meaningful role for the provincial level IEs. Essentially, the default position that has emerged is one in which provincial-level activities overlap substantially with those implemented at district level; provinces are treated more or less as “big districts”, both in the size of their allocations and in the type of activities these allocations fund. Many, perhaps most, of the provincial level activities funded by the CP do not help to strengthen the integration (such as it is) of the administrative system. In this sense, the CP mirrors and in its own way reinforces, rather than helps to solve, the problem of vertical fragmentation in the current governance arrangements of the country.

It should be noted that provincial UNFPA-supported staff do play a role mentoring, and coordinating the activities of, the district-level UNFPA-supported staff. They are one source of help when these staff find roadblocks in their way. Yet it would appear
that even this role is somewhat \textit{ad hoc}, left in important details up to the initiative and organizational skills of the provincial UNFPA-supported staff themselves to play. For example, the team noted that contact between provincial and district UNFPA-supported staff appeared to drop precipitously the further the district-based staff were located from the provincial office - an understandable but regrettable unevenness in the support function. There is little evidence that the provincial staff are substantively playing a functional monitoring and problem-solving role on a consistent, predictable basis.

\begin{center}
\textbf{Box 7: A perspective on accountability}
\end{center}

“\textit{Actors being held accountable have obligations to act in ways that are consistent with accepted standards of behaviour and that they will be sanctioned for failures to do so}”\textsuperscript{18}. The normal chain of accountability flows from public service providers to ministries, politicians, end-users of services and ultimately to citizens.

Taking the above definition into mind, accountability arrangements in the current CP may be problematic. To take three examples:

- In terms of governmental arrangement, the CP management structure appears to deviate from the “normal” governmental chain of accountability, especially at the intersection of ministries-politicians-citizens. To take one obvious example, mechanisms by which parliamentarians would gain an informed vantage point of district-level investments through the CP are not well defined or articulated.

- There is a general lack of ability within the CP to hold local governments accountable for a consistent level of support for CP activities, despite the formal requirement laid out in the \textit{pedum} for all LPs: (1) to have strong commitment to implement activities; (2) to prioritize within their work plans activities that are complimentary to existing local investment plans through the state budget; and (3) to systematically involve the community in decision-making. In practice, none of these standards are enforced or enforceable in practice.

- All UNFPA-supported personnel have clearly stated job descriptions and standard deliverables, as well as clear chain of supervision. Yet for a range of reasons explored above, the practical situation and work requirements faced by these staff may be anything but clear. And some examples suggest that enforcement of personnel standards may be slack; in at least one case noted in the field, a UNFPA-supported staff had serious, sustained underperformance issues (including not reporting for duty for several weeks, without notice) without anyone taking action.

\textit{Source: Budi Setiyono’s analysis}

\begin{center}
\textit{Given the weaknesses in problem solving, communication and monitoring noted above, risks in the CP may be relatively high.}
\end{center}

The point is obvious: poor monitoring and problem-solving systems in the current CP leave it vulnerable to a host of more or less serious risks. One is abuse of CP funds, in a country in which corruption risks are high across the board and in which falsification of the “paper trail” of financial documentation is an ever present risk.\textsuperscript{19} The fact that a significant proportion of CP investments are related to meetings and workshops of one type or another (see Figure 9 on page 65 below), heightens the risk, since these leave little in the way of a tangible product and involve multiple, small transactions (payment of DSA, for instance). (Of course, by the same token, the dollar figures implicated in any particular case are not likely to be large, but it is impossible to say what the cumulative impact would look like.)

Another risk heightened by poor communication and problem-solving lies in the area of stakeholder relationships, to which we turn next.

\section*{4.3 Stakeholder management and ownership}

How a CP draws a range of actors into its ambit, and the degree to which these actors feel empowered to influence CP development - their “ownership” over the CP - is an important cross-cutting issue. It is both a strategy and a management issue; the question of who is involved in the CP is a key design question, and the way they interact and make decisions is an essential element in the management structure.

UNFPA has long espoused the principle that the CP should have a high degree of “national ownership”; it is a principle espoused explicitly in the medium-term strategic plan itself. Yet the meaning and essence of ‘ownership’ are complicated to assess. This section reviews a range of factors both facilitative of, and constraining, national ownership in the current CP.

We begin with donor harmonization, which long been espoused as an important precondition for more effective government ownership of donor assistance, particularly in the UN Development Group (UNDG) context. The UNFPA is a signatory to the Paris Declaration on Aid Effectiveness, which heavily emphasizes donor harmonization:

“…”For too long our capacity development initiatives addressed capacities needed to manage and implement UN-supported programs/projects, rather than strengthening counterpart capacities to manage and implement the national development process.”\textsuperscript{20} 

\textsuperscript{19} An internal World Bank memo from 1998 noted that “despite apparent compliance with World Bank guidelines and documentation requirements for procurement, disbursement, supervision and audits, there is significant leakage from Bank funds.” The practice of document falsification to evade formal controls is one obvious problem that has been noted by a number of sources. See Sea-Change Partners (2004) “Monitoring corruption in World Bank projects: An organizational learning approach”, p. 12.
\textsuperscript{20} Memo from Mark Malloch Brown on Paris declaration, dated 22 July 2005.
UNFPA headquarters has gone further to formulate its own specific policies and strategies regarding donor harmonization, in which the stated goal of harmonization is to try to achieve “greater coherence and impact at the country level”.21

Yet it is also clear that the program is at present far from meeting the requirements of the Paris declaration:

**Harmonization with other donors has yet to significantly contribute to national ownership of the current CP; but both pressures and possibilities for enhanced harmonization are building.**

On the positive side, a number of efforts are underway to improve harmonization:

- The United Nations Development Assistance Framework (UNDAF) provides, in theory, a clear statement of overarching goals to be pursued jointly and singly by the different UN agencies in Indonesia;
- In 2007, UNFPA, UNDP and UNICEF - all of which have Bappenas as their designated Government Coordinating Agency, held their first ever joint annual review, and efforts to coordinate annual work plan development are also underway;
- The HACT (Harmonized Approach to Cash Transfers) initiative is beginning to produce tangible guidelines and results;
- A joint UN programming exercise in Belu district (NTB province) is, after two years of discussion, finally getting off the ground (with UNFPA participation); and
- A joint UN programme on HIV/AIDS is being prepared for Papua region.

While these efforts are preconditions for more effective harmonization down the road, in themselves they have not substantially altered the character of UNFPA interactions with government. (At the same time, it is interesting that in the absence of effective activity-level harmonization across donor agencies from the center, some well-organized localities have taken the initiative to provide better coordination themselves; the box below explores one example from our fieldwork.)

Yet it is also clear that pressures for greater harmonization are growing, and that the activities initiated to date could form the basis of a much enhanced harmonization in the coming years. The next chapter provides some recommendations for tapping into these developments.

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**Box 8: Donor coordination in district X**

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21 As stated in the UNFPA programme polices and procedures guidelines of June 2003.
Currently there around 32 donors operating here. Until recently, these used to work completely independently, with no coordination. Bappeda set to change this from 2004, by mapping the sectors and activities of all donors, in the process identifying gaps, overlaps, and best practices that might be replicated. Bappeda found that there were many donors activities that on close inspection did not match with (what at least they felt were) the real needs of the people. Bappeda discovered that projects targeting physical infrastructure often failed in the absence of attention to incentives and behaviors of people who would have to maintain or use them. Indeed, on a practical level, it could be observed that many projects such as markets, schools, and sanitation facilities were simply abandoned after a short while. Local planners sensed real opportunities if donors could be coaxed into providing more complementary investments.

In 2005, with assistance from ACCESS (an AusAID project), TKPKD (Tim Koordinasi Penanggulangan Kemiskinan Daerah, funded by APBD) and Rumah Alir (an NGO), Bappeda started to collect inputs from a range of stakeholders on the question of how best to improve donor coordination. What emerged was a forum in which 23 local NGOs and donors agreed to more systematically cooperate, with Bappeda providing a secretariat for daily operation. The secretariat concentrated the NGO-donors into three groups: (1) advocacy group (NGO-donors that conduct public hearing, negotiation, lobbying, etc.); (2) support system (capacity building, monitoring, statistical record, publication, etc.) and (3) community-level work (community development, revolving funds, physical infrastructure etc.). The secretariat has proved to be a valuable forum to discuss and coordinate activities under local government leadership.

*Source: Field visit by team*

If harmonization has not generally contributed to high levels of ‘national ownership’, other elements in the CP are attempting to do so. A UNFPA manual states that

“[c]ountry programmes should, to the extent feasible, build on the existing national governmental, non-governmental and civil society systems and processes in order to enhance chances for long-term sustainability. Consequently, government leadership is a prerequisite for the success of UNFPA-supported programs.”

The obvious question posed by the Indonesian case is how decentralization affects the “national ownership” issue noted above. Current CP modalities are admirably focused on local government levels; the potential clear exists for ‘national ownership’ to be meaningfully enhanced by bringing the CP closer to the local priorities and demands, enabling local governments to better formulate plans and activities according to local needs.

Yet this intention has not neatly translated into reality. For a number of reasons described above:

‘National ownership’ in the current CP has often seemed to remain at central levels, and in the bureaucratic and specifically planning agency (rather than a broader political or social) realm.
Constraints on (and opportunities for) significant local ownership of the CP are often found in complex configurations of local capacities, politics and institutions:

*The attempt to cement ‘national ownership’ through decentralized program planning and implementation in the current CP can be constrained by poor plan integration, weak local capacity and non-facilitative local political economy constraints.*

Regional government officers sometimes lack capacity to integrate the CP into local development planning. This may stem relates to either personal or organizational constraints on the integration of the RPJM (Regional Mid-term Development Plan) with the CPAP. Local planning officials (naturally) vary in their level of personal interest in such integration, and may be sensitive to a perceived lack of personal incentive for them to make a serious effort in this regard. On top of that, they often do not have sufficient support, supervision or policy direction in this regard from their political leadership (governor, bupati, mayor etc.). Our discussions with local government officers suggested such senior-level guidance is very influential in driving potential synergies between the CP and RPJM. Yet only a minority of localities appears to be able to mobilize such support.

Second, local political dynamics may also restrain effective programming. In one district visited by the team, for example, local authorities are currently preoccupied with a massive project to transfer its old capital city to a greenfield site - at huge cost. A major proportion of the local government budget is going to finance the physical infrastructure involved, leaving the budget for social service agencies essentially dry. Learning this, the team was not surprised to find that UNFPA funds were being used, in the words of the district health chief, to “keep the office running”, rather than for strategic programming.

However, there are some governments (such as Timor Tengah Selatan and Lombok Tengah) that appear to be quite capable of utilizing program funding to support the local development process. The leaders in these districts possess a clearer concept of their own development agenda, and carefully monitor the state of donor fund utilization in conjunction with the state budget projects. The planning authorities, in turn, appear in both districts to be fully knowledgeable with respect to the mission of the CP, and to possess strong managerial capabilities. Their actual state of integration between the local budget and the CP is rather impressive, coming some way towards the ‘ideal’ degree of integration the team envisioned in Figure 8.

**Figure 8: Potential integration between UNFPA CP and local planning and budgeting process**
Other constraints on local ‘ownership’ lie in the CPs own work processes, which can have a centralizing character.
Donors’ own work processes often unwittingly hamper their effective support for decentralization, an effect called the “donor-decentralization gap” in the literature. This is true for the UNFPA CP as well; key elements in the management structure and process constrain the transfer of ‘ownership’ downward to local government levels, or send mixed signals. Two examples have already been mentioned:

- The constraints on annual work planning imposed by the list of ‘menu’ activities as well as standardized unit costs; and
- The contractual and practical ambiguities in the position of UNFPA-supported management staff at national, provincial and district levels, whose position can lead to them being viewed by some co-workers as a ‘quasi-foreigner’ carrying out a ‘foreign mission’ (an actual quote by a senior, central agency official interviewed by the team).

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The role of a broader range of civil society in the current CP is insufficiently developed, and this hampers a more balanced sense of ‘national ownership’.

One characteristic of the CP is its fairly limited depth in the involvement of non-bureaucratic stakeholders. For instance:

- Where one might expect a broader range of actors, e.g. from academic circles or NGOs, to be engaged in a technical assistance / capacity building roles in the CP, in practice their presence appears to be ad hoc and generally thin.
- Non-governmental organizations appear of course as implementing partners in a number of programs, particularly the IFPPD (featured in chapter three earlier), the Indonesian Planned Parenthood Association, and several smaller NGOs. Yet their share of overall funding in the CP is limited to a small percentage of overall program allocations, and the stability of this funding is in many cases quite low, with several NGOs seeing their allocations cut altogether this year, quite unexpectedly.
- NGO voice in the CP is arguably low, with low levels of regular communication and contact between the NGOs, Bappeda/Bappenas and UNFPA itself noted in the field.

In addition, despite affording much more opportunity for bottom up planning, the 7th CP has not provided a convincing modality to promote people’s participation. Ownership is essentially ‘bureaucratic’ in the current CP.

There are two potential counter-examples. The Community Empowerment Program (CEP) is one important attempt in the current CP to broaden activities to the community level. See the box below for an assessment of this program, and why it is unlikely to serve the purpose of meaningfully broadening community-level ownership in the CP.
Second, the IFPPD may eventually help fill this ‘ownership’ gap in some ways. Currently the IFPPD engagement is focused on broad advocacy rather than the CP itself, but in at least one district visited (Timor Tengah Selatan) the team noted the potential (implied in Figure 8) for it to enhance the demand among parliamentarians for knowledge about CP-related activities, and for co-financing.

**Box 9: A critical look at the Community Empowerment Program (CEP)**

The Terms of Reference for this review asked the team to look specifically into the Community Empowerment Programme (CEP). The team briefly visited several projects in the field, in two districts, and reviewed program documentation.

This is an important program in that it currently accounts for 10% of all program funding in all districts. The stated goal is to “empower the poor community, particularly woman and adolescent groups, in order to improve access to information and service of family planning, maternal health, adolescent reproductive health, HIV/AIDS, and gender sensitive economic empowerment activities and protection of violence against women”. More specific objectives include “to improve participation of poor community, including women and adolescent groups, in poverty eradication through community empowerment activities, and access for the poor community to information and service of family planning, adolescent reproduction health, maternal health, STIs-HIV and AIDS, economy empowerment activities and protection of violence against woman.”

The project basically works by inviting community organizations to submit a proposal that are linked in some fashion to the areas above. Some specific suggestions for types of activities under each of the headings that would be appropriately conducted at the community level are suggested in the program guidelines; for instance, “development of peer groups” related to adolescent reproductive health, or “counseling on clean and healthy life behavior” to reduce maternal mortality. Most of the actual proposals received have focused on one of the suggested sets of activities under “improvement of the family planning program”, namely “improvement of family income” through “provision of seed capital for income generating activities”; and such proposals are often linked in some way to another activity to be conducted by the group with more of a health focus. In the case of two small-scale enterprises visited by the team, which received some start-up capital through the project, the intention was to use some of the profits generated to fund the provision of IEC materials or the visit of a qualified external resource person on adolescent reproductive health to schools.

As noted in one of the precursor documents to the program, it was thought that “the advantage of such a model is that it gives communities an opportunity to execute own projects. When successfully done, it can serve as a value experience upon which future projects can be designed and implemented. It can create healthy competition for funds, and provide a basis for co-management between communities and the government, which is generally overlooked, but important dimension of true decentralization.”

We believe, however, that the CEP is unlikely to have a significant impact as currently designed and implemented. “Community-driven development” (CDD) programs, in which funds are devolved for communities to control for some set purposes, are common in Indonesia, but they typically operate on a scale that is several

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22“Indonesia and Decentralization”, op. cit, p. 18.
times larger than the CEP, and with program management structures focused entirely on making them work. Even with such substantial resources, effective management for CDD schemes is challenging due to the inherent challenges of controlling the quality of local participatory processes and decision-making, and of monitoring diverse village-level investments. In the case of the CEP, with small funds dispersed to many targets and monitored by a bureaucracy focused primarily on the CP activities in government agencies, this task is certainly even more difficult.

There are also several reasons for the limited potential of CEP that mirror some overall weaknesses in the CP. First, the funds are generally speaking too low to have a plausible impact on the recipient organizations. Second, the procedures for disbursing funds are complicated, bureaucratic and possibly lacking (in some places) in transparency, undermining the sense of empowerment and community participation.

But the most important reason is the poor conceptualization and design of most of the proposals funded, at least in the case of the limited sample accessed by the team. Largely focused on income generating activities, they enjoy only the weakest of linkages to the broader objectives stated under the program. A key reason for poor activity quality is, in turn, the limited technical assistance that is available to groups to develop proposals, and the broad nature of the guidelines themselves.

Designing sustainable development interventions is difficult at any level, but handing fundamental design details over to community groups, with a patchy set of guidelines and little technical assistance (most of it focused on how to process the paperwork) was never likely to produce sustainable impacts locally. It is even less plausible to result in any innovations that might be adopted on a broader scale (this being the most important litmus test proposed for program activities in the next CP; see next chapter).

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**Some points of stress in the actual relationships are evident in the current CP.**

Looking across the CP, several of the management and structural challenges noted in this chapter have translated into somewhat strained relationships between important stakeholders of the CP. Central government agency-UNFPA communication appears to be rather poor. For instance:

- Some important meetings (such as Technical Team meetings in which key management decisions regarding the CP are typically taken) are taking place without the substantive participation of UNFPA officers.

- Lack of role clarity in the annual programming process, described earlier, has led to gaps and delays in the approval of AWPs, which has in fact lead to frustrations both between central stakeholders and between central and local stakeholders.

- Local IPs (particularly NGOs but also some district stakeholders) appear to often view the CP as essentially “owned” by UNFPA itself, and CP decisions as something rather distant from their needs and realities.

None of the findings of this chapter should be taken to an extreme, including this one. They are meant to call attention to some negative elements that may be forming in the CP, and that could ossify into dysfunctional patterns that could become ever
more difficult to turn around, the longer they are left to fester. The box below, presenting the rather bleak situation the team found in one province visited (atypically so - other provinces certainly showed more positive signs), should serve as a warning sign.

**Box 10: A bleak view: UNFPA in X Province**

Country Program operations in X Province are in a state that could appropriately be described as alarming. Coordination is weak to the point of being non-existent; the steering committee (SC) has never held a single meeting; the PPCU does not function properly, and Bappeda and agencies carry out the program without any strongly expressed motivation. Agency willingness to undertake CP investments appears to relate more to pressure from the central ministries than local needs; one officer stated that “*Kami mau melaksanakan program karena nggak enak saja dengan [x]*” (“We’re carrying out the program only because we don’t want to alienate the Department of [x]”).

Bappeda does not play a significant coordinating role here. Most roles and initiative were played solely by the Provincial Program Manager (PPM). Bappeda is not enthusiastic because, as one of Bappeda staff noted, “UNFPA is only overloading our existing jobs” and “we’re asked to be responsible for overall project implementation, but we get nothing in return.” Personnel within Bappeda basically are divided into two groups: those who would be happy to see the CP to cease its operation in the province, and those who want the CP to continue out of the possibility of obtaining some financial benefit from it. Some IPs claimed that the Bappeda used to retain (against regulations) 15% of all budgeted activities from implementing agencies. Though this practice has been stopped, in practice agencies still are “more or less required” to invite Bappeda staff as either resource persons or participants when they are conducting their activities, so that staff involved could collect DSA.

Implementing agencies are generally as unenthusiastic as Bappeda. Most of them, for example, expect the PPM and PFA to construct work plans, Terms of References for activities and financial reports rather than to do these tasks themselves (as they are supposed to under the *pedum*). When the PPM and DFA complained about this practice, they were often told that “your salary is very high, so you deserve to take over everything.” Agencies are also appear to be passive; the PPM often reports needing to call agencies to encourage them to spend money that is available and has been allocated for activities.

Moreover, for around 8 months, the PPM and PFA have had no communication with each other at all. After the PFA went ‘missing in action’, the function finally had to be taken over by the HIV/AIDS Project Coordinator; yet despite the former’s absenteeism, the PFA apparently continues to receive his salary.

**4.4 Efficiency and cost-effectiveness**

We turn finally to the issue of cost-effectiveness in the current CP. While we did not analyze financial elements of the CP in any depth (as explained in chapter 1), our findings suggest that the cost-effectiveness of the current CP is likely to be low at
present - probably low enough to serve as a motivation and justification for substantial future changes. Concerns are evident on both the ‘cost’ and the ‘effectiveness’ side of the equation.

**The Country Program overhead may be on the side, warranting review.**

Figures provided by the UNFPA office suggest that the budget for CP-supported salary plus direct overhead costs (such as office maintenance) amount to some 30-35% of the total annual budget allocations at central and provincial levels, and some 15-20% at district levels. Yet this figure may actually be an understatement, in that a significant portion of the program investments is spent on coordination meetings, daily subsistence allowance, and transport - some portion of which might be better seen as overhead in a different reckoning. If these were fully added to the direct overhead, the figure might reach as high as three-quarters of all funding in a district, as suggested by a detailed coding of activities funded shown for two district examples in Figure 9.

Overall, the cost of human resources deployed in the CP (both government and UNFPA), was found to account for 26% of the total CP budget for 2007.

One would have to benchmark such figures against other donors and other UNFPA offices in order to draw firmer conclusions. A senior official with a different UN agency in Indonesia claimed that overheads up to 30-40% for that agency are not necessarily considered high, as long as program outcomes were viewed by the agencies’ own donors as positive. That leads to the next point, namely that:

**It is on the ‘effectiveness’ side of the cost-effective equation that concern is clearly warranted.**

This point brings us back from management processes to the question of overall program design and strategy. As noted primarily in chapter 3 on program design and strategy, the current CP is probably not having a significant impact across most components (although it is not the place of the current review to offer any kind of detailed, component-by-component impact evaluation). In addition to the management inefficiencies noted in the present chapter, the primary reason for concern over program effectiveness is the lack of a coherent program strategy and focus: the high degree of fragmentation in the disbursements, the lack of integration with the government’s own planning process, and poor intervention design for a broader impact. Figure 9 itself underlines the importance of strategy coherence and high-quality work planning in the context of a CP in which such a huge percentage of overall allocations is going for transport, DSA and management. Such high percentages are not in themselves proof of a problem; they merely raise the stakes of ensuring that the quality of capacity
building and technical assistance taking place is commensurate with the investments being made.

The next chapter addresses some potential remedies for this situation.
Figure 9: Functional breakdown of program expenditures in two typical districts

**Landak 2007 and 2008**

**Manggarai 2007 and 2008**

*Source: Analysis contributed by UNFPA Country Office. Note the 2008 figures are based on district proposals, not approved allocations.*
5 – TOWARDS STRATEGIC RENEWAL: SOME CONSIDERATIONS

5.1 Overview

This chapter lays out some ideas for improving the impact of the current and future country programs in Indonesia. It is divided broadly into a short-term focus (the remainder of the current CP) and longer-term (the next CP). As noted in chapter one, these recommendations are put forward primarily in order to stimulate debate, not offer any kind of definitive solutions - solutions that obviously will have to come from all the parties involved themselves.

5.2 Short-term focus: Fixing what is broken

We assume it is probably impossible to change basic CP parameters - the type and levels of funding for different activities in different districts; the key features of the management structure, etc. - in the remainder of the current CP, both because this would generate a lot of resistance, and because it would probably take too much time to decide what exactly to do.

Instead, we suggest in the short-term attempting to mend some obvious ‘broken fences’ in the CP, particularly with respect to management processes. The intention in doing so would be to improve stakeholder relationships and the prospect for positive outcomes in the current CP, building confidence in the run-up to the next programming cycle.

Take proactive measures to improve annual work plan quality and coherence, and clarity among stakeholders regarding their roles in and expectations of planning process.

Fundamentally redressing the ‘strategy deficit’ in the current CP will demand a new programming cycle and, perhaps, a significantly different approach to programming. But in the short term - by all means before the formal results of the mid-term review of the CP, waiting for which would result in the loss of another year - it may be possible to do the following to improve both coherence and efficiency in annual work planning:

☐ Sketch out a ‘roadmap’ of some of the key interventions likely to build up to a more integrated, cohesive impact in the remaining 2-3 years of the CP. Taking a few of the most important ‘quasi-models’ of the current CP as departure points - IERH, for instance - the idea would be to attempt to achieve and communicate greater clarity regarding the sequencing and interlinkages between
key elements in the model, not in the abstract, but in terms of how the process might meaningfully unfold in an ‘average’ CP district.

**Box 11: A more detailed look at recommendations for annual planning**

The following recommendations are offered for improvement of the process by the team member with great experience working within UNFPA (in India), Venkatesh Srinivasan:

- As there is a gap between the overarching strategies and activities taking place under the work plans, it is recommended that key interventions for the practical achievement of outputs be defined. For example for the output “establishment of a blood bank,” all inputs should be provided by the UNFPA project, or the source from where non-project funded inputs would be provided should be specified.

- To ensure translation of the country level CPAP, and to contextualize it for the provinces/districts, development of a 3-4 page version of a Province / District Programme Action Plan could be useful. This document could be an important document guiding 2-3 years of annual programming, and could help base the CP on clearly perceived local needs and varying local situations.

- To improve comprehensiveness of project related inputs at the province/districts, it is suggested that the AWPs provide significantly more detail on the strategies embodied in their plans. At present, apparently a TOR is to be submitted along with each AWP, providing details on the ‘how’ and ‘why’ of the activities, but it is uneven in its inclusion and elaboration. The AWP and TOR should form an integrated plan.

- As the AWP process is detailed and also given the context of decentralization, where the process of consultation at the district is deemed critical, it is obvious that this is a time consuming exercise. It is recommended that annual work planning is started not later that July for the plan for the next year. This would also benefit linking UNFPA support to the government’s planning process, not least for potential co-financing.

*Source: Analysis contributed by Venkatesh Srinivasan*

- **Invest substantial technical assistance resources in a series of ‘strategic programming’ workshops for districts to sketch out the remaining ‘roadmap’ of activities for a 2-3 year period (until the end of the CP).** To get to a more substantial and high-quality annual work plan, it is desirable and, in the longer term, cost-effective to frame it against a 2-3 year\(^{23}\) ‘roadmap’ customized for each district. Over the second and third quarters of 2008, such programming workshops (which could double as 2009 annual planning workshops) could take place over a few days each in all CP districts, avoiding the pitfalls of the provincial level workshops of 2006, which saw limited participation of the principals involved.

\(^{23}\) Whether 2 or 3 years depends largely on whether a decision is reached regarding dropping one year from the current CP - a step that is recommended below.
Regardless of whether the ‘strategic programming’ workshops can take place, it is necessary to **improve the clarity and improve communication on the process and roles of different actors in the planning process**, so as to reduce some of the frustrations currently being felt, especially by local IPs.

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**Improve monitoring and problem-solving.**

The monitoring framework emerged as “everyone and no one’s responsibility” in our review. Yet it is critical because it ends up taking up a large amount of time in the current system - time that is, given the lack of follow-up and poor observed activity quality - largely wasted.

- **On an urgent basis, properly resource the NPCU and conduct a review of its intended and actually fulfilled functions.** The program at present suffers from a lack of strategic steering, in part because the NPCU support function has been seriously underresourced. Rather than framing analysis and options carefully for participatory decision-making across the CP, the NPCU has played a passive gatekeeper function, which has contributed to the perception that important decisions (e.g. at the TT meetings) have been taken in a somewhat *ad hoc* and top-down manner. In conjunction with this:

- **Place renewed emphasis on Technical Team (TT) meetings as a key source of participatory, and strategic, decision-making in the CP.** The Steering Committee structure of the current CP is simply too weak to play a meaningful, and fast-acting, role in fixing short-term problems. The TT meetings are well placed to do so. To improve their functioning, the commitment of different agencies to improve the predictability of attendance of the ‘right people’ at meetings must be secured; in fact, dates for the meetings should be publicized up to a year in advance and fall on some predictable dates, and the attendance record made a performance indicator in itself, with a ‘report card’ issued to senior agency leaders. In addition, it is important that the meetings be conducted in a participatory, transparent manner, and decisions based on clear analysis and strategic considerations. As one of the first order of business for the ‘new and improved’ TT:

- **Conduct a rapid review of current monitoring arrangements**, identifying areas of overlap and poor process design, and reasons for poor managerial follow-up. This review should not take long. This can be remedied by having the Technical Team or Steering Committee ‘officially’ mandate the monitoring review and decide in a timely fashion on its proposed recommendations.
Box 12: Recommendations on monitoring from a UNFPA perspective

The UNFPA Country Office submitted the following recommendations at the invitation of the team:

- The AWPs should include the targets that were stipulated in the results and resources framework.
- The ToR for activities under the 7th CP should be reviewed by DPMs, PPMs and PCOs and following the implementation of the activity ensure that a quantitative or qualitative analysis of the results of the workshops is undertaken by the organizers of the activity. Central government agencies should take a more proactive role in ensuring the presence of these quality control mechanisms. One way of facilitating this is by creating clearer guidelines on the content of ToRs, such as requiring pre- and post-tests and feedback from participants with respect to the content of the training.
- Establish an annual field monitoring plan for all NPOs and PCOs that will be updated on a quarterly basis. Ensure that all districts are visited at least once a year, and encourage NPOs to visit areas outside their focal point, ‘program management’ province.
- Senior management within the CP should take a more hands-on role in managing the program by monitoring the status of implementation of recommendations following the field monitoring visits.
- Based on the analysis of the QWPMT, plans for field monitoring trips should be adjusted to allow visits to areas where additional assistance is needed, as well as see first-hand the implementation status and successes achieved.
- Provide timely analysis and feedback on submitted quarterly work plan monitoring tools jointly by UNFPA and PCOs.
- Encourage PPMs to review reports submitted to them by the DPMs. The same goes for the PCOs, NPCU and UNFPA. Delineate the monitoring roles of all parties involved to get establish who should do what and when to prevent a duplication of monitoring activities by the different partners.
- The DPMs and PPMs have prime responsibility for activity monitoring. This should occur through attendance at the activities, analysis of activity reports and reporting on the progress made towards achieving the annual targets.
- PCOs, together with government officials within their department, have the responsibility to monitor the progress of combined activities and occasionally monitor activities.
- UNFPA staff have, together with the PCOs, the responsibility for the monitoring of the progress of combined activities through field visits and analysis of by DPMs and PPMs submitted reports. In addition to that UNFPA staff should backstop the DPMs, PPMs and PCOs in making necessary adjustments based on information received through monitoring.”

Source: UNFPA Country Office, 2007

- Consider scaling up the UNFPA ‘focal point’ concept, assigning a small team of individuals to work with a group of 5-7 districts each both on the strategic programming review noted earlier and follow-up technical assistance. These teams would be composed of a small number of UNFPA, Bappenas and agency officers, supplemented by a provincial level staff where appropriate, who are personally and professionally committed to joint and separate field visits at a
specified level of intensity. Part of the role of these teams would be analogous to that of the UNFPA ‘focal point officers / program management provinces’ at present - serving as a point of contact for the resolution of lower-level difficulties. But they should be greatly improved by establishing clearer terms of reference and tools to facilitate cross-functional monitoring and analysis.

Adjust CP investments on the margin, if possible, improving the clarity and predictability of support for NGO implementing partners in the current CP.

We believe an attempt to significantly overhaul current investment patterns in the CP would distract from the broader reexamination proposed in the next section, without adding much value in the short term. But on the margins some interventions may be warranted:

- **Increase, and improve flexibility, in CP support for the IFPPD.** The IFPPD as a whole is one of the bright spots of the current CP. Increased funding - and funding less restricted in the uses to which it can be put - coupled with the mobilization of technical assistance to help this NGO map out a longer-term path to impact and sustainability would be very much justified. This will also help to position the IFPPD as a bigger player in the next CP.

- **Improve the stability of assistance to other NGOs.** Partly because of a range of funding and strategy disruptions in the HIV/AIDS program, current CP support for a broad range of NGOs has experienced great swings. A more coherent approach to NGO funding would involve rethinking the types of assistance that can improve both their contribution to program experimentation and policy learning, and the longer-term sustainability of these organizations. While such an approach will likely have to await the next CP, in the short term it is important - and fair - to do everything possible to stabilize support expectations for these partners over the remainder of the CP.

- **Consider downscaling the community empowerment program to free up a flexible source of funding for some of the above activities.** Our review of program documentation and field activities in two localities (see previous chapter’s box) suggests that this well-intentioned attempt to improve community participation in CP activities is unlikely to have any meaningful, sustainable impact on any of the outcome areas intended in the CPAP. The degree of technical assistance that the CP can consistently mobilize to inform local level programming is simply too weak, funding levels too low (and fragmented), and monitoring too sketchy for these investments to collectively warrant the funds being put into them. The intentions of the CEP are laudable, but the results are not likely to match expectations, even if a small number of community groups end up doing “interesting” sets of activities with the funds.
5.3 Medium-term focus: Asking the right *big* questions

The current review found a number of serious problems in the CP, foremost among them a fundamental lack of strategic focus and quality programming across a range of interventions. Redressing this issue will, we believe, require significant changes to the way the UNFPA CP is positioned in Indonesia - changes in terms of how it attempts to pursue UNFPA’s global agenda in the context of Indonesia’s specific needs, and changes in terms of how resources are mobilized and management structures aligned to effectively pursue that strategy. We address each of these below, beginning with the strategy issue:

*Put the mission into clearer focus.*

We believe the most appropriate and productive way to address the multiple areas of poor performance in the current CP, and to seize new opportunities on the Indonesian landscape, is to take a fresh look at what the CP is trying to, and might actually, accomplish. The highest value-added dimensions of strategy, we believe, are those that would position the CP:

- **To enrich policy debates** and national program development,
- **Through a combination of advocacy, policy-oriented research, network-building** and the contribution of ‘lessons learned’ from small-scale, information-intensive, experimental field interventions.

Enriching policy debates implies that UNFPA is helping to influence the political and policy agenda in a direction that reflects it and its key partners’ core priorities. The two critical assets that UNFPA brings to the local scene is its expertise and its status as a multilateral, agenda based agency with broad support from member governments, including Indonesia; these give it great, even unique, opportunities to influence policy debates.

Influencing national program development, in turn, is the service delivery equivalent. Indonesia, *particularly* under conditions of decentralization, poses a difficult environment for effective service delivery and capacity development in the areas in which UNFPA works; as chapter two explored, this is due to the complex, ongoing changes in the institutional environments and the country’s incredible diversity, in every respect, of local conditions. Yet at present it is also an environment that has plenty of ongoing local innovations in service delivery taking place.

What is significant about this definition is the capacities it would require to do well, and what it leaves out. To fulfill these functions well, the Country Program needs to substantially upgrade three ‘critical capabilities’:
Critical capability (1): Design of programs and projects as ‘policy experiments’, including with grounded institutional ‘ownership’ and potential for dissemination of findings.

If emphasis is placed on using field-level programming as a way of learning ‘what works’ and using this knowledge to inform innovations dissemination throughout the system, then program design looks very different than it does in the current CP. Program interventions would have to evince a very careful, deliberate design, with the technical and substantive involvement of experts from all levels. Much more coordination of interventions horizontally (i.e. deliberately trying different arrangements in different field locations, to meet different challenges or to find out what works best in different contexts) would be called for. And fewer activities would be necessary or desirable than at present: quality and strategic selection over quantity.

As noted earlier, ‘ownership’ has a number of potential meanings. In this context, ownership means that program design is realistic - rooted in the institutions that will have to carry an intervention forward when replicated or adapted - and that the program is seen as important and real - not a side-line activity - to the actors involved. This implies that most of the time, where the program is implemented by government agencies, it will have to be integrated into the planning and budgeting process of that agency, not a freestanding ‘donor’ project with second priority status. Ownership also implies that there is a discernable ‘audience’ for the dissemination of the findings, that the ‘bridge’ formed by the CP is not a ‘bridge to nowhere’. This implies targeted support, at critical intervals, from high-positioned officials - something we believe UNFPA and its partners are potentially well-placed to pull off - coupled with a management structure that facilitates ‘steering and policy learning’ for the learning function of the CP.

That leads to the next requirement:

Critical capability (2): Well-mobilized technical assistance and very strong program information systems.

Both of the core missions noted above demand more effective, nimble, and nuanced policy, institutional and program analysis capabilities driving program development and advocacy. This capability is weak, or weakly tapped, in the current CP network, resulting both in missteps (such as the floundering role of the provincial level) and missed opportunities (such as the patchy attempts to influence policy debates at present).
The hallmark of a CP that has a fighting chance of pulling off the ‘development project as policy experiment’\textsuperscript{24} design will be one that effectively mobilizes technical assistance and has strong information systems. The former will allow effective work with local actors to bring the nuanced program design into play; the latter, ability to track, learn-by-doing, modify and credibly communicate the resulting lessons.

One necessary component of the technical assistance picture will be a more coherent and sustained approach to human resource development across the management and support echelons of the CP. The previous chapter noted the poor state of training for, and career prospects of, the UNFPA-supported staff positioned across the CP in different government agencies at different levels. Yet these staff are arguably the most critical players in the current CP with respect to technical assistance. Our team would not wish to comment on the specific configuration of staff needed in the next CP cycle; this is a level of detail that should emerge once the broader questions of scope, strategy and focus become clearer. Whatever staff are positioned to provide essential problem-solving and technical assistance should be well trained, effectively plugged into the broader CP network, and should be motivated by a clearer sense of career prospects and professional identity than those at present.

Both an effect and a cause of these capabilities is that the UNFPA CP will come to be seen as the critical “knowledge broker” in the areas in which it works. Its advocacy and research (whether arising directly from field-level programming or not) will come to be seen as probably the latest and best information available about critical population and reproductive health problems and the most promising solutions to them in the Indonesian context.

\textbf{Critical capability (3): Mobilization of a broad network of actors.}

The UNFPA CP possesses excellent ‘convening’ and networking power - the ability to bring together different actors, bureaucratic and social, to work together in ways that push the envelope of what is normally possible under Indonesian administrative arrangements. This means it is potentially well placed to serve as a bridge linking a range of local programming experiments and innovations to the broader context of policy development.

Specifically, the current CP needs to supplement its already excellent access to national agencies and local governments:

- With better outreach to the wide range of civil society and non-governmental actors that are increasingly important players in population issues;

\textsuperscript{24} The phrase is Dennis Rondinelli’s, from his classic \textit{Development Projects as Policy Experiments: An adaptive approach to development administration} (1993; Routledge).
With more substantive engagement with political and parliamentary actors, at present covered only partly and indirectly through IFPPD support (effective though this is); and

With programming that places the mutual interactions of the above actors more consistently into central focus, taking advantage of the CP as a unique space where normal institutional constraints may at times be somewhat relaxed in an experimental way.

Another potential element in this network equation is other donors. The next CP should build upon the incipient steps towards improved donor harmonization, particularly within the UN Development Group framework. It should look toward the possibility of making integrated, synergistic programming with these agencies into a major element of CP strategy.

In particular, the CP might benefit from restricting most, or all, of its local implementation sites to those in which it is collaborating in joint programming with other UN agencies. This would potentially reduce management overheads, increase technical support and monitoring and enhance the visibility and impact of local programming experiments. Joint field offices (e.g. with UNICEF, which already has several at provincial level throughout the country) might be established to facilitate program support to such field sites, reducing the need for parallel systems and processes.

One proviso is warranted. Joint programming, done well, will tend to improve, or make more visible, local impacts. But they may also make sustainability harder to achieve if the joint programs are not designed and implemented with a ‘light touch’ - avoiding dependence on donor resources and expenditure levels that in the longer term are clearly unsustainable. And joint programming should also not distract attention from the primary strategic focus of UNFPA (as proposed here): information-intensive, field-level ‘policy experiments’ to complement the CP’s broader advocacy and networking strategies. If these are not well-served by a particular integrated programming initiative with other donors, resources should not be directed there (despite the inherent attractiveness of, or pressures for, further harmonization). Yet in practice we feel optimistic that there will in fact be great scope for synergies through harmonization.

5.4 Overcoming obstacles

Although the CP is by no means starting from scratch in terms of the above capacities, it will still have quite a road to travel in building them up. In particular, three obstacles in the existing system will have to be overcome.
Critical obstacle (1): Current assumptions underlying field programming.

As analyzed in chapter three, the current and previous CPs are based on the reasonable but probably inaccurate assumption that the CP can have a significant impact by achieving local targets linked to valued CPAP goals. This is unlikely for two reasons.

One is insufficient funding, and the fragmentation of funding that the above assumption usually leads to (since if one defines the CP mission in this way, it becomes difficult to avoid pressure to work in a fairly large number of localities, on a large number of activities). In practice, the fact of very limited program funds, distributed over such a large program target area (no matter how well targeted onto needs), will severely limit the impact (and sustainability of impact) of even well designed interventions in a country as diverse and large as Indonesia.

Another is unrealistic assumptions about decentralization and annual work planning. The current approach to annual work planning essentially puts the CP in the position of being a form of ‘budget support’ in the social sectors for local governments. These local governments are, in theory, encouraged to then implement a range of activities designed and put together with some flexibility and local ownership, as long as these broadly fit into the CPAP framework. To repeat a key finding of the review, such an approach is in practice insufficient to ensure work plans that achieve a minimum degree of coherence and impact even locally, let alone lead to programs being sufficiently well designed to be of broader interest for policy development. However creative local governments are (and this varies greatly, as noted throughout this report), the hurdles the above approach must overcome in order to have a sustainable impact are typically too great: the ability to integrate donor assistance with local plans and policies over a multi-year period (when the type and level of donor funding is itself uncertain).

It is difficult to overcome this obstacle because the assumptions are reasonable in some ways. “We can’t work in just five districts,” one of the team members once heard a donor official from a similar UN agency say, “because we’re not an NGO!” Of course UNFPA is not an NGO, but the solution is not to attempt to be a very large and special NGO by spreading programs and projects around the country on an ever larger scale. It is rather to use those assets unique to the CP - notably UNFPA’s ‘convening power’ across a network of actors and the legitimacy embedded in the multilateral agenda itself - to bring about big contributions through more narrowly focused, intelligent programming.

Critical obstacle (2): The ‘something-for-everyone’ and ‘divide-the-cake-equally’ mindset.
It is a dilemma familiar to many public sector programs - the longer they operate, the more they expand, and the more the number of stakeholders who would lay some claim to the resources increases - the program loses the ability to be disciplined and focused in its investments. In the absence of strategic focus (and the tough decision-making it would require), calls ‘to be fair’ by dividing the program cake equally then become stronger.

Yet, the greater the number of stakeholders, the harder it is to reform the resulting picture, since everyone will fight to keep their share of the ‘pie’.

The current CP has fallen into this trap to some degree. Program allocations across districts, and indeed across IPs within districts, were in 2007 at least made on a quite mechanical basis. Moreover, a strong tendency has taken hold for districts to take on virtually all activities (or outputs) of the CPAP, rather than focus on a few that are most needed in a district, thereby increasing the fragmentation of expenditure. One district Sekda chief noted to the team that:

“it would actually make more sense to focus on a few activities, but since all the IPs were involved from the beginning, it wouldn’t be fair to restrict their allocations now.”

This is a mindset that is politically realistic but programmatically flawed, and which would presumably have to wait for the new CP formulation to have a (better but not guaranteed) opportunity to be revised.

**Critical obstacle (3): A cumbersome management structure.**

The current CP’s management structure (see Figure 5, page 37) could be fairly straightforward in theory, but is probably in practice too complex and top-heavy when applied to such a small CP (in terms of actual investment levels). The consequences of the ‘over-structured’ management apparatus, several parts of which are not working well, were analyzed at length in chapter four.

Here, we might only add another basic, general cause of the problem. It is a CP that is essentially trying to be too many things to too many stakeholders, with too few resources and too little focus. It is trying to implement high-quality, innovative programs in the most difficult implementation zones of the country, while decentralizing activity development to a significant degree to local IPs. It is trying to support local creativity and innovation while at the same time ‘ensuring consistency’ with a guiding framework (the CPAP) that (as chapter three pointed out) is not particularly intelligible in its programmatic details to generalist local administrators.

A cumbersome management structure is of course a barrier to achieving any defined mission in the CP, but it is particularly lethal to the principles for strategic renewal laid out in the above section. Its main consequence is to make the program increasingly
process-oriented - the shuffling of papers from one office to another, the convening of one meeting to another - rather than results-oriented and nimble. Even the best, most creative minds in the current CP technical assistance super-structure appear to be spending most of their time ensuring the most basic process-related milestones, such as annual work planning submission, or the forwarding of monitoring reports, are completed in a semi-timely fashion. Sufficient focus and strategic clarity are unlikely to be gained while the burden of basic management procedures is weighing so heavily on all elements in the management system.

Over time, many actors may even come to define their management function as one of ‘feeding the bureaucratic beast’ rather than (for instance) making a contribution to the kind of value-adding programming experiments that will enhance policy debates and national program development. The potential effect on morale is clear. Indeed, over time, more and more non-specialist, non-entrepreneurial, non-strategic thinkers will come to be recruited into all ranks of the CP structure, making it difficult, even baffling from their perspective, to try to redefine the overall mission of the CP, and their managerial roles within it.

5.4 Getting there: Some process suggestions

Taken as a whole, the requirements of the ‘strategic renewal’ painted above, are quite ambitious. Going beyond minor adjustments to existing strategy and management processes - adjustments that would leave the strategy deficit unaddressed - would require serious effort, beginning immediately:

Sustain a dialogue in the coming months on the question of how to reposition CP assistance for enhanced impact in Indonesia, recognizing that significant changes are warranted by the current review.

On one level, the conversation will have to revolve around the overall vision and principles for strategic renewal in the next CP. But it may prove to be difficult to agree in the abstract on these changes. More concretely, it will be necessary to:

- To scan the policy, program and institutional environment for potential high-value areas in which the CP can work; and
- To achieve greater programming focus, by narrowing the number of areas in which the CP is to work, and by further elaborating those areas.

Country Program formulation is a complicated process with a number of formal and informal steps. While it is not our place to sketch these out, we can confidently predict some of the key elements that would have to be in place in order for a significant shift in programming strategy to take place.
**Key building block: A Country Program component review.**

Even more so than in a typical program, it will be necessary to assess all major outputs and intervention models of the current CP with a view towards identifying those with the highest potential contribution to the ‘policy debates’ and ‘national program development’ scenarios. The elaboration of clear conceptual and operational roadmaps to sustain an impact for each of these areas should begin in a simple form with the improved annual programming process for the next 2-3 years suggested earlier in this chapter. This ‘mapping’ will need to be much more developed and refined as part of the CP formulation process itself.

Painful though it will be, it is important that this review result in some ‘downsizing’ of the agenda as well. The new CP should be designed around the premise that scarce resources should be focused on activities with greater potential leverage, and an acceptance that probably the great share of current and potential programming contribution is being made by a small number of current activities (and some that probably have not yet been identified).

### 5.5 Closing reflection

The UNFPA CP has significant assets and strengths as well as weaknesses and threats to the achievement of its mission. These are summarized in Figure 10. The basic diagnosis is probably not very controversial among those who have reflected on the CP in some depth; the team heard this analysis reflected back to us from numerous stakeholders of the CP.

It is the implications of the analysis - the “interplay of SWOT” - that poses great challenges for the senior management of all agencies involved in the CP. The program should invest in the areas in which its strengths match the opportunities posed by the Indonesian environment - in focusing on a relatively small number of well-targeted advocacy initiatives and the development of field-level innovations that can contribute to national policy debates and programs. To do that requires clear decisions - decisions that will be painful - to tighten the strategic focus of the program and to build more streamlined management structures that can operate more nimbly. What must be avoided, above all, is an expansion of the ‘damage control’ quadrant, in which poor strategic focus and fragmentation of both investments and the stakeholder environment virtually condemn the CP to underperformance - and make it progressively more difficult to reform.
**Figure 10: Interplay of SWOT in the CP**

**Primary strengths** (of UNFPA CP in general):
- Long history in Indonesia, trusted partner, excellent access to senior levels of several ministries/agencies
- Clearly defined global agenda that acknowledged as highly relevant locally
- Decentralized program structure

**Primary weaknesses** (of same):
- Lack of clearly articulated strategy for program impact and sustainability
- Lack of localization of program strategy
- Non-bureaucratic involvement under-developed
- Steering weak, overly bureaucratic work processes, lack of results-orientation
- Monitoring and evaluation, information systems weak
- Poor approach to human resource deployment

**INVEST**: clear match of strength and opportunities lead to comparative advantage, e.g.:
- Use MTR/new CP for comprehensive rethink
- Refocus onto few core areas of work, linked to multiple donor approach, with expanded role for NGO and non-bureaucratic actors

**DEFEND**: Areas of threat matched by areas of strength indicate a need to mobilize resources either alone or with others:
- Use diversity as the rationale for a consolidated program focusing on diverse, field-level experiments with a range of actors
- Raise high-level demand for CP inputs by articulating program rationale in terms of their potential contribution to national program development rather than local impact.

**DECIDE**: Areas of opportunity matched by areas of weakness require a judgment call: invest or divest; collaborate:
- Build stronger and streamlined steering system
- Invest heavily in building up information/research/advocacy systems.
- Develop focused, sustained approach to deploying highly skilled technical assistance from a broader range of sources.

**LIMIT POTENTIAL DAMAGE**: Areas of threat matched by areas of weakness indicate need for damage control.
- Articulate clear rationale for change, based on current underperformance
- Articulate clear criteria with high threshold levels for viability, for major program investments in next CP
- ‘De-bureaucratize’ CP formulation process to some extent, with substantive strategic inputs from small, well-supported task forces with carefully selected members.

In conclusion, the UNFPA CP has significant assets and strengths as well as weaknesses and threats to the achievement of its mission. We believe the CP should increasingly aim to focus its investments in the areas in which its strengths match the opportunities posed by the Indonesian environment - by focusing on a relatively small number of well-targeted advocacy initiatives and the development of field-level innovations that can contribute to national policy debates and programs. Making this shift will require difficult decisions to tighten the number of activities and to build more streamlined management structures that can operate more nimbly.
Few of the reform ideas presented in this review are totally new; there are already elements of the CP that reflect the orientation described above. Yet, it is likely that a CP refocused on these priorities would have a very different look from the one at present. We predict that the steps needed to be taken will require significant and sustained leadership, and that these steps will be justified by the promise of a more exciting, high-impact, meaningful Country Program in the coming years.
Annex A: Terms of Reference for Assessment

Terms of reference for the evaluation of the design and management of UNFPA Indonesia’s 7th Country Programme

1. Background

UNFPA Indonesia country office has been operating in Indonesia for more than 35 years. Through these years, UNFPA has assisted the Indonesian government and civil society organizations in addressing population issues which include poverty-population dynamics, gender relations, data management for decisions and reproductive health including family planning. The 7th Country Programme (7th CP) for Indonesia has been approved for a five year period from 2006 to 2010. The main components of the 7th CP are (a) Reproductive Health including family planning, maternal health, adolescent reproductive health (ARH) and HIV/AIDS; (b) Population Development Strategy; and (c) Gender.

The 7th CP was signed in May 2006 and in the third quarter of 2006 the implementing partners started the implementation of activities that were planned under the 2006 Annual Work Plans (AWPs) and around the same time the 21 districts and 6 provinces started with the development of their 2007 AWPs. The effective implementation of the 2007 activities was slightly delayed and most districts and provinces were implementing activities to full capacity in the second quarter of 2007. Ten outputs had initially been developed within the above mentioned focus areas. In 2007 together with the relevant government partners the original 10 outputs were reformulated into 6 outputs now reflecting the main focus areas of the 7th CP.

The revised 6 outputs are:

Output 1.1 (R 101): National guidelines and sub national strategies on Reproductive Health, Adolescent Reproductive Health (ARH), Sexually Transmitted Infections (STIs) and HIV/AIDS are developed to ensure access of these services irrespective of marital status, gender, age and sexual orientation

Output 1.2 (R 105): Increased capacity of lawmakers, decision makers, religious and community leaders, civil society and the media to mainstream issues related to

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25 Between 1972 and 2000 the main focus was population and family planning. In the 6th Country Programme (2001-2006) reproductive health (which includes family planning, maternal health and adolescent reproductive health), population development strategy and advocacy stood central while gender was a cross-cutting issue.
reproductive rights, reproductive health, adolescent reproductive health, STIs, HIV/AIDS and gender into policies and programs

Output 2.1 (R 301): Increased awareness and knowledge among women, men and vulnerable groups of issues related to reproductive rights, reproductive health, adolescent reproductive health, STIs, HIV/AIDS and gender (incl. GBV)

Output 3. 1. (R 205): Strengthened maternal and neonatal care, with focus to emergency obstetric care, and increased availability of youth-friendly RH information and services, including those focusing on STIs and HIV/AIDS.

Output 4.1 (P 101): Improved availability and increased capability to utilize disaggregated data on population, reproductive health and adolescent reproductive health, STIs and HIV/AIDS, gender, poverty and enhanced understanding of planners, policy makers and parliamentarians on their linkages with development

Output 5.1 (G 101): Enhanced capacity of Government, non government organizations and civil society organizations, community and the media to prevent and manage Gender Based Violence and other harmful practices based on the statutory, judiciary, customary and religious texts relating to the rights of women and girls.

The 7th CP is being implemented in six provinces and 21 districts. The National Development Planning Agency/Badan Perencanaan Pembangunan Nasional (BAPPENAS) is acting as Government Coordinating Agency (GCA) for the CPAP. Each province and each district has a program manager who is responsible for the coordination of the program in his/her district or province. The general guidelines to administer and manage the program on the national and local level are stipulated in the Pedum. The Pedum is an official document between the GOI and UNFPA that stipulates among others the organizational structure of the 7th CP, the planning and implementation procedure and details on reporting, monitoring and evaluation.

The following are the implementing partners of the 7th CP:
- National Development Planning Agency, Bappenas; District and Provincial Development Planning Offices, Bappeda
- Ministry of Health; provincial and district health departments
- National Family Planning Coordinating Board, BKKBN; provincial and district family planning agencies
- Ministry of Women’s Empowerment
- National Statistical Office, BPS; provincial BPS

26 The province of South Sumatra with focus on Ogan Komering Ilir; the province of West Java with focus on Tasikmalaya and Indramayu; the province of West Kalimantan Province with focus on Kota Singkawang, Kota Pontianak, Sintang, Landak and Sambas; the province of West Nusa Tenggara (NTB) with focus on Lombok Tengah, Lombok Barat, Lombok Timur and Dompu; the province of East Nusa Tenggara (NTT) with focus on West Sumba, Kupang, Alor, Timor Tengah Selatan and Manggarai, and the province of Nanggroe Aceh Darussalam (NAD) Province with focus on Kota Banda Aceh, Aceh Besar, Aceh Jaya and Aceh Barat.
- Indonesia Forum of Parliamentarians on Population Development (IFPPD)
- AIDS Commission at national, province and district levels
- Civil Society Organizations (CSOs) at the national level such as PKBI, YKB, Puan Amal Hayati and Fatayat NU and those operating at sub-national levels

2. Evaluation purpose and users

In line with the 7th Country Programme Action Plan an evaluation will be administrated half-way the country program. As the current organizational structure, management mechanism and program design inhibits the efficiency and success of the 7th CP these areas will need to be evaluated. Moreover, the evaluation will serve as inputs into the midterm-review exercise and intends to look at the lessons that can be drawn from the first one-and-a-half years of the 7th CP and make recommendations aimed to improve the adequacy of strategies and implementation mechanism and efficiency of management and implementation of the 7th CP. The evaluation findings and recommendations will be utilized by UNFPA Indonesia to improve program modalities and management approaches. UNFPA headquarters, donors, the Government of Indonesia, partner agencies and other relevant stakeholders will benefit from the lessons learned.

3. Evaluation objectives and questions

The main objective of this evaluation is to assess the adequacy of strategies and implementation mechanism and efficiency of the management, program coordination, design of the 7th CP and communication and cooperation between the stakeholders. The evaluation should highlight strengths, weaknesses/gaps, good practices and provide forward looking recommendations. The following are specific objectives and review questions:

**Programme Design and Management**

a) To what extent does the 7th Country Programme design take into consideration the principles of simplification and harmonization of UN rules and procedures as per the Paris Declaration and the High Level Panel’s Report on the UN System-wide Coherence.

b) To what extent the 7th CP management design is in line with the execution and implementation rules and regulations for United Nations Development Assistance Framework (UNDAF)

c) To what extent the 7th CP management design is in line with the implementation and management policies and procedures as stipulated in the UNFPA Country Programme Manual (PPM)?

d) To what extent UNFPA Indonesia considered its and its partners capacity in the development of the program design?

e) Are all strategic stakeholders who can influence the program included in the program management design?
f) To what extent provides the 7th CP design flexibility in addressing emerging issues experienced during the course of the CP?

g) To what extent has the 7th CP effectively integrated gender equality, young people and human rights in the program management design?

h) To what extent the program design assure mechanisms to reaching the poor and marginalized?

i) To what extent the actual management mechanisms (including coordination, planning, implementation, reporting, monitoring and communication) are in accordance with the stipulated CP management design?

j) In what way does the program design respond/take into consideration to specific local needs and conditions?

k) To what extent the community empowerment component Management of the program is protected from “Elite capture” in decision making?

l) To what extent is the 7th CP cooperation with NGOs in line with UNFPA’s Guidelines for working with NGOs?

Adequacy of Strategies and Implementing Mechanisms

a) Are operational strategies (including planning, execution modalities and arrangements for the implementation of the program) adequate to achieve timely and effective program implementation?

b) How effective is the coordination in the planning and implementation stage of the program at and between the central, provincial and district level and with NGOs?

c) What are the risk factors such as i) external (factors outside UNFPA’s control) and internal ii) relational iii) human resource issues iv) process v) Information Technology and Communication System that influence the implementation process (including the formation of annual work plans, financial reporting and periodic reporting of the progress made in program implementation) and how do they affect /impact coordination and implementation of the 7th CP?

d) Have the roles, activities and responsibilities of all program partners been clearly defined, shared and understood by the program partners?

e) To what extent is the 7th Country Programme design positioned to meet the decentralized environment?

f) Can the geographic areas be successfully managed under the current program management scheme?

g) Has UNFPA positioned itself within the local country context where it can make the most difference taking into consideration the funds available and geographical spread of the program?

h) To what extend do the implementing partners understand their roles and responsibilities?

i) What are the constraining and facilitating factors and their influence on the timely and effective program implementation?

j) Are the current monitoring, evaluation, internal control and accountability systems adequate to enable UNFPA and its partners to demonstrate program results?

k) What would be the role of UNFPA’s network of partners in assuring a more effective program implementation?
l) Does and how does UNFPA’s network of partners support the achievement of the program results?
m) What is the relevance and contribution of the country program in each of the selected provinces and districts?

Use of resources

a) Are the program inputs (human, technical and financial and leadership) used efficiently?
b) What is the proportion for salary, DSA, transport and meeting costs and is this in line with the proportions of other international organizations working actively in Indonesia?
c) What proportion of the resources is spent on what program input and to what extend is this proportion actually benefiting the poor?
d) Are the payment arrangements under the 7th CP compatible with the 1996 circular of the heads of UNDG to the heads of agencies on payment to implementing partners?
e) Are operational strategies adequate for the use of resources/UNFPA inputs most economically?
f) How do accountability structures of the national, provincial and district implementing and coordinating partners influence economical use of resources?
g) Is the current level of budget available for achieving the intended targets effectively and efficiently adequate by the end of the 7th CP? If not, what changes are necessary recommended and deemed appropriate by all stakeholders?

Sustainability

a) Does the program design include strategies to ensure sustainability?
b) Are program components and approaches replicable by national implementing partners upon ending UNFPA funding?
c) What is the current level of ownership of the 7th CP by the partners and which facilitating and constraining factors affect the ownership?
d) To what extent is it expected will the cooperation and coordination between GOIs and NGOs in the 7th CP will be sustainable? To what extend is it expected that the NGOs after the 7th CP will be able to continue their activities without the financial support from UNFPA?

4. Methodology

The evaluators will design the evaluation methodology required to respond to the review objectives in collaboration with the Country office and other key stakeholders. The methodology should specify the following:

- Key information sources - Identification by evaluators of stakeholders (UNFPA staff, partner agencies, implementing partners, community members including youth and other vulnerable groups
- Data collection instruments
• Types of data collection instruments
• Reference indicators and relevant benchmarks
• Reporting and communication mechanisms during the course of consultation and discussion with UNFPA Jakarta office

5. Evaluation team composition

The team will comprise of up to 4 evaluators (2 national and 2 international). The evaluators will be selected by UNFPA Indonesia in consultation with the Country Support Team in Bangkok, UNFPA Headquarters and the Government Coordinating Agency in Indonesia, Bappenas.

The members of the evaluation team should be competent in the evaluation of similar type of programmes particularly in developing countries and preferably have a background in the following specialized areas:

- Leading evaluation process responsible with expertise on organization structure and office management/mechanism (International evaluator who will function as a team leader)
- Programme Management of international development programmes
- Indonesian governance system and design of development programmes in decentralized environment
- Internal Control measures and Financial management of development programmes

The evaluators should also possess interview skills, analytical skills, facilitation skills and possess excellent English writing skills. Additionally, for the national candidates: fluency in spoken and written Bahasa Indonesia is a requirement.

Evaluators’ general tasks:

- Read background documentation
- Contribute to design of the review methodology
- Conduct field level qualitative data collection through interviews, review of program management meeting minutes
- Contribute sections of the report related to his or hers expertise
- Participate in interim and final briefings
- Provide and/or seek advices to/from UNFPA officials if ambiguities were observed
- Ensure full stakeholder participation in the evaluation process
- Work in harmony with the other team members to deliver UN standard and quality results
- Work under the coordination of and direction of the team leader

Specific tasks for area of expertise of evaluators (see Annex A for detailed description)
Team leader, Programme implementation in decentralized environment, coordination and cooperation issues among all stakeholders, sustainability and role of NGOs (international)

- Evaluate how the program plan matches the actual implementation of UNFPA 7th CP
- Evaluate the cooperation and coordination between all stakeholders (including the NGOs) involved in the 7th CP
- Review the sustainability of the relationship between the stakeholders and the sustainability of the partner NGOs
- Fulfill the role of team leader as stipulated below

Programme design and management of international development programmes (International)

- Evaluate the program design and management mechanism of UNFPA 7th CP
- Review the program design and management of UN agencies such as UNDP, UNICEF and WHO and international funding agencies and international NGOs are active in Indonesia
- Review whether the 7th CP is in line with UNFPA HQ policies and procedures and other UN rules and procedures related to UNFPA’s work and program management
- Provide inputs based on experiences of international development organizations working in decentralized environment
- Review the current roles of stakeholders in the management of the 7th CP

Indonesian governance system, design of development programmes in decentralized environment, coordination, cooperation and ownership issues among stakeholders (national)

- Review the relevance of and support to (is it in line with local priorities and developed year plans?) the country program in each of the selected provinces and districts and the commitment of local decision makers to the 7th CP.
- Identify and analyze the risk factors which influence the implementation process and program management related to the current cooperation and coordination within and between agencies and geographical areas (district-province-national).
- Review the reporting and coordination structures of the national, provincial and district implementing and coordinating partners.
- Review the viability of the current program management scheme

Financial management of development programmes (national)

- Review the program allotment, output budgets and expenditures of UNFPA 7th CP
- Evaluate 7th CP financial implementation data
- Evaluate the efficiency of financial resources (on activity and output level)
- Assess whether funds have been used for intended and/or unintended purposes and whether the appropriate procedures in place to assure financial accountability
- Review the accountability and internal control structures of the national, provincial and district implementing and coordinating partners.

Additional tasks of the team leader
- Guide other team members in order to complete the work in accordance with the Terms of Reference in timely fashion
- Ensure that all individual members work as a team
- Continuously review the work of individual members, provide guidance and ensure a coordinated analysis
- Organize regular meetings
- Settle any disagreement and disputes among the evaluation team, if any, and find the best solutions
- Be the spokesperson of the team in relation to the UNFPA Country Office, government partners and other counterparts
- Ensure that field visits and meeting schedules are adequate to fulfill the terms of reference
- Consolidate the team members’ contributions into a final evaluation report

6. Evaluation management and schedule

The evaluation team will work under the direct supervision of the UNFPA Country office Representative for Indonesia who will provide necessary information and guidance for planning the evaluation. UNFPA Indonesia will provide relevant documents and information for pre-reading upon signing the contract between UNFPA Indonesia office and evaluators.

Timeframe and Work plan

28 days starting 17 November for international consultants (arrival in Jakarta) and 19 November for local consultants (see Annex B for detailed timeline)

7. Procedures and logistics

UNFPA will provide logistical support and arrange meetings and field visits as and when requested by the team. Evaluators will be expected to work 7 days a week. Travel to field visits will be arranged. UNFPA will also make available office space; the evaluators are however expected to bring their own laptops.

8. Expected services and Outputs to be delivered

A final evaluation report written in English which has followed the specified tasks and thereby complying with the objectives set out above. The main text of the reports should be 30 to 35 pages in length. In addition, the reports should have an executive
summary (2 to 4 pages), containing the main findings, conclusions, lesson learned and recommendations.

An introductory section of the report should be devoted to the object of the evaluation, its purpose, its intended audience, the questions asked, the methodology used, and the limitations. A separate section of the report describing context, program activities, and donors and their contribution

Every section of the report should consist of findings (and the arguments and criteria which led to the findings), conclusions, and recommendations. The annexes of the reports should contain (but not be limited to):

1) ToR for the evaluation
2) Evaluation Framework
3) List of reference documents
4) List of people interviewed, by affiliation

9. Background Documents for pre-reading
- Reports from Paris Declaration, MDGs, High Level Panel on UN System-wide Coherence
- GOI Medium Term Plan
- UNDAF Document
- Country Programme Documents and logframe (2007)
- Pedum 2007
- UNFPA’s Policies and Procedures Manual (PPM)
- Project Audit Findings 2006 and 2007
- Annual Reports (2006 and 2007)
- COAR 2007 and 2006
- Annual work plans 2006, 2007 and 2008
- Minutes of Technical Team Meeting and Country Steering Committee meeting
- Work plan monitoring tools
- Field monitoring reports
- Evaluation report outline
- Study on the implications of decentralization for UNFPA’s Country Programme 2005
- UNFPA Multi year strategic planning
- Gol law on decentralization and additional government guidelines on decentralization
- Community Empowerment Programme guidelines
# Annex B: Assessment Schedule

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity</th>
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<tbody>
<tr>
<td>November 14-15, 2007</td>
<td>Initial orientation of team leader</td>
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<tr>
<td>November 24-29</td>
<td>Team arrives in Jakarta, conducts interviews at central level agencies</td>
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<tr>
<td>November 25-December 5</td>
<td>Fieldwork in NTB, NTT, and West Kalimantan provinces</td>
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<tr>
<td>December 6-8</td>
<td>Supplemental interviews at central level and joint team analysis</td>
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<tr>
<td>December 10-12</td>
<td>Fieldwork by one team member in West Java province</td>
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<tr>
<td>December 17-20</td>
<td>Team leader returns to Jakarta for central level interviews and presentation of initial findings</td>
</tr>
<tr>
<td>January, 2008</td>
<td>Report writing and submission of first draft</td>
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