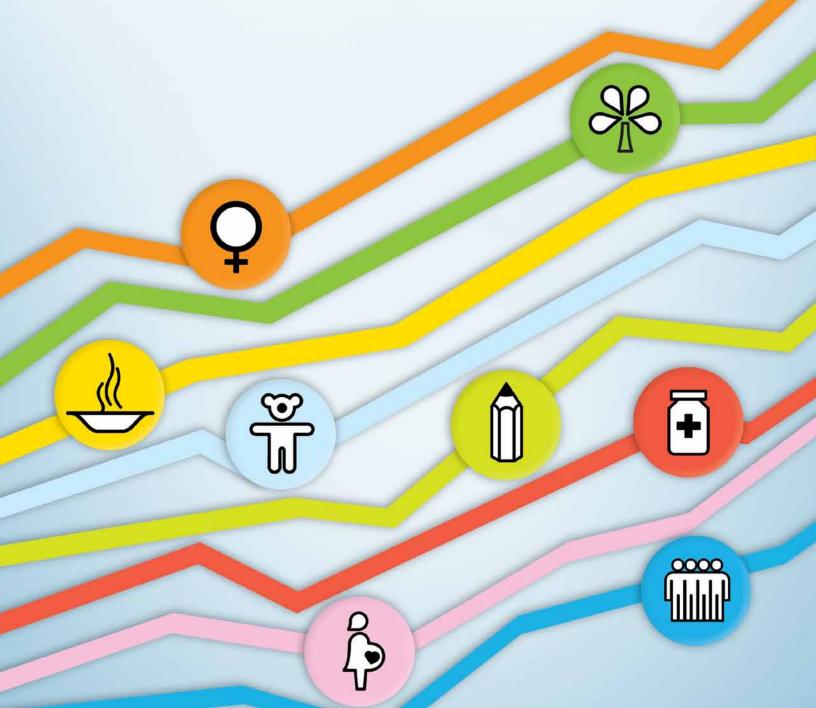


MDG ACCELERATION FRAMEWORK



MDG ACCELERATION FRAMEWORK

November 2011

Pursuant to the recommendation of the UNDG Meeting held on 6 October 2010, the MDG Acceleration Framework was submitted and received electronic endorsement as a living document by the UN agencies in December 2010. This version of the MDG Acceleration Framework benefited from the guidance and technical expertise provided through the members of the UNDG MDG Task Force during 2010. UN member agencies of the Task Force include FAO, ILO, OHCHR, UNAIDS, UNDESA, UNDP, UNEP, UNESCO, UNCHR, UNFPA, UNICEF, UNIDO, UNIFEM, WFP, UN Regional Commissions, as well as the Millennium Campaign, the Office of the Secretary-General and DOCO. Observer members include the World Bank and the UN Non-Governmental Liaison Service (UN-NGLS).

MDG Acceleration Framework

November 2011

The United Nations Development Group (UNDG) unites the 32 UN funds*, programmes, agencies, departments, and offices that play a role in development. Our common objective is to deliver more coherent, effective and efficient support to countries seeking to attain internationally agreed development goals, including the Millennium Development Goals.

* The list of UNDG members are: United Nations Development Programme (UNDP), United Nations Children's Fund (UNICEF), United Nations Population Fund (UNFPA), World Food Programme (WFP), Office of the High Commissioner for Human Rights (OHCHR), United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), United Nations Office for Project Services (UNOPS), Joint United Nations Programme on HIV/AIDS (UNAIDS), United Nations Human Settlements Programme (UN HABITAT), United Nations Office on Drugs and Crime (UNODC), World Health Organization (WHO), Department of Economic and Social Affairs (DESA), International Fund for Agricultural Development (IFAD), United Nations Conference on Trade and Development (UNCTAD), United Nations Educational, Scientific and Cultural Organization (UNESCO), Food and Agriculture Organization of the United Nations (FAO), United Nations Industrial Development Organization (UNIDO), International Labour Organization (ILO), United Nations Department of Public Information (UNDPI), Regional Commissions (ECA, ECE, ECLAC, ESCAP, ESCWA), Office of the High Representative for the Least Developed Countries Landlocked Developing Countries & Small Island Developing Countries (OHRLLS), Special Representative of the Secretary-General for Children and Armed Conflict (SRSG/CAC), United Nations Environment Programme (UNEP), United Nations High Commissioner for Refugees (UNHCR), Office of USG -Special Advisor on Africa (OSAA), United Nations World Tourism Organization (UNWTO), World Meteorological Organization (WMO), and International Telecommunications Union (ITU). Observer members include: World Bank, United Nations Fund for International Partnerships (UNFIP), Office for the Coordination of Humanitarian Affairs (OCHA), Spokesman for the Secretary-General (OSG), and the Office of the Deputy Secretary General (ODSG).

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List of Acronyms and Abbreviations

AWP	Annual Work Plan		
CAP	Country Action Plan		
CAS	Country Analysis Sheet		
CCA	Common Country Assessment		
СРАР	Country Programme Action Plan		
CSO	Civil Society Organization		
DDR	Disarmament, Demobilization, and Reintegration		
GDP	Gross Domestic Product		
IAWG	Inter-Agency Working Group		
ICT	Information and Communication Technology		
IGO	Inter-Governmental Organization		
LAD	Local Area Development		
LDC	Least Developed Country		
LIC	Low-Income Country		
MAF	MDG Acceleration Framework		
MAMS	Maquette for MDG Simulations		
MDGs	Millennium Development Goals		
MTEF	Medium-Term Expenditure Framework		
NDP	National Development Plan		
NDS	National Development Strategy		
NGO	Non-Governmental Organization		
ODA	Official Development Assistance		
PEFA	Public Expenditure and Financial Accountability		
PRS	Poverty Reduction Strategy		
PRSP	Poverty Reduction Strategy Paper		
RBM	Results-Based Management		
SWAP	Sector-Wide Approach		
UN	United Nations		
UNCT	United Nations Country Team		
UNDAF	United Nations Development Assistance Framework		
UNDG	United Nations Development Group		
UNRC	United Nations Resident Coordinator		

EXECUTIVE SUMMARY

During 2010, the world undertook an extensive review of progress toward the Millennium Development Goals (MDGs), the eight development objectives that countries agreed to achieve by 2015. While accomplishments abound (e.g., some 1.6 billion people have gained access to safe drinking water since 1990; under-five child mortality decreased from 12.6 million annually in 1990 to 9 million in 2007; in the developing countries, enrolment in primary education exceeded 88 percent in 2007, up from 83 percent in 2000), many countries risk missing the 2015 deadline unless they take immediate action. The global economic slowdown since 2009 is expected to retard progress in many countries, further underscoring the need for such action.

The United Nations Development Programme (UNDP) first developed the MDG Acceleration Framework (MAF), with the technical inputs and collaboration of other UN agencies, to help accelerate progress at the country level on those MDGs currently seen as unlikely to be reached by 2015. This framework was rolled out in ten pilot countries across a range of MDGs over 2010, and proved itself to be a flexible and robust tool that can be applied in different contexts by various actors.3 It can be adapted to different country circumstances and complements existing government planning processes, while also improving the mobilization and coordination of efforts and resources contributed by various partners. Countries can use this approach as one way to respond to the shared call to accelerate progress that was made at the MDG Summit in September 2010.4 In December 2010, the MAF received endorsements by the member agencies of the United Nations Development Group (UNDG). A MAF Operational Note that explains the process at the country level was prepared by the UNDG MDG Task Force and also endorsed by the UNDG in August 2011.⁵

The MAF provides national stakeholders with a systematic approach to identify and analyse bottlenecks that are causing MDGs to veer off-track or to advance too slowly. It then aims to generate shared diagnostics and to recommend comprehensive, collaborative and focused actions, based on prioritized 'acceleration' solutions. The MAF does not replace existing, nationally owned planning processes and frameworks; rather, it draws upon them and seeks to complement them by helping identify actions and actors who could work together to speed up progress toward the identified MDGs. In case a similar approach has already informed selected sectoral plans in particular countries, the principal added value of the MAF will be to facilitate extension to other MDG-relevant sectors and to focus attention on collaborative solutions with identified roles for development stakeholders. In all cases, the MAF is intended to be a relatively easy and straightforward way⁶

¹ Please see reporting on global MDG progress provided by the Millennium Development Goals Report 2008 and 2009, published by the United Nations.

² This version of the MDG Acceleration Framework benefited from the guidance and technical expertise provided through the members of the UNDG MDG Task Force during 2010. UN member agencies of the Task Force include FAO, ILO, OHCHR, UNAIDS, UNDESA, UNDP, UNEP, UNESCO, UNCHR, UNFPA, UNICEF, UNIDO, UNIFEM, WFP, UN Regional Commissions, as well as the Millennium Campaign, the Office of the Secretary-General and DOCO. Observer members included the World Bank and the UN Non-Governmental Liaison Service (UN-NGLS).

³ Please refer to the preliminary lessons from the MDG Acceleration Framework in pilot countries contained in the report 'Unlocking progress: MDG acceleration on the road to 2015', available at: content.undp.org/go/cms-service/download/ asset?asset_id=2844466

⁴ The MDG Outcome Document is available at: www.un.org/en/mdg/summit2010/pdf/outcome_documentN1051260.pdf

⁵ The MDG Acceleration Framework main document and its Operational Note are available at: www.undg.org/index.cfm?P=1505

⁶ The MAF was completed in about three months in most pilot countries.

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to build upon country knowledge and experiences and to support the increased focus that will be needed to accelerate progress in the years remaining to 2015.

It is based on the following six premises:

- The MDGs are achievable by 2015, if supported by the right set of policies, targeted technical assistance, institutional capacity, adequate funding, and strong political commitment.
- National governments and their international partners are fully committed to achieving the MDGs by 2015 and have a sense of the most effective interventions for realizing the MDG targets.
- Specific prioritized 'acceleration solutions' exist and can help countries improve the rate of progress against specific targets. As all the MDGs are interconnected, partners from across disciplines and sectors can often make critical contributions toward devising and implementing these solutions.
- The 'acceleration solutions' can complement longer-term, structural measures to sustain progress.
- It is possible to formulate these solutions based on evidence, research and experience developed over the past several years.
- Countries can learn from and adapt solutions that have been shown to work in other countries in similar circumstances through, for example, South-South knowledge-sharing.

The MDG Acceleration Framework provides four systematic steps that governments, UN Country Teams (UNCTs) and other stakeholders can apply:

- Step 1 Intervention identification:⁷ Determine the strategic interventions required to achieve the MDGs by 2015 (informed largely by country/sector plans and focused on the MDG targets that are off-track or unlikely to be met by 2015 at current rates of progress).
- **Step 2 Bottleneck prioritization:** Identify and prioritize bottlenecks preventing the selected interventions from being implemented effectively and at scale.
- Step 3 'Acceleration solutions' selection: Determine 'acceleration solutions' for these bottlenecks.
- Step 4 Implementation planning and monitoring: Create a shared implementation and monitoring plan for the 'acceleration solutions' (including an accountability matrix for the government and its partners). This can serve as the basis for an MDG Acceleration Compact (or MDG Acceleration Plan) for the selected off-track MDG(s) 10 to facilitate the involvement of, and

⁷ An intervention is the delivery of a package of goods, services, and/or infrastructure to achieve development goals and targets within a set timeline. Please see the glossary for an expanded definition.

⁸ For the purpose of the MDG Acceleration Framework, 'bottlenecks' are broadly defined as proximate and removable constraints that impede implementation of MDG-related interventions. Please see the glossary for an expanded definition.

⁹ A solution is an action taken to resolve an intervention bottleneck in the near term to produce quick impact on the ground. Please see the glossary for an expanded definition.

¹⁰ The MDG Acceleration Compact is not expected to replace the UNDAF, but it can inform the part of it that is meant to address the selected off-track MDG. In addition, while the UNDAF is a response of the UNCT to the national priorities, focusing on the added value of the UN system, the MDG Compact (or Country Action Plan), generated through the MAF diagnostic process, is expected to engage the broader development community focusing on a specific off-track MDG in a country.

coordination among the government, development partners (including the UNCT) and civil society. Such a compact can help ensure comprehensive support for the required actions and draw upon the strengths of each partner while streamlining efforts and reducing redundancies. 11

To support these steps, the MDG Acceleration Framework also includes a comprehensive list of tested interventions (Annex to Step 1) that countries can refer to and customize while applying Step 1 as well as a dynamic, searchable, online system (currently under development) that helps inform users about concrete solutions to priority bottlenecks based on good practices and country experiences. This living knowledge management tool (The Wikipedia of MDG Acceleration) will continuously capture and codify countries' solutions to bottlenecks, building an ever-growing set of global case studies that describe how to implement the acceleration solutions and generate expected impact. The framework can also accommodate the tools and methodologies developed by UN agencies and other expert practitioners. 12

1.1 Context and overview

At the United Nations Millennium Summit in September, 2000, the world's heads of state and governments adopted the Millennium Declaration, which brought together key actions and targets for reducing poverty and achieving human development all over the world. The declaration's Millennium Development Goals (MDGs) translated the aspiration of the global leaders into measurable global results with concrete targets for the year 2015.

Several countries have made considerable progress toward achieving the desired outcomes. For instance, Mali raised its measles immunization rates among children under one year old from 49 percent in 2000 to 86 percent in 2006, and Tanzania from 78 to 93 percent during the same period. 13 Other achievements — such as expanded HIV/AIDS treatment, increased primary school enrolment, greater access to clean water, and significant advancements in malaria control — have put many countries within reach of MDG targets. Recent successes demonstrate that even the Least Developed Countries (LDCs) can reach the MDG targets when their efforts are backed by the right policies, targeted technical assistance, adequate funding, and strong political commitment.

However, many countries are likely to miss some MDGs and associated targets unless they make urgent additional efforts and take corrective action. These challenges are especially severe in sub-Saharan Africa, where progress is unacceptably slow. Countries that are in or emerging from conflict face even greater constraints, since basic infrastructure, adequate human resources and functioning institutions are often absent. Even in countries that have made tremendous progress in reducing poverty over the past decade, including much of Asia, challenges persist in areas such as health and environmental sustainability. At the same time, in many countries (including those classified as middle-income), high levels of inequality indicate that entire regions or socio-economic groups may be progressing at unacceptably slow rates. In this regard,

¹¹ In the context of global and local partnerships for MDG achievement, it is important to note that progress towards MDG 8 is a critical enabling factor for the achievement of MDGs 1 through 7 in many countries.

¹² Examples of tools by UN agencies will be included in the MDG Wikipedia/Portal.

¹³ MDG Monitor; www.mdgmonitor.org.; [Data Map (www.mdgmonitor.org/map.cfm?qoal=4&indicator=0&cd=), accessed on 14 October 2009].

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the framework advocates for the importance of disaggregating indicators and customizing response strategies in order to promote a focus on the most deprived populations and to go beyond national averages in the assessment of MDG progress.

The effects of global crises (financial, economic, energy and food), climate change, and natural disasters further complicate the challenge of making progress toward MDG goals. Indeed, without decisive action, even countries that were progressing satisfactorily toward the MDGs before crises struck can see their progress slowed, and perhaps even reversed. For example, according to poverty estimates released by the World Bank, the increase in food prices between 2005 and 2007 has pushed an additional 130-155 million people back into poverty.14

If the MDGs are to be achieved in the remaining timeframe, countries and all their partners need to come together at the country level to engage and act rapidly to close the remaining gaps, strengthen and expand on progress already made, and ensure that gains are sustainable.

The UN system has a vital role to play in this effort. Already, the United Nations has launched a number of efforts to support countries in meeting the MDGs. 15 Other partners, including multilateral and bilateral agencies, have provided advocacy, technical and financial assistance that have supported the development of national-scale programmes for specific sectors, mobilized resources, helped enhance aid effectiveness, and strengthened monitoring and evaluation systems to assess progress toward the goals. To meet MDG goals by 2015 in the face of rising challenges, these efforts must be intensified and focused. The 2010 High Level Plenary Meeting on the MDGs endorsed the need for countries and their partners to do so, and achieve 'business unusual' in the years to 2015.

Given this context, the UNDG has put forward the MDG Acceleration Framework which has the potential to act as a broader coordinating framework to motivate the additional efforts that will be needed for country-level MDG acceleration initiatives. The framework is based on the following premises: 16

• The MDGs are achievable by 2015 when strong political will translates into: (a) strong government leadership and national ownership, (b) effective domestic policies, (c) appropriate quantity,

¹⁴ World Bank, 2009. Commodities at the Crossroads: Key findings from the Global Economic Prospects 2009, report available at: siteresources.worldbank.org/INTGEP2009/Resources/GEP-2009-Booklet.pdf

¹⁵ Following the 2005 World Summit, the UN System has supported countries to conduct the MDG Needs Assessment/ Costing, which provides clarity on what needs to be done (MDG-related interventions) and how much it would cost to meet the MDGs by 2015. In particular, UNDP, UNESCO, UNICEF, and WHO have worked to standardize the costing methodologies for education, health, water sanitation and gender areas. In 2008, UNESCO released EPSSim V2.8, a UN-wide tool for supporting the national educational planning process that had been developed in collaboration with UNDP and UNICEF. The World Bank and UNICEF have worked with the Marginal Budgeting Bottleneck (MBB) methodology for under-five child mortality and maternal health MDGs. Since 2008, an Inter-Agency Working Group (IAWG) composed of UNAIDS, UNDP, UNFPA, UNICEF, WHO and the World Bank has been working on the harmonization of costing and impact assessment tools for the health sector and is moving toward a single UN-wide tool, expected to be released in 2011. UNDESA and the World Bank have worked in Latin America to support macro-economic scenarios using the MAMS. In 2007, the UN Secretary-General launched the MDG Africa Initiative, which has received direct support from UNDP. UNDP, in collaboration with IMF and AfDB, has rolled out the MDG Gleneagles Scenarios in 20 African countries to simulate the impact of increased ODA in national economies.

¹⁶ These premises should not be construed as necessary prerequisites for the use of the acceleration framework. For example, the acceleration solutions identified through the use of the framework may themselves improve the quality of governance or policy, factors that are recognized as being important for achieving the MDGs.

quality, and focus of investments (foreign and/or domestic), (d) effective partnerships with strong accountability, (e) buy-in by civil society and communities, (f) involvement and empowerment, and (g) institutional capacity and good governance.

- · National governments and their international partners are fully committed to achieving the MDGs by 2015 and have a sense of the most effective interventions for realizing the MDG targets.
- Specific, prioritized 'acceleration solutions' exist that can help countries improve the rate of progress against specified targets by removing bottlenecks in the implementation of effective interventions. As all the MDGs are interconnected, partners from across disciplines and sectors can often make critical contributions toward devising and implementing these solutions.
- The 'acceleration solutions' can be applied along with longer-term, structural measures (often already underway as part of national or sectoral plans) to sustain progress and strengthen institutions (e.g., efforts to reform the health care system will not be interrupted by programmes to increase immunization). 'Acceleration solutions' may even improve the quality and political acceptability of longer-term measures.
- It is possible to formulate these near-term and long-term solutions based on evidence, research, and experience developed over the past several years.
- Countries can learn from and adapt solutions that have been shown to work in other countries in similar circumstances through, for example, South-South knowledge sharing mechanisms.

The MDG Acceleration Framework proposes to:

- Support countries in identifying bottlenecks that interfere with implementing key MDG interventions, including those that would quard against possible reversals of MDG progress.
- Analyse the reasons behind these bottlenecks to arrive at a comprehensive, objective set of solutions with clearly defined roles and responsibilities for different partners helping countries accelerate MDG progress.
- · Create a basis for discussion that engages all relevant stakeholders and enables the monitoring of progress against agreed-upon benchmarks.
- Help United Nations Country Teams (UNCTs) to focus their efforts and resources for MDG progress,¹⁷ based on priorities that will be determined jointly with host countries.

The acceleration framework is intended to be applied to MDGs that are (1) considered top priorities by countries and (2) 'off-track' or 'slow-progress', including those at serious risk of reversal. In addition, it could also be applied to MDGs that are strategically important for their potential to provide significant, positive spillover effects for advancing other MDG targets.

For each selected MDG, the framework prompts analysis of the following key questions:

¹⁷ The UNDG Operational Guidance accompanying the MDG Acceleration Framework would provide further advice to UNCTs in the allocation of available resources by taking into consideration the country's priorities at the national and sub-national levels.

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- Is the country successfully implementing the interventions identified as relevant, evidence-based, cost-effective and country-specific for meeting the objectives of off-track MDG efforts?
- What are the bottlenecks in policy and planning, budget and financing, service delivery (supply), and service use (demand) that impede successful implementation of interventions that are not being fully effective? How can they be prioritized?
- What could the government and its development partners do to address these bottlenecks? In particular, what complementary role could the UNCT play and what particular contribution could the UN make in that context?

1.2 Rationale for developing the MDG Acceleration Framework

A recent internal assessment of MDG progress, which considered MDG efforts in countries from the same African sub-region, illustrates the challenges of uneven progress and underscores why domestic policies and effective interventions are critical to accelerating MDG progress.

This assessment compares MDGs for countries such as Malawi and Zambia, two countries with similar characteristics and demographics (e.g., landlocked Low-Income Countries (LICs) with high HIV/AIDS prevalence). Figure 1.1 shows the primary school completion in Malawi is currently off-track, but on track in Zambia. However, under-five mortality is off-track in Zambia, while Malawi is on track to reach this MDG. 18 This comparison illustrates the high level of heterogeneity in MDG progress even for countries that have socioeconomic similarities.

Higher GDP and ODA per capita alone do not account for the divergent outcomes. This is confirmed when comparing Uganda's and Ghana's progress toward MDG 1 (poverty reduction). Ghana saw an annual decline of 4.6 percent in its poverty rate between 1999 and 2006, while Ugandan poverty rose by 3.8 percent between 2000 and 2003. This difference exists despite comparable rates of per capita GDP growth of about 2.5 percent. 19

The Malawi-Zambia example also highlights disparities in progress within a country. As demonstrated above, MDG 2 is off-track in Malawi while MDG 4 is on track and the reverse is true for Zambia. In fact, correlations of the rates at which changes occur across MDGs in a given country often vary widely, sometimes demonstrating little or no linkage, as if they were the results of wholly independent factors and policies. 20 The implication of these observations is that domestic policies and effective interventions are critical to accelerating progress toward the MDGs.

Countries and their partners — even in countries that lag far behind on many MDGs — often know (or have a sense of) the interventions that would put them on track to meet the MDGs. For example, the nation's sector plan may already specify agricultural extension services to reduce rural poverty. However, these governments

20 Ibid.

¹⁸ Data used is based on international comparable data provided by UNICEF and World Bank. See the available data in the World Development Indicators.

¹⁹ Bourguignon, François et al. (2008), Millennium Development Goals at Mid-Point: Where do we stand now and where do we need to go?, European Report on Development, September 2008.

Malawi Zambia Primary Completion Rate (PCR) Primary Completion Rate (PCR) 1990-2015 Actual and desired trends 1990-2015 Actual and desired trends 120 120 Path to goal Path to goal 80 80 Actual trend Actual trend 40 0 1995 2000 2005 2010 2015 1995 2005 2010 2015 1990 1990 2000 Under-five mortality rate Under-five mortality rate Deaths per 1000 live births Deaths per 1000 live births 200 200 120 MDG Targe 100 **MDG Target** 40 1990 1995 2000 2005 1995 2000 2005 2010 2015 1990 2010

Figure 1.1: Comparison of trends on MDGs for countries with similar profiles

Source: World Bank: Education at a Glance: Country Profiles, and UNICEF: Trends in Child Mortality in the Developing World: 1990-2007, www.unicef.org/infobycountry

have been unable to effectively prioritize and fully implement these critical interventions, mostly because of policy, resource, and/or service delivery constraints (e.g., despite planning and budgeting for extension services, there is no adequate pool of government employees to train farmers).

Specifically, three critical factors seem to constrain efforts to fully implement these interventions: (1) a lack of institutional capacity to systematically identify and address bottlenecks/constraints, (2) the absence of a well-functioning coordinating mechanism to align efforts — often across sectors — to overcome bottlenecks, and (3) limited accountability of government agencies and development partners.

Lack of institutional capacity to identify and resolve priority MDG bottlenecks

Governments often have difficulty in quickly identifying and solving intervention bottlenecks with specific, high-impact actions. Furthermore, in cases where solutions are identified, governments may lack the delivery and monitoring mechanisms to ensure proper and timely implementation and monitoring of the solution.²¹ This is especially problematic when initial solutions do not work as planned and a change in course is required.

²¹ Or, more broadly, suffer from poor governance.



Absence of well-functioning coordinating mechanism to align efforts around priority bottlenecks

As noted in the Secretary General report 'Keeping the Promise', the MDGs represent a 'pact', not just among governments, but also among all development stakeholders.²² Each actor must focus on the best use of its assets, proceeding efficiently, effectively and collectively.

Lack of cohesion, alignment, and cooperation within governments, and between governments and their partners in development, often results in (1) redundant efforts or (2) insufficient coverage of required interventions or bottleneck solutions. In addition, lack of communication (e.g., no clear list of MDG priorities), unclear roles and responsibilities, and/or competing priorities often impact coordination capacities.

This lack of cohesion sometimes may be reflected in the work of the UN Country Team itself. An informal analysis of UNCT/UNDP work in various countries found a lack of alignment between UNCT/UNDP in-country work and the MDGs that are off-track. Specifically, a preliminary inquiry into the United Nations Development Assistance Framework (UNDAF) and UNDP Country Program Action Plan (CPAP) showed that, in the countries assessed, Country Offices did not always adequately respond to policy and service delivery constraints of 'off-track' or 'slow-progress' MDG targets.²³

It should be noted that, through the UN Reform Agenda, the UN has initiated steps to strengthen its coordination mechanisms. The MAF could be used to help reinforce these efforts.

Limited accountability of government agencies and development partners

Processes, partnerships and mechanisms that ensure adequate levels of monitoring so as to track and evaluate progress may be poorly developed in certain countries. As a result, accountability remains poor, often leading to slow progress.

Accountability can be further limited by a lack of data to indicate which MDGs are off-track and whether bottleneck solutions are working properly. Thus, even where monitoring units exist, they may lack clear, measurable indicators of progress toward MDG targets. Without such indicators, the monitoring units do not have the required capacity to hold parties accountable.

1.3 Objective of the MDG Acceleration Framework

The objective of the MAF is to help countries overcome slow and uneven progress and meet the 2015 MDG deadline. The actions that each country undertakes will be based on a structured methodology for identifying and mapping bottlenecks to MDG progress, as well as prioritized, quick-impact 'acceleration solutions' to these bottlenecks. A dynamic, searchable tool (under development) will guide users through this methodology

²² UN Secretary General, 2010. Keeping the promise: a forward-looking review to promote an agreed action agenda to achieve the Millennium Development Goals by 2015 (A/64/665), report to the sixty-fourth session of the UNGA, agenda items 48 and 114. The report is available at: www.un.org/ga/search/view_doc.asp?symbol=A/64/665

²³ Please refer to the findings from the report 'Beyond the Midpoint: Achieving the Millennium Development Goals' (UNDP, 2009). The report is available at: content.undp.org/go/newsroom/publications/poverty-reduction/poverty-website/mdgs/beyond-the-midpoint.en

by helping them identify relevant solutions to their identified MDG bottlenecks. This living knowledge management tool, The Wikipedia of MDG Acceleration, as well as tools and methodologies developed by governments, UN agencies and development partners, will continuously capture and codify solutions to bottlenecks being discovered in various countries. This codification will result in an ever-growing set of global case studies that describe how to implement the acceleration solutions and provide their expected impact. 24 In this respect, the MAF can be useful in facilitating knowledge sharing, South-South cooperation and advocacy, and the associated process could provide the UNCTs and their members opportunities to further align their work with national needs and plans.

Given its focus on pragmatic solutions that are anchored in existing plans and processes, the MAF can serve as the basis for an MDG Acceleration Compact or MDG Acceleration Action Plan, facilitating coordination and accountability among the country, development partners, civil society, and the UN. This acceleration compact could result in unified, comprehensive support for the required solutions, while eliminating redundancies. This plan should be based on the Paris Declaration principles to promote aid effectiveness, coherence, and country ownership.

1.4 Overview of the methodology

The MDG Acceleration Framework provides a structured method consisting of four modules — or steps — that help identify and implement the bottleneck solutions required to accelerate MDG progress.

The country must first identify the priority MDG(s) where special efforts are needed in order to reach the desired level of progress by 2015 and around which there is sufficient domestic political commitment to ensure required levels of participation and delivery. Once these have been recognized, the following four steps, which constitute the MAF method, can be followed in sequence. Many countries may find that they have already accumulated enough knowledge and experience, perhaps through the formulation and successive reviews of MDG-based National Development Strategy (NDS)/ Poverty Reduction Strategy Papers (PRSP), so that they can proceed fairly rapidly through one or more of these steps. However, it may still be useful to go through this systematic process in order to ensure that all relevant actions have been identified, cross-sectoral contributions incorporated, and partner roles established.

Step 1: Intervention identification

Step 1 helps identify and prioritize the package of interventions best capable of accelerating progress on the identified MDGs. In most cases, countries will have already completed this step and the interventions will be reflected in the national plans (e.g., NDP/PRSP) or, in some cases, be found in the set of good-practice interventions provided by the MDG Acceleration Framework (see Annex 1 of Step 1). These good-practice interventions are derived from evidence-based research showing which interventions are most likely to

²⁴ The 2010 UNDG/MDG Task Force Thematic Papers (UNDG, 2010), as well as the UNDG Policy Network's Good Practices publication (UNDG, 2010), present a set of MDG good practices and lessons learned on the ground, collected through various UN agencies, governments, NGOs and CSOs



accelerate MDG progress in a given setting.²⁵ It is important to recognize that the chosen interventions will be dynamic, reflecting progress already made toward the MDGs — for example, once enrolment in primary education has risen as a result of the abolition of school fees, countries may want to prioritize interventions that will improve education quality in order to improve retention while maintaining enrolment. This step guides users through a process and scorecard that helps prioritize the interventions best suited for each country.

Step 2: Bottleneck prioritization

Step 2 helps identify the sector-specific and cross-sector bottlenecks that are impeding successful implementation of the prioritized interventions. These bottlenecks may be related to policy and planning, budget and financing, service delivery (supply), and service use (demand). This step helps prioritize these bottlenecks by using a recommended process and prioritization criteria such as potential near-term impact and positive spillover effects. Statistical and administrative data that are disaggregated on the basis of geography, administrative regions, income, sex, ethnicity or other relevant categories may be especially useful when assessing the coverage of services and for identifying underserved areas or groups of marginalized people.²⁶

Step 3: Selection of 'acceleration solutions'

Step 3 helps determine near-term solutions to priority bottlenecks that will best accelerate MDG progress, accounting for criteria such as magnitude and speed of impact, sustainability, potential adverse impacts, governance challenges, country capacity, and funding availability. It uses lessons learned from pilots in the country itself as well as knowledge of field-tested solutions and case studies from other countries in similar circumstances that link to specific bottlenecks and interventions. The case studies help users understand the range of possible solutions, why they worked or failed in other countries, the requirements for implementation, and their expected impact. Perhaps most important, these case studies help users develop pragmatic solutions that can be customized to their country's unique situation (e.g., focus on a specific group of people or subnational region).

Step 4: Implementation planning and monitoring

Step 4 enables a country to create the implementation plan for the bottleneck solutions. This includes identified partner roles as well as an accountability matrix, resource plan, and implementation scorecard. In addition, this step helps countries develop the in-country capacity to implement the plan and monitor for success, including resources to establish or strengthen a monitoring unit.

An illustrative, simplified example is presented in Box 1 below. Country cases are presented in the MAF pilot roll-out report, which includes lessons learned from four completed country reports (e.g., Colombia focusing on Cundinamarca and Nariño territories, the Lao People's Democratic Republic, Togo, and Uganda).²⁷

²⁵ These interventions should be based on scientific research and/or analysis of case studies done by UN agencies, development partners (e.g., the World Bank, technical NGOs, civil society), academia, and countries.

²⁶ A greater emphasis on inequities is often required as part of the situation analysis, as well as in the identification of intervention gaps and solutions.

²⁷ Preliminary lessons from the MDG Acceleration Framework in pilot countries have been recorded in the report 'Unlocking progress: MDG acceleration on the road to 2015', available at: content.undp.org/go/cms-service/download/asset?asset_id=2844466



Box 1: Illustrative example of a country using the four steps, focusing on MDG 1 (eradicate extreme poverty and hunger)^a

To illustrate the four steps, we use the example of a country that is performing poorly on MDG 1 (poverty reduction and hunger) and wants to accelerate progress toward achieving its targets using the MDG Acceleration Framework.

The first step is to use **Step 1** to decide which interventions to choose and prioritize. The country makes this decision based on its national development and sector plans and the good-practice interventions provided in Annex of Step 1. For example, a country may identify two potential interventions: (1) expand agriculture extension services and (2) improve agriculture inputs. (Note: For the sake of simplicity, only two interventions are identified here, but, usually, a country will investigate a set of more interventions depending on its country or sector plans and the potential interventions outlined in Annex of Step 1). Expanding extension services is prioritized due to its high near-term impact as well as its sustained impact. In addition, the intervention appears to be feasible due to the country's technical capabilities and widespread support within the government.

Once the country prioritizes the key intervention(s) required, the analysis progresses to Step 2, which will help identify and prioritize the bottlenecks that prevent implementation of the intervention. For expanding extension services, potential bottlenecks are: (1) lack of funds for extension worker salaries (under budget and financing), (2) too few agriculture extension workers (under service delivery), and (3) no extension programme administrator (under policy and planning). Once bottlenecks are identified, this step helps prioritize the most important ones based on a recommended set of criteria (e.g., potential impact on achieving the MDG target, speed of removal, and availability of feasible solutions). Based on the criteria for bottleneck prioritization, "not enough agriculture extension workers" is selected for action first due to its large potential impact (i.e., half the country is unable to expand extension services due to a lack of qualified workers). In addition, this bottleneck adversely affects some of the most vulnerable population groups in the country. Finally, government officials and development partners (including the UNDG) are familiar with potential solutions - this is a solvable bottleneck based on the experiences and knowledge of the framework users.

Step 3 focuses on finding a solution to "not enough agriculture extension workers." The country can identify solutions using its own data and experts. It can also refer to the MDG Wiki database to identify field-tested, potential solutions for a prioritized bottleneck. The database will help the country identify feasible solutions that have been demonstrated in other countries and that could be adapted to the local context. Some examples are: (1) re-allocate funds to market extension jobs, (2) train health community workers to also help villagers with agriculture, (3) collaborate with agriculture specialists from neighbouring countries to help with the training of extension workers (e.g. South-South collaboration initiatives), and (4) strengthen the agriculture

a Other examples of potential interventions and bottleneck resolution that could help in the application of the MDG Acceleration Framework have been well documented in the MDG Good Practices published by the UNDG Policy Network for MDGs (2010) and the MDG Thematic Papers by the UNDG MDG Task Force (2010). For instance, in order to address under-nutrition or a micronutrient deficiency (MDG 1) such as low vitamin A status and high prevalence of worm infestation impairing child nutrition and manifesting in high child morbidity, key interventions could include public health campaigns around diet diversity, massive scale-up of vitamin A capsule distribution and deworming for children 6-60 months. These could be further supported by deworming days twice a year in schools, and extended for example to include other targets that could be off-track, such as measles immunisation. These are often cost-effective measures and have the potential to yield highly accelerated impact in a short time-frame.

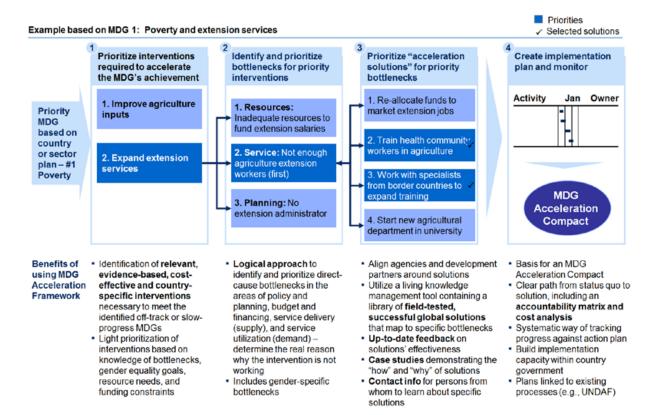


programme at the national university. The country should determine how to implement each solution, the time required for implementation, and the likely impact (both benefits and costs).

Using the output of Step 3, the country decides to focus on the second and third solutions (cross-training health workers and working with specialists from border countries). These solutions are based on criteria similar to those used for the interventions: impact and feasibility (including cost). Both of these solutions are expected to help overcome the bottleneck and help meet MDG 1, based on estimates of lives impacted and a cost that can be borne by the government and development partners.

Finally, **Step 4** is used to develop the implementation and monitoring plan (including creating the accountability matrix) for the two solutions. The country uses the resource and implementation planner and scorecards to help make sure that solutions are implemented according to schedule and cost and that they help realize the expected impact. This step will help the country form an MDG Acceleration Compact for MDG 1 because it will clearly articulate who is responsible for which activities and resources by when.

Figure 1.2: Overview of the steps, using MDG 1 as an example



1.5 **Applying the MDG Acceleration Framework**

Countries and their development partners will apply the MAF so as to adequately reflect country circumstances and exploit ongoing development processes. However, it is expected that the following considerations will be helpful in guiding this:

Identify prioritized, pragmatic 'acceleration solutions' through a holistic approach

- Map the end-to-end connections among (1) selected MDG targets, (2) priority interventions, which can depend on the current level of MDG achievement, (3) intervention bottlenecks, (4) potential solutions to bottlenecks, and (5) an implementation of those solutions.
 - Identify the actionable, direct causes of the MDG bottlenecks.
 - Focus on a comprehensive set of feasible quick-impact solutions that will remove the bottlenecks, while building sustainability of the achievements. Solutions would need to necessarily go beyond addressing purely financing constraints.
 - Pay special attention to solutions that enable gender equality and women's empowerment on account of their multiplier effects.
- Employ an indicative and consultative process that avoids prescriptive recommendations and brings together partners from across disciplines and sectors.
- Ensure that bottlenecks that may be reflecting difficulties in access by under-represented or marginalized groups are duly recognized and addressed.
- Codify and leverage a cross-country set of bottleneck solutions through a continuous feedback loop that transmits on-the-ground, evidence-based experiences and proven approaches to development practitioners.
- Employ real-time research and empirical examples to make fact-based decisions.

Align and focus stakeholders and resources on accelerating progress toward the MDGs

- · Create 'shared commitments' with clear roles and responsibilities for all stakeholders, i.e., adopt an MDG Acceleration Compact or Action Plan. This plan, which should reflect the country priorities, will improve the monitoring of progress set against a series of agreed-upon benchmarks and ensure aligned, predictable, and flexible funding to accelerate progress toward the MDGs (see Figure 1.3).
- · Promote country ownership. Governments will drive the process by determining the bottleneck solutions and coordinating which development partners work on each intervention, bottleneck, and bottleneck solution. Governments are expected to use input from their own planning processes (e.g., NDP/PRSP) in the MAF and then focus on bottlenecks and solutions that align with and enhance such plans.

Executive Summary

Assist the United Nations Country Teams (UNCTs) in focusing their efforts and resource allocations
on priority areas of support, which will be determined jointly with the host countries,²⁸ within the
UNDAF framework. The MDG Acceleration Framework is meant to interface with and feed into the
UNCT's existing processes (e.g., UNDAF, UNDAF Action Plans,²⁹ and CPAPs, etc).

MDG Acceleration Framework: Identifies interventions Government and bottleneck solutions for each intervention Development partners Bottleneck (2) UN agencies partner UNDG solution 1 with government to Bottleneck implement **UNDP** solution 2 interventions and MDG intervention 1 solve bottlenecks PRSPs and WHO Bottleneck solution 3 sector plans Sector plans inform MDG inform MDG Acceleration Acceleration Framework Framework interventions Non-UN (e.g., improved MDG MDG intervention 2 agriculture intervention 3 **USAID** inputs) Framework interventions (3) Non-UN agencies and solutions help World Bank government revise plans partner with and budgets or change government to ministry line items implement **DFID** interventions and solve bottlenecks Government drives the process The MDG Acceleration Development partners of determining the interventions, determine their country Framework serves as a basis bottlenecks, and bottleneck for a MDG Acceleration programming based on solutions. It coordinates with Compact between the interventions and solutions the development partners to national government and the identified in the MDG

Figure 1.3: Stakeholder alignment as the foundation for an MDG Acceleration Compact

Provide the methodology and tools to help identify bottleneck solutions

development partners

• Provide a clear logic and set of analyses to identify and prioritize commonly agreed-upon interventions and bottlenecks that should be removed to optimize expected MDG outcomes.

Acceleration Framework tha

reflect government priorities

implement the interventions and

solutions

²⁸ The focus of the MAF is on enhancing the effectiveness of country-level efforts. However, the findings from the analysis from a group of countries could inform the operationalization and fine-tuning of regional strategies, such as those proposed in the MDG Africa Steering Group Recommendations (July 2008, UN Secretary General's MDG Africa Steering Group Initiative).

²⁹ The UNDAF Action Plan, which replaces multiple operational agency documents, is a further initiative in the harmonization and simplification of UN business processes. In some cases it will replace CPAPs. The UNDG has prepared a Guidance Note for the preparation of the UNDAF Action Plans (UNDG, January 2010).

- Use the Wikipedia of MDG acceleration (under development), a dynamic, searchable, online tool/ resource to help users identify potential solutions to the bottlenecks.
 - Tap into an international reservoir of knowledge. It is a living tool that continuously grows and evolves as countries/agencies populate the Wiki with their own experiences, while testing or implementing solutions.
 - Draw on the tools and methodologies developed by the UN agencies and other development partners.30
 - Guide users through the process of mapping and selecting bottlenecks and corresponding solutions.
 - Provide global case studies for bottlenecks and solutions that give a detailed explanation and analysis of the approach and impact as well as the 'why' behind successes or failures.
 - Provide a toolkit to help governments plan, implement, and monitor solutions (including accountability matrix and costing).

1.6 Intended audience

The framework has been designed to generate nationally owned consensus action plans that will assist the United Nations Country Teams (UNCTs) — and other partners — to support national governments in accelerating progress toward the MDGs. The MAF will help these organizations formulate country-specific responses that are explicitly linked to the UN's mission, mandate and comparative advantage. Applying this framework will: (1) deepen the partnerships between the UN agencies and different stakeholders in each country, (2) allow UN agencies to allocate MDG resources more effectively, and (3) provide a basis for policy dialogue and planning with national governments.

The methodology proposed in this framework will help UNCTs orient the UN system interventions to accelerate MDG progress through the UNDAFs, UNDAF Action Plans, 31 CPAPs, and Annual Work Plans (AWPs) 32 — the MAF is intended to interface with and support the MDG elements of existing UN processes at the country level.

This framework can also be adapted and used beyond the UN system to include practitioners working with the government, other development agencies, NGOs, and CSOs that are engaged in sectoral efforts to achieve the MDGs. These actors may comprise an expert working group that works with the UNCT to employ the MAF.

³⁰ Complete list with details forthcoming.

³¹ The UNDAF, a multi-year strategic document, sets out how the UNCT will jointly support achievement of national priorities and provides a broad indication of what results are to be achieved. It is a programming tool, which ensures that the strategic priorities identified in the UNDAF are operationalized coherently through agencies' programmes. The UNDAF Action Plan, which replaces multiple operational agency documents, is a further initiative in the harmonization and simplification of UN business processes. In some cases, it will replace CPAPs. The UNDG has prepared a Guidance Note for the preparation of UNDAF Action Plans (UNDG, 2010). Further information is provided in the Guidelines for UN Country Teams on Preparing a CCA and UNDAF (January 2010).

³² Annual Work Plans set out specific tasks to be implemented in the short term, allocating resources and responsibilities associated with these tasks.



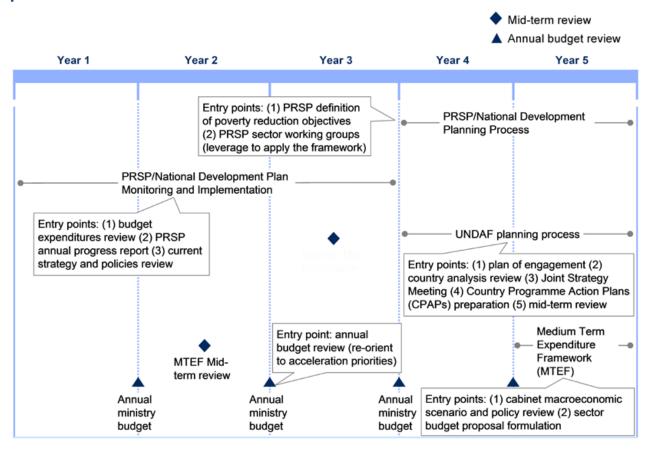
Potential entry points for the MDG Acceleration Framework application

The entry point graph and timeline (Figure 1.4) provides visibility into a typical five-year government planning cycle as well as the UNDAF planning process. Applying the MDG Acceleration Framework to specific country contexts allows users to remain flexible in their approach, customizing the process to leverage existing planning resources and the most effective budget and planning entry points (nearest-term with the greatest leverage). By building MDG Acceleration Compact outputs into existing processes, users can avoid the pitfalls of creating entirely new parallel processes while mainstreaming MDG acceleration priorities directly into government and development partner planning documents and budgets. This will aid the adoption of the tool as well as its effectiveness in delivering acceleration solutions.

- Poverty Reduction Strategy Paper/ National Development Plan: During the PRSP/NDP planning process, use sector working groups to apply the MAF. Build high-level outcome targets and funding and implementation responsibilities into PRSP/NDP documents. For countries not in the planning cycle, users can build Acceleration Compact outputs into the PRSP/NDP budget expenditures review, annual progress report, or policies and strategies review, depending on the country context.³³
- Government Medium-Term Expenditure Framework (MTEF): Build MDG Acceleration Compact outcome targets, associated resource requirements, and funding responsibilities directly into the government's national 3- to 5-year expenditure framework. The cabinet review of macroeconomic scenarios and the sector budget proposal formulation offer opportunities to integrate Acceleration Framework outcome targets and resource requirements. Users can also link these targets and resource requirements to MTEF annual updates if countries are in the middle of the MTEF cycle. For those countries using a roundtable budgeting approach, this presents an ideal opportunity to apply the full MDG Acceleration Framework process by leveraging existing government-development partner collaboration to create the MDG Acceleration Compact. Finally, for many countries, the MTEF resource envelope determines the financing plan for Sector Wide Approaches (SWAPs), in which case the MTEF provides an ideal entry point to focus budgeting plans at the sector level to the existing priorities. MTEF preparation varies by country and users should review existing MTEF infrastructure and protocol to best position MDG Acceleration outcome targets and resource requirements.
- Ministry budget: Build solution implementation activities, outputs, and outcome targets into
 ministry budget line items in order to reallocate funding to reflect new government priorities and
 solution delivery requirements.
- United Nations Development Assistance Framework: Build outputs, output metrics, and output
 targets directly into the UNDAF planning process to focus support on government priorities that
 accelerate MDG progress. Users should assess UNDAF entry points as early as possible in the process;
 these include the UNDAF plan of engagement and country analysis review. The UNDAF process
 links directly to the UN Common Country Assessment (CCA) and the UNDAF mid-term review. Both

³³ Users can reference the World Bank's *Sourcebook for Poverty Reduction Strategies* for details on the preparation (resources and processes required) and final outputs (national development plan document) involved in the PRSP/NDP process.

Figure 1.4: Government and UNDAF entry point map and timeline allows users to build MDG Acceleration Compact outputs directly into existing government and UNDAF processes



of these processes present additional entry points for countries given their particular planning cycle. For details on the UNDAF planning process, please see the UNDAF/CCA Guidelines. The MDG Acceleration Framework indicators should be harmonized with the UNDAF indicators in the participating countries in order to avoid a multiplicity of monitoring systems and also to ensure that governments monitor the results based on their national priorities and toward keeping their commitments to achieving the MDGs.

• Development partner mid-term review: Build solution implementation activities, outputs, and outcome targets into mid-term, sector reviews for development partners as course corrections for development partner country action plans and budgets.

1.7 Limitations and risks

Embracing the overarching objective of accelerating progress is subject to some limitations and risks are grouped into three areas discussed below.

Focus on actions that can accelerate MDG progress

MDG achievement is based on the premise that two types of action are needed to achieve MDG targets: (1) near-term actions that quickly accelerate progress to achieve the MDGs by 2015 and (2) long-term strategies to overcome systemic development challenges.

These two kinds of action support each other and are not mutually exclusive: achievements from near-term solutions may be difficult to sustain if longer-term systemic improvements are not made; visible successes from acceleration efforts may themselves ease the process of creatively identifying and adopting the most effective longer-term solutions. While the MDG Acceleration Framework focuses on the first type of action, it can help create an enabling environment for addressing longer-term issues.³⁴ In addition, unintended consequences that may arise from the implementation of near-term actions should be considered early on in the planning process and suitably addressed.

Facilitate near-term results

To reach the MDG targets by 2015, national governments and development partners must act decisively in the near term. The MDG Acceleration Framework, therefore, cannot work outside national processes. Nor is there time to mount an intensive adoption campaign. The framework must provide ministries with the means and incentives to adopt solutions quickly within established processes (bureaucratic processes fatigue must be avoided).

- This approach presumes a national commitment to and ownership of the MDGs. It also presumes demand for tools to accelerate progress toward the MDG targets.
- Without UN agency and development partner agreement to deliver increased and/or better coordinated funding, the MDG Acceleration Framework may not yield the expected results on the ground.

Build on existing national assessments and global shared knowledge

Given the pressure on time and resources, the MDG Acceleration Framework is expected to build on existing national assessments and global shared knowledge as much as possible. In addition, the Framework employs a hypothesis-driven, consultative approach that ensures acceleration actions go forward by making best use of available data. As a result, the Framework may work better for some MDGs than others, depending on whether national experts agree on the bottlenecks and solutions. For example, while health-related MDG interventions and bottleneck solutions are well established within the scientific and expert communities, it

³⁴ Should a country wish to prioritize longer-term actions (perhaps because it is already making satisfactory progress), it may find the four-step process of the MAF to be useful in thinking through the actions needed for the purpose.

may be more difficult to reach consensus for MDG 1, which lacks a clear-cut consensus among experts on the set of necessary interventions to achieve the MDG target.

The application of the MDG Acceleration Framework cannot accommodate time-consuming decision and implementation schedules that would preclude rapid impact. Experts must quickly complete the Framework steps³⁵ and mainstream the solutions through government and partner planning processes and budget mechanisms. Otherwise, the compact decision and implementation schedule runs the risk of becoming bogged down in bureaucratic decision-making.

Additional considerations for application 1.8

The following considerations will facilitate success and mitigate the risks outlined above:36

Ensure government commitment accompanied by stakeholder alignment and buy-in

- Commitment from stakeholders to join the effort before the MDG Acceleration Framework process begins, including: relevant government ministry officials, UNCT and UN agency representatives, representatives from a broad spectrum of development and social partners, NGOs, and civil society representatives. Stakeholders must stay involved throughout the process.
- · Agreement between UN agencies and development partners to deliver timely, predictable, increased, and better-harmonized funding to countries that complete the MDG Acceleration Framework and establish acceleration priorities.
- Consensus among the stakeholders on the right interventions for the country, given its unique context. The consensus is required to assure that the bottlenecks and solutions selected are the most relevant for the country.

Leverage existing tools and processes

- · Planning and budgeting entry points for MDG Acceleration Framework activities and solutions identified in advance to ensure quick, streamlined action by the government, the UN system, and development partners.
- Where possible, information should be extracted from previous exercises (e.g., MDG needs assessment, capacity assessments, PRSP/NDP mid-term reviews, etc.) rather than spending time and resources to duplicate available data and planning processes already undertaken by the country.

³⁵ The experience of the pilot countries suggests that quality Action Plans can be developed in about three months.

³⁶ The UNDG MAF Operational Note (available at: www.undg.org/index.cfm?P=1505) provides more detailed guidance in this respect.

Ensure country capacity

- Country capacity to complete the MDG Acceleration Framework, including a basic ability to:
 - Gather and analyze national MDG data against established target baselines. Use disaggregated data where available (e.g., sex, income, geography, ethnicity, etc).
 - Conduct stakeholder interviews and establish expert working groups.
 - Perform qualitative intervention analysis (impact, feasibility, speed of implementation) for prioritization and sequencing bottlenecks and solutions.
 - Implement with plan to monitor performance and report back.

Complement acceleration interventions with long-term interventions

Implement complementary long-term development initiatives, including sound macro-economic
policies and capacity development, in parallel with the near-term solutions, as identified through
the MDG Acceleration Framework, to form a comprehensive strategy to address development
challenges.

1.9 Conclusion

The MDG Acceleration Framework is expected to support countries to meet the 2015 deadline by providing a systematic methodology for identifying and prioritizing the removal of bottlenecks to MDG progress. Furthermore, it serves as the basis for an MDG Acceleration Compact or Action Plan, which facilitates coordination and accountability among governments, development partners, civil society, and the UN. Although countries face considerable challenges that are likely to become even more difficult due to external shocks such as the economic, food, and climate crises, the MDG Acceleration Framework will help streamline efforts to accelerate progress and achieve the MDGs.

Concepts used in the MDG Acceleration Framework

Acceleration

Acceleration is a relatively rapid increase in the rate of progress toward MDG targets that effectively shifts the slope of current projection lines for 'off-track' MDGs. Acceleration results from removing critical bottlenecks that are impeding the implementation of key interventions.

Interventions

Within the MDG Acceleration Framework, an intervention is defined as the delivery of a package of goods, services, and/or infrastructure to achieve development goals and targets within a set timeline. Interventions should be evidence-based and have proven impact. Many governments will already have comprehensive intervention lists in their national and sectoral planning documents, along with required inputs. Strategic plans for education, for example, usually will list potential interventions and the basic inputs required (e.g., schools, equipment, trained teachers, supportive educational policies). Thus, they can use existing planning documents as starting points. It is important to highlight that required interventions should be grounded in real needs and not be a wish list.

Examples of interventions include:

- Providing vaccines to lower infant mortality.
- Eliminating school fees for enhancing primary enrolment and primary completion rates.
- Developing/expanding agriculture extension services to transfer technology to small farmers (female/male).

The MDG Acceleration Framework examines national development plans, sector strategies and proven interventions from different country experiences to identify and prioritize the necessary set of interventions - tailored to country and target population context - to meet the MDGs along with other sector and development targets.

Bottlenecks

For the purpose of the MDG Acceleration Framework, 'bottlenecks' are broadly defined as proximate and removable constraints that impede implementation of MDG-related interventions. Although application of the MDG Acceleration Framework may also reveal systemic and underlying obstacles to achieving MDG targets, the framework focuses explicitly on proximate or direct-cause constraints to implementation, in order to deliver quick solutions. Bottlenecks may be:

- Sector-specific, presenting issues that can be addressed within a lead sector ministry/agency (e.g., lack of adequate capacity and qualification of health care personnel to deliver primary health care services).
- Cross-cutting, encompassing issues across multiple sectors that exceed the mandate of a lead sector ministry/agency (e.g., lack of funds for social programmes).

Executive Summary

The MDG Acceleration Framework identifies sector bottlenecks across four categories: (1) policy and planning, (2) budget and financing, (3) service delivery (supply), and (4) service use (demand).

Examples of bottlenecks include:

- Policy and planning: Within the national health sector plan, 100 percent immunization coverage is not prioritized for all sub-national districts.
- Budget and financing: Inadequate provision of public funds to guarantee universal access to primary education and eliminate school fees in rural areas.
- Service delivery (supply): Insufficient pool of government employees to provide agriculture extension services to most farmers.
- Service use (demand): Cultural resistance to placing girls in schools; health care workers may not observe cultural practices during delivery (e.g., placenta practices performed by specific ethnic groups, etc.).

Solutions

A solution is a single action or package of actions taken to resolve an intervention bottleneck in the near term to produce quick impact on the ground. Solutions attempt to ensure successful implementation of interventions. Examples of solutions include:

- Immediate technical assistance in creating a good-practice vaccine distribution system.
- Reallocation or mobilization of resources to eliminate school fees in rural areas.
- · Offer of government incentives to enlist private sector or community workers to help provide agriculture extension services to all farmers.

2. PREVIEW OF THE ACCELERATION FRAMEWORK STEPS

2.1 Summary

The MDG Acceleration Framework Steps provide a systematic methodology and toolkit to help identify and prioritize bottlenecks to MDG progress, select near-term 'acceleration' solutions to these bottlenecks, and create a comprehensive implementation plan to accelerate progress on the ground.

2.2 **Process overview**

The MDG Acceleration Framework process is a flexible, agile, and robust approach that enables countries and UNCTs to apply the framework methodology and toolkit to particular country contexts and intervention implementation challenges. The methodology is not prescriptive in nature. However, the methodology does rely on proven interventions as the starting point for accelerating progress toward top-priority MDG targets. As a result, it may be easier to apply the MDG Acceleration Framework process to targets for which a consensus set of MDG-based interventions is already clearly defined.

The methodology consists of four steps, each with its own tool set, that help users identify and implement bottleneck solutions. The primary input for the Framework is the priority MDGs that are off-track (i.e., experiencing slow progress) and require immediate action to accelerate progress toward the 2015 deadline.

- Step 1: Intervention identification and prioritization: Identifies and prioritizes the interventions that are critical to accelerating progress toward priority MDG targets by 2015. Users identify interventions necessary to accelerate progress toward priority MDG targets and then profile and rank these interventions.
- Step 2: Bottleneck identification and prioritization: Identifies and prioritizes bottlenecks that impede implementation of the priority interventions identified in Step 1. Users create a detailed end-to-end map of intervention implementation activities and associated bottlenecks and rank these bottlenecks based on impact and feasibility of removal/mitigation.
- Step 3: Solution identification and sequencing: Identifies and sequences near-term solutions to remove/mitigate intervention bottlenecks identified in Step 2. Solutions can be drawn from the countries' own experiences, successful pilots, and evidence-based good practices. 37 The dynamic 'Wikipedia of MDG acceleration' — under development — will provide a library of field-tested, global solutions and case studies for specific bottlenecks and interventions by drawing from these resources. Users identify and prioritize potential solutions through the 'wiki' tool, tools and methodologies of UN agencies, 38 and by engaging experts.

³⁷ The 2010 UNDG/MDG Task Force Thematic Papers (UNDG, 2010), as well as the UNDG Policy Network's Good Practices publication (UNDG, 2010), present a set of MDG good practices and lessons learned on the ground, collected through various UN agencies, governments, NGOs and CSOs.

³⁸ It is expected that the MDG Wikipedia will also include a list of updated resources (toolkits, guidelines and reports) that may be useful for additional guidance on specific MDGs.

• Step 4: Implementation planning and monitoring: Enables the government to establish an MDG Acceleration Compact, which serves as the basis for an implementation and monitoring plan for bottleneck solutions. Users create a resource and implementation plan, an implementation accountability matrix, target trajectory maps, and a monitoring and evaluation scorecard with standardized performance metrics to track solution delivery.

Each of these steps builds directly on country context and sub-national knowledge to achieve its objective.

The process leading up to the formulation of the MDG Compact or Country Action Plan is intended to be manageable and to build upon existing processes and knowledge, whether gathered from analytical reports, expert surveys or stakeholder consultations, while tapping into existing thematic working groups and other forums at the country level. While the government is expected to lead the process, the consultations required at each step and the end goal of formulating a concrete Action Plan or Acceleration Compact require the engagement of a wide range of non-government actors. The consultations should draw upon available national documents such as PRSPs reviews, sector plans, evaluations conducted by government agencies and development partners. The roles of the UNCT identified in the Action Plan are expected to help inform the UNDAF or to be aligned with it, depending on the programming cycle stage.

Figure 2.1 illustrates the objectives and deliverables for each step. The time to complete the step for each priority MDG target should be determined at the country level.

2.3 Relationship to existing processes

The MDG Acceleration Framework feeds directly into existing government, UN, and development partner processes: outputs from MDG Acceleration Framework Step 4, for example, are direct inputs to country and development partner planning and budgeting tools, such as the UN Common Country Assessment (CCA), UNDAF, PRSPs, and MDG National Reports.

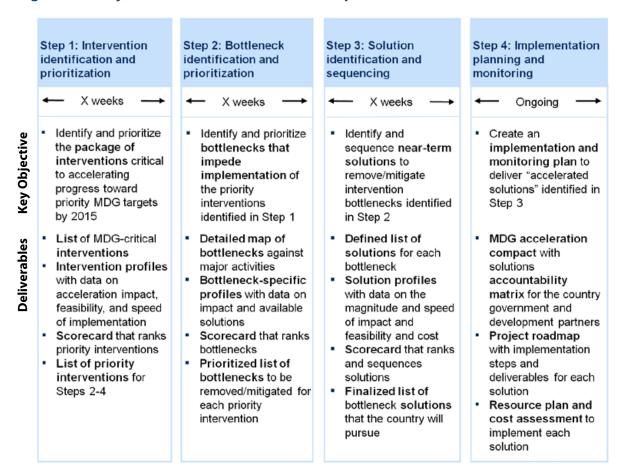
Because the framework is owned and used by the government, the government can ensure that it (1) addresses the bottlenecks behind localized MDGs, including uneven sub-national levels of achievement, (2) focuses on specific population segments³⁹ (e.g., rural children, women, ethnic minorities), (3) addresses and mitigates adverse impacts, and (4) includes a monitoring plan for each solution.

As the framework is fully consistent with the five interrelated UN principles (i.e., the Human Rights-Based Approach, gender equality, environmental sustainability, capacity development, and Results-Based Management)⁴⁰ that guide the UNDAF, the MAF can be used within in-country frameworks associated with UN coordination (e.g., joint programming) and donor coordination (e.g., EFA-Fast Track Initiative local donor group, education donor group, etc.), and can harmonize activities to be carried out through them.

³⁹ Demographic changes have implications for MDG attainment and longer-term sustainable development.

⁴⁰ Results-based management is a strategic management approach that UNCTs must use with partners to plan, cost, implement, monitor, and measure the changes from cooperation, rather than only the inputs provided or activities conducted. RBM depends on critical assumptions about the programme environment and risk assessments, clearly defined accountabilities and indicators for results, and performances monitoring and reporting (op. cit. Guidelines for United Nations [UN] Country Teams on Preparing a CCA and UNDAF, UNDG, January 2010).

Figure 2.1: Objectives and Deliverables for Step 1-4*



^{*} Time taken to complete each step is determined by the country and the expert working group. Based on the MAF pilot roll-out experience, several countries were able to complete the process in about 3-4 months.

2.4 Relationship to MDG Needs Assessment (costing tools)

While the Framework recognizes and builds on the significant work already done in using the MDG Needs Assessment tools to analyze the cost of achieving MDG targets, it is not designed to be a costing exercise. The framework deliberately moves beyond financing to analyze complementary bottlenecks that impede on-theground implementation of interventions to achieve MDG targets. Nevertheless, the framework can be applied when or before a country decides to engage in a costing exercise. In this respect, the MAF can facilitate the prioritization of what needs to be costed. Existing costing tools can be further enriched by identifying priority bottlenecks and estimating the costs and this information can help refine existing action plans.⁴¹

⁴¹ For a list of MDG Needs Assessment and Costing tools, refer to: content.undp.org/go/newsroom/publications/povertyreduction/poverty-website/mdg-na/mdg-needs-assessment-tools.en and to www.who.int/pmnch/topics/economics/ costing_tools/en/index.html

2.5 Intended users

The methodology assumes there are two core classes of framework users: (1) expert working groups (comprised by ministry officials, UN, development partners, NGO, and CSO representatives) that help the country throughout each of the four steps; and (2) UNCT technical experts who may, upon government demand, directly support in its preparatory work and analysis. The expert working group may be formed specifically for the MDG Acceleration Framework work process or may be, ideally, an existing development planning working group.

2.6 Facilitation technique

When engaging the expert working group, facilitators for the MDG Acceleration Framework should design sessions that emphasize objective decision-making. Sessions should include at least one gender-sensitive facilitator. To accomplish this, facilitators should consider:

- Basing facilitation techniques on sub-national customs and knowledge.
- Interviewing all expert working group participants before the group sessions begin to identify participant positions on issues and likely points of consensus and disagreement.
- Clearly defining analytical criteria at the start of each session.
- Incorporating regular 'pause and reflect' intervals that build preliminary consensus and identify gaps in agreement.
- Considering gender-sensitive and role-playing exercises to expand perspectives.
- Using the MAF step profiles, scorecards, and other tools to provide a solid analytical foundation for prioritization exercises (e.g., SWOT stakeholder analysis).
- Eliciting a group commitment to making decisions about priority interventions, bottlenecks, and solutions rather than delaying hard choices for the future.

More information on facilitation best practices for the Acceleration Framework appears in Annex A.

2.7 Explanation of colour-coding for profile, scorecard, and monitoring and evaluation tools

The MDG Acceleration Framework employs a colour-coding system to help assess interventions, bottlenecks, and solutions against a series of criteria. The assessments are used to help determine priorities during each MAF step. The colour-coding system is shown below.⁴²

⁴² In practice, countries have adapted this methodology to suit their circumstances.

Colour-coding definitions for the profile and scorecard tools in Steps 1-3:

- Green: achieves acceleration of progress toward priority MDG targets.
- Amber-green: potentially achieves acceleration of progress toward priority MDG targets.
- Amber-red: probably does not help acceleration of progress toward priority MDG targets.
- Red: does not help acceleration of progress toward priority MDG targets.

Colour-coding definitions for the monitoring and evaluation tool in Step 4:

- Green: implementation is on-track.
- Amber-green: implementation experiencing some delays that are easily resolved.
- Amber-red: implementation experiencing significant delays requiring attention.
- Red: implementation off-track requires immediate attention.

Intervention identification and prioritization



3. STEP 1: INTERVENTION IDENTIFICATION AND **PRIORITIZATION**

3.1 **Summary**

Step 1 helps identify and select the priority interventions that have the greatest country-specific, nearterm impact in reaching priority MDG targets. Countries that have already identified priority MDG-based interventions should draw from existing processes to complete Step 1.

Specifically this step helps:

- Identify the comprehensive list of interventions critical to accelerating progress toward achieving each priority MDG target.
- Prioritize and select the two or three most important interventions for each MDG target based on impact and feasibility of implementation.

The prioritized interventions of Step 1 are inputs for Step 2, which identifies bottlenecks that impede these interventions and prioritizes which bottlenecks to address to achieve the greatest impact.

3.2 **Purpose and objectives**

The primary objective of Step 1 is to identify and prioritize the interventions critical to accelerating and achieving priority MDG targets by 2015, thereby helping countries (and UNCTs) focus resources on the most important interventions. This begins with the government and relevant stakeholders agreeing upon two or three priority MDGs. Then, countries will:

- Develop a comprehensive list of interventions critical to accelerating progress toward priority MDG targets. This list of interventions should be informed by the priorities listed in the NDP/PRSP.
- Profile each intervention, including the magnitude (and speed) of impact and feasibility.
- · Prioritize the interventions for accelerating MDG progress based on their profile. Prioritized interventions will be examined under Steps 2 and 3 to identify bottlenecks as well as solutions to address the bottlenecks.

In the context of the MDG Acceleration Framework, an intervention is defined as the delivery of goods, services, and/or infrastructure to achieve development goals and targets by a specific date. In general, the MAF seeks to prioritize interventions that have near-term impact. However, the list can also include the delivery of interventions that have longer timelines, such as building capacity or physical infrastructure. Interventions should be evidence-based, with proven impact. Each country should aim to produce a comprehensive and coherent list of interventions both within and across sectors.

Many governments will already have intervention lists in their national and sector planning documents. These interventions can serve as starting points as long as they are grounded in real needs and address priority MDG

targets. Countries that have already undergone an MDG Needs Assessment exercise should leverage the work done through the costing exercise to help complete Step 1.

Examples of interventions include:

Target 1.A: Halve the proportion of people whose income is less than US\$1/day

- Agriculture extension services to transfer technology and farming methods to farmers (male and female)
- Small-scale water management that uses pumps, drip irrigation, and wells
- · Labour-saving technologies

Target 2.A: Ensure that children everywhere, girls and boys alike, will be able to complete a full course of primary schooling

- School fees elimination for enhancing primary enrolment and primary completion rates
- New schools and basic physical infrastructure (e.g., classrooms, female toilet facilities)
- School feeding programmes

Target 4.A: Reduce by two-thirds the under-five mortality rate

- · Vaccines to lower infant mortality
- Widespread delivery of neonatal integrated package (e.g., clean delivery, prevention of hypothermia, antibiotics for infection)

3.3 Methodology

This methodology has two process steps: (1) create intervention profiles and a summary scorecard and (2) prioritize interventions that will accelerate MDG progress.

1: Create intervention profiles that provide the information required to prioritize the interventions

Users create a list of priority interventions based on the NDP/PRSP, the MDG Acceleration Framework's good-practice guide, and other good-practice resources.

However, it is important to note that creating a list of priority interventions may be easier for some MDG targets than for others. Where a consensus on necessary interventions already exists, the process of developing a list of priority MDG interventions will be fairly straightforward. When this consensus is absent, users face a more difficult task and must rely on their own judgment, data, and the results of pilot initiatives to determine intervention relevance and effectiveness.

The list should contain interventions that experts believe are appropriate for the country's particular context. Where possible, users should leverage existing intervention prioritization work (e.g., national and sector plans and MDG Needs Assessment report).

To identify existing interventions, users should review key documents such as sector plans, Poverty Reduction Strategy (PRS)/ Poverty Reduction Strategy Papers (PRSPs), and MDG National Reports and consult with sector ministries, UN specialized agencies, academia, and civil society organizations (CSOs).

The List of Interventions in the Annex provides information to identify basic, proven/successful interventions that have been applied by various countries to achieve each MDG. These interventions are drawn from good practices of national governments and from the work of specialized UN agencies and other development partners.

Appropriate interventions should:

- Have an estimated production function that provides a clear understanding of the benefit per unit of resource expended to implement the intervention.
- · Focus on the most fundamental development needs for both male and female, girls and boys, including access to water, sanitation, hygiene, food and nutrition, shelter, security, public health and disease control, as well as access to sexual and reproductive health information and education services.

Figure 3.1: Intervention evaluation template for Impact (Illustrative)*

Criteria	Description	Green	Amber green	Amber red	Red
Incremental outputs and outcomes	Additional impact from improved implementation on priority MDG targets	Can close large portion of MDG gap by 2015 (defined at country level - e.g. 25% of gap)	Can potentially close large portion of MDG gap – defined at country level	Limited potential for additional impact prevents meaningful acceleration	 No potential for additional impact
Beneficiaries (population impacted)	Target population includes vulnerable groups and the least well- off	 Majority of impact focused on vulnerable groups and the least well- off 	 Portion of impact benefits vulnerable groups and the least well-off 	 Limited impact on vulnerable groups and the least well- off 	Little or no impact on vulnerable groups and the least well-off
Impact ratio	Benefit per unit of resource expended to implement the intervention	Data supports high ratio of benefit per unit of expenditure	 Data supports moderate ratio of benefit per unit of expenditure 	 Limited data available to support ratio or low ratio of benefit per unit expenditure 	 Limited data available to support ratio and low ratio of benefit per unit expenditure
Speed of impact	Length of time to realize the intervention's impact	 Full impact is realized within x months – time defined at country level 	 Partial impact is realized within x months or full impact within x years – time defined at country level 		 Impact will not be realized before 2015
Evidence of impact	Intervention implementation history and impact in other contexts	Intervention implemented successfully in many countries	Intervention implemented successfully in a few countries	 Intervention has not been implemented previously or has been implemented with mixed success 	Intervention implemented with no success in other countries

^{*} Criteria to be discussed by the expert working group and adjusted to the country context

- Have the highest impact and positive catalytic effect in reaching priority MDG targets. Interventions should focus on specific development challenges within a sector and aim for the greatest positive impact on their MDG targets.
- Rely on a strong fact base. Countries should identify proven good-practice interventions from countries/regions with similar contexts and demonstrate their feasibility and impact.
- Feature strategies that are tailored to the country's specific context. Interventions should be further customized to regions within a country and sub-national governments should be heavily involved in implementing the interventions as well as in planning and financing.
- Include specific strategies for tackling challenges faced by women and girls, since they typically face the greatest burdens of extreme poverty, hunger and disease.

After identifying the interventions, users create comprehensive intervention profiles that help assess likely impact (e.g., magnitude and speed of impact, targeted beneficiaries) and feasibility (e.g., governance and funding availability). To create comprehensive intervention profiles, users will gather data from existing

Figure 3.2: Intervention evaluation template for Feasibility (Illustrative)*

Criteria	Description	Green	Amber green	Amber red	Red
Governance	Stakeholder coordination and political will for solution implementation	High potential for stakeholder coordination and political support	 Potential stakeholder coordination or political support in doubt 	 Potential stakeholder coordination and political support in doubt 	 Potential stakeholder coordination and/or political support certainly not available
Capacity	Government and partners' ability to plan, implement, and monitor the solution	 Government and partners have the capacity to plan, implement, and monitor the solution 	 Some capacity concerns over planning, implementation, or monitoring, but delivery likely 	 Significant concern over planning, implementation, or monitoring that may prevent delivery 	 Government and partners probably do not have the capacity for successful delivery
Funding availability	Availability of funds to cover the solution's cost	 Funding (either through the government or donors) readily available 	 Funding likely, but specific source yet to be determined 	 Ability to fund the solution uncertain; probably requires a new funding source 	 Funding not likely
Additional factors	Additional factors that may impede the solution	No factors identified	 Minor concerns identified, but they can be resolved 	 More substantive issues identified, but solutions likely 	 Substantial, unsolvable issues identified

^{*} Criteria to be discussed by the expert working group and adjusted to the country context

sources (e.g., ministry reports and IGO/NGO reviews) as well as from interviews and focus groups with relevant experts. These profiles will be used to prioritize the interventions.

Intervention evaluation templates (see Figures 3.1 and 3.2) provide the criteria for evaluating each intervention, along with a description of the criteria.

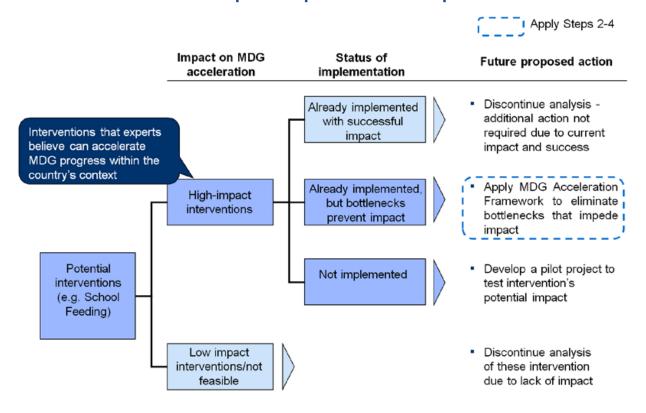
Outputs: The outputs from Step 1 are a full list of interventions critical to achieving the priority MDG targets and intervention-specific profiles (impact and feasibility) that provide the qualitative and quantitative data for prioritization.

2: Prioritize the interventions that will accelerate MDG progress

Users can create intervention scorecards that summarize the relative strengths and weaknesses of each intervention. These scorecards provide the basis for comparing intervention impact and feasibility. Through a consultative and consensus process, expert working groups use the scorecards to compare interventions' strengths and weaknesses and to rank the interventions.

Based on this ranking, the expert working group identifies the priority interventions. For each of these selected interventions, the expert working group decides on three possible actions: (1) do nothing if the

Figure 3.3: MDG Acceleration Framework Step 1 identifies interventions necessary for MDG acceleration and the potential path forward for implementation



intervention is already working, (2) pilot the intervention if the country is not currently pursuing it, and (3) if the intervention is not working, run it through Steps 2-4 to determine the bottlenecks, acceleration solutions, and implementation plan.

To prevent confusion and delay, the expert working group must commit to making a decision on each intervention — it should not defer such decisions to a later time.

Outputs: The outputs from this step are scorecards that help the experts rank the importance of each intervention and priority interventions for accelerating MDG progress.

A special note on cross-cutting interventions

While the interventions identified under Step 1 will often be sector-specific, there is a chance that some of the most appropriate interventions are cross-cutting; interventions traditionally tied to one sector may, in fact, have a significant impact on a second sector. For example, addressing environmental factors (MDG 7) may have an effect on infant mortality (MDG 4). So, a sector-specific analysis would focus on health interventions, but a cross-cutting analysis will also identify safe water, reducing atmospheric pollution, and sanitation

Figure 3.4: Overview of Step 1 process*

Inputs include priority Create intervention profiles that provide Prioritize the interventions that will MDG, stakeholder the information required to prioritize the accelerate MDG progress commitment, agreedinterventions upon best practice interventions X weeks X weeks Create a list of potential priority Create intervention scorecards activities interventions, based on the National Rank the interventions based on the Development Plan/PRSP and the profiles, scorecards, and expert judgment Framework's good practice guide Select priority interventions and decide on Create comprehensive intervention profiles next steps for each intervention. Next steps (e.g., number of people impacted, could include: (1) do nothing if the beneficiaries, governance, capacity, etc.) intervention is already working, (2) pilot the intervention if the country is not currently based on Pre-existing data on the intervention's pursuing it, or (3) run the intervention impact and feasibility, including through Steps 2-4 if the country has implementation timeline implemented the intervention, but it is not Expert interviews and focus groups, working including intervention participants Outputs Full list of interventions critical to achieving Scorecards that help the experts rank the priority MDG targets importance of each interventions Intervention-specific profiles that provide Priority interventions for accelerating MDG data on impact, feasibility, and speed of implementation Interventions that will run through Steps 2-4 Ownership • Expert working group - supported by Expert working group – chaired by government representative - including UNCT experts Interviewees include ministry officials, UN, ministry, UN, development partner, and development partners, and CSO expert CSO experts representatives

^{*} Time taken to complete Step 1 determined by the country and the expert working group

improvements as potential health interventions as well. MDG Acceleration Framework users will want to identify these additional cross-cutting interventions when appropriate.

3.4 Step 1 illustrative case study: MDG 2

In this illustrative case study, country users prioritize three interventions critical to accelerating and achieving MDG 2 (Universal Primary Education Target 2.2 — increasing the percentage of pupils who start first grade and go on to finish primary education). The case study walks through Step 1 methodology to illustrate the use of MDG Acceleration Framework tools and to provide examples of activities and outputs.

Step 1: Create intervention profiles

The expert working group and UNCT technical experts review national development strategies, focusing on education-sector strategy, and study reports on good practices to achieve universal primary education. The list of possible interventions they identify includes:

- a) Conditional cash transfers
- b) Parent involvement in sub-national educational management
- c) Child involvement in sub-national educational management
- d) Transparent information dissemination (right to information)
- e) Development of new learning evaluation systems
- f) Programmes for children with disabilities
- g) Conflict/post-conflict programming
- h) Incentives for creating an environment for girls' enrolment (e.g., uniforms, separate toilets)
- Construction of new schools equipped with separate sanitary facilities for girls and boys
- Teacher training and recruitment j)
- k) Curriculum reform
- School feeding programme
- m) Eliminate school fees
- n) Early education programme
- o) School security
- p) Access to labour-saving technologies (e.g., technologies that facilitate access to water and energy)

After reviewing data on interventions, as well as hosting expert interviews and focus groups, the expert working group and UNCT technical experts profile each intervention. They use the template from Step 1, which captures:

- Impact: incremental impact, beneficiaries (population segment impacted, e.g., rural residents, vulnerable groups, etc.), production function (impact ratio), speed of impact, evidence of impact.
- · Feasibility: governance, political will to implement, technical difficulty, resource availability, additional requirements/factors.

Figure 3.5: Template of intervention profile – Conditional Cash Transfers – MDG 2 (Illustrative)*

Intervention description: Conditional cash transfer to improve demand-side incentives. Cash transfers will cover the family's opportunity cost in lost wages or other earning potential caused by the child's enrolment and attendance. Cash transfers will also cover indirect educational costs such as books and transportation to school. Accelerated impact Overall Feasibility Overall Governance Incremental outputs and outcomes 2 key actors: Ministry of Education and High incremental impact potential because Ministry of Finance aligned with the program no program currently exists. 50 percent High political will from both the government greater chance a child will finish school and potential donors Beneficiaries (population impacted) Conditional transfers targeted to girls and Capacity vulnerable groups Conditional transfers require significant technical and management expertise from the Impact ratio Ministry of Education Every \$10 expected to result in 1 additional Funding availability enrolment Donors have expressed interest in providing Speed of impact and ability to accelerate funding Expected to impact 50 percent of students within 6 months; the remaining 50 percent Additional factors will take 18 months High potential for corruption Financial infrastructure to facilitate payments currently exist Evidence of impact Intervention was successfully implemented

Step 2: Prioritize the interventions

in Ghana

The expert working group reviews the scorecards and prioritizes (1) conditional cash transfers, (2) construction of new schools, and (3) incentives for creating an environment for girls' enrolment. The country has attempted to implement these first two programmes for the last several years, but success has been mixed. The country has never tried incentives for girls' enrolment.

Conditional cash transfers are chosen as a priority intervention because, while there has been slow adoption of the programme in this country, other countries (with similar agriculture-based economies) have experienced great success with such programmes: a 50 percent increase in students' finishing school (illustrative for this case). Conditional cash transfers can also be targeted to the most vulnerable population groups, including to girls. The country's Ministry of Education and Ministry of Finance support the programme, as do potential donors.

Similarly, new school construction will most likely have significant impact because most rural areas currently do not have school facilities (despite the country's having started a school building programme in 2001). Furthermore, school construction has support from the Ministry of Education as well as most states and local communities.

^{*} Numbers are illustrative and will vary based on intervention and the country context

These two interventions will be examined under Steps 2-4 to identify implementation bottlenecks and solutions. The third intervention, incentives to create an environment for girls' enrolment, is not currently underway in the country and will be piloted on a national scale due to broad support and success demonstrated by neighbouring countries.

3.5 Potential challenges to completing MAF Step 1

In executing Step 1, there are five potential barriers to success:

- Country and sector plans do not clearly identify priority interventions aimed at achieving the MDGs or do not focus on the MDGs. In these cases, countries may need to spend additional time during Step 1 analyzing potential interventions (e.g., studying the interventions in the Annex at the end of this step).
- There is no consensus as to the relevant good-practice interventions necessary to achieve a priority MDG target. In these situations, countries may choose to pilot a set of interventions to determine which interventions work best in their context.

Achieves acceleration Potentially achieves acceleration Probably does not help acceleration **INTERVENTION SCORECARD - MDG 2** Does not help acceleration Intervention Interventions **Impact** Feasibility Rank chosen? Potential actions Amber green Yes Conditional cash transfers Proceed to Step 2 **Acceleration Framework** Amber red Amber red No Parent involvement 9 No furth consideration required set of interventions Amber red Nο Children involvement Amber green 6 No furth nsideration required Amber green Amber green 5 Nο No furth Transparent information deration required Amber red Amber red No No furth Learning evaluation systems 8 eration required Amber green Amber red 7 Nο Programs for children with disabilities There are 3 potential Amber red 12 No Conflict/post-conflict programming actions for priority Amber green Yes Incentives for girls' enrolment interventions: (1) do Yes Construction of new schools 1 nothing if the No Amber red Amber red Teacher recruitment and training 10 intervention is already Amber green Curriculum reform Nο working, (2) pilot the No Nutritional feeding programs 13 intervention if the country is not currently No Early education programming Amber red 14 pursuing it, and (3) if interventions Additional country No School security .11 the intervention is not

The expert working group ranks the interventions based on potential

impact, feasibility/risk, and any

additional information they may have about the interventions

working, run it through

Steps 2-4 to

determine the

bottlenecks and solutions

Figure 3.7: Illustration of intervention scorecard with priority interventions selected – MDG 2

			Potenti Probal	ves acceleration tially achieves acceleration bly does not help acceleration not help acceleration
				Selected
				nterventions
Impact	Feasibility	Rank	chosen?	Potential actions
Green	Amber green	1	Yes	Proceed to Step 2
Green	Amber green	2	Yes	Proceed to Step 2
Amber green	Green	3	Yes	Pilot the intervention
Amber green	Amber green	4	No	No further consideration required
Amber green	Amber green	5	No	No further consideration required
Amber red	Amber green	6	No	No further consideration required
Amber green	Amber red	7	No	No further consideration required
Amber red	Amber red	8	No	No further consideration required
Amber red	Amber red	9	No	No further consideration required
Amber red	Amber red	10	No	No further consideration required
Red	Green	11	No	No further consideration required
	Green Green Amber green Amber green Amber green Amber red Amber red Amber red Amber red Amber red	Green Amber green Green Amber red	Green Amber green 1 Green Amber green 2 Amber green Green 3 Amber green Amber green 4 Amber green Amber green 5 Amber red Amber green 6 Amber green Amber red 7 Amber red Amber red 8 Amber red Amber red 9 Amber red Amber red 10	Impact Feasibility Rank chosen? Green Amber green 1 Yes Green Amber green 2 Yes Amber green 4 No Amber green Amber green 5 No Amber green Amber green 6 No Amber green Amber green 7 No Amber green Amber green 8 No Amber green Amber green 9 No Amber green Amber green 9 No Amber green Amber green 10 No

• Ministry staff lacks the capacity to provide technical input to the process and rely exclusively on external technical consultants, who lack national and sub-national knowledge.

Red

Amber red

Amber red

12

13

14

No

No

No

No further consideration required

No further consideration required

No further consideration required

Amber red

Red

Red

- Expert working group lacks the minimum data (or data is not of sufficient quality) to determine
 which interventions are successful and which have failed. Data to determine how interventions
 work across population groups may also be lacking. If data is not available, the expert working
 group may need to conduct surveys, interviews, or focus groups to determine which interventions
 will be successful.
- Government ministers and experts strongly disagree over which interventions are key to accelerating progress, potentially delaying decisions. Please refer to Annex A for facilitation suggestions.

3.6 Prerequisites for success

Completion of Step 1 requires:

Conflict/post conflict programming

Nutritional feeding programs

Early education programming

Consensus on two or three priority MDGs requiring interventions to accelerate progress by 2015.
 (Most countries have undertaken substantial reporting and analysis on MDG progress and have MDG scorecards.)

- Agreement on what are the proven good-practice interventions for the country-specific context so that the remaining steps focus on the right interventions.
- · Commitment from representative stakeholders to join the expert working group before the process begins. These stakeholders should include relevant government ministry officials, UNCT representatives, representatives from a broad spectrum of development partners, and civil society representatives (e.g., women's organizations, religious groups, workers' and employers' organizations, etc.). These stakeholders must also stay involved throughout the process to ensure that the best decisions are made.

3.7 Potential sources of information

When completing this step, there are several sources of information available to help identify and prioritize the interventions:

- National Development Plan/Poverty Reduction Strategy Papers
- National Development Strategies/Poverty Reduction Strategies
- Sector plans
- Mid-term reviews
- MDG Needs Assessment
- DevInfo
- MDG Acceleration Framework Suggested Package of Interventions (see Annex Step 1)
- UNDP MDG Handbook on Preparing National Strategies to Achieve the MDGs (forthcoming 2011)
- · Writings on MDG Good Practices (UNDG 2010, MDG Good Practices by the UNDG Policy Network for the MDGs) and UNDG Thematic Papers (2010) by the MDG Task Force
- NGO/CSO sector evaluations and reviews

ANNEX – STEP 1: LIST OF INTERVENTIONS

The list of interventions below is based on country experiences and technical expertise from UN specialized agencies. All interventions should be tailored to the country context.

Millenium Development Goals

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Goal 1: Eradicate extreme poverty and hunger	me poverty and h	unger
Target 1.A: Halve, between 1990 and 2015, the proportion of people whose income is less than one	1.1 Proportion of population below US\$1 (PPP) per day	Investments in soil health: Combinations of mineral fertilizers, agroforestry (use of trees to replenish soil nutrients), green manures, cover crops, return of crop residues, mixed planting, and soil erosion control, as appropriate, depending on soil characteristics, partly financed by market-oriented smart vouchers to food-insecure farmers.
dollar a day		Ex ante impact analysis of key poverty reduction policies: Conduct Poverty and Social Impact Assessments of economic and social policies with strong effects on poverty reduction, e.g., capital market deregulation, removal of trade barriers or privatization of basic services.
		Extension services: Strengthening of extension services with village-level paraprofessionals that have a strong gender-sensitive participatory approach and up-to-date knowledge of soil health, small-scale water management, improved germplasm, high-value products, and other ecologically sound agricultural techniques.
		Small-scale water management: Gender-sensitive development of water management techniques and structures, pumps, drip irrigation, wells, and the like, as appropriate and acceptable by users, partly financed by market-oriented and affordable smart vouchers to food-insecure farmers.
		Improved inputs: Provision of locally procured seeds (whenever available) of improved varieties of crops, pastures, and trees, as well as improved breeds of livestock and fish, with delivery systems accessible to food-insecure farmers, such as community tree nurseries.
		Farm diversification: Ensure farmers have access to knowledge, technology and incentives to farmers to diversify to high-value livestock, vegetables, and tree products, once they are food-secure.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Target 1.A: Halve, between 1990 and 2015, the proportion of people whose	1.1 Proportion of population below US\$1 (PPP) per day	Cash transfers programmes: Within the context of social protection strategies, e.g., conditional cash transfers aimed at supporting families to keep children in school and out of the workforce.
income is less than one dollar a day		Develop ICTs and national broadband development plans as tools for accelerating the MDGs: • Provide direct, relevant agricultural information online and in local languages to improve farming practices and land productivity.
		 Increase efficiency, competitiveness and market access of developing country firms to participate in global economy.
	1.2 Poverty gap ratio	Agricultural research: Increased investments in national research systems for agriculture and natural resource management to 2 percent of agricultural GDP. In order to obtain accelerated results to close the poverty gap ratio, investments in agricultural research could fast-track existing research pipelines and technology that are ready but have had limited dissemination, focused on crops primarily grown by the poor, such as cassava, pigeon pea, cowpea, maize, and rice.
		Introduction and scale up of safety nets targeted to the poor using cash, voucher (food, agriculture inputs, education, or critical services), or in-kind transfers (food, school materials, seeds, fertilizers, etc.).
	1.3 Share of poorest quintile in national consumption	Special interventions to reach women farmers. Recruitment and training of women extension workers; provision of inputs (seeds, fertilizers, implements) targeted to reach women; promotion of women's property rights to and control over land, water, trees, livestock and fisheries; and access to knowledge and information about agriculture, nutrition, marketing, finance, natural resources management and conservation, and environmental protection.
		Storage, marketing, and agroprocessing equipment facilities. Construction of warehouses to reduce post-harvest losses, construction of market spaces; provision of training and equipment to encourage small-scale agroprocessing industries in rural areas; support for shifts to high-value farming and skill building; support for rural input traders; and provision of access to market information.
		Agrodealer networks: Fostering of local agrodealers to sell fertilizers, seeds for agroforestry, green manure, water management equipment, and improved seeds; redemption of smart vouchers; receipt of training from extension workers.

Goals and targets (from the Millennium	Indicators for monitoring	Suggested interventions
Declaration)	progress	
Goal 1: Eradicate extreme poverty and hunger (cont.)	me poverty and	I hunger (cont.)
Target 1.A: Halve, between 1990 and 2015, the		Food security, agriculture development (such as Green Revolution, national food security strategies)
proportion of people whose income is less than one dollar a day	in national consumption	Decent employment-generation policies (such as targeted employment interventions for the poor) and ensuring access to employment (such as vocational guidance services for young people to find their first job, consistent with the conditions of employment established under national law and practice); ensuring elimination of direct and indirect, policy and practice barriers to work and productive resources, particularly barriers on the basis of sex, race, age and disability.
		Give higher priority to support programmes targeting young women for income generation, decent employment, and job search mechanisms.
		Vocational and technical training for specialized and broad agriculture sector, especially targeted at women who are often bypassed by such possibilities.
		Support to producers' and workers' institutional arrangements (formal and informal): Investments to strengthen producers' and workers' institutional arrangements to improve their bargaining power to enable them to access markets and influence policies. Special emphasis will be on access to technology for men and women producers and workers, e.g., mobiles, internet, etc., after the 'biovillages' in southern India and the Hunger Project's 'epicenters' in Africa.
		Electric power generation capacity. Extension, upgrading, and maintenance of electric power generation capacity (thermal energy plants, hydropower, or geothermal, as appropriate) to supply electric power grids.
		Electric power grid: Extension of electricity grid through high-voltage lines, medium- to low-voltage lines (including end-user connections) and other related infrastructure (such as transformer stations).
		Off-grid energy supply to remote areas and populations not connected to grid (solar, wind, hydropower, biomass, generators, etc.).
		Access to tenure and rights: Local ownership and control of natural resources, including common property and provision of access rights, including to ancestral lands, especially for women.

Goals and targets	Indicators for	Suggested interventions
(from the Millennium Declaration)	monitoring progress	
Target 1.A: Halve, between 1990 and 2015, the	1.3 Share of poorest quintile	Industrial promotion: Supportive policies, including tax concessions and grants, as well as provision of additional infrastructure for development of manufacturing and service industries.
proportion of people whose income is less than one dollar a day	in national consumption	Export processing zones: Provision of export processing zones, industrial parks, and other designated areas for private sector development in ways that do not create poverty, e.g., through displacement of vulnerable or marginalized populations.
Target 1.B: Achieve full and productive employment and decent work for all,	1.4 Growth rate of GDP per person	Develop ICTs and National broadband development plans as tools for accelerating the MDGs: • Create employment opportunities (i.e., telecentres, call centres, data entry processing, software development)
including women and young people ^a	employed	 Increase efficiency, competitiveness and market access of developing country firms to participate in global economy
		The intervention areas are clustered around three categories: Policy, capacity and direct action.
	1.5 Employment-to- population ratio	This is an integrated approach to deliver on the four MDG employment-related indicators. The general objective is to place productive employment and decent work at the centre of national development strategies.
	1.6 Proportion	Policy-level interventions to address poverty (macro level)
	of employed people living	 Measures to boost effective demand and help maintain wage levels by including macroeconomic policies
	below US\$1 (PPP) per day	• Use employment targeting in macro and sectoral strategies
	1.7 Proportion of own-account	 Put productive and decent job creation at the centre of policy-making; employment- intensive policies for infrastructure investment; employment-centred agricultural and rural development policies; policies to enhance the employment gains from trade and
	and contributing family workers	address the employment effects of trade shocks, industrial policies and value chain development. It is important that the quantity and quality of jobs be addressed and
	in total employment	that these employment goals and targets be integrated into national development frameworks, economic policies and sectoral strategies. Gender equality should be put at the centre of employment-related policy-making
		the centre of employment-related policy-making

See also the FAO Guidance document on how to address rural employment and decent work concerns. This Guidance document provides additional reflection on the centrality of decent and productive employment promotion in rural areas for the achievement of the MDGs as well as examples of concrete actions and tools that could be considered at the country level. The document is available at: www.fao-ilo.org/fileadmin/user_upload/fao_ilo/pdf/GuidanceRE.pdf

Goals and targets	Indicators for	Suggested interventions
(from the Millennium Declaration)	monitoring progress	
Goal 1: Eradicate extreme poverty and hunger (cont.)	me poverty and	hunger (cont.)
Target 1.B: Achieve full and productive employment	1.4 Growth rate of GDP	• Enhance knowledge of rural labour systems and their main dynamics, ensuring that analysis is backed up by rural employment age- and sex-disaggregated data
and decent work for all, including women and young people	per person employed	 Monitoring trends in the informal economy (including small-scale agriculture and informal rural economy) and policy action that facilitates upgrading and transition to formality
	1.5 Employment-to- population ratio	 Scaling up public employment programmes and more broadly increasing the content of employment in the area of infrastructure investments through (i) redirecting fiscal policies; (ii) strengthening governance in contracting and tendering processes; (iii) promoting skills and entreprehensishin among small contractors in the domestic construction industry:
	1.6 Proportion of employed	and (iv) integrating rights and the broader decent work agenda into public infrastructure works
	people living below US\$1 (PPP) per day	 Active labour market policies and programmes addressing the specific needs, constraints and potential of women and youth
	1.7 Proportion of own-account and contributing	 Adoption and enforcement of national legislation against child labour and its worst forms and development and implementation of cross-sectoral national action plans to eliminate the worst forms of child labour
	family workers in total	 Active labour market policies and programmes for specific vulnerable groups (particularly young people employed in hazardous work, migrant workers, landless people, refugees,
	employment	internal displaced people, demobilized soldiers, persons living with disabilities, people living with and affected by HIV/AIDS, indigenous people, and the elderly) including public works programmes, cash transfers to the most vulnerable, and temporary subsidies for
		housing and fee waivers. Policies that improve access to finance and related services to smoothen income and expenditure of households, as well as policies to close the credit gap for SMEs and enable small and medium enterprise financing
		 Policies and regulatory frameworks to improve the enabling environment to make it easier for individuals, particularly women and young people, to start and grow formal businesses. This implies policies that encourage investment, land access, entrepreneurship, workers' rights and the creation, growth and maintenance of sustainable enterprises

Goals and targets	Indicators for	Suggested interventions
(from the Millennium Declaration)	monitoring progress	
Target 1.B: Achieve full and productive employment	1.4 Growth rate of GDP	 National and sector-specific policies and systems to forecast skills needs and match skills delivery with labour market needs
and decent work for all, including women and	per person employed	 National, local and sector-specific inter-ministerial and multi-stakeholder mechanisms and partnerships to address the complexity and multi-dimensionality of employment issues
young people	1.5 Employment-to- population ratio	 Expansion of social protection systems: Establish a social protection floor by ensuring access to basic social services and empowerment and protection of the poor and vulnerable. Investments in social safety nets such as food for work, cash for work.
	1.6 Proportion of employed	employment guarantee schemes, community grain banks, environmental rehabilitation, provision of water, sanitation, health and education services and a minimum income
	people living below US\$1 (PPP) per day	security to mitigate shocks and reduce longer-term food security risks. Beneficiaries should include marginalized groups such as persons living with disabilities, ethnic, linguistic and religious minorities, and non-nationals
	1.7 Proportion of own-account and contributing family workers	 Extending social protection to small agricultural producers and other informal rural workers through livelihoods-based mechanisms and mechanisms for improving working conditions, such as: promotion of good practices in occupational health and safety in agriculture; support to productivity-enhancing safety nets; conditional cash transfers; and
	in total employment	schemes linking transfers with active labour market policies Work/family: Develop policies and laws allowing for a better balance of work and family recognite for women and man in order to allow a more order to the control of these
		responsibilities for women and men in order to allow a more equal straining of these responsibilities. Such policies should include parental and/or paternity leave (with incentives for men to use them since, when incentives are available, men do not often take advantage of them). Infrastructure for childcare and dependent care, backed by appropriate human and financial resources, should be pursued.
		 Capacity-building interventions to address poverty (meso level) Tripartite constituents who have the capacities to negotiate multi-component and coordinated national employment policies

Goals and targets	Indicators for	Suggested interventions
(from the Millennium Declaration)	monitoring progress	
Goal 1: Eradicate extreme poverty and hunger (cont.)	me poverty and	hunger (cont.)
Target 1.B: Achieve full and	1.4 Growth	Capacity-building interventions to address poverty (meso level) (cont.)
productive employment	rate of GDP	 Capacity of national institutions to generate and analyze age- and gender-disaggregated
and decent work for all,	per person	labour market information to improve monitoring and evaluation (action-oriented
including women and	employed	research, statistical capacity to generate and analyse data, including industrial and
young people	1.5	occupational classification to the third digit, and necessary details on specific activities
	Employment-to-	and time use)
	population ratio	 Capacities of national institutions to plan, implement and monitor multi-stakeholder
	1.6 Proportion	programmes to expand access to employment opportunities and relevant training, with
	of employed	a focus on youth, women, and people in rural areas, as well as specific vulnerable groups,
	people living	such as young people employed in hazardous work, migrant workers, landless people,
	below US\$1	refugees, internal displaced people, demobilized soldiers, persons living with disabilities,
	(PPP) per day	people living with and affected by HIV/AIDS, indigenous people, and the elderly, to acquire
	1.7 Proportion	skills and use them to secure productive employment
	of own-account	· Capacities of national institutions to improve effectiveness of public national employment
	and contributing	services through career guidance and counselling, labour exchange services, delivery of
	family workers	active labour market programmes, regulation of private employment agencies and rapid
	ın total	
	employment	 Capacities of business providers to provide training and other market development programmes
		 Capacities of national and decentralized institutions to support the development of producer and worker organizations and networks
		 Capacities of national institutions and other relevant stakeholders (including producer, employer and worker organizations in the formal and informal economies) to address child labour prevention
		• Capacities of producer and worker organizations and networks, particularly in rural areas.
		to engage in policy dialogue and strategic planning. Youth and women organizations empowerment should be a priority.

Goals and targets (from the Millennium Declaration) Target 1.8: Achieve full and productive employment and decent work for all, including women and young people	Indicators for monitoring progress 1.4 Growth rate of GDP per person employed 1.5 Employment-to-population ratio 1.6 Proportion of employed people living below US\$1 (PPP) per day 1.7 Proportion of own-account and contributing family workers in total	 Suggested interventions Direct action interventions to address poverty (micro level) Employment-intensive road rehabilitation (or other infrastructure) programmes Green and decent jobs initiatives focusing on climate change adaptation and mitigation measures, bioenergy, organic farming, biofuels production, sustainable forest management, etc. Employment Guarantee Programmes: Consider options to provide employment of last resort by the government, either for crisis mitigation or with a longer-term development perspective, especially for women, and complementarity with other labour market policies and social protection measures (e.g., Junior Farmer Field and Life Schools) Multi-stakeholder initiatives and programmes in sectors of the economy that involve the worst forms of child labour (e.g., agriculture) Child labour prevention programmes linked with youth employment promotion for out-of-school children Skills training interventions targeted at vulnerable youth, including those who have missed basic education, to enable young people to find decent work. Reformed and scaled-up informal apprenticeship schemes Programmes that allow women and men, especially the young, to develop and apply enterprising attitudes and skills in business and the community (SIYB, GYB, EYB, WEDGE)
		 Programmes that promote the adoption of sustainable and responsible workplace practices that improve the quality of employment Programmes aiming to provide migrant workers with information about their rights and protection against all forms of discrimination in employment and occupation Programmes to improve the productive use of remittances in rural areas of origin, e.g., incentives schemes; partnerships between financial institutions to improve migrants' access to efficient remittance-transfer channels Programmes that facilitate linkages between SMEs and large enterprises, including multinational enterprises, along expanding national and global value chains. This includes the promotion of rural enterprises and the integration of local economies with larger national and global markets

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Goal 1: Eradicate extreme poverty and hunger (cont.)	eme poverty and	nunger (cont.)
Target 1.B: Achieve full and productive employment and decent	1.4 Growth rate of GDP per person employed	 Direct action interventions to address poverty (micro level) (cont.) Programmes to promote effectiveness, competitiveness and outreach of cooperatives and other producer and worker organizations and networks
work for all, including women and young people	1.5 Employment- to-population ratio	• Enterprise growth models through value chain development (e.g., support of small-scale producers' participation in value chains, building on the potential of POs)
	1.6 Proportion of employed people living below US\$1 (PPP) per day	• Social security: Assess options and take targeted steps to establish both contributory and non-contributory social security schemes, if necessary starting with those that protect disadvantaged and marginalized individuals and groups, or with a core group of social risks and contingencies, consistent with the conditions of national law and practice.
	1.7 Proportion of own-account and contributing family workers in total	 Access to credit: Extension of the formal banking system and provision of microcredit services, including to rural women and marginalized groups such as persons living with disabilities, ethnic, linguistic and religious minorities or non-nationals. Micro-insurance innovations
Target 1.C: Halve, between	employment 1.8 Prevalence	Addressing hidden hunger: Reduction of vitamin A and iron, zinc, and iodine deficiencies by
1990 and 2015, the proportion of people who suffer from hunger ^b	of underweight children under five years of age	increasing the production and consumption of micronutrient rich foods, particularly local fruits, vegetables, livestock products, and iodized salt and fortified foods from local products (such as India Mix); special attention to nutrition needs of population groups who are particularly vulnerable or marginalized on grounds of gender, ethnicity, religion (with added attention to young women), and people living with HIV/AIDS; fast-track the dissemination of new bio-fortified lines such as sweet potato (vitamin A), rice (zinc and iron) and maize (protein).

b Interventions to improve food supply through increased agricultural productivity, particularly for smallholder farm households, described under Targets 1A and consider India and China). Addressing food security in these countries requires a careful and coordinated balance of development and humanitarian assistance, a 1B, could also be considered here to address food security. The 2010 State of Food Insecurity: Addressing food insecurity in protracted crises, published by FAO, indicates that over 20 percent of the world's chronically hungry live in the 22 countries experiencing protracted crises (and almost 40 percent if one does not view that echoes broader the policy perspectives of the High-Level Task Force on the Global Food Security Crisis (HLTF)/Committee on World Food Security (CFS).

While locally sourced food is the ideal, it should not come at the expense of improving nutrition, particularly where RUSFs are not yet locally available.

		:
Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Target 1.C: Halve, between 1990 and 2015, the	1.8 Prevalence of underweight	Introduce protocols and training on Community-based Management of Acute Malnutrition (CMAM) and treatment of Severe Acute Malnutrition (SAM).
proportion of people who suffer from hunger	children under five years of age	Scaling up public health messaging about diet quality for children under five years; including a focus on exclusive breastfeeding and good nutrition in pregnancy, as low birth weight is a significant determinant of future malnutrition.
	1.9 Proportion of population	Nutrition for school-going children: Provision of balanced school meals with locally produced foods at the primary and secondary levels.
	below minimum level of	Urban agriculture: Promote urban and periurban food production, particularly of root and tuber crops, bananas, fruit trees, vegetables, and small-scale livestock.
	consumption	Nutrition for infants, pregnant women, and nursing mothers: Promotion of mother- and baby-friendly community initiatives, including exclusive breastfeeding for first six months and complementary feeding with continuing breastfeeding for infants aged 7 to 24 months.
		Provision of sufficient calories, protein, and micronutrients to pregnant women and nursing mothers, supported by nutrition extension workers. Universal access to reproductive and
		sexual health services is also needed to ensure that women are able to delay first pregnancy and properly space births to avoid cumulative nutritional deficits and to reduce the risk of complications for themselves and their children.
		Nutrition for undernourished children under five years: Complementary feeding, including fortified and blended foods, with take-home rations supported by nutrition extension workers.
		Emergency food assistance: Early warning systems. Strengthening of early warning systems to cope with natural disasters.
		Emergency food response: Direct food transfers and feeding, appropriate to age and nutritional status, in areas where drought, floods, earthquakes, and civil wars threaten the acutely hungry with starvation.
		Thermal energy systems: Improved cooking stoves. Distribution and maintenance or replacement of appropriate cooking stoves (ceramic stoves, liquid petroleum gas stoves (LPG), ethanol stoves, charcoal stoves, and the like).
		Modern cooking fuels. Strengthening of distribution and production systems for modern fuels (such as liquid petroleum gas, ethanol, dimethylsulfoxide, and kerosene), including safe containers.

Goals and targets (from the Millennium Declaration)	indicators for monitoring progress	Suggested interventions
Goal 2: Achieve universal primary education ^d	sal primary educa	tion ^d
Target 2.A: Ensure that, by	2.1 Net enrolment	Demand-side incentives: Elimination of fees for primary school.
2015, children everywhere,	ratio in primary	Demand-side incentives: Conditional cash transfers (CCTs) to parents
boys and gins alike, will be able to complete a full course of primary schooling	education	Demand-side incentives: School feeding (and take-home food rations where needed). Nutrition for school-going children. Provision of balanced school meals with locally produced foods at the primary and secondary levels.
		Construction and equitable allocation of school and classroom to address the needs of marginalized populations informed by analysis of disaggregated data and school mapping exercises.
		Promotion of more flexible school models, such as multi-grade and mobile schools, as well as the effective use of technologies to provide educational opportunities.
		Addressing the issues of transition from pre-primary to primary level and from primary to post-primary education, vocational training and lifelong learning within a sector-wide perspective.
		Ensuring that national legislation is aligned with human rights principles, including those of non-discrimination and equal educational opportunities set out in international instruments. Enforcing laws against discrimination.
	2.2 Proportion of pupils starting	Demand-side incentives: School health programmes such as de-worming and iron supplementation, as well as provision of safe water and a focus on hand washing.
	grade 1 who reach last grade of	Demand-side incentives: Targeted subsidies to girls, and vulnerable populations such as ethnic groups or HIV/AIDS orphans.
	printary scribon	Demand-side incentives: Provision of school material such as textbooks, uniforms, etc.
		Demand-side incentives: Ensure acceptability (e.g., relevance, cultural appropriateness and good quality) of education by reviewing form and substance of education, e.g., flexibility of timetables, teaching languages, cultural inclusiveness and relevance of curriculum.

d Interventions also based on UNESCO and UNICEF, 2007.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Target 2.A: Ensure that, by 2015, children everywhere, boys and girls alike, will	2.2 Proportion of pupils starting grade 1 who	Systems to involve parents in school management: Parent committees, school-based management, financing, auditing, and expenditure management systems that are consistent with more local control.
be able to complete a full course of primary schooling	reach last grade of primary school	Mechanisms for children's participation: e.g., consultative systems for children to contribute to the development of education policy at the national and regional levels, guidance and training for schools on establishing schools councils, involving children in the development of school policies and respondents in systems for monitoring and evaluating education systems.
		Information/assessment: Provision of transparent information regarding resources, greater access to information through school report cards, better data systems, and better measurement of learning outcomes.
		Improving and evaluating learning outcomes: Learning evaluation systems that assess acquisition of skills and knowledge and learning outcomes.
		Special packages to make schools safe for girls: Training teachers and administrators in gender sensitivity, hiring female teachers, promoting zero tolerance of violence and abuse against girls and investing in gender-sensitive infrastructure such as latrine facilities.
		Special packages for children living with disabilities: Investments in infrastructure, special training for teachers, specific outreach and retention efforts, and separate performance assessments.
		Special packages to reach children in child labour, including transitional education programmes designed to assist reintegration into the formal education system.
		Special packages for education in conflict and post-conflict situations: Community participation to increase coverage of children affected by conflict and efforts involving private institutions and NGOs to create a participatory and culturally and environmentally sensitive learning environment through training of teachers and relevant learning material.
		Infrastructure: Provision of materials and services necessary for schools, including classrooms, furniture, transportation, and other facilities such as libraries, laboratories, and sports facilities, where needed for primary and post-primary schooling.
		Education sector HR management systems (administration of schools, strategic HR management).
		Teachers. Recruitment of teachers, with provision of incentives (such as adequate salaries and housing in rural areas, where applicable) and ensuring adequate pre-service and in-service training within the framework of a broad teacher policy.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Goal 2: Achieve universal primary education (cont.)	sal primary educa	ition (cont.)
Target 2.A: Ensure that, by	2.3 Literacy rate of	Demand-side incentives: Reduction of school fees for secondary and vocational education.
2015, children everywhere, boys and girls alike, will be able to complete a full	15- to 24-year-olds, women and men	Curriculum reform: Implementation of curriculum reform, where necessary, to improve education content, quality, and relevance, with a focus on vocational and informal training as necessary to prepare students for transition to work and to adulthood.
course of primary schooling		Adult literacy for women: Providing non-formal educational opportunities to uneducated and/or illiterate mothers of young children, particularly in pockets of undereducated women, particularly adolescent girls and young women, such as ethnic minority/indigenous communities, and in areas where parental literacy is a constraint on children's enrolment and completion.
		Providing a first or second chance to adolescents and adults and out-of-school children by exploring a space for expansion of non-formal education that is complementary and integrated into national systems.
		Develop ICTs and national broadband development plans as tools for accelerating the MDGs: Improve the efficiency and effectiveness of education ministries and related bodies through strategic application of technologies and ICT-enabled skills development
		 Increase supply of trained teachers through ICT-enhanced distance training
		 Empower teachers at the local level through use of ICTs and networks that link teachers to their colleagues
		 Broaden availability of quality educational materials/resources through ICTs, local content distribution
		 Provide schooling and training, including vocational training outside of schools (distance learning)
		 Improve youth learning skills on ICT and using ICTs to meet the challenges of the knowledge-based global economy of the 21st century
		• Promote digital literacy through e-learning

Goals and targets (from the Millennium	Indicators for monitoring	Suggested interventions
Declaration)	progress	
Goal 3: Promote gender equality and empower women	er equality and en	power women
Target 3.A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in	3.1 Ratios of girls to boys in primary, secondary and tertiary education	Security for girls and women from violence: Legislation and administrative actions to protect girls and women against violence, promotion of awareness of women's right to seek redress, protection from perpetrators of violence (through access to shelters, services, etc.), and mechanisms to dispense justice to perpetrators, including in the work world.
all levels of education no later than 2015		Special interventions to reach girls in areas of child labour in which girls constitute a large part of the workforce, in particular domestic work and agriculture.
		Removing barriers to girls' education, including by providing scholarships and cash transfers and eliminating user fees; expanding support for girls, especially at the secondary level; and improving the quality of education.
		Ensuring a gender sensitive approach to education, including gender-sensitive policies, curriculum, pedagogy, as well as learning and teaching materials.
	3.2 Share of women in wage employment in the non-agricultural	Special packages to make schools safe for girls: Training teachers and administrators in gender sensitivity, hiring female teachers and providing incentives (e.g., attention to security) for them to work in rural and remote areas, and investing in gender-sensitive infrastructure such as latrine facilities.
	sector	 Develop ICTs and national broadband development plans as tools for accelerating the MDGs: Deliver educational and literacy programmes specifically targeted to poor girls and women using appropriate technologies, thus breaking the cycle of women's poverty by teaching girls and women to read, learn math, and develop basic ICT skills
		 Influence public opinion on gender equality through information and communication programmes using a range of ICTs
		 Vocational and schooling programmes targeted at girls outside traditional school environment (e.g., using community centres in villages, telecentres, etc.)
		 Use radio broadcasting to offer locally relevant training for girls

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Goal 3: Promote gender equality and empower women (cont.)	er equality and en	npower women (cont.)
Target 3.A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015	3.3 Proportion of seats held by women in national parliament	Universal access to sexual and reproductive health information and services and protection of reproductive rights: (Service packages described under health interventions.) Legislation and awareness campaigns and strengthened enforcement to protect the rights of individuals and couples to plan their families; to ensure access to sexual and reproductive health information and services; to discourage early marriage (at ages posing health risks), female genital mutilation, and other traditional harmful practices; and to expand access to safe abortions (where permitted by law) and to review the legal status of abortion in order to improve public health while respecting national sovereignty, cultural values, and diversity.
		Equal access to and treatment at work: Provision and enforcement of non-discrimination and equal opportunity legislation and legislation promoting gender-sensitive policies, such as provision of maternity, paternity and dependent care leave and training, and support programmes for women entrepreneurs and young girls training to transition to work (including care centres for young children to ensure early childhood development). Active labour market policies with a particular focus on women as an important means of ensuring equality of access to employment opportunities for women. Targeted measures (for example, temporary goals or quotas) according to national regulation and practice should be considered.
		Equal access to property rights: Legislation and administrative support to provide and protect women's equal rights to and control over property and other inherited and acquired assets. Political representation: Mechanisms (such as quotas and reservations) to allow for adequate representation of women at all levels of government, along with adequate training.
		Involvement of women's groups at the community level: Recognition of and support for women's groups organized at the community level to encourage women to be partners in the design and delivery of public services and to have an equal voice with men in development decisions, the design and assessment of economic crisis recovery packages, and local economic development.
		National women's machineries: Legislative and financial support to national women's machineries (defined by the United Nations as "a single body or complex organized system of bodies, often under different authorities, but recognized by the government as the institution dealing with the promotion of the status of women").

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Target 3.A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no	3.3 Proportion of seats held by women in national parliament	Sex- and age-disaggregated data: Collection of sex- and age-disaggregated statistics in rural and urban contexts using gender analysis on health, education outcomes, access to assets, resources, services, and particularly credit, markets, technology, knowledge and infrastructure, conditions of work and employment, political representation, and genderbased violence.
later than 2015		Analysis of Convention on the Elimination of all Forms of Discrimination against Women (CEDAW) reports: Examination of CEDAW Reports and development of an action-oriented package of responses including a sound accountability mechanism to ensure countries are effective in the implementation phase.
		Adult literacy for women: Providing informal educational opportunities to uneducated and/or illiterate mothers of young children, particularly where there are pockets of undereducated women (such as within ethnic minority/indigenous communities) and in areas where parental literacy is a constraint on children's enrolment and completion.
Goal 4: Reduce child mortality ^e	ortality ^e	
Target 4.A: Reduce by two thirds, between 1990 and 2015, the under-five mortality rate	4.1 Under-five mortality rate	Health care systems: Multiple interventions to strengthen the health care system. Human resource training and salary enhancement, improving management capacity, enhancing monitoring and evaluation, strengthening quality control, strengthening medical information systems, increasing capacity for research and development, enhancing community demand, and improving infrastructure.
		Integrated management of childhood illness to reduce child mortality, illness, and disability, and including preventive and curative elements (i.e., universal coverage of parasitological diagnosis for malaria and provision of anti-malarial drugs for malaria and antibiotics for acute respiratory infection).
		Nutrition for undernourished children under five years: Complementary feeding, including fortified and blended foods, with take-home rations supported by nutrition extension workers.
		Introduce protocols and training in Community-based Management of Acute Malnutrition (CMAM) and treatment of Severe Acute Malnutrition (SAM). Promote diet diversity, vitamin A capsule distribution and deworming campaigns.

e Interventions also based on WHO, 2008.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Goal 4: Reduce child mortality (cont.)	ortality (cont.)	
Target 4.A: Reduce by two thirds, between 1990 and 2015, the under-five	4.1 Under-five mortality rate	Diarrheal Disease: Oral rehydration therapy and antibiotics for diarrheal disease, access to safe water, sanitation and hygiene education. Zinc should be added to the protocol for ORS and antibiotics for the diarrhea-related intervention.
mortality rate		Malaria: Provision of long-lasting insecticide treated mosquito nets, indoor residual spraying.
		Immunization and care for measles.
		Develop ICTs and national broadband development plans as tools for accelerating the MDGs: Increase monitoring and information sharing on disease, nutrition, maternal health
		 Increase access to health information, including access to reproductive health and HIV/ AIDS prevention information, through locally appropriate content in local languages.
		• Enhance delivery of basic and in-service training for health workers
		 Increase access of rural caregivers to specialist support and remote diagnosis
		 Facilitate knowledge exchange and networking among policy makers, practitioners and advocacy groups
		 Use radio broadcasting and telecentres to offer health information through locally appropriate content in local languages
		 Promote access to telemedicine, digital health and e-medicine applications
	4.2 Infant mortality rate	Long-lasting insecticide treated mosquito nets, indoor residual spraying interventions to prevent malaria and integrated management of childhood illness (the risk of death from malaria and pneumonia is highest in infancy).
		Neonatal integrated package: Clean delivery, newborn resuscitation, prevention of hypothermia, kangaroo care (skin-to-skin contact), antibiotics for infection, tetanus toxoid, antiretrovirals for HIV-exposed infants, breastfeeding education (including education and support for safer infant feeding for HIV-positive mothers), and hygiene education. (Neonatal mortality is also influenced by maternal health interventions. These also include a package of measures, such as antiretrovirals for pregnant women, to reduce vertical transmission of HIV/AIDS).

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Target 4.A: Reduce by two thirds, between 1990 and 2015, the under-five mortality rate	4.2 Infant mortality rate	Nutrition for infants, pregnant women, and nursing mothers: Promotion of mother- and baby-friendly community initiatives, including exclusive breastfeeding for first six months and complementary feeding with continuing breastfeeding for infants aged 7 to 24 months. Provision of sufficient calories, protein, and micronutrients to pregnant women and nursing mothers, supported by community-based nutrition extension workers. Universal access to reproductive and sexual health services is also needed to ensure that women are able to delay first pregnancy and properly space births to avoid cumulative nutritional deficits and to reduce the risk of complications for themselves and their children.
		Addressing hidden hunger: Reduction of vitamin A and iron, zinc, and iodine deficiencies by increasing the production and consumption of micronutrient-rich foods, particularly local fruits, vegetables, livestock products, and iodized salt and fortified foods from local products (such as India Mix); special attention to nutrition needs of population groups who are particularly vulnerable or marginalized on grounds of gender, ethnicity, religion, as well as people living with HIV/AIDS; fast-track the dissemination of new biofortified lines such as sweet potato (vitamin A), rice (zinc and iron) and maize (protein).
		Promote public health campaigns on exclusive breastfeeding through public health messaging, protocols in health care systems, baby-friendly hospitals, curricula for adolescents in schools, etc.
		Introduce protocols and training on Community-based Management of Acute Malnutrition (CMAM) and treatment of Severe Acute Malnutrition (SAM).
		Promote public campaigns focusing on the Nutrition of Pregnant Women (e.g., control of diabetes; reduce low birth weight, a significant determinant of IMR).
	4.3 Proportion of 1-year-old children	Establish protocols within health care systems to ensure availability of vaccines, 'well baby check' at local clinics where immunization could be delivered.
	immunized against measles	Ensure high coverage of measles immunization campaigns: Integrate measles immunization within vitamin A capsule distribution programmes and other health care programmes targeting children.
		Promote public health campaigns about the importance of measles immunization.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Goal 5: Improve maternal health	rnal health ^f	
Target 5.A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio	5.1 Maternal mortality ratio	Health care systems: Multiple interventions to strengthen health care systems. Human resource training and salary enhancement, improving management capacity, enhancing monitoring and evaluation, strengthening quality control, strengthening medical information systems, increasing capacity for research and development, enhancing community demand, and improving infrastructure. Emergency obstetric care. § Rapidly (economically and physically) accessible treatment for pregnancy and delivery complications such as eclampsia, hemorrhage, obstructed labour, and sepsis, and for incomplete abortion and post-abortion care. Emergency obstetric care
		requires functioning health care services with equipment and trained staff to deliver effective interventions for these complications. Referral systems, with well-equipped and staffed district hospitals and community-based health workers, are needed to facilitate access to emergency obstetric care facilities in case of emergency.
		Safe abortion services. Universal access to post-abortion care by making PAC part of Emergency Obstetric Care/Primary Health Care. Access to abortion counselling and safe abortion services to the extent permitted by law; integrate FP with PAC (post-abortion care) and safe abortion services.
		Develop ICTs and national broadband development plans as tools for accelerating the MDGs: Increase monitoring and information sharing on disease, nutrition, maternal health
		 Increase access to health information, including access to reproductive health and HIV/AIDS prevention information, through locally appropriate content in local languages.
		• Enhance delivery of basic and in-service training for health workers
		 Increase access of rural caregivers to specialist support and remote diagnosis
		 Facilitate knowledge exchange and networking among policy makers, practitioners and advocacy groups
		 Use radio broadcasting and telecentres to offer health information through locally appropriate content in local languages
		• Promote access to telemedicine, digital health and e-medicine applications

f Interventions also based on WHO, 2008.

g WHO, UNFPA, UNICEF and AMDD (2009), Monitoring Emergency Obstetric Care: A Handbook. World Health Organization, Geneva, 2009.

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Goals and targets (from the Millennium Declaration)	monitoring progress	Suggested interventions
Target 5.A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio	5.2 Proportion of births attended by skilled health personnel	Physical and economic access to delivery services: Information about services, skilled attendance, clean delivery, and post-partum care. Presence of trained and registered midwives, nurses, nurse-midwives, or doctors at birth with ability to diagnose and refer emergent complications as well as post-partum care (including counselling on nutrition, family planning, and parenthood skills). Facilities need to be equitably distributed in the country and services need to allow for culturally acceptable procedures, e.g., traditional indigenous birthing rituals. Participatory systems for users to contribute to the development and the monitoring of policies and services can help assess needs and increase quality.
Target 5.B: Achieve, by 2015, universal access to reproductive health ^h	5.3 Contraceptive prevalence rate	Reproductive health: Counselling and service provision for contraception and birth spacing that take women's fertility desires into account. Information and education on benefits and methods of family planning and birth spacing; appropriate follow-up on method satisfaction, consistent and correct use of method, and options for appropriate method switching. Reproductive choice counselling and family planning services for women living with HIV/AIDS. Promote effective and consistent male and female condom use for dual protection. Information and provision of emergency contraception when methods fail. Community-based distribution of contraceptive methods. Screening and treatment of sexually transmitted infections. Universal access to reproductive and sexual health services is also needed to ensure that women are able to delay first pregnancy and properly space births to avoid cumulative nutritional deficits and reduce the risk of complications for themselves and their children, to avoid unintended pregnancies that might result in unsafe abortion, which is an important cause of maternal deaths. Universal access to contraception: Programme to ensure universal access to family planning choices, including effective modern contraception, and emergency contraception, and
		to guarantee reliably available and affordable supplies and choice among methods.

demand of individuals. Unmet need for family planning may increase as education increases and mortality declines, if service delivery does not accelerate to accommodate new demand. But this should spur corrective efforts to improve services and sustain an increase in the proportion of demand being met. Similarly, there is no specific target for adolescent fertility, nor should there be, but the general point that decline is expected as services improve and other education and h It should be emphasized that specific numerical targets are not specified. Rather, contraceptive prevalence rate (CPR) and unmet need for family planning should be examined together to ensure that a rights-based approach to family planning access is adopted. In general, CPR should be increasing and unmet need should be declining (i.e., the proportion of stated desires to limit or space births being met should increase), but efforts should be responsive to the informed and voluntary health goals are attained should be specified.

Goals and targets (from the Millennium	Indicators for monitoring	Suggested interventions
Declaration)	progress	
Goal 5: Improve maternal health	nal health (cont.)	
Target 5.B: Achieve, by 2015, universal access to reproductive health	5.3 Contraceptive prevalence rate	Use several service delivery platforms to provide family planning (FP) information and services that would increase access to FP for those in greatest need, such as at the site and time of childbirth, as part of post-partum care, at the site and time of post-abortion care, during child immunization, provision of services for people living with HIV/AIDS, etc.
		Ensure that primary health care facilities and providers are adequately equipped and prepared to provide FP information and services as part of their routine care.
		Make FP information and referrals to services available through non-health sectors: micro-finance, environmental and agricultural programmes.
		Create an evidence-based strategic plan for social and behavioural change communication and use multiple channels (mass media, interpersonal communication, new communication technologies, folk/traditional) to disseminate information and promote behavioural and social change, in order to maximize effect. Combine entertainment with education.
		Prevention and treatment of sexually transmitted infections. Programmes to detect and treat sexually transmitted infections (such as syphilis, gonorrhea, and chlamydia) and other reproductive tract infections that can increase the risk of HIV/AIDS and infertility and affect the choice of appropriate contraceptive methods.
	5.3. Proportion of working women in reproductive age entitled to paid maternity leave around childbirth	Maternity protection at work in line with ILO Convention No. 183 is also needed to enable women's healing, rest and recovery around childbirth, to encourage early initiation to breastfeeding, to ensure economic access to prenatal, postnatal and delivery services for the mother and her child as well as to offset income loss due to work interruption around childbirth.

ILO 2009: ILO Database of Conditions of Work and Employment Laws – Maternity Protection. Available at: www.ilo.org/dyn/travail/travmain.byCountry2
WHO and UNICEF 2010, Countdown to 2015 decade report (2000–2010): Taking stock of maternal, newborn and child survival. See p. 30, Health systems and policy indicators. Available at: www.countdown2015mnch.org/documents/2010report/CountdownReportAndProfiles.pdf ILO 2010, Maternity at work. A review of national legislation. Second edition. Geneva. Available at: www.ilo.org/public/english/protection/condtrav/

Goals and targets (from the Millennium	Indicators for monitoring	Suggested interventions
Target 5.B: Achieve, by 2015, universal access to reproductive health	5.4 Adolescent birth rate	Age-appropriate sex education and services (especially for adolescents): School- and community-based education programmes, mass media education programmes, youth-friendly information and service delivery, beneficiary-driven programming to meet the information and service needs of diverse adolescent groups (including married adolescents), and programmes to educate parents to improve adolescent reproductive health. Ensure comprehensive sexual and reproductive health (SRH) education and information for women, men, girls and boys throughout the life cycle in schools and other organizations and through peer education. Emphasis on curriculum-based interventions at schools led by adults. Develop and/or transform current SRH services into youth-friendly services by training providers, redesigning facilities, getting community support, and increasing awareness among young people. Implement culturally relevant social support, skills building, and economic participation to encourage girls to delay age of marriage/first pregnancy. Promote effective and consistent male and female condom use for dual protection.
	5.5 Antenatal care coverage (at least one visit and at least four visits)	Antenatal care: Physical and economic access (equitable) to routine care during pregnancy, including preventive and curative interventions such as blood pressure and weight monitoring, screening and treatment of infections, nutrition, family planning and smoking counselling, intermittent preventive treatment for malaria in highly endemic areas and provision of long-lasting insecticide treated mosquito nets for prevention of malaria, voluntary HIV counselling and testing and antiretrovirals for HIV-positive women to prevent mother-to-child transmission of HIV and to treat mothers living with HIV.
	5.6 Unmet need for family planning	Outreach and engagement of men to increase participation and support in reproductive health health: Counselling and information services for men to address their reproductive health needs, support the decisions of their partners, and change gender and relationship norms to ensure greater gender equality; prevent gender violence and harmful traditional practices and promote collaborative decision-making; information and services for reproductive health in the army and police forces, including efforts to combat gender violence. Promote gender equity norms among men, through education/mass media to prevent gender-based violence (GBV) and increase supportive behaviours among men toward SRH.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Goal 5: Improve maternal health	nal health (cont.)	
Target 5.B: Achieve, by 2015, universal access to reproductive health	5.6 Unmet need for family planning	Enable task sharing to increase access to FP information and methods by strengthening a diversity of products, providers, and service delivery outlets (both health care facilities as well as non-conventional outlets such as pharmacies, private facilities, and community health care workers). One example: provision of injectables by community-based workers.
		Universal access to contraception: Programme to ensure universal access to family planning choices, including effective modern contraceptive methods, and to guarantee reliably available and affordable supplies and choice among methods.
		Community-based distribution of contraceptive methods.
		Outreach to disadvantaged $^{\downarrow}$ populations (in terms of income, geography, and other contextual characteristics) less likely to have access to health services.
		Counselling and service provision for post-partum and post-abortion women.
		Adequately addressing reproductive choices of women living with HIV through linking/integrating reproductive health care and HIV services. $^{\rm k}$
Goal 6: Combat HIV/AIDS, malaria	DS, malaria and ot	and other diseases
Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS	6.1 HIV prevalence among population aged 15-24 years	Health care systems: Multiple interventions to strengthen the health care system. Human resource training and salary enhancement, improving management capacity, enhancing monitoring and evaluation, strengthening quality control, strengthening medical information systems, increasing capacity for research and development, enhancing community demand, and improving infrastructure.
		HIV/AIDS prevention: Improved linkages. Effective joint programming between reproductive health and HIV/AIDS programmes. Programmes to break down stigma surrounding HIV/AIDS and to ensure provision of correct information.

- WHO/UNFPA. National-level Monitoring of the Achievement of Universal Access to Reproductive Health: Conceptual and Practical Considerations and Related Indicators. Report from a WHO/UNFPA Technical Consultation. Geneva, 2007.
 - WHO/UNFPA. Glion Consultation on Strengthening the Linkages between Reproductive Health and HIV/AIDS: Family Planning and HIV/AIDS in Women and Children. Geneva, 2006.
- Interventions also based on WHO, 2008.

Goals and targets	Indicators for	Suggested interventions
(from the Millennium Declaration)	monitoring progress	
Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS	6.1 HIV prevalence among population aged 15-24 years	Legal and policy measures and education to address stigma and discrimination surrounding HIV/AIDS and to ensure equitable access to services. Comprehensive combination prevention for key populations, including men who have sex with men, transgender people, sex workers, drug users and prisoners.
		Utilize youth employment programmes to integrate HIV/AIDS prevention activities into training and skills-building programmes.
		Organize Training of Trainers (ToT) in vocational schools facilitating access to information and education for young people (see SHARE Report 2008 – specific example of China)
		Scale up HIV/AIDS prevention through formal and informal workplaces, including training of peer educators among young workers, integration of HIV/AIDS in educational programmes
		for young workers; establish labour-management committees at workplace or include HIV/AIDS education in exiting OSH committees; develop enterprise policies addressing stigma and discrimination; specific training /sensitization for CEOs and mid-level managers;
		Training/sensitization of government officials, including OSH officers and labour inspectors, to ensure compliance with labour law and to reduce discrimination in the workplace
		Prevention and treatment of sexually transmitted infections. Programmes to detect and treat sexually transmitted infections (such as syphilis, gonorrhea, and chlamydia) and other reproductive tract infections that can increase the risk of HIV/AIDS and infertility and affect
		Behavioural change programmess. Policies and programmes to increase knowledge and understanding of HIV/AIDS and to promote and sustain risk-reducing behaviour, including condom social marketing, peer-based education, mass media campaigns, workplace programmes, and inclusion of HIV education in the curriculum of educational institutions.
		Scale up training of education and support staff in educational institutions to create an enabling environment in the classroom and to enable teachers to provide students with adequate HIV/AIDS education."

m See SHARE Report 2006 and 2008; Progress Report OPEC project on HIV/AIDS prevention in Africa and LAC – 2006/08; Progress report of the Sida funded programme on HIV/AIDS prevention and impact mitigation in SSA – 2006/09; also ILO Implementation Report 2008/09 and UNAIDS Report 2008/09.

n UNESCO, 2009. International Technical Guidance on Sexuality Education; IATT on Education, 2004. Global Readiness Survey.

progress IDS, malaria and ot 6.1 HIV prevalence among population aged 15-24 years	Goals and targets Indicators for	Suggested interventions
among aged	llennium monitori progress	
6.1 HIV prevalence among population aged 15-24 years	Goal 6: Combat HIV/AIDS, malaria and o	her diseases (cont.)
		Control of sexually transmitted diseases. Screening and effective treatment of sexually transmitted diseases (such as syphilis, gonorrhea, and chlamydia) in target groups. Voluntary male circumcision in areas of high HIV prevalence.
Implementation of workplace programmes includ offering voluntary counselling and testing services ensuring linkages with the informal economy and access to and information about such services. Using youth employment programmes to integrat programmes, including disseminating information testing (VCT) facilities. Training of trainers in vocational schools facilitatin Harm reduction for intravenous drug users. Action other infections specific programmes include provisid drug substitution freatment, and risk reduction in Prevention of mother-to-child transmission (PMTC HIV from infected women to their infants during p well as during breastfeeding (mothers known to be HIV-negative or whose HIV status is unknown) she for the first six months of life, introduce appropriate continue breastfeeding for the first 12 months of prophylactic treatment, infant feeding, counselling prophylactic treatment.	15-24 years	Voluntary and confidential HIV counselling and testing: Provider-initiated testing and counselling and client-initiated pre- and post-test counselling and HIV testing.
Using youth employment programmes to integrate programmes, including disseminating information testing (VCT) facilities. Training of trainers in vocational schools facilitatin Harm reduction for intravenous drug users. Action other infections that occur through sharing of nor preparations; specific programmes include provisi drug substitution treatment, and risk reduction in Prevention of mother-to-child transmission (PMTC HIV from infected women to their infants during p well as during breastfeeding (mothers known to b HIV-negative or whose HIV status is unknown) sho for the first six months of life, introduce approprial continue breastfeeding for the first 12 months of I prophylactic treatment, infant feeding, counselling for the first should than etch		Implementation of workplace programmes including public-private partnerships (PPPs) offering voluntary counselling and testing services, or referral to such services, and also ensuring linkages with the informal economy and surrounding communities to facilitate access to and information about such services.
Training of trainers in vocational schools facilitatin Harm reduction for intravenous drug users. Action other infections that occur through sharing of nor preparations; specific programmes include provisi drug substitution treatment, and risk reduction in Prevention of mother-to-child transmission (PMTC HIV from infected women to their infants during p well as during breastfeeding (mothers known to b HIV-negative or whose HIV status is unknown) sho for the first six months of life, introduce appropriat continue breastfeeding for the first 12 months of I prophylactic treatment, infant feeding, counselling		Using youth employment programmes to integrate HIV/AIDS into training and skills-building programmes, including disseminating information about local volunteer counselling and testing (VCT) facilities.
Harm reduction for intravenous drug users. Action other infections that occur through sharing of nor preparations; specific programmes include provisi drug substitution treatment, and risk reduction in Prevention of mother-to-child transmission (PMTC HIV from infected women to their infants during pwell as during breastfeeding (mothers known to b HIV-negative or whose HIV status is unknown) sho for the first six months of life, introduce appropriate continue breastfeeding for the first 12 months of I prophylactic treatment, infant feeding, counselling for methods of the first counselling feeding for the first counselling feeding feeding for the first counselling feeding fee		Training of trainers in vocational schools facilitating information and access to VCT.
Prevention of mother-to-child transmission (PMTC HIV from infected women to their infants during p well as during breastfeeding (mothers known to b HIV-negative or whose HIV status is unknown) sho for the first six months of life, introduce appropriate continue breastfeeding for the first 12 months of I prophylactic treatment, infant feeding, counselling for the first to the firs		Harm reduction for intravenous drug users. Actions to prevent transmission of HIV and other infections that occur through sharing of non-sterile injection equipment and drug preparations; specific programmes include provision of sterile syringes and needles, opioid drug substitution treatment, and risk reduction information and education.
יייייין פון אייייין פון איייין פון פון פון פון פון פון פון פון פון פו		Prevention of mother-to-child transmission (PMTCT). Prevention of transmission of HIV from infected women to their infants during pregnancy, labour, and delivery, as well as during breastfeeding (mothers known to be HIV-positive and whose infants are HIV-negative or whose HIV status is unknown) should exclusively breastfeed their infants for the first six months of life, introduce appropriate complementary foods thereafter, and continue breastfeeding for the first 12 months of life; this includes short-term antiretroviral prophylactic treatment, infant feeding, counselling, support, and the use of safer infant feeding methods. (Breastfeeding should then stop only when a nutritionally adequate and

o From the new WHO guidelines: WHO. Guidelines on HIV and infant feeding. 2010. Principles and recommendations for infant feeding in the context of HIV and a summary of evidence.

Goals and targets	Indicators for	Suggested interventions
(from the Millennium Declaration)	monitoring progress	
Target 6.A: Have halted by 2015 and begun to reverse	6.1 HIV prevalence among	Family planning for women living with HIV and HIV treatment and care for eligible pregnant women and mothers.
the spread of HIV/AIDS	population aged 15-24 years	Enhance advocacy for mass support to PMTCT programmes through working with trade unions and business leaders; strengthen primary prevention through workplace structures (including participation of male partners) as well as generation of demand for PMTCT services and increasing referrals from workplace programmes. (See OPEC progress report 2006/08 on Sierra Leone and SHARE reports for 2006 and 2008.)
		Address stigma and discrimination through the implementation of the new International Labour Standard, as there are significant barriers to the uptake of voluntary counselling and testing (VCT) and PMTCT services in many low- and middle-income countries.
		Decrease unmet need for FP in countries with high prevalence of HIV and great unmet needs.
		Blood safety, injection safety and universal precaution interventions. Measures to reduce the risk of receiving infected blood through a transfusion, including HIV antibody screening, protocols to avoid unnecessary blood transfusions, and policies to exclude high-risk donors. Safe injection procedures including single-use needles and syringes. Universal precautions. Post-exposure prophylaxis and antiretrovirals.
		services. 4

- p See Report of the ILC June 2010: www.ilo.org/wcmsp5/groups/public/---ed_norm/---relconf/documents/meetingdocument/wcms_141773.pdf; and the text of The ILO Recommendation concerning HIV and AIDS and the world of work (No. 200): www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---ilo_aids/ documents/normativeinstrument/wcms_142706.pdf (Recommendation 200).
- See ILO/WHO Guidelines on PEP to prevent HIV infection (2007), as well as the ILO/WHO Guidelines on health services and HIV/AIDS. www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---ilo_aids/documents/publication/wcms_116563.pdf **and** www.ilo.org/wcmsp5/groups/public/--ed_protect/--protrav/---ilo_aids/documents/publication/wcms_116240.pdf σ

Goals and targets	Indicators for	Suggested interventions
(from the Millennium Declaration)	monitoring progress	
Goal 6: Combat HIV/AIDS, malaria and other diseases (cont.)	DS, malaria and o	ther diseases (cont.)
Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS	6.1 HIV prevalence among population aged	Develop ICTs and national broadband development plans as tools for accelerating the MDGs: Increase monitoring of and information sharing about disease, nutrition, maternal health
	15-24 years	• Increase access to health information, including access to reproductive health and HIV/AIDS prevention information through locally appropriate content in local languages
		• Enhance delivery of basic and in-service training for health care workers
		 Increase access of rural caregivers to specialist support and remote diagnosis
		 Facilitate knowledge exchange and networking among policy makers, practitioners and advocacy groups
		 Use radio broadcasting and telecentres to offer health information through locally appropriate content in local languages
		• Promote access to telemedicine, digital health care and e-medicine applications
	6.2 Condom use at last high-risk sex	Promote female and male condom use: Condom use among most-at-risk populations, including sex workers, men who have sex with men, transgender people and prisoners.
		Targeted and gender-responsive initiatives to reach clients of most-at-risk populations, including clients of sex workers, with appropriate HIV/AIDS prevention activities, including information about correct and consistent condom use; ensure access to male and female condoms and access to health care facilities and condom distribution points. This may focus on specific mobile populations along transport corridors, including maritime, mining, construction and tourism workers, etc.

See Progress report of the Sida funded programme on HIV/AIDS prevention and impact mitigation in SSA – 2006/09 as well as Recommendation 200: www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---ilo_aids/documents/normativeinstrument/wcms_142706.pdf.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS	6.3 Proportion of population aged 15 to 24 years with comprehensive correct knowledge of HIV/AIDS	Promote age-appropriate sex education for adolescents. Promote and implement measures to provide a safe and healthy work environment across all sectors, including educational institutions. ⁵ Promote youth-friendly health care services. ¹ Training of health care workers in HIV/AIDS, counselling, stigma and discrimination and
		universal precautions. Provide mechanisms to improve working conditions and occupational safety and health conditions for health care workers.
	6.4 Ratio of school attendance of orphans to school	Orphan support: Provision of support to orphans to minimize the impact of AIDS on their lives; includes school fee support, health education, community support, support to extended families, and behavioural change to address discrimination.
	attendance of non-orphans aged 10 to 14 years	Ensure physical and economic access to treatment for most vulnerable populations. Scale up social pensions to caregivers to allow orphans and vulnerable children access to school and to reduce their vulnerability to $HIV.$
		Scale up economic empowerment interventions through cooperatives and social economy organizations to ensure empowerment of vulnerable populations, including young women, PLHIV and other groups, and ensure their access to prevention and care.
		Implement measures that combat child labour and commercial sexual exploitation of children. $^{\text{\tiny V}}$

- s ILO and UNESCO. 2006. "An HIV/AIDS Workplace Policy for the Education Sector in the Caribbean" and "An HIV and AIDS Workplace Policy for the Education Sector in Southern Africa". Geneva. www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---ilo_aids/documents/publication/wcms_116349.pdf and www.ilo.org/wcmsp5/groups/public/--ed_protect/--protrav/---ilo_aids/documents/publication/wcms_116361.pdf
- t See ILO/WHO guidelines on health services and HIV/AIDS:
- www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---ilo_aids/documents/publication/wcms_116240.pdf
- See ILO/ODI study on old-age non-contributory pensions, HIV/AIDS and the world of work in Africa: Exploring links for policy recommendations from a decent work perspective. (Unpublished working paper)
- www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---ilo_aids/documents/normativeinstrument/wcms_142706.pdf ILO Recommendation concerning HIV/AIDS and the world of work (No. 200), Paragraph 35.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Goal 6: Combat HIV/AIDS, malaria and other diseases (cont.)	DS, malaria and oth	er diseases (cont.)
Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS	6.4 Ratio of school attendance of orphans to school attendance of non-orphans aged 10 to 14 years	Targeted initiatives for this age group that address the special needs of children and young people, including knowledge about sexual and reproductive rights, and access to objective sexual and reproductive health education."
Target 6.B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it	6.5 Proportion of population with advanced HIV infection with access to antiretroviral drugs	HIV/AIDS care and treatment: Antiretroviral therapy. Combination drug therapy to treat AIDS. Tuberculosis case finding, prophylaxis and treatment among people living with HIV. Prophylaxis and treatment of opportunistic infections. Palliative care for people living with HIV. Prophylaxis and treatment of opportunistic infections. Palliative care for people living with HIV, including access to opioid analgesics. Access to essential medicines: Interventions to ensure availability, affordability, and appropriate use. Incentives to direct research and development processes toward appropriate medicines for developing countries; establishment of national essential medicines lists (including preventive, curative, and reproductive health commodities, equipment, and supplies); ensuring reliable procurement and distribution systems; pre-qualifying quality suppliers and procurement and distribution facilities; monitoring systems to assure drug quality; elimination of user fees for essential medicines; programmes to improve the way drugs are prescribed, dispensed, and used, including public media campaigns and education of providers. HIV/AIDS care and treatment: Antiretroviral therapy. Combination drug therapy to treat AIDS. Treatment of opportunistic infections. Treatment of any infection caused by a microorganism that would not normally cause disease in a healthy individual. Expand workplace programmes to give affected communities greater access to Antiretrovirals (ARVs). Use structures within the social economy, such as cooperatives and Micro, Small and Medium Enterprises (MSME), to reach particularly vulnerable populations with activities facilitating access to antiretroviral drugs, but also testing facilities, care and support activities, such as home-based care.

w Recommendation concerning HIV and AIDS and the world of work (No. 200), paragraph 36. \times ILO/AIDS Progress Report 2006-09, activities facilitating home-based care in Mozambique.

Goals and targets	Indicators for	Suggested interventions
(from the Millennium Declaration)	monitoring progress	
Target 6.C: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases	6.6 Incidence and death rates associated with malaria	Malaria insecticide-treated bed nets: Affordable provision of anti-mosquito bed nets that are treated with insecticide, providing a physical and chemical barrier to mosquitoes, shortening the mosquito's life span, and thus reducing incidence of malaria.
•	6.7 Proportion	indoor residual spraying: Periodic spraying of indoor surfaces with insecticide to reduce malaria transmission.
	of children under 5 sleeping under	Artemisinin combination treatment: Affordable provision of combination of drugs used to treat first-line drug-resistant falciparum malaria, which is now widespread in Africa.
	insecticide-treated bed nets	Larviciding, drainage, and house improvement: Measures designed to reduce mosquito breeding can be useful as a supplementary measure in areas where the breeding sites are
	6.8 Proportion	especially few, fixed and easy to identify.
	or children under 5 with fever who are treated with appropriate anti-	Universal coverage of parasitological diagnosis for malaria and provision of artemisinin combination treatment (ACT) for Plasmodium falciparum infections and chloroquine for P. vivax infections where chloroquine remains effective (otherwise an ACT should be used).
	malarial drugs	Routine monitoring of malaria programme interventions, cases and deaths. Monitoring of drug and insecticide resistance.
		Access to information: Programmes to increase knowledge, skills and appropriate attitudes pertaining to malaria as well as participation in health-related decision-making at community and national levels.
		Focus on particularly vulnerable groups, e.g., people in conflict areas who have low resistance to malaria, but have moved to areas where it is prevalent.
	6.9 Incidence, prevalence and death rates	Implementation of the six-component Stop TB Strategy as outlined below, which addresses the social determinants of TB, prevention of transmission and effective treatment, care and control efforts. As TB is among the top three killers of women of reproductive age and a
	associated with tuberculosis	significant threat to the health of children, the Stop TB Strategy is also relevant to Goals 4 and 5.
		TB/HIV integrated interventions: Adaptation of treatment to high-prevalence TB/HIV and multidrug-resistant (MDR) TB settings. Integration with HIV diagnosis and treatment for high HIV-prevalence settings; use of effective diagnostics and treatment protocols for areas with MDR TB.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Goal 6: Combat HIV/AIDS, malaria and other diseases (cont.)	DS, malaria and othe	· diseases (cont.)
Target 6.C: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases	6.9 Incidence, prevalence and death rates associated with tuberculosis	Integrate TB into existing HIV workplace programmes to provide an opportunity for women and men workers living with HIV to be screened voluntarily and confidentially for TB. Within TB/HIV workplace programmes, voluntarily test workers with TB for HIV and provide them with ARV treatment if necessary.
	6.10 Proportion of tuberculosis cases detected and cured under directly observed treatment short course	Implementation of the Stop TB Strategy: (i) pursuing high-quality DOTS expansion and enhancement; (ii) addressing TB/HIV, MDR-TB, and the needs of poor and vulnerable populations; ^y (iii) contributing to strengthening the health care system on the basis of primary health care; (iv) engaging all care providers; (v) empowering people with TB and communities through partnership; and (vi) enabling and promoting research.
Goal 7: Ensure environmental sustainability	mental sustainability	
Target 7.A: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources	7.1 Proportion of land area covered by forest	Conduct ex ante strategic environment assessments and environmental impact assessments. Ensure civil society access to info and participation. Obtain free, prior and informed consent from indigenous communities whose lands are affected. Engagement of those whose livelihoods and incomes are affected assures that they have access to alternative, more sustainable livelihoods (workers and micro and small enterprises, in particular); income sources of affected communities should thus be included within the indicators used in the environment assessment.
		Environmental monitoring systems: Better dissemination and use of existing environmental monitoring and assessments at the national and local levels; provision of funds, technical support, and tools for countries to undertake monitoring, data collection, and harmonization based on established standards (based on core set of indicators). Linking environmental assessment and monitoring to social indicators such as health, education or employment in order to understand how a better environment produces better social conditions for the communities concerned. Ensure that civil society, including workers' and employers' organizations, has access to information on environmental matters (e.g., existing government environment reports to allow for civil society monitoring of environmental protection).

y Component (ii) includes addressing the provision of the full range of interventions required to address HIV-TB coinfection and disease, including integrated delivery of prevention and treatment services; the Stop TB Strategy is also relevant to Goal 6, indicators 6A and 6B.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Target 7.A: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources	7.1 Proportion of land area covered by forest	Analyze the main causes of deforestation and create a strategy for reducing both deforestation and forest degradation. This requires the involvement of all relevant stakeholders. The National Forest Programme – a stakeholder-based process to develop, implement and revise forest policies and plans existing in most countries – would be an excellent vehicle to create, implement and monitor such a strategy and to secure inputs from the forestry sector and related stakeholders.
		Promote integrated land use planning and inter-sectoral collaboration, particularly with the agricultural sector.
		Develop ICTs and national broadband development plans as tools for accelerating the MDGs:
		 Foster environmental protection through remote sensing technologies and communications networks that permit more effective monitoring, resource management, mitigation of environmental risks and early response.
		 Ensuring environmental sustainability: Use radio programmes to promote better farming practices; use satellites to monitor rain forests, glaciers and the polar regions; and reduce the energy requirements of new technologies. Use remote sensing technologies and communications networks to promote more effective monitoring, resource management, mitigation of environmental risks (e.g., GIS to combat illegal logging and illegal fishing and to protect forests).
		 Use broadcasting and communication networks for information sharing (e.g., quality of air, water) and disaster system alerts (e.g., storm, fire).
	7.2 CO ₂ emissions, total, per capita and per US\$1 GDP (PPP)	Enforcement of environmental regulation: Strengthening systems for monitoring environmental pollution to help enforce pollution control.
	7.3 Consumption of ozone-depleting substances	Soil management and prevention of desertification: Implementation of soil erosion control (by wind and water) with employment-intensive approach by planting windbreaks and cover crops; improvements in soil fertility with agroforestry systems, building irrigation infrastructure, cover crops, and conservation of ground and surface water.

Goals and targets	Indicators for	Indicators for Suggested interventions
(from the Millennium Declaration)	monitoring progress	
Goal 7: Ensure environmental sustainability (cont.)	mental sustaina	bility (cont.)
Target 7.A: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources	7.3 Consumption of ozone-depleting substances	Forest management: Implementation of sustainable, pro-poor forest management techniques, forest plantations in appropriate areas to satisfy demand for forestry products, and tree seedlings and other measures to support afforestation. Management of terrestrial protected areas increasingly through community-based or joint management; farm forestry programme for improved forest cover and conservation; pro-poor, biologically representative (including shrubland and pasture) protected area network. Strengthening labour inspection institutions to ensure adequate working conditions for workers in the forestry sector and therefore to avoid forced labour and illegal migration that are often drivers of deforestation. Technical support to forest user groups from government agencies, civil society organizations, and certification organizations to increase income from sustainable harvesting; dialogue with workers' and employers' organizations as well as labour institutions in the forestry sector to promote sustainable practices; technical support to por producers in value addition and marketing of timber and non-timber forest products (NTFPs); compensation to poor households, workers and non-timber forest products (NTFPs); compensation to poor households, workers and non-timber forest products (NTFPs); compensation to poor households, workers and not-semes and other areas to promote green jobs in the sector to benefit the poor (employment, local purchasing and financial benefits). Management of coastal ecosystems and fisheries: Elimination of destructive technologies (for example, dynamite and cyanide, bottom trawling); design and implementation of parepreted fish populations to target levels (biomass at maximum sustainable yield); implementation of a representative network of fully protected marine and coastal areas to restore fisheries. Monitor and enforce regulations about overfishing e.g., by large-scale trawlers); and establish just transition measures in these communities to ensure alternative employment and incomes

rgets lennium	Indicators for monitoring	Suggested interventions
Declaration)	progress	
Target 7.A: Integrate the principles of sustainable development into country policies and programmes	7.3 Consumption of ozone-depleting substances	Thermal energy systems: Improved cooking stoves. Distribution and maintenance or replacement of appropriate cooking stoves (ceramic stoves, liquid petroleum gas stoves (LPGs), ethanol stoves, charcoal stoves, etc.).
and reverse the loss of environmental resources		Modern cooking fuels, including renewable energies. Strengthening of distribution and production systems for modern fuels (in particular, renewable energies such as sustainable biomass, biogas and solar cookers, liquid petroleum gas, ethanol, dimethylsulfoxide, and kerosene), including safe containers. Refineries altered to introduce clean vehicle fuels (low-sulphur diesel).
		Solid waste: Building capacity at the local level, including through training activities, to strengthen or build waste management systems. Reliable waste collection, recycling and composting schemes for improved environment and employment; sanitary landfills; non-combustible safe disposal of chemicals; incineration plants for non-recyclable materials.
		Climate change adaptation: Meteorological data systems programme; climate change adaptation programme; disaster preparedness programme (including disaster warning systems).
		Vulnerability assessments to identify those whose livelihood, employment and income will be harmed by climate change. The assessment should include social dimensions such as health issues, gender implications, increasing vulnerability of food systems. Include local capacity building programmes to deal with future expected impacts of climate change (participatory decision-making process, employment-intensive programmes to build infrastructure, etc.).
		Land management: Rehabilitate and sustainably manage land; soil conservation programme (including technology); technical support to the poor for value addition and marketing of dryland products; land use policies, planning and zoning.
		Environmental governance: National environmental awareness and education programme; national poverty-environment mainstreaming programme; national civil society support programme; national natural resources and environmental data systems programme. Engaging relevant stakeholders, including social actors at the local, regional, national and international levels, in dialogue about environmental decisions. Similarly, engaging relevant environmental stakeholders on social and economic decisions at all levels.

Goals and targets	Indicators for	Indicators for Suggested interventions
(from the Millennium Declaration)	monitoring progress	
Goal 7: Ensure environmental sustainability (cont.)	mental sustaina	bility (cont.)
Target 7.B: Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss	7.4 Proportion of fish stocks within safe biological limits	Electricity: Electric power generation capacity. Extension, upgrade, and maintenance of electric power generation capacity (particularly of renewable energies such as solar, hydro, sustainable biomass and biogas) and of thermal, hydropower, and geothermal energy plants to supply electric power grids as well as off-grid supply.
		Maximize the potential of renewable energies to meet electricity demand in off-grid areas. Electric power grid. Extension of electricity grid through high-voltage lines, medium- to low-voltage lines (including end-user connections), and other related infrastructure (such as
		transformer stations). Strengthen and/or build local capacity to use renewable energies.
	7.5 Proportion of total water resources used	Integration of environmental sustainability into sector strategies. Strengthening institutions for environmental management (such as ministries and environmental protection agencies) to provide technical support to the development of sector strategies. Integratation of the environment as part of the agenda of all sectors, particularly of those in the forefront of labour and employment, economy, education and health.
		Management of freshwater resources and ecosystems: Institution of integrated water resources management plans; promotion of reforestation to protect selected catchment areas; increasing efficiency of cropping systems; and monitoring of wells and groundwater-dependent systems. Promote access to water efficiency technology; promote access to rainwater harvesting and recycled wastewater technologies. Building water catchment and irrigation infrastructure with labour-intensive approach; promoting the creation of local capacity of workers and employers through technical business management training programmes.
		Watershed management: Promotion of reforestation and afforestation to protect selected water catchment areas. Community-based, participatory process involving relevant stakeholders or joint-management for maintenance and rehabilitation of degraded watersheds.
	7.6 Proportion of terrestrial and marine areas protected	Environmental impact assessments: Assess the likely strategic environmental impact of largescale infrastructure projects and other development strategies on the environment.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Target 7.B: Reduce	7.7 Proportion of	Pollution control: Development and implementation of pollution control standards.
biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss	species threatened with extinction	Transformation of market incentives: Revision of subsidies in forestry and fisheries that cause overexploitation of these resources; design of agricultural subsidy programmes to prevent overuse, development of an internationally credible system of certification of raw natural resources. Strengthening of social protection systems and other just transition measures where environmental or other policies will probably greatly disrupt employment and where natural disasters are common.
		Reformation of tax laws: Taxation of environmental 'bads' (such as pollution and degradation) and appropriate carbon tax systems. Provide incentives through active labour policies, low-carbon and more sustainable sectors in order to provide workers and employers with the appropriate skills to create new green jobs and reduce the environmental impact of existing companies and sectors.
		Access to tenure and rights: Local ownership of natural resources, including common property and provision of access rights.
Target 7.C: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation	7.8 Proportion of population using an improved drinking water source	Integrated water resources management: Protection and allocation of water resources for agricultural, domestic, and industrial uses as well as environmental needs after comprehensive assessment of renewable and non-renewable water resources; establishment of a body to coordinate the agencies responsible for management of water resources and services, sanitation services and allocation of water resources, which also involves other stakeholders (users, civil society organizations, service providers, donors, workers' and employers' organizations in the sector). Monitoring and regulation of services: Establish a regulator for utilities. Licensing and regulation of small-scale private sector, including regulation of price/tariffs to ensure affordability.
	7.9 Proportion of population using an improved sanitation facility	Water storage and other infrastructure for water management: Construction and operation of water storage infrastructure for drinking water supply, agricultural water use, emergency supply and hydropower; extension of large-scale water harvesting. Hydrological monitoring: Operation and extension of hydrological monitoring systems.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Goal 7: Ensure environmental sustainability (cont.)	nmental sustainab	ility (cont.)
Target 7.C: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and	7.9 Proportion of population using an improved sanitation facility	Water supply infrastructure. Provision, rehabilitation and operation of infrastructure for water supply (such as standpipes, boreholes, dug wells, or rainwater harvesting), including water treatment as necessary. Allocation (purchase) of land for essential services, such as kiosks/public latrines.
basic sanitation		Other water management infrastructure: Storm drainage and flood control measures. Extension and rehabilitation of storm drainage infrastructure, including conversion of sanitation infrastructure to serve as storm drainage. Trunk water infrastructure: Maintenance and extension of trunk infrastructure for urban water supply, including treatment facilities and reservoirs.
		Water pollution control standards and regulations: Provision for water quality testing; dissemination of results of water quality testing and recommendations for point of use water treatment to overcome poor water quality, availability of information; licensing and regulation of water use and abstraction, pollution control.
		Sanitation infrastructure: Construction and operation of sanitation facilities (ventilated and improved pit latrines, septic tanks, flush toilets, simplified sewage, and conventional sewage), including emptying of pits and safe disposal of sullage.
		Sewage treatment: Construction and operation of simple sewage and other wastewater treatment facilities (such as waste stabilization ponds or other forms of primary treatment) where needed in dense urban settlements or because of specific environmental concerns (such as eutrophication of freshwater lakes).
		Building awareness: Targeted awareness-building measures accompanying the provision of new sanitation infrastructure to ensure the informed choice of technology options and proper use by all household members. Creation of local offices to facilitate participation, decision-making and dissemination of information in informal settlements/peripheral areas in order to facilitate discussion of type of service, complaint procedures, payments, applications for connections, etc.

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Target 7.C: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation	7.9 Proportion of population using an improved sanitation facility	Hygiene education: Awareness campaigns (in primary schools, through community-based organizations, media, etc.) to promote hygienic behaviour, with particular focus on hand washing and personal hygiene, as well as appropriate use of sanitation facilities and safe water storage.
Target 7.D: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum	7.10 Proportion of urban population living in slums	Infrastructure for slum upgrading: Upgrading and extension of roads and sidewalks, street lighting, storm drainage, and communications infrastructure within slums based on input received through civil society participation in citywide planning and plans to improve slums. (See above for domestic water supply, sanitation, and energy services.)
dwellers		Security of tenure: Improving the security of tenure through legislation against forced eviction and through legitimized occupancy or formal title.
		Enforcement of improved land tenure legislation: Legal protection and enforcement of slum dwellers' rights, particularly against forced evictions, including by providing legal aid (e.g., participation of slum dwellers in the process of determining planning and enforcement options is key).
		Housing: Incremental improvements to and construction of housing, with a focus on most vulnerable and marginalized populations.
		Urban infrastructure: Planning of urban infrastructure (roads, footpaths, sidewalks, street lighting, storm water drainage, bus lanes, and other transport infrastructure) based on input received through civil society participation in citywide planning.
		Provision of basic services (such as refuse collection and solid waste disposal, policing and security, and fire protection) based on input received through civil society participation in citywide planning.

sı					
Suggested interventions	ent				
Indicators for monitoring progress	nership for developm				
Goals and targets (from the Millennium Declaration)	Goal 8: Develop a global partnership for development	Target 8.A: Develop further an open, rule-based, predictable, non-discriminatory trading and financial system	Target 8.B: Address the special needs of the least developed countries	Target 8.C: Address the special needs of landlocked developing countries and small island developing states (through the Programme of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty-second special session of the General	Target 8.D: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term

Goals and targets (from the Millennium Declaration)	Indicators for monitoring progress	Suggested interventions
Target 8.E: In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries	8.13 Proportion of population with access to affordable essential drugs on a sustainable basis	
Target 8.F. In cooperation with the private sector, make available the benefits of new technologies, especially information and communications	8.14 Telephone lines per 100 population 8.15 Cellular subscribers per 100 population 8.16 Internet users per 100 population	 Promote national broadband development plans as a tool for accelerating the MDGs: Develop the right conditions for broadband infrastructure rollout and content deployment to maximize social and economic stimulus for transformational changes in poverty eradication, education, empowerment of women and girls, health care, and environmental sustainability. Support wider broadband inclusion and access to rural and remote areas and vulnerable and disadvantaged groups. Establish multi-stakeholder follow-up mechanisms, including national broadband committees, at the national, regional and global levels.



STEP 2: BOTTLENECK IDENTIFICATION AND 4. **PRIORITIZATION**

4.1 **Summary**

After identifying the priority interventions required to accelerate progress toward the MDG targets, bottlenecks to these interventions must be identified and prioritized. This step helps accomplish this task. Specifically, it helps:

- Identify bottlenecks to priority interventions
- Prioritize the bottlenecks based on potential impact and availability of potential solutions

The prioritized bottlenecks serve as inputs into Step 3, which then determines solutions that the country and its partners will implement.

4.2 **Purpose and objectives**

Under Step 1, priority interventions were identified based on their ability to accelerate progress toward MDG targets. Step 2 lays out a process for identifying the reasons why an intervention is not accelerating progress at the intended rate and allows the user to isolate the impediments or 'bottlenecks' that a country faces as it implements the intervention.

The MDG Acceleration Framework defines a bottleneck as "a proximate and removable constraint that impedes implementation of MDG-related interventions." Although the MAF may also reveal systemic obstacles to achieving MDG targets such as root causes of structural inequalities in a society, this step highlights directcause constraints that can be solved in the near term. Nevertheless, it is expected that longer-term structural issues can be addressed through complementary measures and that resolving some of the more immediate bottlenecks may itself help create an enabling environment for tackling the structural bottlenecks.

Within the context of the MAF, there are two types of bottlenecks: (1) sector-specific and (2) cross-cutting:

Sector-specific bottlenecks directly affect a sector's performance and can be addressed within a lead sector ministry/agency. The MDG Acceleration Framework identifies sector bottlenecks across four categories:

- Policy and planning: Policy bottlenecks relate to the adequacy of existing national or sub-national strategies, sector policies and plans, regulations, standards, and guidelines, including the legal framework and laws (within and outside the control of the sector) that potentially affect service delivery or the implementation of identified intervention(s).
- Budget and financing: The quantity and quality of funding including financial resources from national revenue and external resources – should also be considered when identifying bottlenecks for each intervention. Insufficient budget allocations, slow budget absorption (expenditure levels and effective disbursement), Official Development Assistance funding gaps, poor linkage between budgeting and planning, and single-year budgeting are common bottleneck areas.

- Service delivery (supply): Bottleneck analysis must also focus on the delivery of goods and services on the ground. With respect to the supply side, bottlenecks are likely to occur in areas such as human resources availability and development, supplies and logistics, lack of decentralized capacity, technical and organizational quality, procurement systems, value chain analysis, sector management and institutions, and the absence of comprehensive monitoring and evaluation systems.
- Service use (demand): Bottlenecks in the use of goods and services on the ground from the demand side are likely to occur in the following areas: empowerment of users to use the services when available, information and education available to explain the service, advocacy, intervention promotion, physical distance (lack of transportation), affordability of services, and gender and cultural barriers (e.g., women may face unique difficulties in accessing services). As a matter of fact, culture, human rights and gender are critical pillars in addressing demand-side issues.

Cross-cutting bottlenecks affect multiple sectors and require an integrated response across sector ministries/ agencies (e.g., lack of funds to finance social expenditures; inadequate infrastructure linking rural areas to urban centres).

Based on these definitions, the objective of Step 2 is to identify and prioritize bottlenecks that impede implementation of the priority interventions identified in Step 1 of the MDG Acceleration Framework.

4.3 Methodology

In order to identify and prioritize the bottlenecks, Step 2 uses three processes: (1) identify potential bottlenecks for each priority intervention, (2) determine the potential impact and feasibility of solving each bottleneck, and (3) prioritize bottlenecks that should be solved. The input into this methodology is a priority intervention identified under Step 1.

1: Identify potential bottlenecks for each priority intervention

This step identifies the direct causes of poor intervention performance: the implementation bottlenecks that constrain an intervention from achieving desired results. The step involves:

- · Constructing the end-to-end pathway for each intervention, highlighting the critical activities required to implement the intervention.
- Identifying direct-cause bottlenecks (sector and cross-cutting), using expert interviews, qualitative 'user' data, and on-the-ground analyses. Figure 4.1 provides an overview of bottleneck categories and subcategories. In this figure, subcategories for cross-sector bottlenecks are illustrative, as they should be tailored to each country's context. Analyzing the intervention pathway from the perspective of the categories and subcategories can help identify all major bottlenecks.

Outputs: A detailed map of bottlenecks against the intervention pathway for each priority intervention.

Cross-cutting Sector specific Bottleneck Cross-cutting Service delivery **Budget and** Service utilization categories Policy and (illustrative planning financing (supply) (demand) examples below) Sub-Sector strategies, categories Resource **Engagement and** policies, and Human resources Self-efficacy allocation advocacy plans Infrastructure. Legal framework Resource Coordination and equipment, and Acceptability and laws expenditure alignment supplies Accessibility and Accountability Institutional Resource Sector mobilization Affordability and transparency capacities governance

Figure 4.1: Overview of bottleneck categories and sub-categories

2: Determine potential impact and feasibility of solving each bottleneck

Create profiles for each bottleneck that include the direct and cross-cutting impact of solving the bottleneck (number of people who will achieve the MDG target, the population impacted) and the availability of potential solutions. These two factors provide the basis for prioritizing the bottlenecks.

Outputs: Profiles for each bottleneck that assess the impact removing/mitigating the bottleneck.

3: Prioritize bottlenecks

Create a scorecard that ranks the full list of bottlenecks from highest to lowest priority across all interventions for a specific MDG according to impact and availability of potential solutions. From this list, select priority bottlenecks to solve.

Outputs: A scorecard that ranks bottlenecks and a prioritized list of bottlenecks to be removed/mitigated for each priority intervention.

In order to successfully complete this step, the expert working group that is focusing on acceleration and the UNCT may need to consult with (1) the target populations for each intervention, (2) additional experts from within or outside the country, and (3) good-practice documents. This will provide a holistic perspective on how to improve the intervention implementation.

Figure 4.2: Overview of the Step 2 process*

Input: priority intervention		Determine potential impact of each bottleneck	Prioritize bottlenecks that should be solved X weeks
Main activities	 For a given intervention, construct its end-to-end intervention pathway, highlighting the critical activities required to implement the intervention For each activity, identify sector bottlenecks: (1) policy and planning (2) budget and financing, (3) service delivery (supply), and (4) service utilization (demand), using expert interviews, qualitative "user" data, and on-the-ground analysis Identify cross-cutting bottlenecks 	 Create profiles for each bottleneck that include Impact of solving the bottleneck (number of lives and people groups impacted) Availability of potential 	 Based on the bottleneck profiles, rank the full list of bottlenecks from highest to lowest priority Select priority bottlenecks to resolve across all interventions
Outputs	 For each priority intervention, detailed map of bottlenecks against major activities 	 Bottleneck profiles that provide potential impact and available solutions 	 Scorecard that ranks bottlenecks Prioritized list of bottlenecks to be removed/mitigated for each priority intervention
Owner- ship	 Expert working group – supported by UNCT experts Interviewees include ministry officials, UN, development partners, CSO expert representatives, and representatives of intervention target population 	 Expert working group – supported by UNCT experts Interviewees include ministry officials, UN, development partners, and CSO expert representatives 	 Expert working group – supported by UNCT experts

^{*} Time taken to complete Step 2 is determined by country and expert working group

A note on analyzing cross-cutting bottlenecks

Just as analyzing cross-cutting interventions is important during Step 1, MDG Acceleration Framework users should also identify cross-cutting bottlenecks. Cross-cutting bottlenecks are critical because they may impact multiple MDGs, raising the importance of solving them quickly. For instance, access to obstetric care to reduce maternal mortality rates may be impaired by a lack of infrastructure (e.g., lack of roads prevent physicians from visiting villages). This lack of infrastructure may also impede progress on other MDGs, such as MDG 1 (farmers cannot easily get inputs for production, such as fertilizer) and MDG 2 (children cannot travel to school). Furthermore, paving roads lies beyond the mandate of the Ministry of Health. This requires users to assess the feasibility of a solution that involves integrated action by relevant agencies, including their ability to leverage information on the potential impact across MDGs to create the necessary political will to implement.

To help identify these cross-cutting bottlenecks, the MDG Acceleration Framework provides the following categories of questions to help initiate discussion (questions are not exhaustive):

Geography and demographics

- Are there geographic barriers that prevent service delivery (e.g., mountainous areas that are difficult to reach)?
- Are there groups of people living in remote geographical areas that lack transportation?
- Are there disparities in services between rural and urban population groups, women and men, ethnic groups, different states or districts?
- Is the country vulnerable to national disasters and climate change?

· Budgets, accountability, and data

- Are there fiscal constraints across the entire government?
- Do fiscal responses to crises (e.g., the global financial crisis) threaten MDG interventions?
- Is there a lack of government-wide accountability for fund expenditures that impedes MDG interventions? Is there corruption that reduces the effectiveness of interventions?
- Are there links between the national and subnational (e.g., district, municipality, village) governments that provide transparency and accountability for the delivery of services?
- Do subnational governments have the ability to customize interventions to meet regional needs?
- Is there sufficient data to monitor service delivery?

Capacity

- Does the government lack the capacity to plan and deliver the interventions (e.g., need for civil service reform)?
- Does the country lack the basic infrastructure required to deliver the interventions?

• National/subnational ties

- · Are there links between the national and subnational governments that provide transparency and accountability for the delivery of services?
- Do subnational governments have the ability to customize interventions to meet regional needs?

4.4 Step 2 illustrative case study: MDG 2

Under Step 1, the three prioritized interventions for accelerating achievement of MDG 2 were: (1) the construction of new schools, (2) conditional cash transfers, and (3) incentives to create an environment for girls' enrolment. Incentives for girls' enrolment will not be analyzed during Step 2 - instead it will be piloted for the first time. Construction of new schools and conditional cash transfers, however, will be analyzed unde Step 2. This case study illustrates how the three steps described above would be applied to these interventions and exhibits the templates and tools for carrying out Step 2.

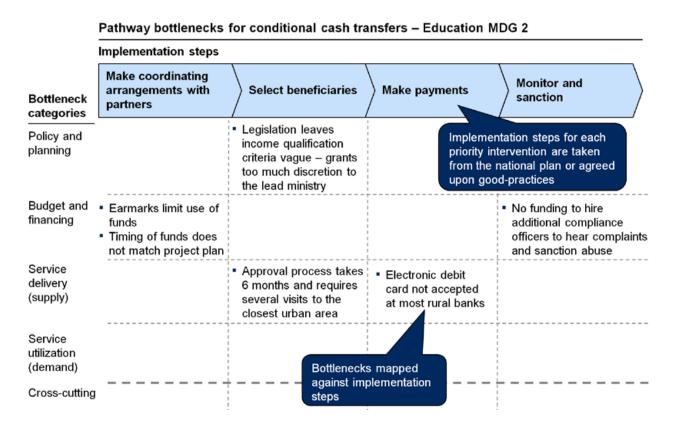
1: Identify bottlenecks for each priority intervention

To begin Step 2, the expert working group and the UNCT technical experts construct an end-to-end intervention pathway highlighting the key implementation steps for each intervention, based on the activities outlined in the sector plan or good practices. For conditional cash transfers, these are (1) coordinate arrangements with partners, (2) select beneficiaries, (3) make payments, (4) monitor and sanction.

Next, the expert working group consults with the intervention target population to identify the bottlenecks in policy and planning, budget and financing, service delivery (supply) and service use (demand) for each implementation step. To do this, they may use the intervention pathway template.

Figure 4.3 shows how the template works for conditional cash transfers in a hypothetical situation. As Figure 4.3 shows, bottlenecks in policy, budgeting, and service delivery prevent successful implementation of the transfers programme, despite significant demand. For example, approval of programme participation is complex – requiring six months to complete and several long (and costly) trips to the urban administration centres. Also, the debit cards used by the programme are often not accepted at rural banks, making it difficult to redeem the cash transfer.

Figure 4.3: Illustration of intervention pathway – conditional cash transfers – MDG 2



In addition to using the intervention pathway, the team may also use issue-tree analysis. Issue trees provide a systematic way of identifying direct-cause bottlenecks. To use an issue tree, start with the major categories of sector and cross-cutting bottlenecks, and then branch out to the subcategories of bottlenecks. Then, systematically identify the direct-cause bottlenecks for each subcategory.

Figure 4.4 is an example for the 'budget and financing' branch of the issue tree.

2: Determine potential impact and feasibility of solving each bottleneck

The expert working group profiles each bottleneck for each priority intervention. These profiles outline the potential impact (sector and cross-cutting) of fixing the bottlenecks (i.e., the number of people who will meet the MDG target) and also assure the availability of potential near-term solutions. The MDG Acceleration Framework provides a bottleneck profile template that helps capture this information (Figure 4.5).

In this case, removing/mitigating the bottleneck in service delivery due to limited acceptance in rural areas of the approved debit card means that 400,000 more children will attend primary school (MDG Target 2A). In addition, 200,000 students will now have care for malaria and HIV/AIDS through school clinics, which has a direct impact on MDG Target 6.

Figure 4.4: Illustration of issue tree analysis – conditional cash transfers – MDG 2

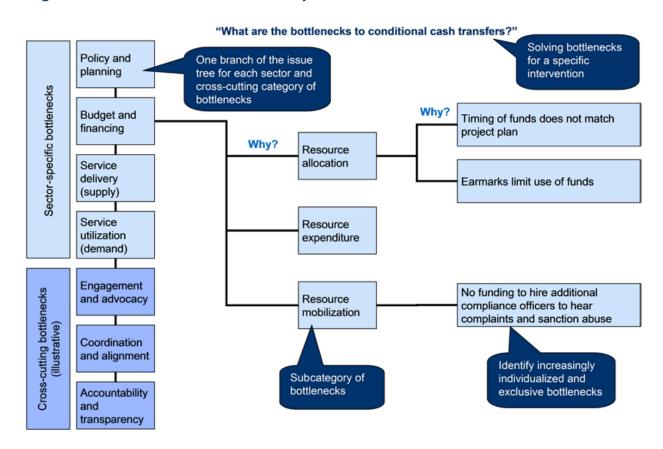
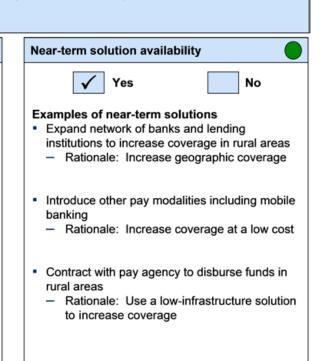


Figure 4.5: Bottleneck profile template – conditional cash transfers – MDG 2 (Illustrative)*

Bottleneck description: The government-approved electronic bank card is not accepted at most rural banks. The inability of rural parents to access the cash transfers means that many children living in rural areas – in particular girls – will not enroll or attend due to lost earning power for the family.

Bottleneck category: Service delivery (supply)

Bottleneck impact Direct impact Number of people who will achieve the MDG target by solving this bottleneck 400,000 Population segment impacted Conditional transfers targeted to girls and vulnerable groups Spillover/cross-cutting impact Type of benefit Improved health outcomes for MDG 6 (Malaria and HIV) due to school clinics Number of people who will achieve the MDG target by solving 200.000 this bottleneck Population segment impacted



^{*} Numbers are illustrative and will vary based on the intervention and the country context

3: Prioritize bottlenecks

All segments, especially girls

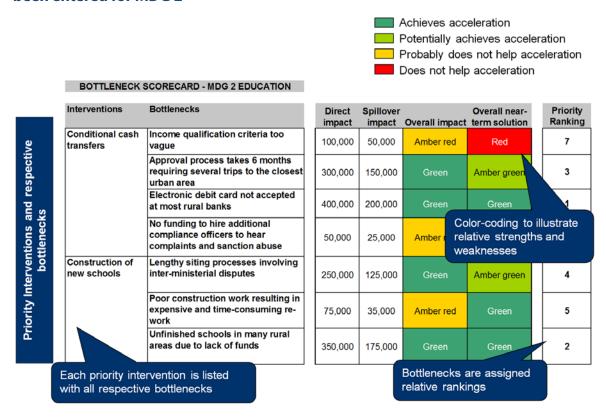
The expert working group reviews the bottleneck profiles and prioritizes bottlenecks across all MDG 2 interventions based on their potential for accelerating impact and the availability of solutions.

The bottleneck scorecard helps the expert working group summarize the relevant data from the bottleneck profiles and helps identify the relative impact and ease of removing each bottleneck. Based on these results, users then prioritize the removal/mitigation of bottlenecks across all interventions.

In this example, five bottlenecks to conditional cash transfer and construction of new schools have been prioritized (the same profile and scorecard process used above would also have been applied to construction of new schools producing a prioritized list of bottlenecks):

- 1. Conditional cash transfer debit card not accepted at rural banks
- 2. Construction of new schools unfinished schools in many areas due to lack of funds
- 3. **Conditional cash transfer** approval process takes 6 months and requires several visits to the closest urban area

Figure 4.6: Illustration of bottleneck prioritization scorecard once the data has been entered for MDG 2



- 4. **Construction of new schools** lengthy siting process involving ministerial disputes
- 5. **Construction of new schools** poor construction work resulting in expensive and time-consuming repair

The expert working group, with assistance from the UNCT, will further examine these five bottlenecks under Step 3 when they determine near-term solutions. The trade-offs vis-à-vis the incentives generated will be assessed when prioritizing the bottlenecks.

4.5 Potential challenges to completing MAF Step 2

When working on Step 2, the expert working group and UNCT may face the following barriers:

· Working group experts lack the data on bottleneck impact to effectively prioritize bottlenecks. In this case, the expert working group and UNCT may need to conduct interviews and focus groups with target populations to better understand the bottlenecks or rely on lessons learned and good practices from other countries with similar contexts.

- Lack of access to target population groups to understand on-the-ground bottlenecks. The expert working group and technical experts will need to quickly identify target populations they can interview, including experts, service providers, and service beneficiaries.
- Critical bottlenecks may be systemic in nature and have little potential for near-term removal/mitigation. This leads to three possible outcomes: (1) MDG Acceleration Framework users choose a different set of interventions with greater potential for the application of near-term solutions, (2) users agree that the country's situation makes the MAF unsuitable and address the systemic issues first, or (3) the countries apply the MAF and deploy cross-cutting resources and solutions to resolve the identified bottlenecks.
- Countries may face a perceived trade-off between 'equity' and 'acceleration' in the short run. The
 historical evidence shows that inequities often arise when countries begin to make progress toward
 MDGs and that addressing these becomes an important part of continuing progress. The MAF
 allows for taking this into account and encourages the use of disaggregated data and differentiated
 approaches to facilitate this. This is an aspect that may be of particular relevance to countries that
 are performing well in national MDG averages, but that retain persistent pockets of poverty and
 inequalities.

Figure 4.7: Illustration of bottleneck prioritization scorecard after the bottlenecks have been prioritized and selected

Achieves acceleration Potentially achieves acceleration Probably does not help acceleration Does not help acceleration BOTTLENECK SCORECARD - MDG 2 EDUCATION Interventions Bottlenecks Direct Spillover Overall near-**Priority Bottleneck** impact Overall impact term solution Ranking selected impact Priority Interventions and respective Conditional cash Electronic debit card not accepted 200 000 400,000 Green 1 Yes transfers at most rural banks Construction of new Unfinished schools in many rural 350,000 175.000 2 Yes schools areas due to lack of funds Conditional cash Approval process takes 6 months bottlenecks transfers requiring several trips to the closes 300,000 150,000 Green Amber green Yes urban area Construction of nev Lengthy siting processes involving 250,000 125,000 Amber green 4 Yes inter-ministerial disputes Construction of new Poor construction work resulting in schools expensive and time-consuming re-75,000 35,000 Amber red 5 Yes work Conditional cash No funding to hire additional transfers compliance officers to hear 50,000 25,000 Amber red 6 Amber green No complaints and sanction abuse Conditional cash Income qualification criteria too transfers 7 vague 100,000 50,000 Amber red No

4.6 **Prerequisites for success**

To be successful, Step 2 requires:

- · Consensus by the expert working group, government experts and officials, UNCT, and other country experts on the priority interventions identified under Step 1. Step 2 is intended to analyze bottlenecks for the most important interventions.
- Sufficient primary or secondary data on bottlenecks to assess the impact of removing them. This impact analysis helps prioritize the bottlenecks, which will allow the country to best allocate resources for solving the bottlenecks.

Potential sources of information 4.7

When completing this step, there are several sources of information available to help identify the potential bottlenecks:

- National laws
- National Development Strategy/PRS
- Sector plans
- Mid-term reviews
- MDG Needs Assessment
- Demographic Household Surveys (DHS)
- Multiple Indicator Cluster Surveys (MICS)
- National Development Plans/PRSPs
- Medium-Term Expenditure Framework
- Annual budget
- Reports from the Ministry of Planning and Financing/Implementation
- Expenditure reports
- Public Expenditure Reviews for the Sector
- PEFA (Public Expenditure and Financial Accountability)
- Performance Measurement Framework
- Aid management report
- Time Use Surveys (TUS)
- DevInfo

ANNEX – STEP 2: QUESTIONS TO HELP IDENTIFY AND PRIORITIZE BOTTLENECKS

pathway and issue tree analysis to help structure the conversation. The last two columns (Bottlenecks identified and Ranking) can be used to capture The template below can be used as an additional guide to identify bottlenecks. These questions can be used in conjunction with the intervention the main points during the bottleneck conversation(s).

1. Policy and Planning

Sub-category	Questions	Information sources	Bottlenecks identified	Ranking
Laws and policies: Policies and laws are conducive to the delivery and use of services	 What are the laws and policies – within and outside of the intervention sector – that have direct implications for this intervention implementation? Is the implication positive or negative? Are the institutional responsibilities and powers clearly defined for this intervention among national, district, and municipality authorities? Do existing laws and policies provide incentives for public-private partnerships and government ministries to deliver the intervention? 	• National laws		
Sector policies/ strategies: Sector policies and strategies (e.g., NDP/PRSP, sector plans) support delivery and use of services. Sector-based strategies and plans are MDG-based and outline challenges and strategies to meet development goals	 Are sector-based strategies and programmes linked directly to the MDGs? Is the MDG priority intervention integrated into the PRSP or NDS? If not, what causes the lack of integration? Lack of advocacy, awareness, and understanding of the intervention's relevance? Lack of technical expertise and capacity within the government ministries? 	National development strategySector policiesMid-term reviews		

Sub-category	Questions	Information sources	Bottlenecks identified	Ranking
Sector plan: Sector plan clearly outlines the strategies, approach, and inputs required to deliver the sector priorities	 Does the sector plan use disaggregated data beyond sex and urban/rural demographics to define priority groups and geographies for service delivery? Does the sector plan specify and reflect the needs of the most vulnerable group? 	National development strategySector planMid-term reviews		
	 Does the sector plan restrict access (directly or indirectly) of services to some population groups (male and female, girls and boys, rural and urban, elderly, youth, ethnic groups, etc.)? Does the sector plan contain an M&E system? 			

II. Budget and Financing

Sub-category	Questions	Information sources	Bottlenecks identified	Ranking
Budget allocation: Government budget allocation for the sector matches the priority needs outlined in the	 Is the government budget aligned with the priority needs outlined in the National Development Plan? Are there resources allocated to the intervention in the budget? What is the budget allocation formula? Does the 	 MDG Needs Assessment (Costing) Medium-Term Expenditure Framework (MTEF) 		
National Development	formula allow for alignment with the National Development Plan? • Which stakeholders are primarily responsible for the budget allocation? Line ministries, Ministry of Finance/Planning, legislature, donors, or the private sector?	 Reports from the Ministry of Planning and Financing Reports from the Ministry of Planning and Imple-		
	 Is there a Medium-Term Expenditure Framework (MTEF) associated with the PRS/NDP? Is the MTEF's allocation aligned with the National Development Plan? 	menta-tion • Gender-responsive budget exercises		
	 Has the government undertaken a gender-responsive budget? 			

Sub-category	Questions	Information sources	Bottlenecks identified	Ranking
Expenditure: Government expenditure aligns with government budget	 Does planned expenditure match actual expenditure? If not, what is the source of the mismatch? What are the primary reasons for lower-thanexpected spending on priority areas (e.g., lack of donor funding, spending authorization delays, delayed procurement)? Do sub-national organizations (including the government) share responsibility for expenditures? 	 MDG Needs Assessment (Costing) Medium-Term Expenditure Framework (MTEF) Annual budget Reports from the Ministry of Planning and Financing Reports from the Ministry of Planning and Implementation Expenditure reports Public Expenditure Reviews for the Sector PEFA (Public Expenditure and Financial Accountability) Performance Measurement Framework 		
Resource mobilization: ODA is sufficient to meet budgeted spend on priority sector programmes	 What is the percentage of public spending in this sector financed by donor (i.e., ODA levels) finances? Do conditions on donor spending reduce the effectiveness of sector programmes? How? Do donors coordinate their funding and activities amongst themselves, as well as the government, allowing for funds to be allocated as efficiently as possible? Is there a SWAp in place to help coordinate donor funding? Is donor funding coordinated through a specific government mechanism at the national and sub-national levels? Is there a clear donor strategy that helps specify the resources solicited from donors (e.g., level and allocation of funding)? 	 MDG Needs Assessment (Costing) Medium-Term Expenditure Framework (MTEF) Annual budget Aid management report 		

Annex – Step 2: Questions to help identify and prioritize bottlenecks

III. Service delivery (supply)

Sub-category	Questions	Information sources	Bottlenecks identified	Ranking
Human resources: The right people with the right skills are available at the right time	 On-the-ground personnel: Are there enough qualified and trained service providers to deliver the intervention? Are there sufficient trained/skilled service providers on the ground? If not, is it due to a failure in recruitment or retention? Are service providers gender-sensitive? Are service providers sensitized to provide services to different ethnic groups? Is there an adequate incentive system in place? Do the service providers meet the minimum qualification requirements? If not, is it due to lack of training or lack of people with the basic prerequisites? Do the training curricula provider high-quality guidance? Do the service providers have access to 'refresher' training? 			
equipment, and supplies: Equipment/ supplies/ infrastructure delivered to the service delivery site on time and at the expected cost	 Procurement: Are the right infrastructure, equipment and supplies (volume and quality) purchased at the required price and do they arrive at the required location on time? Are there enough qualified suppliers? Are there enough resources to purchase the required supplies? Are the right supplies (volume and quality) delivered from the supplier on time and at original cost? Are there quality control mechanisms in place to assure supply is procured that meets NDS/PRS standards? Are public-private partners leveraged to purchase the required supplies at an attractive price? 			

Sub-category	Questions	Information sources	Bottlenecks identified	Ranking
Infrastructure, equipment, and supplies (cont.)	 Distribution: Are the equipment and supplies transported to the service delivery location on time and at cost? Are there sufficient logistics routes to deliver the required equipment and supplies? Are equipment, personnel, and funding available to transport the supplies? To all districts? Are there quality control systems in place to monitor the transport process? Do these systems monitor for time of transport, wastage, and leakage? 			
Delivery and sector governance	 Overall delivery: Does the intervention provide high-quality, equitable coverage? To what percentage of the districts is the intervention provided? What percentage of the overall population is covered? Is the distribution of services equitable across the districts? If not, is it due to differences in personnel on the ground or provision of goods among districts? Are disaggregated data (e.g., sex, ethnicity, age, income, rural, urban) used to determine the locations of greatest need and demand for the intervention (geographical priorities)? Are the needs of the poorest and most vulnerable considered in the intervention's delivery? Does the subnational government share significant responsibility for delivery? 			

Annex – Step 2: Questions to help identify and prioritize bottlenecks

Sub-category	Questions	Information sources	Bottlenecks identified	Ranking
Delivery and sector governance (cont.)	 Accountability: Are there clear lines of accountability between the national and sub-national governments? Are there accountability mechanisms in place for sub-national governments to report on the effective- ness of MDG-related support and programming (e.g., resource allocation)? 			
	 Is there a national government unit that can respond to the sub-national government's needs? 			
	 Planning: Are there clearly articulated plans with responsibilities outlined for the national and sub- national governments as well as development partners? 			
	 Is there an intervention plan that outlines major activities and resources required for implementation? Does the plan specify owners for each activity and required resource? 			
	 Do the sub-national government and/or other sub-national organizations have responsibility for sub-national operations? 			
	 Are all relevant parties equipped to deliver their part of the intervention, including the national governments, development partners/donors, and sub-national government? 			
	 Are there clear linkages between the national and sub-national governments' roles and responsibilities (e.g., clear handoffs)? 			

 Programme management and M mechanisms to monitor the intergovernance (cont.) Is there a programme manager vigilantly monitors the intervente vigilantly monitors the intervence by the quantity, quality, and timel services delivery? Does the M8 assess the interventions' delive participate in this monitoring perticipate in this monitoring participate in the intervention participate in the intervent	Sub-category Questions	Information sources	Bottlenecks identified	Ranking
 Is there a programme manager vigilantly monitors the interverse. Does this unit have specified poservices delivery? Does the M& assess the interventions' delive participate in this monitoring is participate in this monitoring in the monitoring is a participate in the monitoring in the monitoring is a participate in the monitoring in the machaquality service for clients? What are the causes of quality monitoring and feedback mectaning of service personnel? 	<u>_</u>			
 Does this unit have specified p the quantity, quality, and timel services delivery? Does the M& assess the interventions' delive Do representatives from civil st participate in this monitoring for Are M & Es publicly available? Quality control: Are there mechaquality service for clients? What are the causes of quality monitoring and feedback mectaning of service personnel? 	 Is there a programme management unit that vigilantly monitors the intervention's success? 			
 Do representatives from civil so participate in this monitoring participate in this monitoring participate in this monitoring solution of service from civil solutions. What are the causes of quality monitoring and feedback mectraining of service personnel? 	• Does this unit have specified procedures to monitor the quantity, quality, and timeliness of goods and services delivery? Does the M&E system accurately assess the interventions' delivery status?			
 Quality control: Are there mechal quality service for clients? What are the causes of quality monitoring and feedback mectraining of service personnel? 	 Do representatives from civil society support and participate in this monitoring process? Are M & Es entiticipate in this process. 			
What are the causes of quality monitoring and feedback meclaning of service personnel?	 Quality control: Are there mechanisms to assure high-quality service for clients? 			
	 What are the causes of quality control problems? No monitoring and feedback mechanism? Inadequate training of service personnel? 			
Are there evaluation mechanis improve quality control perfori	 Are there evaluation mechanisms to understand and improve quality control performance? 			

Annex – Step 2: Questions to help identify and prioritize bottlenecks

IV. Service utilization (demand)

Sub-category	Questions	Information sources	Bottlenecks identified	Ranking
Empowerment and self-efficacy of service users ^a (education, awareness and communication): Education and awareness campaigns have been used to encourage usage of the intervention	 Are potential users aware of the intervention? Are users empowered to use the services available? Do the users know how to properly use the services/ intervention? Has there been a public education campaign that aims to motivate usage? Does this campaign use multiple types of media to ensure maximum exposure (e.g., radio, newspapers, music, theatre, communication through village elders)? Are the education campaigns easily understood by subnational people groups, especially for marginalized or minority populations (e.g., pictorial)? 			
Acceptability and adequateness: Population's culture (customs and traditions) and preferences align with the interventions	 Is the intervention culturally acceptable, particularly to marginalized and/or minority populations? Does the service meet the cultural/religious criteria and are the services provided in minority languages (if applicable)? Are there aspects of the intervention that do not meet the preferences of the population (male and female, youth, elderly, rural and urban, different ethnic groups)? Are the interventions (or services provided) adequate and meet the basic quality standards? 			

a The concept of 'service users' should be broadened to that of 'family decision-makers'. This is because many of the decisions on which the achievement of MDGs necessarily depend on (although are often strongly complemented by) the availability of and access to basic services. The question of whether to invest scarce depends - including livelihoods, local resource use, health care, child feeding, sanitation, investment in learning - take place within the household and do not household resources in accessing services (notably the cost of time and transport' to health facilities, and in some cases the primary school/child labour trade-off), is also influenced by the level of 'empowerment' (knowledge) and mobilization for development goals of household decision-makers.

Sub-category	Questions	Information sources	Bottlenecks Ranking identified	Ranking
Accessibility and affordability:	 What are the barriers for accessing services (e.g., physical and financial)? 			
Addressing the barriers to service users	 Are the costs associated with the services provided prohibitive? 			
addressed under service delivery) ^b	 Can the service user afford the services? What about the most poor and vulnerable (e.g., women, youth, elderly, ethnic groups)? 			

b Barriers that exclude many intended service users from actually using services – ranging from lack of information, discrimination (gender, language/ethnicity, disability), or severe poverty to various forms of violence – need to be considered when assessing service utilization as part of a bottleneck-breaking approach.

Therefore, in some cases, even if services are 'acceptable, accessible and affordable, there might well be other factors, such as these, which suppress demand and/ or prevent the poorest and most marginalized from using them.



STEP 3: SOLUTION IDENTIFICATION AND SEQUENCING 5.

5.1 Summary

After prioritizing intervention bottlenecks, users identify and sequence bottleneck solutions to speed intervention implementation and accelerate progress toward priority MDG targets.

Specifically, Step 3 helps:

- Identify solutions to remove/mitigate intervention bottlenecks
- Prioritize and sequence solutions to maximize magnitude and speed of impact on priority MDG targets

These sequenced solutions and their estimated impact on priority MDG targets serve as the inputs to Step 4, which creates a solution implementation and monitoring plan that will be formalized in an MDG Acceleration Compact and grounded in existing government processes at the national level.

5.2 **Purpose and objectives**

Step 2 enabled the user to identify bottlenecks that impede the implementation of interventions that are critical to accelerating progress toward priority MDG targets. Step 3 helps identify, prioritize, and sequence near-term solutions to these bottlenecks.

In this context, a solution is defined as an 'accelerating', near-term action that resolves an intervention bottleneck to produce quick impact on the ground. Solutions attempt to ensure successful implementation of interventions.

Examples of interventions, bottlenecks, and potential solutions include:

Intervention	Bottleneck	Solution
National Development Plan/PRSP and health sector strategy call for measles vaccination	No vaccine distribution system exists	Immediate technical assistance to develop a good-practice vaccine distribution system
National legislation eliminates school fees to increase primary school enrolment	Sub-national school districts continue to charge fees because national funding is not sufficient to cover costs	Reallocate or mobilize resources to eliminate need for school fees in rural areas
Provision of agriculture extension services to all farmers (both female and male) to increase yields and transfer good practices and new technology	Ministry of Agriculture lacks sufficient staff to bring extension services to many farmers.	Offer government incentives to enlist private sector or community workers to help provide agriculture extension services to farmers

5.3 Methodology

The methodology has three processes: (1) develop a list of potential bottleneck solutions and profile them, (2) prioritize the solutions, and (3) confirm priority interventions and bottlenecks. The output from Step 2 provides the prioritized list of bottlenecks that impede implementation of MDG target interventions.

Before undertaking these steps, users should refer to the Good Practices Approach to Facilitating the MDG Acceleration Framework included in Annex A to Section 2.1 (Preview of the MDG Acceleration Framework Steps). This document emphasizes the importance of positive collaboration, trust, and a vision of success based on the government's core strengths in generating solutions to intervention bottlenecks.

1: Identify and profile potential solutions

Under this step, users identify and evaluate potential near-term solutions to intervention bottlenecks that will produce rapid acceleration toward priority MDG targets.

Figure 5.1: Solution evaluation template for Impact (Illustrative)*

Criteria	Description	Green	Amber green	Amber red	Red
Impact magnitude	Magnitude of the solutions impact on solving the bottleneck Impact on priority MDG target Indirect/spillover impact Equitable impact	 Achieves large portion of potential impact from solving the bottleneck and has equitable impact. Some spillover impact identified 	 Achieves large portion of potential impact from solving the bottleneck, but impact is not equitable 	 Achieves a portion of potential impact from solving the bottleneck. Minimal spillover impact. Impact is not equitable 	 Does little to solve the intervention bottleneck
Impact speed	Length of time to realize the solution's impact	 Full impact is realized within x months – time to be determined at the country level 	 Partial impact is realized within x months or full impact within x years – time to be determined at country level 	 Impact will not be realized until shortly before 2015 	 Impact will not be realized before 2015
Sustain- ability	Government and partners have the ability to maintain solution over the medium and long term (e.g., beyond 2015) and help enable systemic improvement	 Solution is viable beyond 2015. Contributes to systemic improvement 	 Solution is probably viable beyond 2015, but there are a few obstacles 	 Solution is viable for the next x years, but then will end. No systemic improvement 	 Solution is viable for only the next x years – time to be determined at country level
Adverse impact	Magnitude of negative impact, within or outside the sector	No known adverse impact	Small risk of adverse impact	 Low levels of adverse impact likely 	 Substantial adverse impact likely

^{*} Criteria to be discussed by expert working group and adjusted at the country level

- · For each bottleneck, identify potential solutions based on proven solutions and case studies (available in the Wikipedia of MDG Acceleration), expert interviews/focus groups, and government documents and assessments.
- Create a profile for each solution that documents impact (see Figure 5.1) and feasibility (see Figure 5.2).

Step 3 includes solution evaluation templates, which provide criteria to evaluate each solution. They are shown here in Figures 5.1 and 5.2.

Outputs: A list of potential solutions for each bottleneck and a profile of each solution (e.g., magnitude, sustainability and speed of impact, funding availability). This information provides the foundation for the solution prioritization and sequencing analysis in the next section.

2: Prioritize the solutions

Prioritize and sequence the solutions to maximize near-term impact and allocate resources most effectively by reviewing solution profiles and ranking solutions based on solution impact and feasibility of implementation.

Figure 5.2: Solution evaluation template for Feasibility (Illustrative)*

Criteria	Description	Green	Amber green	Amber red	Red
Governance	Rule of law, transparency and accountability mechanisms to implement the solution	 Government has put into place the necessary accountability mechanisms. Rule of law is strong 	 Accountability mechanisms are in place but are not fully adequate 	Rule of law is weak and may affect the implementation of the solution	 Lack of rule of law and accountability mechanisms will affect the successful delivery of the solution
Capacity	Government and partners' ability to plan, implement, and monitor the solution	 Government and partners have the capacity to plan, implement, and monitor the solution 	 Some capacity concerns over planning, implementation, or monitoring, but delivery likely 	 Significant concern over planning, implementation, or monitoring that may prevent delivery 	 Government and partners probably do not have the capacity for successful delivery
Funding availability	Availability of funds to cover the solution's cost (including mobilization of domestic and external resources, contributions by partners, reallocation within the budget)	 Funding (either through the government or donors) readily available 	 Funding likely, but specific source yet to be determined 	 Ability to fund the solution uncertain; probably requires a new funding source 	Funding not likely
Additional factors	Additional factors that may impede the solution (e.g. acceptability level of the solution)	No factors identified	 Minor concerns identified, but they can be resolved 	More substantive issues identified, but solutions likely	Substantial, unsolvable issues identified

^{*} Criteria to be discussed by expert working group and adjusted at the country level

Depending on resource constraints and existing programmes, this step may require making trade-offs between bottleneck solutions or between these solutions and existing programmes. These trade-offs should be discussed explicitly while reviewing the solutions' adverse impact, countries' and partners' capacity for implementation, and sources of potential funding.

Outputs: A scorecard that ranks and sequences the list of near-term actions to accelerate progress toward MDG targets.

3: Confirm priority interventions and bottlenecks

This section provides an important check to ensure that the priority solutions will accelerate implementation of the most critical interventions for achieving the MDG targets. Confirm that the correct interventions and bottlenecks were chosen for the MDG Acceleration Framework process.

Outputs: A finalized list of bottleneck solutions that the country will pursue to address priority intervention bottlenecks.

Figure 5.3: Overview of the Step 3 process*

Input: priority bottlenecks	Create profiles for potential solutions	Prioritize the solutions	Confirm priority interventions and bottlenecks
	← X weeks →	← X weeks →	◆ X weeks →
Main activities	 For selected bottlenecks, identify potential solutions based on (1) solutions and case studies in the searchable tool and (2) expert interviews/ focus groups For each solution, create an accelerated impact profile, including magnitude and speed or impact on the bottleneck, feasibility of the solution, and requirements for successful implementation 	 Rank the solutions based on the profiles and expert judgment Prioritize and sequence the solutions based on magnitude and speed of impact and feasibility (i.e., where will the first funds be spent?) 	 Double check that the priority solutions will accelerate implementation of the most critical interventions to achieving the MDG targets. Confirm that the correct interventions and bottlenecks were chosen for the Acceleration Framework process
Outputs	 Defined list of solutions for each bottleneck Profile for each potential solution 	 Scorecard that ranks and sequences solutions List of solutions for near-term action to accelerate MDG progress 	 Finalized list of bottleneck solutions that the country will pursue
Owner- ship	 Expert working group – supported by UNCT experts Interviewees include ministry officials, UN, development partners, CSO expert representatives, and representatives of intervention target population 	 Expert working group – supported by UNCT experts 	 Expert working group – supported by UNCT experts Interviewees include ministry officials, UN, development partners, CSO expert representatives, and representatives of intervention target population

^{*} Time taken to complete Step 3 is determined by country and expert working group

5.4 Step 3 illustrative case study: MDG 2

In Step 2, the illustrative case example went through the analysis of two critical interventions (conditional cash transfers and construction of new schools) and prioritized bottlenecks impeding their respective implementation. As an output, Step 2 prioritized five bottlenecks for immediate removal/mitigation in the following order:

- 1. Conditional cash transfer debit card not accepted at rural banks
- 2. Construction of new schools unfinished schools in many areas due to lack of funds
- 3. Conditional cash transfer approval process takes 6 months and requires several visits to the closest urban area
- 4. Construction of new schools lengthy siting process involving ministerial disputes
- 5. Construction of new schools poor construction work resulting in expensive and time-consuming repair

Under this step, the case example illustrates the process of identifying, prioritizing and sequencing solutions based on the key bottleneck to conditional cash transfers: the approved electronic debit card is not accepted at rural banks. This case study demonstrates how Step 3 methodology, tools and templates would identify this as a high-priority solution (due to its impact) and then prioritize and sequence the solution (establishing a new mobile banking system, using mobile phones).

1: Create profiles for potential solutions

The expert working group identifies potential solutions based on consensus opinion and/or relevant solutions case studies from the Wiki of MDG Acceleration.

After identifying potential solutions, the expert working group and UNCT technical experts create profiles for each solution. This section offers a template that contains the following data for mobile banking (impact numbers, timeline, and cost estimates provided here are illustrative):

- · Solution impact:
 - Magnitude: The estimate is that a mobile banking system could enable funds to reach rural areas and bring 260,000 more children into elementary schools, potentially including 130,000 female students (thereby also accelerating progress toward MDG 3 targets on gender parity). The solution has high impact on those least likely to attend school: rural and female students.
 - Speed of impact: The timeline for impact is 6 months for development, 6 months to implement. After that, impact is nearly immediate - 70 percent in year one and 90 percent in 18 months. In this case, estimates of the speed of impact assume that all preconditions for implementation are in place, thereby avoiding delays in achieving impact.
 - Sustainability: A mobile banking system is sustainable over the long term and will likely lead to the further development of financial institutions in partnership with the private sector.
 - Adverse impact: There are no known adverse effects.

- Feasibility:
 - **Governance:** There is one key government actor and the solution has political support from the highest levels of government.
 - **Capacity:** The design and implementation of the solution are technically very difficult, requiring significant technical support from development partners. Mobile banking will also require additional government staff for the ICT and compliance units.
 - **Funding availability:** Mobile banking development and implementation costs US\$2 million and donor funding is available.
 - **Additional factors:** Mobile banking depends on extensive mobile phone penetration among rural families as well as a national awareness campaign to generate demand.

The example for this case study is in figure 5.4.

2: Prioritize and sequence the solutions

The expert working group reviews the solution profiles and scorecards and ranks the solutions. The solution profiles and scorecards provide the expert working group with information on the relative strengths and

Figure 5.4: Solution profile template – conditional cash transfers – debit card not accepted in rural banks – MDG 2 (Illustrative)*

Solution description: Introducing mobile banking as an alternative pay modality will ensure greater coverage in rural areas. Mobile

banking allows rural families to withdraw credited funds from participating merchants and other payment agencies (e.g., post offices) through SMS text messages, obviating the need to travel to specific banks to withdraw money. Solution impact Feasibility Overall Overall Governance Magnitude 260,000 Estimated impact on priority MDG target 1 key actor: Ministry of Education disburses funds and monitors attendance Number of new children attending school 130,000 New ICT unit in ministry Indirect impact on MDG 3 Strong political support from government, donors, Increase in female students merchants, and rural families Equitability/Population segment impacted Mobile banking will benefit those least likely to get an Capacity education - rural and female students Technical difficulty of design and implementation High level of difficulty in designing and Impact Speed implementing required ICT system, but Estimated time for design/development technique has been proven in several other Designing mobile pay systems will take 6 months countries Estimated time for implementation Rolling out mobile pay modality will take 6 months Funding availability Estimated time to see results on the ground Donors have expressed interest in providing funding Results will be immediate upon roll-out, 1 year 70% for solution cost of US\$2M impact, 1 year 6 months 90% impact Sustainability Medium- to long-term impact Additional factors Mobile banking is sustainable over the long term and Extensive mobile phone use by rural families will likely lead to further development of financial National awareness campaign institutions in collaboration with the private sector Adverse impact

^{*} Numbers are illustrative and will vary based on the solution and the country context

Green

Figure 5.5: Illustration of solution scorecard – conditional cash transfers – Debit card not accepted in rural banks - MDG 2 (Illustrative)*

Amber Green Amber Red Red SOLUTION SCORECARD - DEBIT CARD NOT ACCEPTED AT RURAL BANKS - MDG 2 EDUCATION Potential bottleneck solutions Solution impact Overall solution imp unding availability pact magnitude Additional factors Solution Rank chosen AG G Expand network of banks and lending institutions G G Yes Mobile banking - alternative pay modality Contract with pay agency to disburse funds in rural areas No Solutions are evaluated against criteria and then prioritized and sequenced

weakness of the different solution alternatives. In this example, the expert working group ranks solutions to the debit card bottleneck in the following order: (1) mobile banking – alternative pay modality, (2) expand network of banks and lending institutions, and (3) contract with pay agency to disburse funds in rural areas

3: Confirm priority interventions and bottlenecks

The expert working group reviews the list of solutions to ensure that they support acceleration toward priority MDG targets. The expert working group confirms that the two solutions do address the right bottleneck (debit card not accepted at rural banks) to an intervention that is critical to accelerating MDG progress (using conditional cash transfers as a country-appropriate mechanism to meet primary enrolment and attendance targets under MDG 2).

5.5 Potential challenges to completing MAF Step 3

When completing Step 3, the expert working group will need to overcome these potential barriers to success:

• No significant case studies or proven solutions exist for a specific bottleneck prioritized under Step 2. In this situation, countries may need to interview experts to gather ideas. They may also need to pilot a series of solutions to identify which best address the bottlenecks in their local context.

^{*} Numbers are illustrative and will vary based on the solution and the country context

- Expert working group lacks the data or data of the required quality to appropriately estimate the solution's impact, feasibility, cost, and/or other requirements for success. The expert working group may need to rank the solutions based on their best estimates or attempt to solve a bottleneck for which it has better data.
- Government ministers and experts strongly disagree over which solutions to pursue. To try to reach
 group alignment, use the facilitation suggestions in Annex A, centring the discussion on the fact
 base developed under Step 3. Identify the specific points of disagreement and use the facts to
 discuss and solve the disagreement. If the group cannot reach consensus, it may decide to address
 a different MDG instead.

5.6 Prerequisites for success

Successful completion of Step 3 depends on:

- Consensus by the expert working group, UNCT, and other country experts on the priority bottlenecks identified under Step 2
- Relevant expertise and sufficient data on solutions for the expert working group to assess impact and feasibility of potential solutions. Whenever available, the use of disaggregated data is encouraged
- A comprehensive, searchable database with proven solutions from other countries/geographies for specific types of bottlenecks

5.7 Potential sources of information

Several sources of information may help the expert group identify and sequence potential solutions:

- UNDG Millenium Development Goals Thematic Papers (2010)
- UNDG MDG Good Practices (2010), prepared by the UNDG MDG Policy Network
- · Wikipedia of MDG Acceleration
- Websites and knowledge management platforms of other UN agencies
- Development partner good practice case studies
- Investing in Development: A Practical Plan to Achieve the Millennium Development Goals, a Report
 to the UN Secretary-General by the Millennium Project, in collaboration with academic, NGO, and
 CSO experts
- Country MDG reports
- DevInfo

Implementation 2 planning and monitoring



6. STEP 4: IMPLEMENTATION PLANNING AND MONITORING

6.1 Summary

After identifying and sequencing solutions to intervention bottlenecks, country stakeholders work with development partners to establish an MDG Acceleration Compact as the basis for an implementation and monitoring plan for these solutions. Step 4 ensures coordination of MDG acceleration actions, accountability in implementation, and successful delivery of solutions that accelerate progress toward priority MDG targets. Specifically, this step helps users:

- Select the best delivery model for the country context
- Identify the activities required to implement the solutions by when and by whom
- Assess and build institutional capabilities needed to deliver solutions
- Identify the appropriate budgeting and planning cycle entry points to ensure support for solution implementation
- Monitor and evaluate solution implementation

The implementation and monitoring plan will provide governments with the ability to coordinate action to achieve priority MDG targets as well as offer visibility into delivery challenges and successes.

6.2 Purpose and objectives

Step 3 identified, prioritized, and sequenced solutions to intervention bottlenecks in order to accelerate progress toward priority MDG targets. The primary objective of Step 4 is to help the user implement and monitor these solutions.

Successful delivery of solutions represents the difference between reaching priority MDG targets and remaining off-track. For many users, effective delivery will be the most challenging part of the overall effort to accelerate MDG progress. Solution delivery is often hampered by shifting priorities, lack of clear targets, insufficient incentives, opaque delivery systems, and inflexible hiring and procurement practices. Step 4 provides tools to address these delivery challenges by helping:

- Identify the activities required to implement the solutions. Document the necessary activities
 and resources required to implement solutions, establish a timeline for implementation, and assign
 funding and implementation responsibilities to specific parties to coordinate delivery and ensure
 accountability.
- 2. **Assess and develop government capacity to deliver solutions.** Ascertain whether capacity exists across key delivery components, including the capacity to engage stakeholders, assess a situation and define a vision, formulate policies and strategies, budget, manage, implement and evaluate.

- 3. **Identify appropriate budget and planning entry points.** For the specific country, determine when it is most appropriate to use this framework and how the framework will interface with existing processes (e.g., PRSP, UNDAF).
- 4. **Develop a plan to monitor and evaluate solution delivery.** Estimate the implementation trajectory, establish regular meetings to monitor delivery, match outputs against targets to assess progress, and address any implementation challenges that arise.

The tools under Step 4 employ the Results-Based Management (RBM) approach to focus solution monitoring and evaluation efforts on measuring results against the priority MDG target.

The output of this step is the MDG Acceleration Compact and the tools required to implement and monitor each country's agreed-upon solutions.

6.3 Description of implementation and monitoring toolkit

The following set of tools supports the four steps outlined above to implement and monitor acceleration solutions. Users are not required to sequence use of these tools or employ the full set of tools.

A summary of the toolkit is provided below:

Step 4 tools

Identify the activities required to implement the solutions

- Tool 1A: Target matrix Provides an overview of the target outcomes for each solution across all MDGs.
- Tool 1B: Resource and implementation plan Projects resource requirements over time to meet output and outcome metrics and achieve target outcomes.
- Tool 1C: Accountability matrix Coordinates solution delivery between the government and its development partners by matching outputs and resource targets to specific actors.

Assess and develop government capacity to deliver solutions

• Tool 2A: Capacity assessment and response – Helps users identify critical delivery capabilities that already exist as well as the additional capabilities necessary to reach delivery objectives.

Identify appropriate budget and planning entry points

 Tool 3A: Entry point map and timeline – Allows users to build MDG Acceleration Compact outputs directly into existing government and UN planning and budgeting processes.

Develop a plan to monitor and evaluate solution delivery

• Tool 4A: Trajectory map – Projects the MDG target's path over time, allowing users to monitor actual versus expected results.

- Tool 4B: 'Routines' calendar Represents a set of regularly scheduled 'checkpoints' to assess whether delivery is on track.
- Tool 4C: Monitoring and evaluation scorecard Applies standardized metrics to determine whether implementation and impact are on track.
- Tool 4D: Implementation challenges mapping Identifies the specific impediments to successful delivery of the solution.

An in-depth discussion of each tool follows:

Identify the activities required to implement the solutions

- Tool 1A: Target matrix (Figure 6.1) The target matrix provides an overview of the target outcomes for each solution across all MDGs. Users will find the target matrix helpful in leveraging potential synergies across solutions and establishing the overall landscape for monitoring progress toward targets.
 - How to use: The target matrix links directly to Step 3 outputs and lists solutions and their targets. To complete the matrix:
 - Enter full list of solutions identified in Step 3 for all intervention bottlenecks in the left-hand column. Across the top of the matrix, users will find each of the MDG targets.
 - Map target impact (direct and spillover) for each solution against respective MDG target categories. Step 3 solution profiles provide solution target information.
- Tool 1B: Resource and implementation plan (Figure 6.2) The resource and implementation plan projects resource requirements over time to meet output and outcome metrics and achieve target outcomes. The plan structures input targets over eight categories (policy and planning, budget and financing, people, infrastructure, equipment, supplies, delivery process/governance, and demand generation) to reveal resource needs over time and to ensure adequate planning for implementation activities. These resource and implementation targets provide the foundation for the MDG Acceleration Compact and allow users to mobilize resources in support of solution implementation and to develop necessary capacity to undertake delivery.

• How to use:

- · Map resources to the eight implementation input categories and project them over the timeline necessary to implement the solution. The tool alerts users when resources fall short of projected needs.
- · Estimate cost of inputs and source of funding where possible (i.e., resources are already allocated, resources will be reallocated from existing asset base, resources do not exist and must be mobilized).
- Link output metrics and outcome targets to the resource and implementation timeline to monitor implementation results.

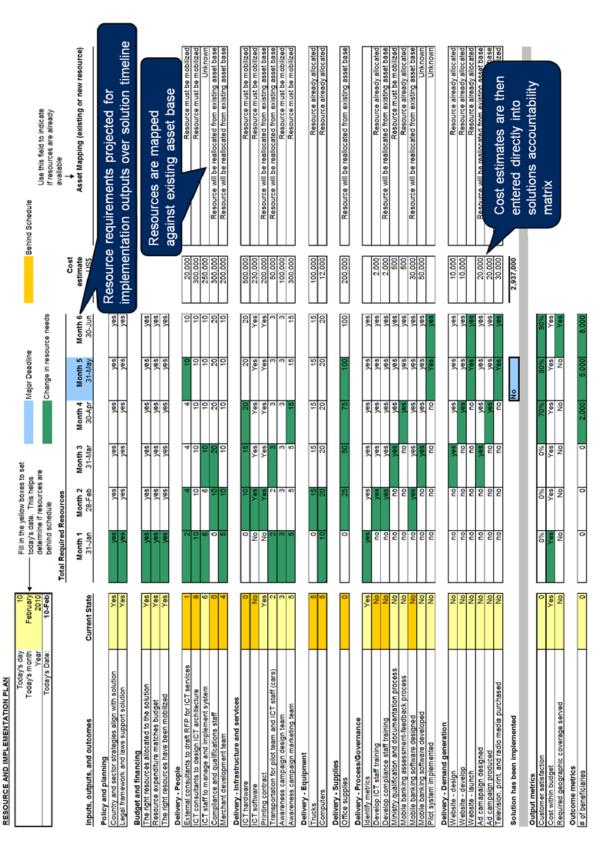
Figure 6.1: Tool 1A – Target matrix provides landscape of solution impact across MDGs (Illustrative)*

Interventions and their bottleneck solutions	MDG Target 2.A Universal primary education	MDG Target 3.A Eliminate gender disparity in education	MDG Target 4.A Reduce by two thirds infant mortality rate	MDG Target 7.C Halve proportion without access to safe drinking water
Conditional Cash Transfer	340,000 new students	130,000 new female students		
Mobile bankingExpanding banking network	260,000 80,000	130,000		
Building new schools	360,000 new students	175,000 new female students		
 Reallocate ministry funds 	260,000	175,000		
 Improve construction quality control 	100,000			
Vaccination of infants			200,000 vaccinations (20,000 lives saved = 25% mortality reduction)	
Train community health workersMobile clinics			150,000 50,000	
Access to safe water	<u> </u>			150,000 people now
 Reallocate funds from health clinics to installing sanitation facilities 			from diarrhea = 6% mortality reduction	have access to drinking water = 5% decrease in people lacking access to safe drinking water

^{*} Numbers are illustrative and will vary based on the solution and the country context

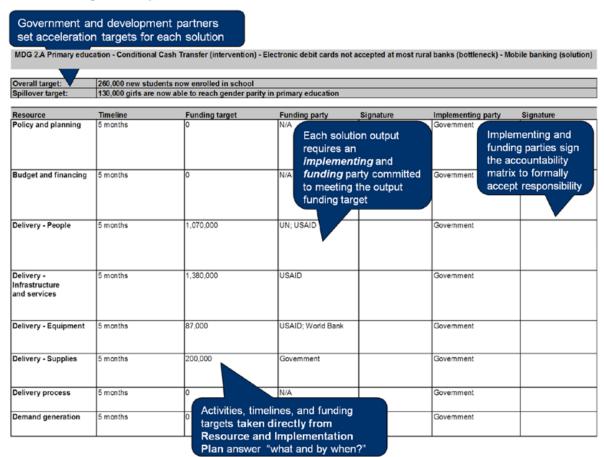
- Tool 1C: Accountability matrix (Figure 6.3) The accountability matrix coordinates solution delivery between the government and its development partners by matching outputs and resource targets to specific actors. The accountability matrix is drawn up during the MDG Acceleration Compact meeting, at which the government and development partners negotiate and agree to their roles and responsibilities (funding and/or implementing).
 - **How to use:** The target matrix links directly to the resource and implementation plan. Before convening the MDG Acceleration Compact meeting, users will:
 - Fill out the first three columns on the left-hand side of the tool for each of the solutions, using information in the resource and implementation plan. These columns require users to identify the type of implementation input or activity, the timeline for implementation, and the funding target to support that input or activity.
 - Agree in the MDG Acceleration Compact meeting on funding and/or implementing responsibility for each of the inputs in the matrix. The responsible party signs in the appropriate space to formally accept responsibility.

Figure 6.2: Tool 1B – Resource plan projects resource needs and target outputs over time (Illustrative)st



^{*} Numbers are illustrative and will vary based on the solution and the country context

Figure 6.3: Tool 1C – Accountability matrix matches implementation inputs and resource targets to specific actors (Illustrative)*



^{*} Numbers are illustrative and will vary based on the solution and the country context

Assess and develop government capacity to deliver solutions

• Tool 2A: Capacity assessment and response (Figures 6.4 and 6.5) – This portion of the step allows users to formulate a capacity development response to create the necessary institutional environment for successful implementation and monitoring of solutions. The assessment is based on UNDP's capacity assessment tool, which identifies existing critical delivery capabilities and the additional capabilities necessary to reach delivery objectives.

· How to use:

Mobilize and design: Engage stakeholders and design the assessment. It is important to
engage stakeholders directly in the design of the assessment, which should: clarify objectives
and expectations; adapt the UNDP Capacity Assessment Framework to sub-national needs;
determine the data and information collection approach; determine how to conduct the
assessment (team and location); and plan and cost the capacity assessment.

- Conduct the capacity assessment: Collect data on desired and existing capacity through selfassessment, interviews, and focus groups. UNDP's capacity-assessment toolkit provides a number of supporting tools to help support a capacity assessment. 1 These include sample capacity assessment worksheets, interview guides, and draft terms of reference for the capacity assessment team, the scoping mission, and national consultants. This toolkit also provides sample questions that assess the government's functional capacities to do the following:
 - 1. Engage stakeholders: Identify, motivate, and mobilize stakeholders; create partnerships and networks; promote engagement of the civil society and the private sector; manage large group processes and open dialogue; mediate divergent interests; establish collaboration mechanisms.
 - 2. Assess and create a vision and mandate: Access, gather, and disaggregate data and information; analyze and synthesize data and information; articulate capacity assets and needs; translate information into a vision and/or mandate.
 - 3. Formulate policies and strategies: Explore different perspectives; set objectives; elaborate sectoral and cross-sectoral policies; manage priority-setting mechanisms.
 - 4. Budget, manage, and implement: Formulate, plan, and manage projects and programmes, prepare a budget to estimate capacity development costs; manage human and financial resources and procurement; set indicators for monitoring progress.
 - 5. Evaluate: Measure results and collect feedback to adjust policies; codify lessons and promote learning; ensure programme fulfils commitment to stakeholders.
- Summarize and interpret results: Compare desired capacities to existing capacities to determine the level of effort required to bridge the gap between them.
- Formulate a capacity development response: Define the capacity development response through quick-impact and long-term initiatives that tackle core capacity issues (e.g., ways to measure whether capabilities are functional). Define indicators of progress in order to monitor and progress toward obtaining and strengthening necessary capabilities.

A special note on developing skills and changing mindsets to successfully deliver solutions: Effective delivery of acceleration solutions depends on the skills and mindset of the implementing parties. Most important, the delivery agent must be fully motivated and capable of using the delivery tools provided here. A motivated leader will show a high degree of ambition (sets the bar high and challenges performance), focus (avoids distraction and pursues established priorities), clarity (demands transparency), urgency, and irreversibility (models behaviour as an institutional routine to achieve system-wide reform). This overall mindset, along with the tools and guidance provided here, sets the foundation for successful delivery of acceleration solutions.

¹ UNDP Capacity Assessment Methodology can be accessed at: content.undp.org/go/cms-service/download/publication/ ?version=live&id=1670209

Functional capacities Folinide dides Still House of Day Charles The Control of the Contr Strand Hollow A DE LEGICION DE L **Technical** capacities Institutional arrangements Leadership Core issues Knowledge Individual Organizational Accountability Enabling environment Points of entry

Figure 6.4: UNDP's Capacity Assessment Tool addresses 4 core issues, 5 functional capacities, and 3 entry points

Source: UNDP Capacity Assessment Tool Guidelines and Practice Note.

Identify appropriate budgeting and planning entry points

- Tool 3A: Entry point map and timeline (Figure 6.6) The entry point map and timeline provides visibility into a typical five-year government planning cycle as well as the UNDAF planning process. Applying this tool to specific country contexts allows users to remain flexible in their approach to the MDG Acceleration Framework, customizing the process to leverage existing planning resources and the most effective budget and planning entry points (nearest-term with the greatest leverage). By building MDG Acceleration Compact outputs into existing processes, users can avoid the pitfalls of creating entirely new parallel processes while mainstreaming MDG acceleration priorities directly into government and development partner planning documents and budgets. This will aid the adoption of the tool as well as its effectiveness in delivering acceleration solutions.
- Poverty Reduction Strategy Paper/National Development Plan: During the national development
 planning process, use sector working groups to apply the MDG Acceleration Framework. Build highlevel outcome targets and funding and implementation responsibilities into PRSP/NDP documents.
 For countries not in the planning cycle, users can build Acceleration Compact outputs into the
 PRSP/NDP budget expenditures review, annual progress report, or policies and strategies review,
 depending upon country context. Users can refer to the World Bank's Sourcebook for Poverty

Possible Quantitative Ranking Scheme

Figure 6.5: Tool 2A – Capacity assessment supporting tool provides governments with a set of questions to review their functional capabilities to deliver solutions

Accountability Point of Entry Organizational Summary Rating	addresses 4 core issues: accountability, institutional arrangements, knowledge and leadership	No evidence of relevations Anecdotal evidence of a Partially developed of Widespread, but not of Fully developed capa.	e of capacity capacity of comprehensive, evidence of capacity		
Capacity Questions			Assess Cap	acity	
Functional Capacity	Questions		Desired Level (1-5)	Existing Level (1-5)	Evidence (Narrative)
Engage Stakeholders	Does the organization have the capac mechanisms that ensure multi-stakeh				
Assess a Situation and Define a Vision	Does the organization have the capacinterpret a comprehensive analysis of mechanism environment? Does the o capacity to create a vision for robust a	the accountability rganization have the			
Formulate Policies and Strategies	Does the organisation have the capac accountability mechanisms to ensure transparent policies and strategies?		Questions	nddress the	
Budget, Manage and Implement	Does the organization have the capac enforce accountability mechanisms re budgeting, management and impleme	garding programme		onal capabilities	
Evaluate	Does the organization have the capac accountability mechanisms for monito				

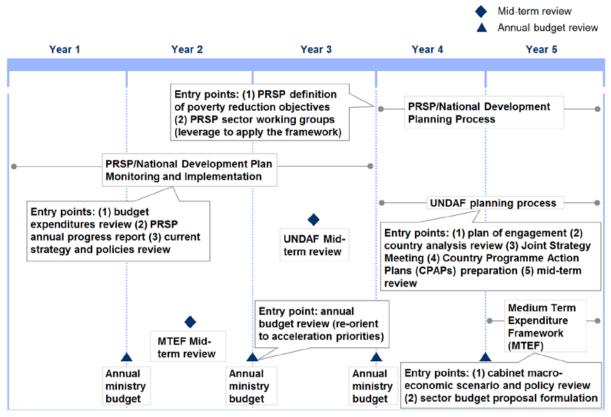
Source: UNDP Capacity Assessment Tool Guidelines and Practice Note.

Core Issue

Reduction Strategies for details on the preparation (resources and processes required) and final outputs (national development plan document) involved in the PRSP/NDP process. Users should ensure that cross-cutting policies are adequately captured.

• Government Medium-Term Expenditure Framework (MTEF): Build MDG Acceleration Compact outcome targets, associated resource requirements, and funding responsibilities directly into the government's national three- to five-year expenditure framework. The cabinet review of macroeconomic scenarios and the sector budget proposal formulation offer opportunities to integrate Acceleration Framework outcome targets and resource requirements. Users can also link these targets and resource requirements to MTEF annual updates if countries are in the middle of the MTEF cycle. For those countries using a roundtable budgeting approach, this presents an ideal opportunity to apply the full MDG Acceleration Framework process by leveraging existing government-development partner collaboration to create the MDG Acceleration Compact. Finally, for many countries, the MTEF resource envelope determines the financing plan for Sector Wide Approaches (SWAPs), in which case the MTEF provides an excellent entry point to shift budgeting plans at the sector level. MTEF preparation varies by country and users should review existing MTEF infrastructure and protocol to best position MDG Acceleration outcome targets and resource requirements.

Figure 6.6: Tool 3A – Government and UNDAF entry point map and timeline allows users to build MDG Acceleration Compact outputs directly into existing government and UNDAF processes



Source: World Bank PRSP Guidelines, UNDAF guidelines, Expert interviews.

- **Ministry budget:** Build solution implementation activities, outputs, and outcome targets into ministry budget line items in order to reallocate funding to reflect new government priorities and solution delivery requirements.
- United Nations Development Assistance Framework (UNDAF): Build outputs, output metrics, and output targets directly into the UNDAF planning process to focus UNDP support on government priorities that accelerate MDG progress. Users should access UNDAF entry points as early as possible in the process; these include the UNDAF plan of engagement and country analysis review. However, users may also be able to access the UNDAF process through the Joint Strategy Meeting and the formulation of Country Action Plans. The UNDAF process links directly to the UN Common Country Assessment (CCA) and the UNDAF Mid-term review. Both of these processes present additional entry points for countries, given their particular planning cycle. For details on the UNDAF planning process, please see the UNDAF/CCA Guidelines.

• **Development partner mid-term review:** Build solution implementation activities, outputs, and outcome targets into mid-term, sector reviews for development partners as course corrections for development partner country action plans and budgets.

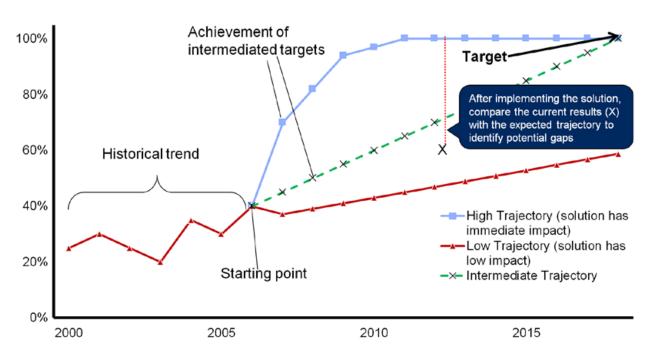
Develop a plan to monitor and evaluate solution delivery

• Tool 4A: Trajectory map (Figure 6.7 and 6.8) – The trajectory map projects the MDG target's path over time, allowing users to compare actual versus expected results. Estimating the target's path after solution implementation enables meaningful debate over whether a target is appropriately ambitious and whether it will demonstrate clear acceleration over business as usual. The tool builds a trajectory map based on user input. Users should rely upon expert advice from within the lead ministries and development partners to develop this input and to ensure that target projections are consistent with available qualitative and quantitative data. For certain solutions, users may have sufficient information to build the trajectory directly. For many solutions, however, users may not have a detailed sense of the target trajectory and may choose to model trajectory scenarios.

· How to use:

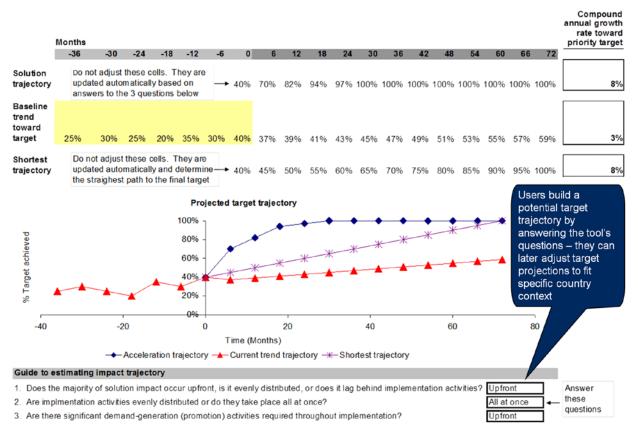
- Enter specific estimates of percentage target attainment into the tool and/or
- Respond to a series of questions that help the user form a scenario for the target's trajectory.

Figure 6.7: Trajectory map – Building a trajectory requires the system to set interim and final delivery targets



Source: Sir Michael Barber, "Instruction to Deliver" (2007).

Figure 6.8: Tool 4A – Trajectory map: Users build the target trajectory by entering percentage attainment of the target over time. A scenario builder is available to help determine these percentages (Illustrative)*



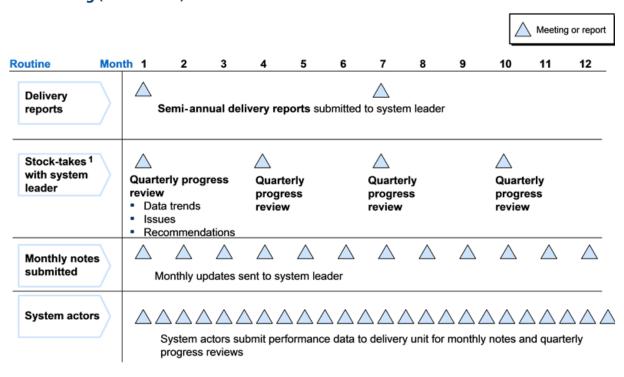
*Numbers are illustrative and will vary based on the solution and the country context

• **Tool 4B: Routines calendar** (Figure 6.9) – Routines establish regularly scheduled 'checkpoints' to assess whether delivery is on track. They provide structure and discipline for the monitoring process and allow users to quickly address and diagnose problems. Routines also communicate a sense of urgency in implementation.

· How to use:

- Establish routines and launch delivery: Select routines (e.g., weekly, monthly, quarterly) that are appropriate for the solution and country context and create a master calendar of the planned routines.
- Clarify what will be assessed in each routine: Determine which SMART indicators (impact/ outcome rather than activity/input focused) will be assessed in each routine and how progress will be measured.
- Communicate expectations for routines: Publish and distribute the schedule of routines to all relevant parties and ensure that they are aware of the assessment indicators.

Figure 6.9: Tool 4B – Routines help users establish a regular schedule of meetings and publish the master calendar for all relevant parties to ensure adequate monitoring (Illustrative)*



¹ A stock take is an in-person meeting with the system leader (e.g. Minister or Deputy Minister of Education) to review quarterly progress Source: Sir Michael Barber, "Instruction to Deliver" (2007)

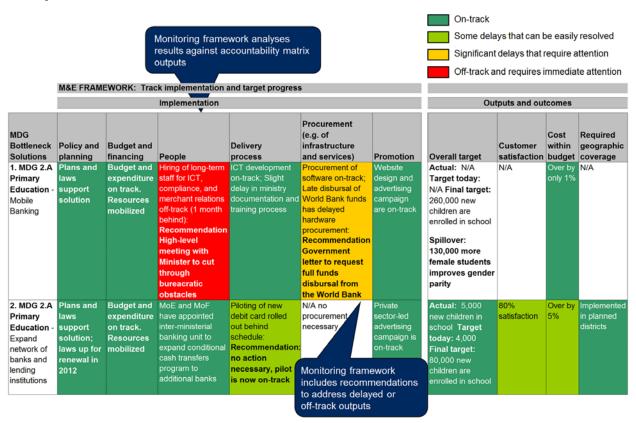
• Tool 4C: Monitoring and evaluation scorecard (Figure 6.10) – The monitoring and implementation scorecard uses standardized metrics to indicate whether implementation and impact are on track. The scorecard takes its inputs from the resource and implementation plan. This information allows users to quickly take appropriate steps to understand and fix implementation challenges. For metrics that are off-track, users can refer back to the accountability matrix to determine the responsible parties.

· How to use:

- Review the resource and implementation plan to compare implementation progress to
 planned progress across the implementation, output, and outcome categories. Record
 progress against expectations with comments and the appropriate colour code to indicate
 the metrics current status.
- Use the scorecard as a reporting mechanism during the routine meetings.

^{*}This diagram is illustrative and will vary based country context and delivery method chosen

Figure 6.10: Tool 4C – Monitoring and evaluation scorecard uses standardized metrics to measure actual implementation progress against expected inputs, outputs, and outcomes (Illustrative)*



^{*}Numbers are illustrative and will vary based on the solution and the country context

• Tool 4D: Implementation challenges mapping (Figure 6.11) – The challenges mapping tool identifies specific impediments to successful solution delivery and should focus on the 'amber red' and 'red' situations identified in the monitoring and evaluation scorecard. The mapping exercise offers the opportunity to diagnose the problems and formulate responses.

· How to use:

- Create solution implementation pathways across the six categories in the resource and implementation plan.
- Map these implementation steps against impediment categories (policy and planning, budget and financing, service delivery/supply, service delivery/demand) to diagnose and identify impediments.

Figure 6.11: Tool 4D – Implementation challenges mapping allows users to identify and address impediments to successful delivery of solutions (Illustrative)*

	Education MDG 2							
Implemen-	Implementation steps							
tation challenge categories	People	Infrastructure and services	Equipment	Suppliers	Delivery process	Promotion		
Policy and planning	 Ministry of Education has no protocol for hiring ICT staff 							
Budgeting and financing	Solution implementation challenges mapped against implementation output categories		 Funds disbursal delayed due to lack of communication 					
Service delivery (supply)	 Hiring of long- term staff undermined by delays in Ministry HR department 							
Service utilization (demand)								

^{*}This diagram is illustrative and will vary based on the solution and the country context

Solution pathway challenges for mobile banking -

6.4 Implementation advice and lessons learned from prior projects

Experiences across a number of projects have produced the following advice and lessons learned for the implementation of acceleration solutions:

- Put people ahead of process to make sure that individuals implementing the solutions are motivated and feel ownership over implementation. This is more important than creating the perfect plan because the people will ultimately implement the plan they are the key to success. To facilitate this, governments should ensure that the right incentives are in place.
- **Clearly communicate** the value of delivering the acceleration solutions up-front to create momentum toward the delivery objectives within the organization and implementing agency.
- **Deliver quick wins** to establish the credibility of the delivery process within the implementing agency as well as with implementing partners.
- **Provide incentives for transparency** by managers, to ensure that they report slow and off-track delivery, enabling early diagnosis and resolution of delivery challenges.

6.5 Potential challenges to completing MAF Step 4

Rolling-out Step 4 will pose many challenges in execution capabilities and culture for the government and development partners. Acceleration Compact members must be honest about these challenges and identify concrete ways to overcome them during the early stages of Step 4. Here are some of the common barriers to success and some suggested ways to reduce them:

- Subjective capacity and performance reviews: All parties must be honest about their capabilities in order for implementation to be successful. The participating parties must understand the strengths and weaknesses of all actors in the MDG Acceleration Compact. However, feedback on individuals must be objective (both in content and tone), without assigning blame. This is crucial because success of these acceleration solutions will rely heavily on all participants (junior and senior) being engaged as thought leaders and implementation partners.
- **Hierarchical mentality:** A strong hierarchy prevents honest evaluation and monitoring of implementation. Hierarchy can reduce the willingness of junior colleagues to provide accurate assessment of on-the-ground realities. Special care must be taken to develop a peer mentality and culture that allow for honest assessments and problem solving throughout the evaluation and monitoring of these acceleration solutions.
- Ambiguous or low-aspiration goals: Compact leaders must set ambitious, time-bound, and specific targets/goals for each solution. Without ambition and time limits, the MDG targets will not be met, nor will the solutions be inspiring. Without specificity, accountability will prove to be difficult.
- Process and planning-focused culture: Organizations that emphasize process as opposed
 to impact will not succeed in accelerating MDG targets. Typically, these are organizations that
 can be characterized as 'fire-fighting,' 'meeting-heavy' and 'decision-light' places that may
 be very busy, but not productive. Compact members must fight these tendencies and focus on
 accountability for implementation, impact, and results. During implementation and monitoring,
 individuals and organizations should not be rewarded for their process and plans, but rather for
 change on the ground.

6.6 Prerequisites for success

In order to complete Step 4 successfully, several conditions for success must be in place:

Adequate quantitative data: During the monitoring phase of Step 4, the Compact stakeholders
must have data that accurately reflects the solution's implementation ("Is implementation on
track and on budget?") as well as the solution's impact on the ground ("Is the solution achieving
the intended results?"). This data is necessary to ensure accountability and provide transparency
concerning the solution's status. Implementation data should be available from the tools in this
module. Impact data may not be easily obtained, depending on a country's data systems. When
systems are not robust, the Compact stakeholders may need to conduct data-gathering in the field.

- Evaluate/de-prioritize current initiatives: Under Step 3, the MDG Acceleration Framework discussed trade-offs between current initiatives and the priority acceleration solutions. For Step 4 to be successful, these trade-offs must become reality. Individuals within the MDG Acceleration Compact may need to de-prioritize some initiatives in order to ensure they have the right resources to implement MDG acceleration solutions.
- Senior leadership support: Senior leadership of all stakeholder groups must publicly outline their organizations' aspirations for the solution(s), articulate the benefits, and commit to being fully involved in the implementation and monitoring (including attending key meetings). Such engagement by senior leadership is required to indicate the importance of these solutions to their respective organizations and also to generate demand and accountability from the public.
- A respected implementation team: Ensure that the implementation team is well respected within (and across) the organizations that comprise the MDG Acceleration Compact organizations. This respect will help the team effectively implement the solutions (as they work with many different stakeholders) and will also emphasize the importance of these solutions.
- Clear lines of responsibility: As noted at the beginning of this chapter, there are many ways to draw these lines. The MDG Acceleration Compact partners must create these lines before conducting Step 4 in order to ensure accountability for implementation and results.

6.7 Potential sources of information

When completing this step, there are several sources of information available to help create an implementation and monitoring plan:

- UNDP Capacity Assessment Tool (User's Guide and Practice Note)
- UNDP's Handbook on Planning, Monitoring and Evaluating for Development Results
- World Bank Handbook, Ten Steps to a Results-Based Monitoring and Evaluation System



ANNEX A: BEST PRACTICE APPROACHES TO FACILITATING THE MDG ACCELERATION FRAMEWORK

Steps 1–3 of the MDG Acceleration Framework rely on expert working groups to identify priority interventions, identify and prioritize bottlenecks, and identify and sequence bottleneck solutions. These working groups – comprised of government, development partner, and civil society representatives – should seek to reach the best and most objective answer to the challenges of accelerating MDG progress. In this context, facilitation plays an important role in promoting collaboration, ensuring objectivity, and instilling commitment to decision-making.

To achieve these objectives, facilitators must, at a minimum, have a solid understanding and appreciation of sub-national customs and knowledge, be sensitive to inequalities (such as those across gender), conduct interviews with participants beforehand to understand likely areas of consensus and disagreement, employ techniques to expand perspectives, and elicit a group commitment to decision-making.

In addition, facilitators should adopt strategies that quickly establish a positive, collaborative approach to problem solving and minimize overtly political considerations that prevent objective answers. Facilitators can help build trust and collaboration between participants from the very beginning of the MDG Acceleration Framework process by focusing on the group's ability to devise solutions when working together – rather than by setting a negative tone by assigning fault for bottlenecks. This positive approach will be particularly helpful in Step 3 when the experts are identifying solutions to the bottlenecks.

Facilitation process

The steps below can help foster this positive collaboration. Each step is described. Sample discussion questions are also provided to help the expert group complete the step. Facilitators should craft questions that help the participants develop an understanding of each step and articulate a concrete response:

• Identify and appreciate the government's and partners' causes for success. Focus on the government's and partners' core strengths (what they do well) and align various stakeholders around these core strengths.

Sample questions:

- In what areas has the government had the most success in achieving MDG targets and why?
- · What are three core strengths of the government and development partners in implementing MDG interventions?
- What are examples of how the government has successfully overcome implementation challenges in the past?

Material in this section has been adapted from David L. Cooperrider, Dana Whitney and Jacqueline Stavros, Appreciative Inquiry Handbook.



• Imagine a vision for the future: Describe what MDG success would look like over the next five years.

Sample questions:

- What MDG achievements will be accomplished by 2015?
- By 2015, what new approaches and strategies would have to be adopted to make these achievements possible?
- What does successful implementation of priority MDG interventions look like in this country context? What role does sustainability play in this vision?
- What is your vision of successful government leadership and development partner collaboration in achieving MDG targets in 2015?
- **Design the path to achieving success.** Codify the approach to achieve success and define the group members' roles and responsibilities.

Sample questions:

- Do we have sufficient evidence and the right expertise to make objective decisions on interventions, bottlenecks and solutions for priority MDG targets?
- Which changes will be easiest to implement and have the biggest impact in achieving MDG targets and the vision of success we have created?
- What are the boldest changes we can make to accelerate progress toward MDG targets and our vision of success and what are the risks in pursuing this course?
- How can we best leverage success in accelerating progress toward a priority MDG target across other MDG targets?
- **Take action to deliver success.** Building on the team's strengths, vision, and path to success, describe the resources and activities required to achieve success.

Sample questions:

- How can we ensure successful, near-term delivery of solutions?
- How can we help mobilize political will within the government and with development partners to implement acceleration solutions?

Type of forum

This approach can be used in various forums, depending on the number of people in the working group and the desired outcomes. Facilitators can tailor this approach to these different types of forums:

• Core group discussions (10-20 people): Expert working group meetings to apply the MDG Acceleration Framework process as well as smaller sub-working group meetings (e.g., break-out



teams to address specific interventions) fall within this type of forum. For these meetings, facilitators should focus on developing immediate consensus and strong commitment to decision-making. Techniques for core group discussions include: deeply structured interviews, dialogue-based planning (story development), and coaching and leadership development.

• Large group discussions (expert working group and development partners): The MDG Compact Meeting as well as unit-wide or cross-ministry meetings to initiate solution delivery will often involve large numbers of participants. Within this type of forum, facilitators should focus on breaking down barriers of communication and building leadership capacity. Techniques for large groups include: group visioning exercises (envisioning success) and leadership capacity workshops.

Characteristics of the meetings

Finally, to ensure that these forums effectively drive collaborative decision-making, facilitators should incorporate the following characteristics:

- The whole 'system' participates: The working group contains a fully representative cross-section of relevant stakeholders for each priority MDG. This diversity ensures that all relevant stakeholders have had the opportunity to devise solutions and voice concerns or generate new ideas to accelerate MDG progress.
- People self-manage their work: Working group representatives should help one another move through the MDG Acceleration Framework by asking each other probing questions while taking responsibility for their perspectives and ideas.
- Groups remain task focused: The working group should stay focused on the task of accelerating progress toward priority MDG targets.
- Create common ground: Consensus and collaborative decision-making provide the foundation for generating acceleration solutions. To ensure this foundation exists, members must respect differences of opinion and then work diligently to find areas of agreement. Facilitators play an essential role in helping participants find areas of common ground.
- Commitment to action: Working group members should openly commit themselves to prioritizing interventions, bottlenecks and solutions and taking decisive action to deliver solutions on the ground.



ANNEX B: ADDITIONAL RESOURCES TO ENSURE SUCCESSFUL DELIVERY OF SOLUTIONS

Figure 1: UNDAF planning process includes a number of detailed steps that offer entry points to ensure UN support for MDG Acceleration priorities and targets

Timeline for Country Programming National develop-National planning process1 ment plan1 Current cycle New cycle Jan-Feb Jan-Apr Sep Dec Feb-Mar Oct-Nov Dec Jan Years 1 year 4 year 4 year 4 year 5 year 5 year 5 year 5 year 1 thru 5 Executive committee agencies (ExCom) Plan of Country **UNDAF** Joint Country Country CPAP **CPAP** Annual Engagement analysis Completed Strategy Programme Programme Signed Implemented Review **Action Plans** reviewed Results Documents Meeting and supple-Matrix JSM1 to Executive (draft) JSM2 M&E Plan Boards (all agencies) mented Annual **UNDAF** Informed by results of UNDAF Work Plans Evaluation evaluation (year 4) Map national Specialized Agencies and Nonresident Agencies (SAs and NRAs) planning process Map existing Programme or Project Documents of SAs and NRAs can follow different cycles and may be developed at any point in the 5-year cycle of the UNDAF analytical work Choose 1 of 3 analysis options Joint Programmes identified, developed, and implemented Assess UN comparative advantage

The UN's analytical support strengthens country analysis and the national development framework. The UNDAF shows the collective response of the UNCT to the national development framework, and demonstrates its comparative advantages

¹ Suggested timeline of year 4 should be used flexibly by UNCT



GLOSSARY

Antiretroviral Therapy (ART) consists of the use of at least three antiretroviral (ARV) drugs to maximally suppress the HIV virus and stop the progression of AIDS disease. Huge reductions have been seen in rates of death and suffering when a potent ARV regimen is used. (WHO)

Capacity building The extent to which a programme or project contributes to capacity development, i.e., the extent to which a project enables target groups to be self-reliant and makes it possible for government institutions, the private sector, and civil society organizations to use positive experience with the programme or project to address broader development issues. Capacity building empowers people to realize their potential and assures ownership and sustainability of the process and ensuing development. It has four related components: (i) individual learning; (ii) the quality of the organization; (iii) the strength of the relations of the organization; and (iv) an enabling environment. (UNDP, 2001b, Annex II: Glossary of Terms)

Capacity development The process by which individuals, organizations, institutions, and societies develop their abilities individually and collectively to perform functions, solve problems, and set and achieve objectives. (UNDP, 2001b, Annex II: Glossary of Terms)

Civil Society Organizations (CSOs), including non-governmental organizations, community-based groups, religious representatives, professional associations, trade unions, social movements and women's organizations, represent the interests, needs and concerns of their constituencies. These groups become politically active when they identify a need to advocate for a particular issue. Advocacy efforts may include seeking to influence relevant policies and legislation, providing oversight of key operations and promoting accountability among government actors. (UNDP, IKnow Politics)

Development effectiveness Development effectiveness reflects the extent to which an institution or intervention has brought about targeted change in a country or the life of the individual beneficiary. Development effectiveness is influenced by various factors, beginning with the quality of project design and ending with the relevance and sustainability of desired results. (UNDP, 2001b, Annex II: Glossary of Terms)

Development intervention A development intervention usually refers to a country programme (CP), programme/thematic component within a CP or a project. (UNDG)

Effectiveness The extent to which a project or programme has achieved its objectives or produced the desired outcome, independent of the costs. Assessing the effectiveness of a project or programme requires a clear definition of the immediate objectives of the intervention and of the indicators to measure them. (UNDP, 2001b, Annex II: Glossary of Terms)

Efficiency The extent to which financial costs have been minimized when projected outputs are produced. It requires an optimum combination of human, material, and natural resources during management of the process. (UNDP, 2001b, Annex II: Glossary of Terms)

Evaluation A time-bound exercise that attempts to assess systematically and objectively the relevance, performance, and success of ongoing and completed programmes and projects of an organization, and to package the findings in an appropriate format.



Foreign Direct Investment (FDI) is the investments made to acquire lasting interest in enterprises operating outside of the economy of the investor. (UNCTAD)

Gross Domestic Product (GDP) is gross value added, at purchasers' price, by all resident producers in the economy plus any taxes and minus any subsidies not included in the value of the products. It is calculated without deducting for depreciation of fabricated assets or for depletion or degradation of natural resources. Value added is the net output of an industry after adding up all outputs and subtracting intermediate inputs. (UNDP Asia Pacific Human Development Report: Trade on Human Terms, 2008, p. 214)

Impact The overall effect of an intervention. Impact goes beyond the achievement of outputs and immediate objectives and tries to capture the social, economic, environmental, and other developmental changes that have taken place as a consequence of the project or programme. As such, the concept of impact is closest in essence to development effectiveness. Impact evaluations are concerned with both intended and unintended results and should also take into consideration how external factors have affected these results. When assessing the impact of a project, UNDP's evaluations concentrate on four dimensions:

- 1. Impact on target groups: How have the standards of living of the intended key beneficiaries changed as a result of the project? Have they increased or decreased?
- 2. Impact on gender: How has the project modified social relations between men and women? Has the project increased the capacities and opportunities of women?
- 3. Impact on the environment: Are natural resources more efficiently used in the community as a result of the project? Has the implementation of the project harmed the environment in any way?
- 4. Impact on the institutions: Is the institutional structure of the target community stronger as a result of the project? Are property rights better defined? Have traditional institutions suffered?

(UNDP, 2001b, Annex II: Glossary of Terms)

Indicators Observable signals of status or change that are intended to provide a credible means of verifying results (either quantitatively or qualitatively) in terms of outputs, immediate objectives, and also impact. Indicators should be defined in agreement with all stakeholders and need to be valid, practical, clear, and measurable. (UNDP, 2001b, Annex II: Glossary of Terms)

Infant mortality rate is the probability of dying between birth and exactly one year of age, expressed per 1,000 births. (UNDP HDR 2006, p. 408)

Inputs Human, financial, material, and natural resources that are used when undertaking different activities of a project or programme. It is important to quantify them correctly in order to determine the efficiency of the project. (UNDP, 2001b, Annex II: Glossary of Terms)

Kangaroo care is a method of care of preterm infants that involves infants being carried, usually by the mother, with skin-to-skin contact. It is an effective way to meet baby's needs for warmth, breastfeeding, protection from infection, stimulation, safety and love. Its key features are:

- 1. Early, continuous and prolonged skin-to-skin contact between the mother and the baby
- 2. Exclusive breastfeeding (ideally)



- 3. It is initiated in hospital and can be continued at home
- 4. Small babies can be discharged early
- 5. Mothers at home require adequate support and follow-up
- 6. It is a gentle, effective method that avoids the agitation routinely experienced in a busy ward with preterm infants

(Department of Reproductive Health and Research, World Health Organization, 2003. Kangaroo Mother Care: A Practical Guide, p. 2)

Least Developed Countries (LDCs) are countries that, according to the United Nations, exhibit the lowest indicators of socioeconomic development. A country is classified as a Least Developed Country if it meets three criteria based on:

- 1. Low-income (GNI per capita of less than US\$750)
- 2. Human resource weakness (based on indicators of nutrition, health, education and adult literacy)
- 3. Economic vulnerability, based on instability of agricultural production, instability of exports of goods and services, economic importance of non-traditional activities, merchandise export concentration, and handicap of economic smallness, and the percentage of population displaced by natural disasters.

(UNDP Asia Pacific Human Development Report: Trade on Human Terms, 2008, p. 214)

Logical Framework (Logframe) is a management tool used to improve the design of interventions, most often at the project level. It involves identifying strategic elements (inputs, outputs, outcomes and impact) and their causal relationships, indicators, and the assumptions and risks that may influence success and failure. It thus facilitates planning, execution and evaluation of a development intervention. (UNDG)

Low-Income Countries (LICs) are defined on the basis of per capita gross national income (GNI), based on the approach used by the World Bank. Based on GNI per capita for 2004, the low-income countries are US\$825 or less. (UNDP Asia Pacific Human Development Report: Trade on Human Terms, 2008, p. 215)

Maternal Mortality Ratio is the annual number of deaths of women from pregnancy-related causes per 100,000 live births. (UNDP Asia Pacific Human Development Report: Trade on Human Terms, 2008, p. 215)

Medium-Term Expenditure Framework (MTEF) provides the 'linking framework' that allows expenditures to be "driven by policy priorities and disciplined by budget realities." It consists of a "top-down resource envelope, a bottom-up estimation of the current and medium-term costs of existing policy and, ultimately, the matching of these costs with available resources [...] in the context of the annual budget process." The 'topdown resource envelope' is fundamentally a macroeconomic model that indicates fiscal targets and estimates revenues and expenditures, including government financial obligations and high-cost government-wide programmes such as civil service reform. To complement the macroeconomic model, the sectors engage in 'bottom-up' reviews that begin by scrutinizing sector policies and activities (similar to the zero-based budgeting approach), with an eye toward optimizing intra-sectoral allocations. (World Bank, 1998. Public Expenditure Management Handbook. Chapter 3, "Linking Policy, Planning, and Budgeting in a Medium-Term Framework")



Millennium Development Goals (MDGs) represent a global partnership that has grown from the commitments and targets established at the world summits of the 1990s. Responding to the world's main development challenges and to the calls of civil society, the MDGs promote poverty reduction, education, maternal health, gender equality, and aim at combating child mortality, HIV/AIDS and other diseases. (UNDP)

Monitoring A continuing function that aims primarily to provide programme or project management and the main stakeholders of an ongoing programme or project with early indications of progress, or lack thereof, in the achievement of programme or project objectives. (UNDP, 2001b, Annex II: Glossary of Terms)

National Human Development Reports were first launched in 1990 with the goal of putting people back at the centre of the development process in terms of economic debate, policy and advocacy. It places human development at the forefront of the national political agenda. They are tools for policy analysis reflecting people's priorities, strengthening national capacities, engaging national partners, identifying inequities, and measuring progress. As instruments for measuring human progress and triggering action for change, regional reports promote regional partnerships for influencing change and addressing region-specific human development approaches to human rights, poverty, education, economic reform, HIV/AIDS, and globalization. (UNDP, Human Development Reports Office)

National ownership reflects the degree to which there is genuine host country commitment to a development initiative, strategy, programme, or policy framework. Some of the most prominent attributes of national ownership are the demonstrated level of government support (by means of public policy, seniorlevel political directives and statements, and allocation of government resources); the breadth and depth of public participation; and the involvement of local institutions in planning, implementation, and evaluation. (UNDP, 2001b, Annex II: Glossary of Terms)

Net enrolment ratio in primary education is the number of students enrolled in primary education who are of official school age of primary education, as a percentage of the population of the official school age. (UNDP HDR 2006, p. 405)

Official Development Assistance (ODA) is the disbursements of loans made on concessional terms and grants by official agencies of the members of the Development Assistance Committee (DAC), by multilateral institutes and by non-DAC countries to promote economic development and welfare in countries and territories in part I of the DAC list of aid recipients. It includes loans with a grant element of at least 25% (calculated at a discount rate of 10%). (UNDP HDR 2006, p. 408)

Oral Rehydration Therapy (ORT) is a simple, cheap, and effective treatment for dehydration associated with diarrhea, particularly gastroenteritis, such as that caused by cholera or rotavirus. ORT consists of a solution of salts and sugars that is taken by mouth. It is used around the world, but is most important in the developing world, where it saves millions of children a year from death due to diarrhea, the second leading cause of death in children under five. (UNICEF, 2007. The State of the World's Children 2008: Child Survival, p. 8)

Outcomes Current or intended changes in development conditions that UNDP interventions support. They describe a change in a development situation between the completion of outputs and the achievement of impact. Its achievement requires the collective efforts of several partners and favourable contextual circumstances. Example: income increased, jobs created. (UNDP, 2001b, Annex II: Glossary of Terms)



Outputs Specific products and services that emerge from processing inputs through the various activities of the project. Outputs refer to the completion (rather than the conduct) of activities and are the type of results over which managers have a high degree of influence. Example: people trained, studies completed. (UNDP, 2001b, Annex II: Glossary of Terms)

Performance The extent to which a programme or project is implemented in an effective, efficient, and timely manner. (UNDP, 2001b, Annex II: Glossary of Terms)

Performance measurement A system for assessing the performance of development interventions, partnerships or policy reforms relative to what was planned, in terms of the achievement of outputs and outcomes. Performance measurement relies upon the collection, analysis, interpretation and reporting of data for performance indicators. (UNDG)

Performance monitoring A continuous process of collecting and analysing data for performance indicators, to compare how well a development intervention, partnership or policy reform is being implemented against expected results (achievement of outputs and progress towards outcomes). (UNDG)

Poverty gap provides information on how far the consumption of poor people is from the poverty line – i.e., the depth of poverty. More technically, the measure captures the average expenditure shortfall, or gap. It is obtained by adding the total shortfall of the poor (ignoring the non-poor) and dividing this total by the number of poor. The poverty gap thus measures the consumption deficit of the population, or the resources that would be needed to lift all the poor out of poverty through perfectly targeted cash transfers. (UNDP Asia Pacific Human Development Report: Trade on Human Terms, 2008, p. 216)

Programme A time-bound intervention that differs from a project in that it usually cuts across sectors, themes, or geographic areas, involves more institutions than a project, and may be supported by different funding resources. (UNDP, 2001b, Annex II: Glossary of Terms)

Project A time-bound intervention that consists of planned, related activities aimed at achieving defined objectives. (UNDP, 2001b, Annex II: Glossary of Terms)

Public Expenditure and Financial Accountability (PEFA) is a partnership between the World Bank, the European Commission, the UK's Department for International Development, the Swiss State Secretariat for Economic Affairs, the French Ministry of Foreign Affairs, the Royal Norwegian Ministry of Foreign Affairs, and the International Monetary Fund. PEFA aims to support integrated and harmonized approaches to assessment and reform in the field of public expenditure, procurement and financial accountability. (PEFA)

Purchasing Power Parity (PPP) is a rate of exchange that accounts for price differences across countries, allowing international comparisons of real output and incomes. (UNDP HDR, 2006, p. 409)

Relevance The degree to which the objectives of a programme or project remain valid and pertinent as originally planned or as subsequently modified owing to changing circumstances within the immediate context and external environment of that programme or project. (UNDP, 2001b, Annex II: Glossary of Terms)

Results A broad term used to refer to the effects of a programme or project. The terms 'outputs,' 'outcomes,' and 'impact' describe more precisely the different types of results. (UNDP, 2001b, Annex II: Glossary of Terms)



Results Chain The causal sequence for a development intervention that stipulates the necessary sequence to achieve desired objectives – beginning with inputs, moving through activities and outputs, and culminating in outcomes, impacts and feedback. In some agencies, reach is part of the results chain. (UNDG)

Results Framework The logic that explains how results are to be achieved, including causal relationships and underlying assumptions. The results framework is the application of the logframe approach at a more strategic level, across an entire organization, for a country programme, a programme component within a country programme, or even a project. (UNDG)

Results-Based Management (RBM) A management strategy by which an organization ensures that its processes, products and services contribute to the achievement of desired results (outputs, outcomes, and impacts). RBM rests on clearly defined accountability for results and requires monitoring and self-assessment of progress towards results and reporting on performance. (UNDG)

Sector-Wide Approach (SWAP) is an approach to international development that "brings together governments, donors and other stakeholders within any sector. It is characterized by a set of operating principles rather than a specific package of policies or activities. The approach involves movement over time under government leadership towards: broadening policy dialogue; developing a single sector policy (that addresses private and public sector issues) and a common realistic expenditure programme; common monitoring arrangements; and more coordinated procedures for funding and procurement." (World Health Organization, World Health Report 2000)

Success A favourable programme or project result that is assessed in terms of effectiveness, impact, sustainability, and contribution to capacity development. (UNDP, 2001b, Annex II: Glossary of Terms)

Sustainability The durability of programme or project results (in terms of outcomes and impact) after the termination of planned activities. Sustainability depends on five factors: government commitment, socioeconomic environment, management efficiency and effectiveness, suitability of the technology used for the country or region, and self-financing capacity of the project. It is important to distinguish between two types of sustainability:

- 1. Static sustainability refers to the continuous flow of the same benefits that were set in motion by the completed programme or project to the same target groups.
- 2. Dynamic sustainability refers to the successful maintenance of the results of a programme or project when changes in the social and economic conditions take place.

(UNDP, 2001b, Annex II: Glossary of Terms)

Target groups The main stakeholders of a programme or project who are expected to gain from the results of that programme or project, i.e., sectors of the population that a programme or project aims to reach in order to address their needs based on gender considerations, socio-economic characteristics, or other factors. (UNDP, 2001b, Annex II: Glossary of Terms)



United Nations Development Assistance Framework (UNDAF) is the multi-year strategic programme framework for the UNCT (United Nations Country Team). It describes the collective response of the UNCT to the priorities in the national development framework, priorities that may have been influenced by the UNCT's analytical contribution. Its high-level expected results are called 'UNDAF outcomes.' These show where the UNCT can bring its unique comparative advantages to bear in advocacy, capacity development, policy advice, and programming for the achievement of MD/MDG-related national priorities. The UNDAF sets out how the UN will support achievement of national priorities and provides a broad indication of what results are to be achieved, but relatively little detail on how those results are to be delivered. (United Nations Development Group)

United Nations Development Assistance Framework (UNDAF) Action Plan is a programming tool that ensures that the strategic priorities identified in the UNDAF are coherently implemented through agencies' programmes. The UNDAF Action Plan describes how the UNCT agencies will work with national partners and each other to achieve the outcomes and outputs identified in the UNDAF. It therefore focuses on accountabilities, resource requirements and resources commitments, governance structures, management and implementation strategies, and monitoring and evaluation. It also gives further details about the programme results to be delivered. The UNDAF Action Plan is an agreement between government and participating UN agencies. (UNDG, 2009. Guidelines for UN Country Teams on preparing a CCA and UNDAF, February 2009)

Under-five mortality rate is the probability of dying between birth and exactly five years of age, expressed per 1,000 live births. (UNDP HDR, 2006, p. 408)

Upstream assistance is assistance that aims at achieving effects at the earlier stages of policy and programme development. Related activities include institution building, advocacy, and policy/programme coordination. Upstream assistance by UNDP generally consists of policy advice; engagement of governments and other key stakeholders in dialogue on development objectives, methods, priorities, sustainability, and scope; and development of the capacity of key institutions to perform these functions and to provide substantive contributions to the policy-making process. (UNDP, 2001b, Annex II: Glossary of Terms)



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