

Sand, Norway,
28 June 2006
Revised 12 July 2006

UN at country level: Experiences of a Regional Director

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To assist reform efforts, experiences from UN development assistance at regional and country levels might be useful. Though the experiences date to a large extent from the end of the 1990s and relate specifically to West and Central Africa, much remains relevant, though the relevance might not be the same for all regions. West and Central Africa is a region with particularly acute social and economic challenges.

Country variations

The number of UN agencies at country level is high in some countries, but not in all. There is considerable variation, depending on the region, the economic status of the country as well as political conditions. Nearly 2/3 of the UN Country Teams include ten agencies or less, while the rest have more. Country needs vary as well as government policies and aid flows. There are “donor darlings” with hundreds of donors of all kinds, including UN agencies, global funds, bilateral donors and NGOs, as well as “rejected recipients” where only a minimum of UN organisations as well as other donors are present. The challenge of cost-effective assistance to development, including coordination of aid, therefore presents itself differently in different countries. The challenges are generally the greatest in the poorest countries, where needs are the most acute, administrative systems often weak and aid flows wide-ranging in many cases, but not always.

Organisational variation

The UN system is not only fragmented, but also varied. At country level, there are specialised agencies, programs and funds. The World Bank and IMF formally belong to the UN system, but operate to a great extent independently.

Totally, there are a dozen or so specialised agencies, but many are highly focused (IAEA, ICAO, IMO, ITU, UPU, WIPO, WMO) and not represented at country level. Even those with a broad mandate (FAO, ILO, UNESCO, UNIDO and WHO) usually have limited presence in the field. Structures vary. Some agencies have regional offices located in the field, in the case of WHO with considerable autonomy. Agencies also have country representatives, but not necessarily very numerous and not in all countries. The specialised agencies are not primarily development organisations and generally have small budgets for operational activities (mainly technical assistance). Their tasks are first of all of a global character: setting standards, monitoring implementation and

promoting necessary action. UNAIDS has a special role, above all doing advocacy, monitoring and coordination with relatively few staff at country level. The World Bank and IMF are highly centralised, with small country offices, though the World Bank during recent years has pursued a process of decentralisation.

The programs and funds have the largest country presence, particularly UNDP and UNICEF and to a certain extent WFP and UNFPA (usually in the UNDP office). In crisis situations UNHCR plays an important role. Collaboration and coordination among the “founding members” of the UN Development Group (UNDP, UNICEF, UNFPA, WFP) have improved in a marked way during the last decade and the Resident Coordinator System at country level has been strengthened. In addition, membership of the undg has grown to 25 plus five observers, among others the World Bank.

Effective aid?

Reflecting upon activities supported by UNICEF during the last part of the 1990s, the experience was that it was possible to provide meaningful assistance under precarious conditions, even if it was not without problems. Recipient governments as well as representatives of the civil society showed considerable trust in the organisation. Dialogue with the authorities was usually frank and constructive, though conflicts could occur when governments did not adhere to basic principles or procedures (funds were misused or not accounted for, for example, or agreed-upon priorities were overruled for personal political reasons). It was sometimes necessary to find compromises between different concerns in the choice of activities to be implemented, for example when the government wanted to give priority to districts or groups where needs were not the greatest, but solutions were only accepted if they were in accordance with priority objectives. In some cases, UNICEF refused to assist with government-supported projects, such as big hospitals for the well-to-do in capitals instead of primary health care for rural populations.

Generally, supported interventions within health and education formed an integrated part of national strategies; UNICEF providing funds, technical assistance and supplies for government execution. Activities that were supported, were clearly targeted, were mostly implemented in close collaboration with other donors and local partners (more than often generally realised, though not always enough) and usually had an impact, though at times it could have been greater. Many interventions aimed at solving acute crises or health problems. But revitalisation of primary health care and education services focused on long-term building of capacities and institutions. Here notable progress was achieved in the coverage and quality of services, but sustainability in the long run was often uncertain, due among others to the financing requirements. Particularly in rural areas a continued presence of qualified personnel presented special problems. Regarding the rights of women and children, UNICEF had a clear position, criticising the authorities when necessary. If this was done publicly, it created tensions in some cases. UNICEF could also take action to supplement government efforts, protect and assist vulnerable groups and support NGOs working to improve the situation of women and children.

Obstacles

Problems had first of all to do with funding:
 - Needs in the areas of health and education were extremely pressing in most countries in the region, but generally, there was an agonizing dearth of money. Though

governments, the private sector and the public at large generally appreciate the efforts of UNICEF, it was often difficult to obtain even modest donor contributions for high priority activities. In the course of the 1990s, allocations to the work supported by UNICEF in the areas of health and water were substantially reduced (and allocations from other donors did not compensate for the reductions until funds started coming in for the polio campaign and other immunisation efforts). At the same time, funds for education and for groups in need of special protection increased.

- The way funds were allocated, also created problems. UNICEF general resources were reliable (though limited) and distributed according to children's needs. Supplementary funding (funds in trust), on the other hand, often required considerable mobilisation efforts on the part of country representatives and others and the results were unpredictable. Contributions would come – or not come and the amounts and conditions varied. Some countries had great problems mobilising resources even for basic health and education services. Others had goodwill, but had to manage numerous donors with different objectives and conditionalities, including different reporting requirements. It was not always possible to understand why funds were or were not allocated – political and budgetary considerations in donor countries often appeared to be more important than the needs on the ground, the success of interventions or the consequences of a lack of funds. Thus, important social initiatives were put on ice because financing did not materialise, or they were suddenly interrupted because donors changed their minds. There is good reason to consider closely the criteria, stability and time perspectives of donor contributions to obtain expected results.

- Country programs were negotiated and regularly reviewed with the government, often with the participation of a number of officials from different ministries, NGO representatives etc. The processes were time consuming (sometimes excessively so), but ensured transparency, participation of different interests as well as country ownership. Implementation problems nevertheless occurred due to limited administrative capacity, centrally as well as locally, insufficient infrastructure and lack of qualified personnel, especially in rural areas. Difficult balances had to be struck between a reasonable progression and local participation, confidence in the authorities and the monitoring of activities and funds, including reporting.

Aid coordination

Coordination of development activities could take place at different levels. Most important was the role of the government, determining policies and priority interventions, executing programs and monitoring the implementation of activities. Where governments strongly emphasized the coordination of aid and managed to follow up in an effective way, the need for coordination measures at other levels became less important. However, governments differed, not only with regards to policies and priorities, but also decision-making processes and working methods, including coordination, resources and management capacity. Some governments were extremely centralised around the Head of State or Government, giving ministers a limited role. Others worked more as a team or left ministers to deal with their respective sectors more or less on their own. Donor coordination could be welcomed to reduce administrative burdens, but also be perceived as reducing alternatives or putting (undue) pressure on the government. Problems arose above all where ministers were weak and uncoordinated at the same time as administrations were lacking in efficiency. Here the challenge could be to help governments achieve a minimum of coordination regarding the inputs from various donors.

In relation to the UN system, governments requested different inputs from different agencies. For various reasons they sometimes accepted or preferred to collaborate with some parts of the UN, but not others. Too rigid internal coordination could then limit the possibilities of the UN to provide assistance. With increased collaboration among UN agencies the flexibility and adaptability of a manifold system to various country situations need to be maintained as much as possible, so the system can accommodate differing needs in different settings.

Increased UN coordination has been taking place during the last decade on different levels. To reduce costs, efforts have been made to harmonise and rationalise support systems and administrative services and in particular establish common UN premises at country level. In some cases, considerable efficiency gains were made. In others, efforts were hampered by unfavourable conditions. The acquisition of common premises could, for example, entail an increase instead of reduction in expenditures due to more costly office facilities.

In governing boards, donors often required that the UN at country level should “speak with one voice”. But it remained unclear what “one voice” was supposed to mean? What kind of messages should be transmitted in this way and under which circumstances? Given that the different UN agencies deal with different matters, it seemed inexpedient that one person should represent them all. The Resident Coordinator could not be an expert in all areas and might not be the best spokesperson in all situations. And how should UN messages related to different issues and expressed in different contexts be determined, in particular if views and competence within the local UN team varied? Some Resident Coordinators collaborated with colleagues in a flexible way, letting them play the first violin in their respective areas as a matter of course. Conflicts arose, however, when he/she tried to monopolise contacts with government, present positions that were not agreed upon within the UN team, or downplay vital concerns of various agencies. For UNICEF, a lack of commitment to women’s and children’s issues on the part of the Resident Coordinator was particularly sensitive. The question arose why a special organisation with an appointed Resident Coordinator actually was needed to ensure UN coordination and representation at country level? The UN team in a country could form a collective leadership, with an elected leader if necessary, and be represented by the representatives of different agencies in contacts with the government and other partners according to their mandates and the issues involved.

In some situations a common “UN position” was evidently required, in connection with sensitive political questions, for example, emergency situations, security or other system-wide issues. Here collaboration usually was painless, though UNICEF and UNDP, for example, could have differing views at times regarding modalities for the transfer of funds to governments or the need for special security measures. Regarding sectoral or thematic policies and interventions, however, the mandates as well as the areas of interest and forms of assistance of the different UN organisations varied so much that system-wide UN coordination was of little value. At the same time, coordination not only with relevant ministries and UN agencies, but also the World Bank, bilateral donors and influential NGOs within each sector was extremely important and useful in many cases. Sector collaboration could be targeted and efficient, clarifying sector policies and strategies, improving interventions and activities and obtaining synergetic effects. In connection with the revitalisation of primary health care, for example, governments collaborated closely with UNICEF, the World Bank and WHO, in addition to bilateral donors: the Bank funded the rehabilitation of premises,

while UNICEF trained personnel and provided supplies of essential drugs according to WHO guidelines.

Given the complexity of development issues and their political character, it is not surprising that views on priorities and strategies sometimes differed. There were disagreements regarding sectoral issues of various kinds: some important and some of lesser importance, some creating problems for governments, while others contributed to better policies and practices. Some differences were sorted out at local level, while others required decisions at regional or global levels. At times disagreements arose between UN agencies, as when UNICEF (and the World Bank) gave priority to the building of health systems, while WHO placed greater emphasis on vertical health campaigns. But there were also divergent views between UN agencies and other donors, for example when UNICEF and the Carter Centre disagreed on the strategy to be followed in the final phases of the eradication of Guinea worm. Most important were the differences between UN agencies on one hand and IMF and the World Bank on the other with regards to macroeconomic and social policies. But the participation of UN agencies in country dialogues related to these questions was usually very limited. In some cases, UNICEF provided information to be used by the government in discussions with IMF or the Bank or advised governments about actions to avoid problems inherent in IMF/World Bank recommended policies. Though a broader consensus gradually has been achieved at global level regarding development goals, the challenge remains of policies and programs suitable for different countries to achieve the goals.

Considerable efforts were made to harmonise procedures for programming, activities, monitoring and reporting of different UN agencies. But not only the UN, also donor governments (in their bilateral as well as multilateral aid), various global funds and in some cases even NGOs need to be brought into these efforts to rationalize processes and procedures in the aid community as a whole. Here the OECD/DAC has an important role to play in collaboration with the UN. Procedures need to be simplified in many cases, requiring less administrative time and effort from recipient governments and being better adjusted to recipient country realities. Also financial arrangements, including travel costs and per diem for participants in local activities, should be harmonised within the donor community, so all donors apply the same rules. The proliferation of global funds of different kinds during recent years, among others in the area of health, bypassing established UN agencies and creating considerable additional transaction costs for recipient countries, requires special consideration. Donors in particular should consider how the number can be reduced.

The UN Development Assistance Framework (UNDAF) provides a common framework for assistance, as the PRSPs and SWAPs also do in different ways. Though they have weaknesses, among others increasing the bureaucratic workload, the efforts are important to make development activities better targeted and more complementary for the country as a whole. But common frameworks must not replace the programs particularly of well-established UN agencies created to promote important (and in some cases neglected) development concerns. The programs of the UN agencies should fit into the common frameworks (conforming to national policies and priorities), but the agencies need to maintain identity and responsibility to ensure the focus, quality and effectiveness of interventions and a clear accountability for the use of funds. With a single, general program and budget for the whole development system, the UN risks not only losing accountability, but also visibility and focus and thus attract less funds, funds both donor governments and the public wish to channel to specific purposes like women and children, health and education, food security, environmental issues etc. Particularly weak groups and sensitive issues risk losing out with such arrangements. To achieve the

Millennium Goals, however, it is important among others to strengthen organisations such as UNICEF for the benefit of children and improve the gender architecture of the UN system as a whole to ensure effective progress for women.