Public Administration and the Millennium Development Goals: Leadership and Policy imperatives

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Public administration has defied a precise universally accepted definition. One of my admired public administration scholars, Prof. Ferrel Hardy in his latest book[^1] comments that “despite several decades of development, consensus about the scope of public administration is still lacking and the field is described as featuring heterodoxy rather than orthodoxy”. This however does not in any way diminish the importance of Public Administration in the lives of people. On the contrary, public administration has grown in importance to include large chunks of fringes of politics, private sector management values such as effectiveness, efficiency, economy, value for money, and client orientation; and the wider concept of governance. While earlier scholars of public administration had searched to restrict the boundaries of the field and limited it to the function of policy execution of government, it has been gradually accepted that the core of public administration is both politics and public policy. In this sense then public administration can be defined as the formulation, implementation, evaluation, and modification of public policy.” The point here is not to revisit the search for a precise definition of public administration. It is rather to point out that because of its pervasive nature, public administration is critical in the implementation of the International Development Agenda including the Millennium Development Goals (MDGs). It appears that the framers of the MDGs did not fully take into account the fact that the social and political context within which public administration is located, its role and capacity always determines the way public policies and strategies are formulated, debated, decided, legitimized implemented, and their effectiveness, especially in service delivery, attained and evaluated.

The Millennium Development Goals (MDGs)

In September 2000, at the United Nations Millennium Summit, world leaders agreed to eight development goals to be achieved by 2015. The first seven goals focus on (i) eradicating extreme poverty and hunger; (ii) achieving universal primary education; (iii) promoting gender equality and empowering women; (iv) reducing child mortality; (v) improving maternal health; (vi) combating HIV/AIDS, malaria and other diseases; and (vii) ensuring environmental sustainability. The eighth goal calls for the creation of a global partnership for development, with targets for aid, trade, and debt relief.

The United Nations provided an institutional and human resource environment and leadership capacities that enabled the world’s leaders to formulate, discuss and agree on the Goals. It can be said in this regard that the International Public Administration system disposed of sufficient capacity to initiate and legislate the MDGs. The assumption then was that Public Administration institutional and human resources capacities at national levels in different member States were

available in adequate quantities and qualities to integrate the MDGs into national development policies and strategies and successfully implement them. But now, with just less than five years remaining to get to the target of 2015 when the MDGs were expected to be achieved, various evaluations on levels of achievements of MDGs indicate that many countries, especially the Least Developed ones, those with fragile States, those affected by violent conflict, crisis and or disaster will not achieve the MDGs as targeted. It is observed that countries with weak Public Administration institutional and human resources capacities are the most likely to miss by far the target of 2015 to achieve the MDGs. “We are concerned about achievement of the MDGs in countries affected by poor governance, conflict, armed violence and insecurity, where progress to date has been slowest. The MDG figures speak for themselves. Conflict-affected and fragile states are furthest away from achieving the MDGs. For example, MDG 1 on eradicating extreme poverty and hunger is 90% off course, while MDG 5 on improving maternal health is 86% off course in conflict-affected and fragile settings”².

While Member States set MDG targets in terms of what is to be achieved there were no targets set regarding the process and capacities that would be necessary to meet the MDGs targets. It is now acknowledged that there are prerequisites for achieving MDGs and one of the prerequisites is a sound capable public administration in terms of both institutional and human resources capacity. Where public administration institutional, leadership and human resources capacities are inadequate, this has translated into insufficiency or even absence of policies, strategies and weak implementation at national levels that has lead to little achievement of MDGs. Therefore putting the achievement of MDGs back on track will entail, among other things, investing heavily in strengthening the institutional, leadership and human resource capacities in the public sector. This calls for investment in strengthening institutional and human capacities of public administration. Central government agencies responsible for planning, policy and strategy formulation, legislatures and local councils that put in place legal frameworks that guide pursuing MDGs including resource allocation, service delivery Ministries and agencies that directly deliver MDG-related services to the population, control agencies that ensure ethical, transparent, accountable, efficient and effective use of resources etc… must all be strengthened in terms of their institutional set up, leadership and capability of human resources to support the efforts of achieving the MDGs.

**Leadership, policy and strategy:**

The tendency has been to blame inadequate achievement of MDGs to inadequacy of resources, especially financial. However, there is evidence that illustrates that without policy and strategy well thought out and sustained in implementation, little can be achieved even when financial resources are available. This makes public administration as a policy and strategy design sphere

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² See International Network on Conflict and Fragility (INCAF) OECD: “Accelerating Progress towards the MDGs in Countries affected by poor Governance, Conflict, Armed Violence and Insecurity” (draft 2 April 2010)
of public governance very critical in achieving MDGs. Likewise, there is evidence showing that with resolve from top leadership in a given country on issues of MDGs, a lot can be achieved even in contexts of limited funding. Below we select a number of cases to illustrate this point.

Rwanda and the Empowerment of Women: MDG 3: Promote Gender Equality and Empower Women:

Many indicators underline the progress that has been made in the field of gender equality as a result of the different policies that were implemented by the Rwandan government. For examples, within the education field, gender parity in literacy rate and gender enrolment parity at the primary level have been achieved. Within the public/political arena, government set a target of 30% of women among the representatives of the parliament and among all decision-making levels. As a result, to date, Rwanda women hold 56% of the seats in Rwanda's Parliament, the highest percentage of women lawmakers in the world. Consequently, the number of woman in politics and decision making sharply increased over the last decade. Such achievements are more a consequence of leadership determination; policy and strategic outlook than it is of availability of funding. President Kagame’s recent words emphasize this: "I want to challenge us all - as leaders and people of influence - to find new and innovative ways to sustain and accelerate progress towards gender equality and women's empowerment around the world. In doing this, we should harness the potential of our young people, who are not constrained by gender biases, of new technologies for social education and of partnerships across governments, civil society and the private sector." In her statement during the "Role of Leadership in Promoting Gender Equality and Women's Empowerment." On 17th May 2010 in Kigali, the Deputy Secretary General of the United Nations emphasized the role of leadership and vision in the achievement of MDGs. “Your achievements show the remarkable progress that can be made with clear vision and dedication, in a relatively short period of time” she praised Kagame’s leadership.

Uganda’s leadership and MDG 6: Combating HIV/AIDS, Malaria and other diseases;

Uganda’s relative success in combating HIV/AIDS in the country since around 1986 in a way illustrates the importance of leadership resolve, policy and focused strategy in achieving MDGs. What is equally interesting in this case is that the success was a result of a combination of leadership efforts in Government, Civil society and private sector. It is a typical example of how successful shared governance can be in confronting complex challenges facing society. Although combating HIV/AIDS requires a lot of funding especially to provide testing, and drugs, the initial fight against the Epidemic was more of a leadership resolve than availability of funds. And the achievements registered were strongly premised on the initial efforts of educating the public, open dialogue, and the ABC approach (abstinence, being faithful to one’s partner, and using

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3 Paul Kagame President of the Republic of Rwanda speaking at the International Conference on the "Role of Leadership in Promoting Gender Equality and Women's Empowerment." On 17th May 2010.
condoms). The leadership determination from President Museveni has now translated into policies and strategies which require a lot of funds. The phase of the Ugandan HIV epidemic running from 1992 to 2000 saw a fall in HIV prevalence from the peak of 15% among all adults in 1991 to around 5% in 2001.\(^4\) Free antiretroviral drugs have been available in Uganda since 2004 and this requires big funding which has come from government and donors and development partners including the World Bank. However, without the leadership, policy, and strategy environment provided by Uganda’s Public Administration it is doubtful that the country would have witnessed the same levels of success. The public administration institutional set up to sustain the fight against HIV/AIDS has now become a prominent future of Uganda’s fight as much as the leadership resolve was prominent during the initial stages of the fight. For example, in August 2002 Uganda was one of the first parliaments to create a specific parliamentary committee on HIV/AIDS. This committee has been instrumental in the development of strong HIV/AIDS legislation and policies in the country. The Chair of this committee has become a leader and role model for other parliamentarians and is involved in a number of parliamentary programs to raise awareness about the role of parliament in the fight against HIV/AIDS. The Ugandan Parliamentary Committee on HIV/AIDS is mandated to: (i) Coordinate HIV/AIDS activities of Parliament and provide a link between Parliament with the Uganda Aids Commission in combating the epidemic in Uganda; (ii) Scrutinize the HIV/AIDS policies and monitor and evaluate activities of central and local government and other bodies aimed at combating HIV/AIDS; (iii) Examine and make recommendations on relevant Bills and other matters relating to HIV/AIDS; and (iv) In cooperation with the Uganda Aids Commission and the Ministry responsible for health, initiate relevant Bills and motions required for combating the epidemic in Uganda. This institutionalization is having an influence on the fight. For example, the Ugandan HIV committee has conducted numerous field investigations in Uganda to determine the impact of the disease on various communities. In 2006, the chair of the committee tabled a report in parliament that revealed that 60% of new HIV infections in Uganda were reported among married couples. The report revealed that the disease was shifting from the young unmarried to the older married individuals. The committee’s report also reiterated the need for vigilance and leadership from politicians. Since its creation in 2002, the committee has been delivering a status report on HIV/AIDS in the country to the parliament in plenary. Clearly the Uganda case illustrates how public administration and leadership should be put at the center of the achievement of MDGs.

Tanzania’ Free and compulsory primary education MDG2: achieving universal primary education

There are reports indicating that by 1977, Tanzania had achieved UPE by far well before world leaders declared the MDG2: achieving universal primary education in September 2000. This was not because Tanzania was a rich country but because Tanzania’s leadership under Julius Nyerere had realized that they needed to provide education for the country’s development and self-reliance. Tanzania is one of the few African countries that can claim to have a successful education system in its history. The policy of government, the resolve of the leadership of Nyerere and the willingness of the people of Tanzania to break with deprivation (in education) ensured initial success. In the 1970s the government faced a big challenge of how to provide access to primary education for every child. After the Musoma resolution in 1974 the
government set out to implement Universal Primary Education (UPE). Even if Tanzania was among the poorest countries in Africa, it managed this when many countries that were relatively richer were claiming to be incapable of financing the universal primary education for their children. Again Tanzania’s case illustrates that even if money is important to implement Universal Primary Education, it is the public administration leadership and the policies they decide to implement that are paramount in ensuring success.

**President Luiz Inácio’s Fome Zero ("Zero Hunger") and MDG1: Eradicate Extreme Poverty and Hunger: A National Effort to Eliminate Hunger in Brazil:**

The fome Zero (‘Zero Hunger’) experience in Brazil is another case that illustrates how critical leadership commitment and public Administration policy and strategy at national and community levels are critical in the achievement of the Millennium Development Goals. Launched by President Luiz Inácio of Brazil in January 2003, the Fome Zero, is quite an ambitious program which directly addresses MDG1, "Eradicate extreme poverty and hunger". It is one of the highest priorities of the Government of Brazil4.

The Fome Zero program’s aim stated simply is to give each Brazilian the opportunity to have at least three meals a day. It is not a simple challenge given that at the time the program was launched about a quarter of Brazil’s 170 million people were living bellow poverty line. Therefore the program had to provide three meals per day for about 11 families. And this is just addressing the immediate needs of those who go hungry. To this one must add long term needs for sustainability and ensuring that the people of Brazil are able to feed themselves without depending on handout from government. Within the Ministry of Social Development the Government put two policy measures: the first one is a policy that aims to increase access to nourishment for those living below the poverty line, and the second is constituted by long term policies addressing structural issues to ensure that the country’s population has access to nourishment on a sustainable basis and each family can afford access to food.

The Fome Zero has a number of measures including community kitchens to serve the towns residents, especially the children. Civil society organizations including churches have been mobilized to participate in the program by for example operating the community kitchens and volunteering food stuffs and labour. The government contributes some funding. Fome Zero's main emergency component is a monthly income transfer program for poor families, known as Bolsa Família ("Family Grant"). The program currently covers 3.8 million households and receives the largest chunk of Fome Zero resources.

The longer-term measures against extreme poverty and hunger in Brazil cover a wide spectrum of social programs including agrarian reform, incentives for family agriculture, a fairer social welfare system, and job creation.

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4 See Perspectives in Health - The magazine of the Pan American Health Organization Volume 9, Number 2, 2004
Although there are mixed feelings about the success of the programme, consensus is on one critical aspect of it, and that is: it has reduced hunger and if sustained stands chances of eradicating it. The major questions about its success concern sustainability and long term eradication of poverty.

The point here is not to engage in the debate on whether the program is succeeding or not, but to highlight the fact that government leadership and public administration policy came to initiate and galvanize efforts for the achievement of MDG 1. Without the leadership commitment and the policy put in place the efforts of the civil society, however, willing would have been inadequate to address such a huge problem.

**Conclusion:**

As the deadline for achieving the MDGs by 2015 approaches there are efforts trying to (i) speed up the implementation, and (ii) assess and understand the factors that may explain missing the target. It is becoming clear though that many countries in the developing world, especially the least developed ones and those in fragile situations including conflict and post conflict countries, will miss the target. Most of these are the same countries that have institutional, human and structural weaknesses in their public administration systems which stand in their way to planning and implementation of strategies to achieve MDGs. For sure at the same time they are the same countries that have inadequate financial and material resources to support implementation. The conclusion of this presentation is that with or without financial and material resources, countries that lack the requisite public administration and leadership, human, and institutional capacities will not achieve the MDGs even if the deadline is extended! The cases we sighted above prove that with public administration and leadership commitment and determination, plans and strategies will be put in place to implement the MDGs and implementation will be ensured even in situations of inadequate financial and material resources.

There seems to have been a shortfall at the initial stage of planning, discussing and agreeing the MDGs in September 2000. The targets were set in terms of what was to be achieved. They were not set in terms of how or by whom they were to be achieved. For example concerning MDG2 of ensuring that by 2015, children and girls alike will be able to complete a full course of primary schooling, the indicators include enrolment ratio in primary education, proportion of pupils starting grade one who reach grade five, and literacy rate of 15-24 year olds. These are targets of what is to be achieved. There should have been targets of how it will be achieved which would have included the ratio of pupils per teacher, or distance covered by children going to school, or government policy and strategy on primary education. This would have forced governments to immediately start planning how to achieve the Universal primary education. It would have forced development partners and donors to think of what to do to facilitate the achievement of Universal primary education instead of simply giving money. As it turns out many countries are still figuring out how to achieve MDG 2. Weak governments and uncommitted leaders do not achieve levels of service provision that can ensure the achievement
of MDGs. Efforts need to be put on strengthening capacities of governments both human and institutional to enable them plan and implement strategies for the achievement of MDGS. Such strategies would include how to create and operate partnerships with Civil Society and Private Sector organizations in the pursuit of the MDGs.