

SWAps and Civil Society

The Roles of Civil
Society Organisations
in Sector Programmes

Desk Study

December 2002

discussion



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SWApS AND CIVIL SOCIETY

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A Report Prepared for
the Norwegian
Development
Cooperation
(NORAD)

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Preface

NORAD commissioned a desk study to explore the roles of civil society organisations in sector-wide approaches with focus on health and education programmes.

NORAD strategy for poverty reduction advocates new forms of co-operation – program and budget support. NORAD has also developed guidelines for its support to civil society organisations – both to Norwegian based CSO and local CSOs. The new guidelines defines civil society as the formal and informal networks and organisations which operate and are found in the space between the state, the family and market and Norwegian NGOs are encouraged to support this sector of society.

The first generation SWAps focused almost exclusively on improving the effectiveness of Governments and public sectors while the involvement of CSOs was given little attention, both by the countries themselves and the development partners. Lately, there has been more involvement of civil society – not least as a parallel trend to the involvement of civil society in PRSP processes at country level. There has been – both in Norway and internationally limited knowledge about what roles CSOs have played in sector programmes, their level of involvement and what the results are. Not only is there a need to understand better the features of current involvement, but also potentials for what roles and how CSOs can be involved in the future.

International development co-operation policy has moved towards more partnerships among governments, donors, private sector and civil society in achieving sustainable development. However, partnership with CSOs has different motivations and rationale – in most cases driven by two basic sets of beliefs – or two poles of beliefs; neo-liberal economic theory and liberal democratic theory. In the first, CSOs are seen as preferred channel for service provision in deliberate substitute for the state. In the second, CSOs are seen as vehicles for “democratisation and essential components of a thriving civil society”. Norway itself has a tradition of having strong civil society and a strong state considering this as a fundamental basis for the welfare state. The work of Robert Putnam suggests that high social capital - meaning high levels of civic engagement and trust among people are positively correlated with democratic development and better performing local institutions.

The issues raised in this report are increasingly relevant due to new ways of financing activities at country level – the global initiatives such as Global Fund for Tuberculosis, Aids and Malaria and World Banks fast track Initiative to mention some.

This desk study report takes a first step in exploring the field by collecting and systematising available information and by suggesting a way forward. The description of the programmes is not exhaustive since all relevant information related is not included. The importance of the report lies in the fact that it attempts to define some key concepts and identifies and formulates relevant questions. These concepts and questions are currently followed up and being tested through country case studies. A synthesis report based on these country case studies will most probably be finalised by end April 2003.

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1. INTRODUCTION

1. 1. Background

This desk study explores the roles of civil society organisations (CSOs) in sector wide approaches (SWAps) - with a focus on health and education programmes supported by NORAD. Selected issues and questions will be followed up and analysed in country case studies.

The study brings together and is justified by several important developments in aid strategy. NORAD's strategy towards 2005 advocates new forms of cooperation – programme and budget support as means to more effective reduction of poverty in partner countries. Sector wide approaches (SWAps) represent a form of programme support. Norway is here part of a global trend. Several bilateral and some multilateral organisations have adopted SWAp principles, but more slowly relevant practices.

NORAD is either involved in or planning to support sector programmes in five countries in primary- and/or higher education, health in three countries, three in energy and three in roads, one in water and sanitation and one in wildlife management¹.

It was a limitation that the first generation SWAps had as their almost exclusive focus improving the effectiveness of Governments and public sectors. The programmes were driven by a desire to support Governments in a move towards more coherent sector strategies, resource allocation and common management and monitoring arrangements. *“SWAps developed as a response to a dysfunctional public expenditure management system and an objective has been to bring Government and donors within a single policy and expenditure programme, preferable located within the government budget (Foster 2001).* There has been more involvement of civil society organisations in later SWAps, but less knowledge about how much, what roles they have played and with what results.

In parallel, international aid policy has moved towards more partnerships among governments, donors, private sector and civil society, which is seen as a more effective way to achieve sustainable economic and social benefits. Over the recent years, the majority of multilateral and bilateral donors have been engaging civil society in programmes and policy dialogue as a way of building local ownership of the development processes and improving programme design, implementation and sustainability. Not only in sector programmes, but also in PRSP processes, the new Global Health Fund and the World Bank HIV/AIDS programme (MAP) the involvement of civil society organisations is strongly supported.

What explains these trends? The increasing interest in civil society is not an accident, nor is it solely a response to local initiative and voluntary action. There are several reasons, but civil society has gained an increased popularity among donors based on what is called the “New Policy Agenda”. This agenda is not monolithic – its details vary from one official agency to another, but in most cases it is driven by two basic

¹ See Annex 5 for an overview of countries where NORAD is involved with budget support or in SWAps.

sets of beliefs organised around the two poles of neo-liberal economics and liberal democratic theory.

First, markets and private initiative are seen as the most efficient mechanisms for achieving economic growth and providing most services to most people. Governments “enable” private provision, but should minimize their direct role in the economy. Because of their expected cost effectiveness in reaching the poorest, official agencies have increasingly been supporting CSOs in providing welfare services to those who cannot be reached through the markets. CSOs have for a long time been providing such welfare services, but the difference is that now they are seen as the preferred channel for service-provision in deliberate substitution for the state.

Second, under the New Policy Agenda, NGOs and community-based organisations are seen as vehicles for “democratisation” and essential components of a thriving civil society. Civil society is supposed to act as a counterweight to state power – protecting human rights, opening up channels of communication and participation, providing training grounds for activists and promoting pluralism. Donors have adopted various parts of the new agenda. NORAD’s policy on civil society for instance is focusing on the second item mentioned above and does not encourage CSOs as service providers.

There is, however, limited systematic knowledge and documented experience on the role of civil society organisations in SWAps. This is true for Norway, but it is also an unexplored area in other countries and agencies as well. To begin the study, it was therefore necessary to explore the field - collect available information, define some key concepts, identify and formulate relevant questions. The next step would be to test the questions and hypotheses through country case studies.

The rapid growth of SWAps in the social sector - and we are in this study focussing on the social sector (health and education), has important consequences for the future role of Norwegian NGOs and their partners in terms of planning and funding of health and education programmes. But the consequences are not yet clear. Few Norwegian NGOs are so far involved in sector programmes and there are also few and weak institutional mechanisms for them to take more active part.

But Norwegian NGOs provide significant funding to health and education in many of NORAD’s programme countries. The following table gives the total investments for 2002, which amounts to nearly 113 Million NOK. NORAD promotes an integrated approach of all Norwegian support to countries, but the support through NGOs has traditionally been de-linked from bilateral programmes and this is changing only slowly. An interesting question is therefore to what extent there is a link between these NGO investments and the bilaterally supported education and health sector programmes in the same countries. And if the link is weak, to what extent is there scope for and also mutual desire to foster closer linkages.

Table: Financial support from Norwegian NGOs to health and education in countries with sector programmes in the social sector in 2002.

COUNTRY	NORWEGIAN NGOS	AMOUNT (MILL.NOK)
Tanzania	ATLAS, FOKUS, LO, Norsk Bibliotekforening, Misjonssammadet, SOS Barnebyer.	7.716
Nepal	ATLAS, Tibetmisjonen, FORUT, Kirekens Nødhjelp, Norges Blindeforbund, Norsk lærerlag, Redd Barna, Utviklingsfondet	10.965
Zambia	Norges Vel, LO, Norges Idrettsforbund, Norges Lærerlag, Redd Barna, Kirkens Nødhjelp.	15.156
Uganda	ATLAS, CARITAS, Christian Relief Network, Pinsevernene, FOKUS, Hånd i Hånd, LO, Lions Clubs, Norges Fysioterapiforbund, Redd Barna, Strømme stiftelsen.	26.498
Ethiopia	Frikirken, Misjonsselskapet, Misjonssambandet, Haukeland Sykehus, Kirkens Nødhjelp, Redd Barna, Utviklingsfondet.	33.653
Mozambique	Pinsevernene, Kirkens Nødhjelp, LO, Blindeforbundet, Norsk Folkehjelp, Redd Barna.	14.448
Bangladesh	Delta International, FOKUS, Kirkens Nødhjelp, Normisjon.	4.437
TOTAL 2002		112.873 Mill.NOK

1.2. Objectives and Phases of the Study

The previous chapter explains the background and provides the justification for the study. The specific study objectives are:

- (a) To collect and collate information and experience about the roles of civil society in sector programmes (health and education) – in particular in Norwegian partner countries.
- (b) Identify and formulate relevant issues and questions for more in-depth case studies.
- (c) Provide advise and recommendations to NORAD and Norwegian NGO on how to improve the interaction between SWAps and civil society.

The study is focussing on the roles of CSOs in the health and education sector programmes, which means that there are several issues relating to the roles and functions of civil society, which fall outside our mandate. We are also limiting ourselves to the social sector since most SWAps are in health and education, and since most CSOs are also in this sector.

The entry point for the study is civil society organisations in NORAD partner countries and its interactions with national SWAps - and not the roles of Norwegian NGOs as such. On the other hand, we are interested in the contributions and involvement of Norwegian NGOs. We are further not discussing the roles of for-profit

organisations in the private sector – even if the lines between the for profit and not for profit organisations sometimes are blurred

The study is not based on any normative standard on what roles CSOs should play in sector programmes. To a large extent it will depend on the country context, Government policies and quality of civil society, but also on the type and level of service provided. Basic education is for instance perceived as a public responsibility in most countries.

The study is divided into two phases: an initial and relatively brief exploratory phase for collecting and reviewing information from NORAD and other organisations in order to identify and formulate relevant questions and issues. This report is the result of the first phase.

Given the kind of knowledge that exists about the principles for sector programme support and SWAps, it is necessary to move from general to more specific studies, and from desk-based reviews to more field-based empirical work. It is therefore suggested that key questions are identified and analysed in three case studies of NORAD supported sector programmes. A mandate for phase two of the study is presented in chapter 6.

In parallel with this study, there is another study underway by LINS/DECO focusing more exclusively on CSOs and the education sector. There is close collaboration between the two teams and phase two with country studies will be coordinated.

A Reference Group consisting of participants from NORAD and Norwegian NGOs have met three times to review drafts of this document and provide advise and guidance to the process.

2. CONCEPTS AND CONTEXT

2.1. Key Concepts

Sector Wide Approaches

The defining characteristics of a SWAp are that all significant public funding for the sector supports a single sector policy and expenditure programme, under Government leadership, adopting common approaches across the sector, and progressing towards relying on Government procedures to disburse and account for all public expenditure (Foster, M. et al. 2001).

Key characteristics include:

- Government leadership.
- Single sector policy, programme of work and expenditure framework.
- Common approaches to planning, management and monitoring arrangements across the sector on the part of all development partners.
- Development partners progressing towards using government procedures for disbursement and accounting.

This definition has its limitations: In many countries, sectors such as health do not have centralised public expenditure. Non-government finance and non-government service providers are making contributions that are often larger than that of Government while in other countries basic education for instance is perceived as the responsibility of the Government. Sector programmes are designed as mechanisms for coordinating support to public expenditures programmes. Hence, they are most relevant and feasible where public expenditure is a major feature of the sector, hence the dominance of health, education and roads. SWAps are also focusing on single sectors, while for instance HIV/AIDS programmes follow a multi-sectoral approach.

Private Sector and Civil Society

NORAD finds it useful to talk about the state, the private sector and civil society as three separate arenas of development (NORAD, How to deal with direct support to civil society). Private sector covers here for-profit organisations, while civil society includes the broad range of formal and informal organisations that operate in the space between the family and the state. These organisations are not controlled by the Government and operate primarily on a not-for-profit basis.

There are overlaps and grey zones between the three arenas: Some health activities supported by CSOs operate in the market and are run on a commercial basis, even if the owners do not benefit as individuals. There are service-NGOs functioning as consulting firms and also NGOs established and/or controlled by the Government even if they are formally independent. Still we believe it is relevant to use the three arenas: state – private sector and civil society as a point of departure for the analysis.

The fact that there is a wide range of organisations and associations in "civil society" or the "third sector" is a greater challenge. Civil society is an intriguing and attractive concept, but often broad and diffuse. Internationally "the third sector" has lately been subject to considerable literature and research (Salomons 1997, Edwards&Hulme 1997, etc.)

From the 1970's the third-sector organisations were usually called Non Government Organisations (NGOs). They were separate from Government and established to benefit others. They were value-based and not-for-profit, but NGOs became an all-embracing residual category, an imprecise word used in many different ways depending on the perspective of the user. In practice, NGOs were often synonymous with organisations involved in relief and development work, while the new concept of civil society is broader and includes trade unions, churches, local self-help groups, independent media, professional and academic institutions, etc.

CSOs are per definition not good or bad and each country will have organisations with different historical and motivational backgrounds. Civil society should not be equated with specific set of values.

A Classification of CSOs

For the purpose of this report we have found it useful to make a classification based on overall orientation and activities – a classification which might also be useful for the country case studies. There are also other types of CSOs, which are not presented here. Our assumption is that that the various CSOs will play different roles in the preparation, implementation and monitoring of sector programmes. Donors influence also the categories promoting some types of NGOs and not others.

(a) Relief, Welfare and Charity CSOs

Welfare and charity organisations have traditionally been the most established, but are gradually losing ground. Their aims are mainly ameliorative and they work most often under religious and humanitarian inspiration. Such organisations have often historically played an important role, but did often not face the new development challenges. Such CSOs would rarely be involved in SWAps and if so only in service delivery functions.

(b) Development Oriented CSOs

These organisations attempt to improve social, economic and productive conditions and are found both as small community based organisations at village and district levels, and as large professional development agencies at state or national level. Such CSOs are often the favoured organisations by donors and will most often be involved in SWAps as implementers – providing specific services.

(c) Advocacy and Rights Based CSOs

This is the group of organisations involved in advocacy and various types of issue-oriented activism and rights based approaches. They have a far more political expression than the development organisations, arising from for instance the perceived failures of political parties to articulate the concerns and demands of oppressed groups or the need for mobilising interest for particular target groups and/or political issues and protecting the rights of women, disabled, children, etc. Such CSOs are less involved in implementing projects and focus more on mobilising and expressing political issues at local, national and sometimes international levels.

(d) Professional Support CSOs

The late 70's saw the proliferation of action-research institutes, development-training and documentation centres, and groups with high-level skills in law, medicine, media and communication. Most of them are not operational, but define their role as

providing professional resources and support to the broad spectre of civil society. Most of these groups have an urban middle class background, but plays an important supportive role for building capacity for smaller organisations. Such CSOs are often the most relevant for the formulation of SWAps and monitoring of their impact. Some of the organisations are practically private consulting firms, others operate in the grey zone between civil society and private sector.

(e) Network CSOs

Finally, there are the network CSOs set up to nurture and support their CSO constituents within defined thematic areas. The networks are most often issue-specific and vulnerable to changes in leadership and participation. Such CSOs are also often invited by the Government to take part in the formulation and discussion of policies and plans, since they represent several organisations and with knowledge and experience in a particular area.

3. ROLES OF CIVIL SOCIETY IN SWApS

It is not sufficient to say that civil society organisations are engaged in SWApS. We also need to understand how they are involved – in what stages in the formation and implementation of a SWAp and the various roles they play. Such roles will illustrate the type of involvement and could be a useful tool in the analysis of the interactions between CSOs and SWApS in a specific programme and country.

Such roles are here merely used for descriptive and analytical purposes. We need a set of categories to discuss what roles CSOs play, what roles they do not play and could have played. It will also be interesting to discuss potential and actual conflicts between different roles (for instance involvement in policy formulation which may lead to exclusion from implementation, or a strong advocacy voice which may have the same consequences). Roles are associated with the classification of CSOs (see 2.1.), but there are no automatic and clear-cut lines between type of CSO and what roles they play: a service development oriented NGOs may do advocacy, while a professional support CSO could implement projects.

We suggest seven roles capturing various aspects of the interaction between CSOs and SWApS². Sometimes an organisation plays only one role, but more often a CSO plays multiple roles. The potential conflicts and overlap between roles illustrate in itself interesting issues, which will be discussed later. The list is not meant to be all-inclusive, but we believe that the most relevant and typical roles are included.

(a) Contributors to Policy Discussion and Formulation

The most marked increase in recent years has been CSOs as contributors to policy discussion and formulation processes after the formula "Government invites, organisations participate". Representatives of civil society are offered seats at the table in broad cross-sectoral processes (PRSPs) and in sectoral planning and sector working groups. Despite the increased attendance at policy formulation meetings, questions remain over their actual impact. It is also an open question to what extent CSOs have the technical competence to play this role properly.

This is a contribution from inside. Participation is by invitation and often only to those known not to disagree fundamentally or being disadvantaged by the policies proposed. Labour unions are for instance often not invited nor very vocal human rights advocates. Inclusion of CSOs is also often on the basis of their perceived prospect to add value to the process, rather than on any conception of a democratic right to contribute to policy formulation. It is also common that CSOs are invited to discuss some issues: social development and not political and economic macro issues.

(b) Advocates and Lobbyists (pressurisers)

CSOs are here contributing - or more correctly - providing pressure from outside on both policy formulation and implementation, but most often on formulation. It tends to be played by CSOs at national level and often by international NGOs. Influence through pressure is often limited by the broader political context in the country. Challenging the government can be labelled opposition and perceived as an illegitimate activity.

² See Sara Lister (2001).

(c) Service Deliverers (operators)

It is most likely in service-delivery activities that the majority of CSOs have been engaged in SWAps. The shift towards sector-wide approaches is often pushing CSOs towards being sub-contracted by national and district authorities.

(d) Monitors or Watchdogs of Rights

The CSOs are here monitoring various aspects in the implementation of SWAps, e.g. its effects on the poor, environment, human rights, etc. The organisations serves as watchdogs for particular interests and public concerns.

(e) Innovators

The CSOs in this role contribute new ideas and solutions. The production of new approaches and techniques, which are adopted by others, has been considered one of the comparative advantages of CSOs – either through policy formulation or implementation.

(f) Mobilisers

CSOs are here agents in awareness raising and capacity building of poor people – mobilising people to influence policy and take part in its implementation.

(g) Financier

CSOs provide also financial assistance, but hardly with direct contributions to sector programmes through Government basket funding. There are more examples where international CSOs provide support to components of a sector programme or national CSOs are directly or indirectly involved and defined as part of a sector programme. The funding of CSOs from Government is implied in the service delivery role. Funding from Norwegian NGOs in SWAps is so far limited. Some of the larger organisations have important practical experience from SWAps, but most have no policy or practice in this area.

When we combine the suggested classification of CSOs and the set of roles, the following pattern or combinations are likely:

Type of CSO	Potential Roles					
	Participants in policy discussion	Advocates	Operators	Monitors	Innovators	Mobilisers
Welfare CSO			x			
Development CSO	x	x	xxx	x	X	x
Activist CSO	xx	xxx				xx
Professional Support CSO	xxx	x		xx	Xx	
Networking CSO	xxx	xx		x		x

4. ISSUES AND QUESTIONS

Case studies are of limited value if they are not focused – or in other words organised on the basis of specific questions and issues. This chapter lists a broad number of issues, which have emerged from interviews and review of documents. We have tried to subsume issues under cross cutting themes and the suggested roles. Several of the statements are in the form of hypotheses or assumptions, which can be discussed and empirically tested through case studies. In other words, at this stage we do not approve or disapprove any of the statements. There could also be others, which have not been mentioned.

4.1. Marginal, but Increasing Involvement of Civil Society

- The first SWAps had as their main focus improving the effectiveness of Governments. They were driven by a desire to support Governments in a move towards more coherence in terms of sector strategy, resource allocation and common management and monitoring arrangements. SWAps developed as a response to a dysfunctional public expenditure management system.
- The first generation SWAps were thus predominantly public sector focused. There was little sensitivity to the private sector and little recognition of the importance of private financing and CSO contributions to policy development and service delivery. CSOs played hardly any of the seven roles and if any, the service delivery role.
- The original SWAp approach was gradually modified and adjusted to the realities in sectors where public expenditure was not central. This was particularly true in agriculture, but even in core social sectors such as health and education. In many countries the role of non-Government finance and non-Government service provision is larger than that of Government. New decentralisation efforts also challenged the monopoly of a top-down sector Ministry approach.
- Rather than supporting a resurgence of “statism”, the new generation SWAps have moved towards a redefinition of the role of the state. Governments have been forced to recognise that they cannot and should not do everything themselves. On the other hand, it is accepted that the state has important roles to play - in particular in providing a framework for enabling interventions by a variety of actors and in providing basic services in for instance health and education.
- Despite all changes, reference to private sector and CSO partnerships in SWAp policy documents is aspirational more than providing clear and realistic guidelines.

4.2. Governments and Civil Society Tensions

- Interactions between Governments and CSOs are still quite limited and strained and the for-profit private sector even more limited than CSOs. Governments are perceived by CSOs as slow and bureaucratic, controlling and pervaded by perverse practices, such as rent seeking. There is also little space for the more controversial organisations – as for instance advocacy organisations compared to service delivery NGOs. Some of the sentiments are:
 - Governments are jealous of civil society achievements.
 - Governments are resistant to recognising the role of CSOs.
 - Civil society is cynical about how governments operate.
 - Governments are cynical about CSO legitimacy.
 - Governments feel that CSOs are pampered and privileged.
 - The relationship between Governments and CSOs is paternalistic and purely contractual.

4.3. Weak Articulation of Cross-Cutting Issues

- Many new development challenges like HIV/AIDS require a multi-sectoral approach while SWAps are sector-specific and ministry focused.
- Cross cutting issues and important public health priorities like HIV/AIDS are not given due prominence in sectoral policies and programmes.
- The gender perspective is weakly articulated in SWAps. Few women take part in the preparation of SWAps, gender analysis is not carried out and gender is weakly integrated in sector strategies and programmes
- Multi-sectorality is enhanced by the involvement of the civil society – not just in terms of public - private partnerships, but also in the context of working across development sectors. The CSO engagement at district level provides considerable support for taking forward a multi-sectoral response.

4.4. Less and Insecure Future Funding for CSOs

- The funding of international and national CSOs directly from bilateral and multilateral donors may be reduced in the future and replaced by support through Government sector programmes.
- National and local CSOs meet barriers in accessing funds from Governments and will increasingly experience financial problems.
- Social marketing organisations view moves towards SWAp funding with considerable concern. They fear that Governments will be reluctant to pass donor resources on to CSOs. They argue that Governments lack the administrative capability to manage complex contracts and refer to the innate desire of Governments to maintain control and interfere.

- There is an increasing willingness from multilateral and bilateral agencies to open funding windows for CSOs (e.g. World Bank MAP projects for HIV/AIDS allocate 1/3 to CSOs).
- There is Government reluctance to use loan funds for national and international NGOs.
- It is argued by CSOs that all projects should be within the framework of national sector policy and resource allocations, but all funds to the sector do not necessarily need to flow through the Government budget. Government ownership is endorsed as crucial, but should be seen in terms of strategic rather than operational ownership.
- Local CSOs and CBOs are supposed to apply to district committees for funding within SWAps. There are problems when “cash-strapped districts” are asked to release funds for NGO activities.
- Most government - CSO collaboration is in the form of sub-contracting, in which financing is provided by donors and policy is made by either government, or donors.
- Government sub-contracting may lead to unfortunate competition between local CSOs.
- It may also lead to corruptive practices in situations where local NGOs need to pay “fees” to Government for being awarded contracts.
- In a tight budget situation, allowing some of the budget to go “outside” public ministries can meet resistance from Government officials. Providing support to community schools in Zambia faced initial resistance, and local Government in Uganda has been reluctant to pass on budget resources intended to help finance CSO health service providers.

4.5. Changing Role of Northern NGOs

- There is a sense of frustration among NGOs in Northern countries with the lack of institutional framework for being involved with bilateral donors in the context of the new policy for moves to sectoral support at country levels. There is no forum and few mechanisms where the Norwegian NGOs can take part and provide inputs to a discussion about civil society involvement in SWAps.
- National CSOs – and in particular advocacy organisations are to a large extent technically and financially supported by international NGOs.

4.6. Decentralisation or Return of a Centralised State?

- SWAps are perceived as a return to a “state-centred” view of Government. The development of SWAp programmes is most often top-down and supply driven - ignoring the fact that people prefer and make extensive use of private sector solutions in both health and education.
- Decentralisation in the sense of devolving decisions and responsibility for resources and programmes is often viewed as a tension within SWAps where there has been considerable investment in developing central capacity and the development of national programmes.
- In terms of the watchdog and advocacy role of civil society, decentralisation is seen as presenting distinctive opportunities for policy engagement. Most contestation of policy takes place at the implementation level.

4.7. Contributor to Policy Discussion and Formulation

- CSO engagement with government in policy processes has been on the increase, and there has been an opening of space for this to occur, especially at national level.
- The basis on which engagement from CSOs take place is often unclear. There is little discussion or analysis of which groups constitute legitimate participants in processes and why some are selected.
- Participation and legitimacy can be based on knowledge and research, technical skills, values, history and representativity. Donors are mostly preoccupied with representativity, which often becomes the only basis for participation in policy processes.
- Sectoral policy documents tend to make limited reference to the involvement of civil society and the for-profit sector.
- In many policy processes – one or more international NGOs are involved directly or indirectly through local organisations.
- Findings suggest that policy formulation is still extremely centralised and that a few key ministries and individuals are responsible for much of the policy formulation.
- Many CSOs, particularly at the national level, wrestle with the tensions between increased participation in policy processes and issues of independence and autonomy of the state.
- Consultations have tended to be strongest at the development stage of the SWAp and lapse or fade away once the programme gets underway. Consultation subsequently tends to become “tokenised”.

What are the reasons for lack of involvement from CSOs?

- CSOs often lack the capacity and skills to take part in policy discussions. Service delivery NGOs for instance tend to have limited competence in engaging strategically at the national level and limited experience in national level advocacy.
- Governments have little capacity for the policy analysis required to address development of public/private partnerships and embed them appropriate in a systemic approach.
- There is also limited capacity in governments to interface with the private sector. There is no focal point in Government to initiate, support and maintain such collaboration.
- In general, Governments have little experience to enter into contracts with the private sector and civil society.
- The essential culture of Government in relation to CSOs is framed within a paradigm of control, which focuses on licensing, registration and regulation.

4.9. Advocates and Lobbyists (Pressurisers)

- Governments are quite comfortable with CSOs as service providers (“plugging the gaps”). But Governments are much less comfortable with civil society groups in their roles as advocates and watchdogs of rights (women’s, children’s, disabled, etc.), and maybe reluctant to accept the legitimacy of the function of the “voice” and tend to see it in oppositional political terms.
- Civil society is often deeply fragmented with competing networks and umbrella groups. There is no “common voice” and national networks are either weak, absent or non-functioning.

4.10. Service Deliverers (Operators)

- CSOs are seen to have a comparative advantage in providing services to marginalised and hard to reach groups in ways Government cannot.
- The relationship between funding/contracting government and implementing CSO is seen as profoundly asymmetric.
- The shift towards sector-wide approaches is pushing CSOs towards being sub-contracted by national and district authorities – sometimes requesting commissions for the reward of contracts.
- Service delivery CSOs and rights based organisations are often seen as antipodes, but the relationships between service delivery and rights based programming are often unclear and underdefined – for instance to what extent the two approaches are in conflict or complementary.
- Sub-contracting may also lead to a silencing of CSO’s critical and independent role vis-à-vis Governments.

- In some policy processes involvement in service delivery is a pre-requisite for involvement in policy formulation, as governments tend to engage with organisations when it can see a clear advantage in doing so. In the health sector, facility based groups seem to have an advantage over non-facility based groups. The trend by donors to separate service delivery and advocacy organisations might decrease the impact of CSO advocacy.
- There has been a tendency in NORAD to view CSOs exclusively as service providers, which tend to ignore the participatory aspect of civil society. It may also lead to an instrumental view of the organisations pushing CSOs away from their core competence and defined areas of work towards Government defined priorities.
- NGO collaboration with Government in service delivery enables feeding-up empirical realities from grass roots with significant opportunities for influence in the direction of meeting the needs of poor people.
- The interface between people and Government is closest at the district level and CSOs have an opportunity to reflect the interests of poor people and to facilitate a more participatory decision-making involvement of the poor.
- In the long term, it is likely that most private sector service delivery will be funded directly by government through contractual arrangements.

4.11. Monitors and Watchdogs of Rights

- The primary role of CSOs is increasingly seen as advocates for vulnerable groups and watchdogs monitoring the performance of government to enhance accountability and protecting rights.
- There is limited evidence that Governments are willing to open up frameworks of systematic SWAp review to take on board “reality checks” and impact analysis from field based CSOs. There is also marginal involvement of representatives of the entire civil society, such as the press or universities.
- Weak governments are not willing to fund their own critics. CSOs rightly feel a concern that their independence would be jeopardised and their activities constrained if they depended on Government for funding. Most development country governments are neither secure nor mature enough as democracies to accept challenges to their policies and practices from organisations they fund themselves.
- In particular at district level, CSOs have problems to monitor those they depend on for registration.

4.12. Innovators

CSOs have played roles as innovators in many areas, but we found few examples in documents included in this – only some:

- Projects preserve the capacity to innovate, to try out new approaches and promote empirical learning. New interventions, such as prevention of mother to child transmission, require careful testing initially so that scaling up can be informed from field experience.

4.13. Mobilisers

We have not yet found a discussion of CSOs in the role as mobilisers within SWAps - even if this is often a key CSO role. This role is most likely played by several CSOs and our review has most likely been too limited. We believe that the case studies will provide more examples.

5. COUNTRY AND AGENCY EXPERIENCE

5.1. The Role of Civil Society in NORAD Supported SWApS

The following SWApS are supported by NORAD and included in our review³.

Country	Sector	Programme
Tanzania	Education (TAN 0023)	Primary Education Development Plan (PEDP)
	Health (TAN 2293)	Health Sector Reform Programme (HSR)
Nepal	Education (0017)	Basic and Primary Education Programme (BPEP II)
Zambia	Education (0067)	Basic Education Sub Sector Programme (BESSIP)
Malawi	Health	Health Sector Programme (HSP)
Uganda	Health (2866)	Uganda Health Sector Strategic Plan
Ethiopia ⁴	Health (2405)	Health Sector Development Programme (HSDP)
	Education (2406)	Education Sector Development Programme (ESDP)
Mozambique	Health (0096)	Health Sector Reform Programme (HRSP)
Bangladesh	Education (0060)	Primary Education Development Project (PEDP)

This is merely an assessment based on available documents – mainly programme and review documents available in NORAD’s archive. Hence, there could be other documents, which we have not been able to identify and use. We have been searching for what is written about civil society and the role of CSOs relating to each sector programme. One overwhelming observation is that little is written – the visibility of civil society in the documents is very low. Most were found in health programmes and less in education programmes.

Our intention was to use the suggested role set – the seven roles describing various aspects of CSO involvement, but they were found too sophisticated compared to the level of information available in the documents. Hence, they will be more useful in the in-depth case studies.

³ Annex 5 provides a more complete overview of NORAD’s role in SWApS and budget support.

⁴ Health and education in Ethiopia are so far not so far not supported by NORAD as sector programmes, but some support to the sector reform processes have been provided.

Tanzania

Health Sector Reform Programme (HSR)

Operations of the private non-profit health sector currently account for approximately 30% of total health facilities in the country. Until 1977 private for profit health care services were completely banned in Tanzania. The private for profit sector is proliferating and the regulative function and capacity of the MOH is limited.

The Health Sector Reform (HSR) is one Government reforms aimed at improving the economy and performance of public services in general. The main strategies in the reform aim at decentralising the basic responsibilities and decision-making functions from the central to the local levels. Other relevant reforms include, the Public Sector Reform (PSR), Local Government Reform (LGR), Education sector and water sector reforms.

In the Health Sector Strategic Plan (2000-2004) “*To foster linkages with the private sector in the provision of health services*” is included as Goal 7. Its purpose is to promote the delivery of health services by private sector organisations in collaboration with public sector health facilities and governing bodies.

In December 1999, an initial workshop was held with the MOH to formulate a mission statement and propose strategies for Public Private Partnerships. Many of the issues raised illustrated the mistrust that exists between the public and private sectors. Both fear a loss of autonomy from closer collaboration. The advantages of partnership were not yet apparent to the participants (Summary Report 2000).

The term “private sector” is not acceptable to some faith institutions and NGOs who do not want to be grouped with the for-profit providers. Nor was it clear if community groups and the informal sector should be included in this category.

The NGOs delivering health services are, however, increasingly included on the key meeting arenas. SCCS represents churches involved in health service delivery, is invited to participate in the SWAp committee that meets several times a year and in the annual Joint Reviews. However, it is felt that there are a many outstanding issues that have not been dealt with in the reform process such as bed grants, secondment of staff, etc.

Primary Education Development Plan (PEDP)

Civil society is said to be very important for the success of PEDP (Appropriation document 2002). The local communities have since the Education Act of 1978 been given responsibility and right to participate in running schools through school committees, but the level of involvement has varied. Civil society is represented by NGOs, including faith organisations working within primary education both with service delivery and as rights’ organisations. Since 1995 Government of Tanzania has encouraged private participation in the provision of education to supplement Government efforts. MOEC approves and monitors private schools, but do not provide funding.

NGOs are represented at all levels of the reform process from the school level up to the steering committees, and are invited to participate actively also in the monitoring

of the program. In the first stocktaking exercise 2002, the NGO's contributed substantially to the findings and recommendations.

Nepal

Basic and Primary Education Programme (BPEP II)

The Government's Policy Framework for BPEP II identifies the need for meaningful participation of NGOs in piloting and implementing strategies for several new initiatives, such as early childhood development, alternative schooling and women's education programmes. In the Joint Review Mission in 1999 it is noted that Government/NGO partnership has begun and the mission was impressed by the openness displayed at senior levels in the Ministry and the willingness to exchange views with NGO representatives.

A basis for increased involvement of civil society is the decentralisation of the administration and management of schools to local districts, communities and School Management Committees (SMC's). The Local Self-Governance Act and the 7th Amendments Act-Education state that communities and SMC's will own and manage schools in line with agreed guidelines and with financial support from the Government based on number of students and teachers.

Also the 9th 5-year plan (which serves as a basis for BPEP II) aimed at more involvement from local government and civil society. The 10th 5-year Plan states the following: "*...the long-term concept of the Ninth Plan was... to involve the local bodies in the process of developing education..*"

In the PRSP/5 Year Plan (chapter on education) the following is mentioned about the participation of civil society:

"In order to ensure continuity of this long-term concept of the Ninth Plan, the Tenth Plan has prepared the following long-term concept:

To empower the local bodies and communities for enabling them to shoulder the responsibility for educational policy making and for the management of schools pursuant to the Local Self-governance Act introduced according to the concept of decentralization." (PRSP/Education, page 3)

According to the plan, local government in collaboration with representatives of civil society (NGOs, CBOs) will be key partners in implementation:

" To run the programs on education following the concept of decentralization placing emphasis on people's participation in the management of the entire school education starting at the local level.." (PRSP/Education, page 6)

"To encourage the private sector in education for increasing competition in the education sector developing an effective system of coordinating all educational activities at all levels of the education system for making them disciplined and regular." (PRSP/Education, page 7)

“...to make clear the role of non-governmental organizations and local bodies in the implementation of the illiteracy eradication program, and to entrust them the responsibility for implementing the program.” PRSP/Education, page 9)

In the education plan strong involvement of civil society is also envisaged in relation to literacy programmes, adult literacy, post-literacy, continuous education, early childhood education, etc.

Experience so far reveal significant variation between districts. The involvement of civil society has to a large extent been limited to procurement and provision of services from NGOs for training and capacity development and to a much lesser extent in the development and formulation of policies and plans.

In the Technical Panel Report from MTR 2001/2002 it is confirmed that:

“The structural set-up of BPEP is a combination of government line ministry agencies and locally elected bodies. NGOs and CBOs are to be recruited to facilitate the community mobilization and initiate education activities outside the formal schooling (ECD, alternative education, flexible schooling, female education, adult literacy classes, etc.).” (MTR/TPR chapter 3.1)

The experience is however:

“The Review also showed that the participation of civil society organizations, NGOs and the private sector in LG planning and service delivery is weak...Social mobilization and communication have remained a weak component in BPEP II.”

The Joint Donor Review Mission (May 2000) commends the considerable progress to date by HMG in defining a role for NGOs and their involvement in partnership with the MOES in BPEP II. A workshop has been conducted with 40 NGOs and a number of recommendations have been made covering specific operational guidelines for involvement, as well as monitoring, supervision and reporting requirements, and a standard contract for use between DOE and NGOs/INGOs.

Zambia

Basic Education Sub Sector Investment Programme (BESSIP)

BESSIP specifies the roles of public and private sectors including NGOs in the provision of basic education. The targets for enrolment and learning achievement include the efforts of non-Government service providers. The private sector and NGOs are not represented on the Joint Steering Committee, but selected representatives are invited to participate in the twice-yearly reviews of the BESSIP programme, and in the case of Community Schools, joint programmes for training of teachers and other workshops are organised. Educational materials and grants sent to Government schools are also sent to some Community Schools, and some teachers in these schools are on Government payroll.

It should be mentioned that Norwegian Save the Children and Norwegian Church Aid are providing educational support to their partners in Zambia with 11 Mill. NOK in 1999, but channelled outside the Government supported sector programme. Norwegian Save the Children is working within the framework of BESSIP and is

supporting selected programme components in two districts. Norwegian Teacher Association is also assisting its local sister organisations with funds from NORAD in Oslo (ASN). As such Norway provides support to the education sector in Zambia through two channels.

HIV/AIDS was made a separate component of BESSIP in 2001 in order to fully integrate work with HIV/AIDS throughout the programme.

Malawi

Health Sector Programme

The basis for introducing a health sector programme in Malawi can be traced to the Malawi National Health Plan 1999-2004. The overall goal for this plan is: “To raise the level of health status of all Malawians” to be achieved through:

- Introduction of an Essential Health Care Package.
- Introduction of Sector Wide Approach.
- Decentralisation of health care management.

It is also important to notice that the Malawi PRSP document (April 2002) refers to the introduction of the essential health care package and SWAp as a strategy for poverty alleviation through the health sector.

A decision was taken in 1999 to introduce a health sector programme - confirmed in April 2002. This decision has been followed up through a comprehensive dialogue – both in the Ministry of Health and Population (MoHP) and between MoHP and the partners (donors and NGOs/CSOs). This has resulted in a comprehensive SWAp design process, which has just started and expected to be finalised by the end of this year. NORAD and DFID cover the costs of the design process. The design team are asked in the Mandate to discuss “cross cutting issues” like HIV/AIDS and gender. A health SWAp is expected to start in 2003.

MoHP has acknowledged the importance of involving CSOs in the preparation of the sector programme because they are important partners in the delivery of health services in the country. The organisations have participated in the discussion of the SWAp design. In addition, MoHP has asked Christian Health Association of Malawi (CHAM) to appoint resource persons to participate in the SWAp design, which indicate that CSOs are taken seriously.

In the MPRSP, it is mentioned that there has been inadequate support to and coordination with private sector providers, such as CHAM and certain NGOs.

It should also be mentioned that Norwegian Church Aid recently has opened an office in Malawi and expected to provide support to the health sector – and in particular HIV/AIDS. They will become an important partner to CHAM. NCA with support from NORAD will assist in strengthening the capacity of CHAM as part of the new health SWAp – acknowledging the fact that CHAM provides 35% of all health services in the country – in is particularly important in the rural areas.

UNICEF’s Health Sector Support Programme has also been supported by NORAD and aims at improving the health status of Malawian children and women through health system capacity building and empowerment (Programme Plan of Operation).

Local Government Reform Programme

This is an interesting example where an international NGO (OXFAM UK) takes active part in the local government reform programme – by addressing capacity and service needs at local level (OXFAM, Strategic Change Programme 2000). The Norwegian Embassy considers funding OXFAM for this project.

The project addresses service delivery and ways to improve efficiency, accountability and transparency by working simultaneously at the supply and demand side. Through working with local government the project will assist them through a combination of training and capacity building support to provide quality services, while at the same time working with local communities so that they begin to demand an accountable and transparent service by participating in their local governance.

The project will seek to change the practice whereby civil society is not consulted in a participatory manner on issues of local and national interest. Participation in Malawi has all too often been one of inviting attendees to workshops with one or two days workshops, no information in advance and no chance to actively engage – as was the case with the discussion of the PRSP.

The new project will:

- support a group of CSOs to look at the PRSP process and actively engage with the government, with a view to make a positive contribution,
- support the same group to monitor the progress of the PRSPO and to demand government accountability,
- to support local organisations who can carry out analysis of the government budget and expenditure, and make this information available for a wide sector of society, and lobby for changes if required

Uganda

Uganda Health Sector Strategic Plan

The Health Policy and Strategic Plan for Uganda recognise the private sector as a major partner in health care and service delivery.

Facility based private not for profit health care providers are organisations representing nearly 30 % of the health care facilities in Uganda. The majority (80%) belong to various religious denominations. The rest belongs to other humanitarian organisations. The catholic and protestant churches started health care services in the early colonial times, and the Uganda introduced early (1956) a system of Government “Grant-in-Aid” to voluntary health organisations, which later dwindled due to financial constraints. In 1997/98 government subsidies were reintroduced and increased to about 30% of recurrent costs.

A desk office has been established at MOH to coordinate the activities of the private sector. A working group has also developed a policy for Public Private Partnership (Policy for Partnership with Facility-Based Private Not-For Profit Health Providers). The objectives are to promote the recognition and value of the role and contribution of the private sector in health development, and define an institutional framework within which to coordinate, implement, monitor, evaluate and enrich the partnership.

The document is positively endorsing the need for the private health sector in Uganda and laying out principles for partnership instead of talking of regulation and control. At the national level, studies on the role of the private sector have been conducted and analysis is being finalised (Annual Health Sector Performance Report 2000/2001). The private health sector is divided in four categories: Private not for profit, Private health practitioners, Traditional and complimentary medicine practitioners, Informal sector.

The role of the Private Health Sector has been defined as:

- Providing priority services to communities within which they operate.
- Providing health services which are not prioritised within the minimum package, but are demanded by the population.
- Contributing towards policies development, staff training, planning, monitoring and evaluation as stakeholders and as part of civil society.
- Resource mobilisation for health care from households, organisations both local and international.
- Research, community and social mobilisation, advocacy and technical assistance.

In a Joint Review Mission the need to strengthen the process of building the partnership based on mutual trust and understanding is mentioned, and to review the impact of SWAp and central budget support on funding for national and international non-facility based PNFs.

Though the gap may be narrowing, participatory poverty assessments in Uganda have suggested that, where they have a choice, users have a strong preference for NGO health facilities. Though formal charges are higher, patients visiting an NGO facility face fewer uncertainties over illegal fees and over whether the facility will be open, staffed and with drugs available. They pay their staff less, yet appear to achieve higher utilisation and better quality services. Ironically, recent Government action to raise the salaries of public sector health staff have resulted in a skills drain from the NGO sector to Government facilities, where health staff arguably are able to achieve less.

NGO facilities are increasingly integrated within the public funded health system. An NGO facility will be delegated funds from GOU for their general operations and, in addition, some NGO facilities have been designated as the lead facility within their sub district, and will receive the PHC conditional grant funds-through the local authorities who administer the funds have in some cases proved reluctant to release them to NGOs.

There is an increased collaboration and participation of PNFs in the sector, and concerns of the PNFs increasingly receive government attention (Joint Review Mission 2001), but it is acknowledged that PPPH is a complex group with different interests

A recent review (Birungi et.al. 2001) concludes that Uganda has tried to evolve a policy based on consensus, but a framework for integration is still missing. The policy process has proved to be tortuous and the mix has been interpreted differently. The current policy inadequately addresses the institutional and legal issues that are apparently critical for deriving a sustainable public/private mix. It is now estimated

that 79% of curative care in Uganda is provided by the private sector. In addition, access to health care services is predominantly dependent on private spending, which accounts for 60% of the health care expenditure. Despite the significant role, played by the private sector, it remained isolated from the national planning process until recently.

The new policy is perceived as positive, but concern and fear have been raised by the private stakeholders, especially about the use of the word “integration” in the policy document, which carries signals about being swallowed up by government. It has also been argued that the issue of what is public and what is private must be clearly defined – making a clear distinction between private for profit and not for profit initiatives.

Ethiopia

Health Sector Development Programme (HSDP)

The Central Joint Steering Committee (CJSC) has a representative from the NGO community.

In the Health Sector Development Programme it is acknowledged that “initiatives towards greater private sector and NGO participation are constrained by an uncertain environment in which actors presently operating. Clearly policy statements suggest that the Government is expected to both monitor and facilitate the operations of NGOs and private providers in the sector. However, this is not considered a priority function for RHBs that are the prime responsible institutions for such functions. . . They are more concerned with Government delivery since Government service delivery is the basis on which officials are evaluated. delays in project development, reluctance to facilitate NGO endeavours appear to be tolerated, causing an unfavourable environment for NGO activities in the sector. Many of the challenges arise from a history of restriction on private enterprise in all sectors of the Ethiopian economy”.

The second joint review mission (1999) refers to important progress made by some regions involving NGOs into the HSDP. Southern Region has for example organised a two-day workshop, where all partners were invited to discuss the annual plan of action, to strengthen collaboration and coordinate efforts of all partners.

On the other hand, the Mission feels “*that much more attention should be given to find ways of effective collaboration between the public sector and the for-profit and not-for profit sector*”.

Norwegian Mission organisations have been involved in health work in Ethiopia for several decades. The NORAD Appraisal document is discussing the possibility and potential for utilising Norwegian resources as part of the health sector programme development, but we do not know the outcome of those discussions.

A policy on HIV/AIDS was developed in 1998 to provide an enabling environment for the prevention and control of HIV/AIDS in the country. In addition, a Strategic Framework for the National response to HIV/AIDS was developed to cover the period 2001-2005 – also incorporated in the Health Sector Development Program.

Education Sector Development Programme (ESDP)

Judging from the Ethiopian Government's central ESDP documents, the role of NGOs in education could have been strengthened. It is a matter of fact that many international and local NGOs are implementing education and training projects, and also that many of these projects potential could provide the formal schooling system with new insights and ideas. No NGOs were represented during the February 1998 mission work, but the level of interest of various NGOs was clearly demonstrated when the Education Discussion Group for Ethiopia convened a meeting to inform people about the ESDP development. One of the main concerns of these NGOs during the meeting seemed to be what roles they should play within the ESDP framework (Wirak 1998).

In the Norwegian Appropriation Document (1999) it is mentioned as a risk that the sector programme does not involve civil society. It is said that local NGOs have limited possibilities for activities in the areas of education.

In the Appraisal document (1998) NORAD is requested "*to follow the issue of community/NGO participation with special concern...NORAD should also make an effort to contribute to increased community and NGO participation by exploring possibilities for new/expanded Ethiopian-Norwegian cooperation through the NGO channel*" (Appraisal Report 1998).

Save the Children Norway is engaged in non-formal and basic education in Amhara Region with the goal of creating access to basic education for 12000 children with particular emphasis on girls.

Mozambique*Health Sector Reform Programme (HSRP)*

HSRP was one of the first World Bank Sector Investment Programmes in health based on a health policy. The health sector policy emphasises the transition of the role of MOH towards policy development, regulation, etc., and that implementation requires ownership and implementation by all segments of civil society under the leadership role of MOH (Hodne Steen 2000). However, the role the civil society has been blurred. In a document (Options for Dialogue and Action 1998), it is stated that "*if the public sector does not improve delivery performance, donors may seek alternative channels for their health funds, such as NGOs, churches, the private sector, and local community organisations*".

The more recent adopted "Health Sector Development Strategy" forms the basis for current efforts and processes towards establishing a Sector Wide Approach. In this strategy efficient public-private mix is emphasised, but the role of civil society is marginally discussed in programme and review documents. It seems that the health sector is still mainly defined as the public health sector.

A status report (June 2002) from the Embassy in Maputo states that "*Today the civil society is not visible in the central planning processes, and do not take place in the coordination for the development of SWAp. This has been pointed at in a number of GT-SWAp meetings as well as in the CCS. The Ministry has developed some sort of dialogue with some NGOs, but only on a sporadic basis and mostly related to NGOs*

as operators (i.e. in relation to the Global Health Fund discussion). Norway has advocated that there is a need to include representatives from NGOs and civil society in the various meeting points that are established. The Government is struggling with the idea, and cannot decide on how this should happen, who should be present, when, how many etc. It has been indicated that the best solution would be as a first initiative to invite some organisations to select a number of representatives.

At provincial level the presence of some NGOs are more visible, and at district and locality level there are a few associations and community based organisations. It is felt a need to look at how civil society could participate in the integrated planning process taking place (through MOZ 0005) and what could be the role of CS in this process – on the various levels and stages, planning and monitoring".

For other issues related to this we refer to the follow up note elaborated in regard to the study on support to the civil society.

Bangladesh

Primary Education Development Programme (PEDP)

We have not been able to review all basic documents for this programme, so the description is incomplete.

The major objectives of the programme are:

- a) Expansion of local-level institutional networks with a view to enhance efficiency of teacher training and academic supervision.
- b) Strengthen the National Academy for Primary Education.
- c) Improve quality of training of teachers and field-supervisors.
- d) Supply of free text books, learning materials to targeted groups.

There are several major NGOs in Bangladesh – also involved in education and this sector programme, but little information about the involvement of civil society in available documents. In the Revised Programme Implementation Plan it is clearly stated that the HPSP will look at the sector as a whole including NGOs and other agencies. NGOs currently play a significant role in reproductive services and are increasingly delivering primary health services with considerable collaboration at the community level. The successful implementation of the HPSP requires effective partnerships between government and NGOs. However, the programme does not specify the roles of either public or private sectors in achieving their targets.

One element of the programme is to develop public-private partnerships in a number of pilot areas. The aim is to develop commissioning community groups who will contract for ESP services from the public, NGO and service providers.

5.2. SWAps, CSOs and other Related Initiatives (PRSPs).

Poverty Reduction Strategy Processes (PRSPs) provide the broader framework for developing specific sector programmes. Civil society has also been more systematically involved in PRSP processes than in SWAps. In the PRSP Source Book (World Bank) participatory processes involving CSOs are clearly outlined. Hence, we have included a brief discussion of the involvement and participation of CSOs in

PRSPs. During the 1990s the World Bank talked increasingly about participation by civil society in national policy making – as part of the broader stated objectives of the Bank: national ownership, downward accountability, good governance, and improving the poverty focus of development cooperation.

The Bank's own definition of participation clearly states that it should permit genuine influence by poor people: "*Participation is the process through which stakeholders influence and share control over the priority setting, policy-making, resource allocations and access to public goods and services*" (See Christian Aid 2001).

In 1999 the World Bank and IMF formalised their approach to poverty and participation through the introduction of new lending instruments. Both organisations stated that they would place poverty reduction at the heart of their national programmes and debt relief efforts for the world's poorest countries. The Heavily Indebted Poor Countries (HIPC) process would ensure that debt relief funds were focused on poor people's needs. Each of the countries hoping to access debt relief and concessional loans would have to produce a Poverty Reduction Strategy Paper (PRSP) articulating how they intended to use these funds to target poverty.

The strategies were expected to be domestic, country-driven, results-oriented, comprehensive and long-term in perspective, and foster domestic and internal partnerships in line with the principles that underpin the Comprehensive Development Framework (CDF).

Each national strategy was to be coordinated by Government, but based on a broad participatory process involving a wide range of development actors. Civil society, private sector and the poor themselves were meant to fully participate in formulating the PRSPs. Never before had the involvement of civil society groups in national policy making been formally legitimised in this way, nor had it been so high profile.⁵ The PRSP process has been reviewed by both the World Bank itself and some NGOs (Christian AID 2001). The NGO review is by no surprise the most critical and concludes that "*the reality of participation process in PRSPs thus far has not lived up to the optimistic rhetoric*". An external consultant to DFID (SGTS and Associates 2001)" identified that "*In the majority of countries, participation by civil society in the PRSP has, as yet, been limited and superficial*". Even where space has been provided for civil society groups to voice their opinions, these have not had an impact on resulting policies. The main limitations of PRSPs are said to be:

⁵ Prior to the introduction of PRSPs in 1999 some progress had been made in opening up policy processes to civic actors through the Bank's "Country Assistance Strategies" (CAS) – and in particularly what has been called "Participatory CASs".

- *Rubber stamp “participation*

It is clear that some governments consider civil society participation to be an external condition, which they have to fulfil merely to satisfy donors. CSOs are not given sufficient time to prepare for meetings, and claim that they were invited to take part simply in order to legitimise the government’s process in the eyes of the World Bank. There is a fundamental difference between being invited to participate in the design of a poverty reduction strategy and simply being consulted on an already formulated strategy.

- *We invite your views, but not on everything....*

The issues on which civil society’s views are sought have been selective. CSOs are mainly invited to discuss social issues and not macro economic issues.

- *.... which leads to the same policy package*

If diverse groups in a broad range of countries are discussing the same policy issues, you would expect a variety of policies as a result, but the same patterns of World Bank policy prescriptions seem to be found in the first round of PRSPs. The impact of civil society has been very little.

- *Hurried processes*

The speed with which the full PRSPs have been developed has militated against meaningful participation particularly by civil society actors. Documents are often not produced in the national languages, invitations are sent out late, consultations have turned into information-sharing sessions, rather than permitting genuine influence by stakeholders.

The Bank’s internal review is far more positive in its findings: “...*there is a broad agreement among low-income countries, civil society organisations and their development partners that the objectives of the PRSP approach remain valid... and that there have been improvements over time in process and content...*” (The World Bank 2002). It continues with some caution: “*There is some evidence that the active involvement of civil society has influenced PRSP content, particularly in drawing attention to social exclusion, the impoverishing effects of poor governance, and specific policy issues, such as the elimination of school fees in Tanzania and health fees in Uganda*”. It is admitted that CSOs that were out of favour with the government, the private sector, trade unions, women’s groups and direct representatives of the poor had not always been fully involved in the PRSP process.

It is also stated that key cross cutting issues – such as gender, HIV/AIDS, good governance, and rural development – have been addressed to a varying extent across countries. The treatment of HIV/AIDS, which has grown from being a health issue to a serious challenge to development, has tended to be weak in most PRSPs, although some countries (e.g. Madagascar and Mozambique) are making good progress in developing poverty AIDS analyses.

6. NEXT STEPS

Second phase of this study will consist of four studies.⁶ They should be organised around key questions and the following are inputs to a mandate for second phase. We have also included findings from Chapter 4 and presented them as issues or hypotheses to be discussed under the relevant questions. They provide direction for the cases, and they cases could be used to discuss and possibly verify some of the initial findings from the desk study.

6.1. Purpose and Focus

The purpose of the country studies is:

- (a) To review the roles of civil society organisations in selected sector programmes – in particular in relation to roles played by CSO, analysis of opportunities and constraints, and results achieved.
- (b) Provide advice and recommendations to NORAD, Embassies and Norwegian NGO on how to improve the interaction between social sector SWAps and civil society.

The country studies will be used to discuss the relevance and validity of the issues and questions developed in Chapter 4 in this report. The entry point is the interface between national CSOs and sector programmes. Within this context we will also review the roles played and contributions made by Norwegian NGOs.

In countries where NORAD has undertaken a study on Norwegian support to Civil Society, the insights from these studies should be linked to the studies proposed here.

6.2. Questions for the Case Studies

Background

1. What are the characteristics of CSOs in the social sector in the respective countries and who are the key players?
2. Who are funding CSOs and what is the role of Norwegian organisations?
3. What are Government policies and practices vis-à-vis civil society?
4. What is the background for and scope of SWAps in the country?

Assessment of CSO Roles

(All the questions are followed by a number of leading assumptions emerging from the desk review. The case studies will discuss the relevance and validity of these assumptions.)

1. What is the level of involvement of CSOs in the formulation and implementation of SWAps in the country?

⁶ Two more case studies will be available through the other study carried out by LINS/DECO.

- There has been an increasing involvement of CSOs in SWAps, but originally the involvement was marginal and CSOs contributions were not recognised as important.
 - The new generation SWAps have moved towards a redefinition of the state – providing a framework for enabling interventions by a variety of actors.
 - Interactions between Government and CSOs is still limited and strained by mutual scepticism and reluctance.
 - Policies of stronger public/private partnerships are still more aspirational than providing clear and realistic guidelines.
2. What CSOs were asked to take part and why?
- Participation is first and foremost based on invitation from Government.
 - Controversial advocacy organisations tend not to be invited by the Government to discuss SWAps.
 - The basis on which involvement from CSOs take place is unclear.
3. What roles have CSOs played and how have they played those roles?
- (a) As contributors to policy discussion and formulation:
- The involvement of CSOs as contributors to policy discussion is on the increase, especially at national level.
 - Sectoral policy documents make limited reference to the involvement of civil society.
 - Policy formulation is still extremely centralised.
 - Consultations have tended to be strongest at the development stage of a SWAp and fade away once the programme gets underway.
 - CSOs lack the capacity and skill to take part in policy discussions.
 - There is limited capacity in Governments to interface with the private sector.
- (b) As advocates and lobbyists:
- Governments are uncomfortable with CSOs in their roles as advocates and watchdogs and reluctant to accept the legitimacy of an oppositional “voice”.
 - Civil society is fragmented with competing networks and umbrella organisations.
 - There is no common CSO voice and national networks are weak or absent.
- (c) As service deliverers (operators):
- CSOs are mainly being invited and involved in SWAps as service providers – sub contracted by national or district authorities.
 - Service delivery and rights based CSOs are perceived as antipodes while the relationships between service delivery and rights based programming remain unclear and underdefined.
 - CSOs are seen to have comparative advantages in providing services to marginalised and hard to reach groups in ways Government cannot.

- CSOs involved in service delivery have often higher legitimacy as lobbyists and impact on policy processes than CSOs only doing advocacy.
- (d) As monitors (watchdog) of rights and for particular interests:
- The Government is not willing to open up for systematic review and impact analysis of SWAps from field based CSOs.
 - The Government is not willing to invite to discussions or fund their own critics.
- (e) As innovators introducing new concepts and initiatives:
- There is little evidence that CSOs contribute to SWAps as innovators – introducing innovative concepts and initiatives.
- (f) As financiers:
- CSOs play a marginal role as financiers of SWAps.
 - CSOs are part of national sector policy, but funds do not flow through the Government budget.
 - CSOs are increasingly funded directly by the government through contractual arrangements.

Effects of the SWAps

4. To what extent and how are CSOs funded as part of the SWAp?
- The funding of CSOs through SWAps is limited.
 - International CSOs and bilateral donors remain the donors of national CSOs.
 - Local CSOs meet several barriers in accessing funds from the Government.
 - The Government wants to maintain control and dominate CSOs.
 - Cash strapped districts are reluctant to release funds for CSO activities.
5. Have SWAps supported or delayed ongoing decentralisation efforts in the country?
- Decentralisation have challenged the monopoly of a top-down Ministry approach and opened up for stronger CSO involvement.
 - CSO involvement has provided support for a multi-sectoral response.
 - Mostly national CSOs are involved in SWAps.
 - If district- and community based CSOs are involved in SWAps, it is the role as service providers.
6. Have Norwegian/international organisations been involved and how are they affected?
- Few Norwegian CSOs are involved in SWAps.
 - International NGOs are still the dominant technical and financial supporters of national CSOs.
 - There is no forum and few mechanism through which Norwegian CSOs can take part in SWAps.

- There has been a tendency in NORAD to view Norwegian NGOs mainly as service providers in relation to SWAps.
7. What are potential, promising and realistic approaches to strengthening the participation of civil society at local and national level in sector programmes?
- What are the potential roles of formal and informal groups?
 - Which groups/organisations have capacity and skills to a more active involvement?
 - What are the most relevant area of involvement?

6.3. Programmes and Countries for the Case Studies

The country studies should focus on the interaction between one SWAp and local CSOs. We suggest selecting two programmes in the health or education sectors from different countries⁷. The following are possible candidates:

- Health in Uganda, Malawi and Mozambique.
- Education in Nepal and Zambia.

⁷ The other study (DECO/LINS) could for instance do other programmes in one/two of the same countries + one or two more countries.

Annex 1: Mandat

UTREDNING AV SIVILT SAMFUNNS ROLLE I SEKTOR PROGRAMMER

1. BAKGRUNN

Denne utredningen kommer etter forespørsel fra Fagavdelingen i NORAD og er nært knyttet til Fagavdelingens øvrige arbeid med sektortilnærming og sektor programmer i norsk bistand.

Det er flere grunner til at denne utredningen er viktig:

- Økt støtte til sektor programmer fra NORAD side.
- De fleste sektor programmer har vært rettet mot styrking av staten/offentlige institusjoner, men liten/variererende involvering av privat sektor (sivilt samfunns organisasjoner og kommersielle tiltak).
- Økt veklegging av samhandling offentlig – privat setter alle parter overfor nye utfordringer.
- Få erfaringer og lite systematisert/dokumentert erfaring.
- Behov for innhenting av kunnskap og identifisering av problemstillinger + retningslinjer for framtidig satsing.

2. FORMÅL MED UTREDNINGEN

- a) Innhente og systematisere erfaringer om forholdet mellom sivil samfunn og sektor programmer (primært i norsk bistandssamarbeid).
- b) Avklare og definere aktuelle/relevante problemstillinger som krever NORAD's oppmerksomhet.
- c) Gi råd og anbefalinger til NORAD og norske organisasjoner om hvordan samhandlingen mellom sivil samfunn og sektor programmer kan styrkes og forbedres.

3. FASER OG AKTIVITETER

Det foreslås å gjennomføre utredningen i flere faser da det er behov for å avklare og avgrense oppgaven underveis.

3.1. Første fase: Innhente erfaringer og avklare problemstillinger

Denne fasen inneholder en desk studie og intervjuer av informanter i Norge.

(a) Innhente NORAD erfaringer

Hva sies det om sivil samfunns rolle og oppgaver i NORAD støttede sektor programmer?" Oppsummering av alle/et utvalg program dokumenter.

- Gjennomgang interne landprogram dokumenter.
- Intervjue NORAD informanter.

(b) Innhente internasjonale erfaringer

- Hvilke erfaringer har internasjonale donorer? Innhenting og oppsummering av dokumenter/rapporter.
- E-mail/telefon kontakt med et utvalg relevante donorer.

(c) Inhente erfaringene til norske organisasjoner

- Samle inn relevante rapporter.
- Intervjue informanter fra et utvalg organisasjoner.

(d) Avklare og definere problemstillinger

- Utarbeide et kort notat med problemstillinger og forslag til hvordan neste fase av utredningen kan gjennomføres.
- Avholde workshop med NORAD + utvalgte representanter fra organisasjonene for å diskutere det nevnte notatet og erfaringsmaterialet.

Produkter:

- Rapport med oppsummering av erfaring (NORAD, internasjonalt og norske organisasjoner).
- Notat om problemstillinger og videre arbeid.

3.2. Andre fase: Case studier og anbefalinger

Den konkrete utformingen av andre fase vil først foreligge som resultat av fase en, men kan for eksempel inneholde:

- Survey (e-mail) til alle/et utvalg Ambassader med spørsmål om hvilke organisasjoner som er involvert, i hvilket omfang, på hvilken måte osv.
- Gjennomføring av case studies i to til tre land.
- Mer inngående gjennomgang av interessante erfaringer fra internasjonale partnere.

4. GJENNOMFØRING OG TIDSRAMMER

Utredningen vil bli gjennomført av Stein-Erik Kruse ved Senter for Helse og Sosial Utvikling (HeSo) i nært samarbeid med Fagavdelingen og ASN i NORAD.

Første fase skal gjennomføres innen slutten av juni 2002.

NORAD skal være behjelpelig med å skaffe fram relevante rapporter og dokumenter fra egen organisasjon og i tillegg be om lignende informasjon fra internasjonale partnere. NORAD skal også informere norske organisasjoner om utredningen.

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Annex 4: International Findings

Mich Foster (2001) has analysed a number of SWAps from a poverty reduction perspective and included a summary of “*The Role of the Private Sector and NGOs*”.

Programme	Role of Private Sector and NGOs
Uganda Education Sector	The involvement of private sector at University level increased enrolments while releasing resources for primary education.
Cambodian Education Sector	NGOs represented on review, involved in training. Government is reviewing expanded NGO role in capacity building, monitoring and channelling of funds.
Zambian Education Sector	The private sector participates in joint reviews and in programmes for training of teachers. Both Govt. and Community Schools receive Govt. Grants, and some community schoolteachers are on Govt. pay roll.
South African Education Sector	NGOs are increasingly engaged in collaboration with the national and provincial DoEs, but their role is limited. Private sector role is greater at secondary and higher levels of education and focusing on clients who can pay.
Ethiopian Education Sector	NGOs feel alienated from the SWAp and have not been involved in the design or implementation of the programme.
Uganda Health Sector	Some Government Funding is available to enable NGOs to provide subsidised services on behalf of the Government.
Tanzanian Health Sector	Few NGO service providers, Govt. finance goes primarily to Govt. services, but Govt. is keen to develop private role in financing services through formal&community health insurance.
Mozambique Health Sector	Within a decentralised health service, the MOH contracts services from the NHS, NGOs, private, independent and mission services.
Bangladesh Health Sector	The sector is working on innovative approaches to commissioning private and NGO services.
Mali Health&Social Development	The policy is to increase participation of NGOs and private sector. Heavy focus on projects, many executed by NGOs.
Ghana Health Sector	The private non-profit sector has an important role in executing the health programme, especially in rural areas. Although capacity to engage in private sector is weak, it remains strong on the agenda.
Zambian Agricultural Sector	The programme places major emphasis on the role of the private sector and NGOs in the execution and monitoring of activities.
South African Water Services	Role of private sector is acknowledged.

Annex 5 : Norwegian Participation in SWAps and Budget Support

Country	Sector	NORAD's role
Tanzania	Budget support	Active in joint donor programme
	Education	Active in primary education SWAp
	Health	Active player in sector programme, but will be phased out.
	Roads	Active in coordination of donors
Mozambique	Budget support	Active in joint macro-finance support programme.
	Health	Active in planning of sector programme and co-financing with other donors.
	Energy	Active in donor coordination
Malawi	Budget support	Active in joint budget support programme and co-financing with other donors.
	Good governance	Active support to decentralisation programme.
	Health/ HIV/AIDS	Active in collaboration with other donors in preparing a sector programme. Discussion of joint MoU between donors and Government.
Uganda	Health	Takes part in funding of sector programme with SIDA.
	Budget support	Is discussed.
	Legal sector	Active in planning a coordinated sector programme with a joint funding mechanism.
	Energy	Active in planning of coordinated sector approach.
Zambia	Education	Active in donor group for primary education sector programme.
	Roads	Active in donor group for planning of sector programme.
Nepal	Education	Active in the preparation of a sector programme.
Bangladesh	Education	Review of the sector with other donors in relation to the development of sector support.
Vietnam	Financial management	Active in donor coordination with the aim to make a contribution to a joint Trust Fund through the World Bank.
East Timor	Budget support	Active participant in preparation of budget support 2002-2005.
Regional programmes	Environment/ energy	Participates through SIDA in ZACPLAN – regional programme with Nordic funding for the sustainable utilisation of water resources in Zambezi River. Active in donor coordination and preparation of several sub-programmes in the Nile Basin Initiative. Participates through the World Bank and SIDA in programmes for sustainable utilisation of resources in Lake Victoria Basin.

NORADs rapportserie

Year	Nr	Title	Type
00	1	NORAD's Good Governance and Anti-Corruption Action Plan 2000-2001	Position
01	1	Coordination of Budget support programmes	Discussion
01	2	Poverty Reduction Strategy Processes in Partner Countries	Position
01	3	Aids handlingsplan	Standpunkt
01	4	Aids Action Plan	Position
02	1	Study on Private sector Development: Summaries	Discussion
02	2	Study on Private sector in Bangladesh	Discussion
02	3	Study on Private sector in Malawi	Discussion
02	4	Study on Private sector in Mosambique	Discussion
02	5	Study on Private sector in Sri Lanka	Discussion
02	6	Study on Private sector in Tanzania	Discussion
02	7	Study on Private sector in Uganda	Discussion
02	8	Study on Private sector in Zambia	Discussion
02	9	Ownership and partnership: Does the new rhetoric solve the incentive problems in aid?	Discussion
02	10	Study of Future Norwegian Support to Civil Society in Mozambique	Discussion
02	11	Report of a study on the civil society in Uganda	Discussion
02	12	Private Sector Development in Albania	Discussion
02	13	Private Sector Development in Bosnia and Herzegovina	Discussion
02	14	Review of Christian Relief Network in development co-operation.	Discussion
02	15	Budsjettstøtte	Standpunkt
02	16	Direct budget support/	Position
02	17	Fattigdom og urbanisering	Standpunkt
02	18	Urbanisation	Position
02	19	Information and Communication Technology (ICT)	Position
03	1	Helse i utviklingssamarbeidet	Standpunkt
03	2	Principles for Delegated Co-operation in NORAD	Position
03	3	Building demand-led and pro-poor financial systems	Position
03	4	Study on Private sector Development in Nicaragua	Discussion
03	5	Study on Private sector Development and Prospects for Norwegian trade and investment interests in Nepal	Discussion
03	6	Study on Private sector Development and Prospects for Norwegian trade and investment interests in Vietnam	Discussion
03	7	Study on Norwegian Support to Civil Society in Uganda	Discussion
03	8	Tanzania: New aid modalities and donor harmonisation	Discussion
01	1	SWAps and Civil Society – The roles of Civil Society Organisations in Sector Programmes – Synthesis Report	Discussion
04	2	SWAps and Civil Society – The roles of Civil Society Organisations in Sector Programmes – Desk Study	Discussion
04	3	SWAps and Civil Society – The roles of Civil Society Organisations in Malawi's Health Sector Programme	Discussion
04	4	SWAps and Civil Society – The roles of Civil Society Organisations in Zambia's Basic Education Sub-Sector Investment Programme (BESSIP)	Discussion
04	5	SWAps and Civil Society – The roles of Civil Society Organisations in Uganda's Health Sector Programme	Discussion
04	6	SWAps and Civil Society – The roles of Civil Society Organisations in the Health Sector in Mozambique	Discussion

NORADs rapportserie består av to typer rapporter: *Standpunkt* uttrykker NORADs syn på et tema, mens *Diskusjon* er et faglig innspill, som ikke nødvendigvis uttrykker etatens vedtatte policy. NORAD's list of publications comprises two categories: *Position* is NORAD's official opinion, while *Discussion* is a forum for debate that not necessarily reflects NORAD's policy.



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