

**IMPLEMENTATION ENVIRONMENT OF THE SOCIAL ACTION PROGRAMME**

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## THE IMPLEMENTATION ENVIRONMENT OF THE SOCIAL ACTION PROGRAMME.

### 1.INTRODUCTION

This paper addresses some of the significant underlying factors that have militated against a more efficient level of social services delivery in the public sector and are likely to act as constraining factors in the implementation of the Social Action Programme (SAP) . Some of these factors are set in our political context while others stem from a compulsively inert bureaucratic outlook. Taken together, they give rise to a set of formidable impediments that have checked the effective filtration of social services down to the local level. The purpose of the paper is not to focus on the technical nature of such impediments but rather to discuss broadly the elements that contribute to a non- supportive environment for better social service delivery.

The discussion will take up first the necessity of a programme for social action in Pakistan; it will then highlight briefly the major reasons for slow progress in the SAP sub-sectors; finally it will take up for closer scrutiny the aspect of implementation in its political and administrative context. As a final shape has yet to be given to the SAP Operational Plan for the Punjab, approaches for better implementation will only be discussed in broad directional terms.

## 2.THE BASIS FOR SAP

### 2.1 The focus of SAP.

SAP focuses on what **are** accepted to be some of the most critical requirements for human development, emphasising on the five strategic sub-sectors of basic education, basic health, nutrition, rural water supply & sanitation and family planning.

The concerns of SAP are by now well documented and need only be discussed briefly. At a first level, it generally emphasises faster progress in the five sub-sectors mentioned. A secondary focus of the programme is on the education and health of the female population owing to the multiple dividends that such investment pays. A further area of concentration is the localisation, to the extent possible, of social service delivery to the level of the beneficiaries, preferably by inducting them into the delivery system process. Finally, the SAP approach envisages an integrated and closely coordinated pattern of mutually enforcing interaction between its various elements as opposed to the unlinked activity of autonomous projects.

The choice of SAP sub-sectors is based on their intimate relationship to human development as also to the fact that there exists between them a mutually compatible relationship so that improvements in one have a definite contribution to the potential of advancement in another. Education raises preventive health consciousness; family planning contributes to another mother and child health; clean water & drainage prevents disease. Hence the emphasis on an integrated "programme" approach.

Targeting the female population as a priority under SAP has as its basis the influence of women in their role as mothers and home managers. Higher levels of awareness in educated and healthy mothers tend to translate into hygienic domestic practices and the promotion of child education and health. As for beneficiary participation in the social service delivery process, this is based on the strong current thinking that services are best provided when the individual interest ties up with the general interest and that such a situation best prevails at the level of the community. 2.2 The state of human development

Despite an impressive and sustained growth rate, the performance of social indicators in Pakistan has been very poor. Table 1 shows that the GDP growth rate per capita of Pakistan is second only to that of Indonesia.

**Table-1**  
**Comparative GDP Growth per Capita**  
**(19980-90)**

GDP Growth		Population Growth	GDP Growth in per capita
Egypt	5.0	2.4	2.6
Indonesia	5.5	1.8	3.7
India	5.3	2.1	3.2
Sri Lanka	4.0	1.4	2.6
Pakistan	6.3	3.1	3.2

Source: World Development Report, 1992.

Table 2 takes a look at some **key** social indicators and reveals the comparatively poor standing of Pakistan in human development.

**1 Table-2**  
**International Comparisons**

<b>Indicators</b>	<b>Egypt</b>	<b>Indonesia</b>	<b>India</b>	<b>Sri Lanka</b>	<b>Pakistan</b>
Adult Literacy	44	74	43	87	30
Primary School enrolment (% of age group 1989-90)					
Male	104	120	112	100	49
Female	89	115	81	100	28
Life Expectancy mean 1990.	60.3	61.5	59.1	70.9	57.7
Calorie supply per capita (% of daily requirement, 1988)	127	120	94	100	92
Access to safe delivery water (% of population 1988-90)	89	58	75	60	55
Infant Mortality Rate(per thousand live births, 1991)	62	61	84	16	94
Maternal mortality (per 100,000 live births, 1989-90)	320	450	460	80	500

Sources: UNDP Human Development Report, 1991,1992 World Bank, World Development Report, 1990 UNICEF, The State of the World's Children, 1993.

### 3.CONTRIBUTORY FACTORS TO POOR PERFORMANCE

Three major factors have been attributed to failure in Pakistan to adequately address the lethargic progress in social

sector advancement: inadequate funding, uncontrolled population growth and ineffective implementation,

### 3.1 Funding deficiencies.

Pakistan has in the past spent very low percentages of its GDP on education and health. In the fifties and sixties, the allocation for education was no more than 1% of the GDP which is only now approaching about 3%. In health, the situation still remains a very poor with about 1% of the GDP being devoted to this sector. Table 3 shows the public expenditure on education and health in Pakistan as compared to some selected developing countries and reveals the low status that has to be accorded to these sectors in Pakistan. Within this meagre allocation, the share of the primary sub-sector has obviously been much lower which places Pakistan today at the lower end of the human development ranking.

**Table-3**  
**Public Expenditure on Education and Health**  
**\*% of GNP)**

	Education ( 1989 )	Health (1987)
Egypt	6.8	1.1
Brazil	3.7	1.7
Chile	3.6	2.1
India	3.2	0.9
Thailand	3.2	1.1
Pakistan	2.6	0.7

Source: UNDP, Human Development Report, 1992.

### 3.2 Population Growth.

The high population growth **rate** of Pakistan is evident in the comparative setting amongst other developing countries shown in Table 1. The little advancement managed through the limited allocations to the social sectors have been overwhelmed by our population growth. It is evident that half the growth in income is taken away by the increase in population.

### 3.3 Implementation Factors.

While funding for social sectors has clearly been sufficient in the past, the sub-optimal use of such investment *has further restrained progress in social sectors*. The structure and process of existing delivery system has *failed to* convert the available input to potential levels of output. This will be our area of concern in the remaining part of this paper. While the discussion takes into account the set of circumstances affecting better implementation in the Punjab, the situation is in all likelihood substantially similar in the other provinces of the country.

## 1 4. IMPLEMENTATION CONSTRAINTS

Impediments to better implementation have been a consequence of a mix of factors mainly women round the inadequacy exacerbated by the arrangement for the development function and exacerbated by the distortion of existing processes and procedures meant to promote service delivery.

#### 4.1 Planning Capacity

To the extent that successful implementation of SAP depends on sound planning, the province is presently disadvantaged by poor planning capacity generally and especially in the departments concerned. While poor planning practices in the past are manifest today in certain basic deficiencies (such as a reliable sectoral data base) the outlook remain bleak owing to a lack of awareness of the continuing problem. Table-4 gives a profile of the planning wings of the departments of Education, Public Health Engineering and Health and brings out the lack of capacity in these departments to undertake sound planning work.

**Table-4**  
**Profile of departmental planning wings**

Department	Personnel	With relevant qualification	With relevant training
Education	6	Nil	3
Health	8	3	1
PHE	6	Nil	1

As long as the planning wings are not provided the required expertise, input from them will continue to be routine. Their weakness is a function of the unattractiveness of the job for personnel belonging to the general cadres of the departments concerned. Planning assignment offer limited potential for the exercise of influence and authority that goes with other executive departmental functions and are, therefore, hardly ever sought

voluntarily. The consequence is a high rate of turnover and the lack of development of a body of expertise and experience that can lend a professional bias to the function of plan formulation.

Institutional strengthening of departments for better planning and monitoring of development activity is an objective of SAP. The ultimate solution to strengthening such capacity may lie in a separate cadre of qualified and trained personnel. SAP offers the opportunity to do so through its stress on institutional strengthening of Government's delivery capacity. This will engage increasing attention in the Punjab in the first year of SAP.

#### 4.2 Decentralisation.

The heavy inclination towards the exercise of authority is further evident in the centralised structure of the service delivery organisations even as they operate at the field level. Even where decentralisation exists, its exercise is subject to considerable informal direction from the superior level. For instance the SMO of a Rural Health Centre has never in a general sense exercised fully his administrative and financial powers as this tends to detract from the authority of the District Health Officer. The rigidities that such practices introduce in the delivery system have been evident in starvation at the operational levels of adequate and timely supply inputs and in the ineffective supervision of local departmental activity.

The SAP approach in the Punjab makes a conscious effort to bring down the level of every day decision making to the lower formations of the departments concerned. Towards this end, enhanced

administrative, financial and technical powers are sought to be passed down to strengthen levels that constitute the cutting edge of service delivery.

#### 4.3 Political Filters.

The formal passing down of supervisory powers may not entirely resolve the difficulties of centralization as much would depend on the extent to which they are allowed to be exercised with independence. We are aware of the misgivings likely to arise at administrative levels presently exercising such powers and the fact that in the bureaucracy superior levels can exert substantial influence on subordinate formations even under formally decentralized arrangements. Nevertheless, there remains considerable potential for better administration of services if the realm of decision making at levels closer to the beneficiary level is enlarged.

There will also remain the problem of decisions going through political filters owing to the deep interest politicians have developed in developments in their local areas. Any prospects of enhanced funding are not unnaturally viewed as further opportunities to build local support. It would be unrealistic to expect, therefore, that the additionally of the SAP funding for local projects would be insulated from local political attention.

In recognition of the fact that it may be difficult to eliminate political choice altogether the proposed approach is to circumscribe such discretion as far as possible within a criteria based framework. For instance, while choice of location for primary

schools has been allowed in. the investment programme for 1992-93, the choice is restricted to selection from a defined number of schools in a constituency, each of which meets the Education -" Department's criteria for the opening of new schools. Similarly, while the District Development Advisory Boards of each district (comprising MNAs, MPAs and local body representatives) have been inducted into, for example, the selection process for water supply and drainage schemes, the choices must adhere to the Public Health Engineering Department's criteria for new project locations. Experience has shown that once criteria are established, their violation becomes difficult and acceptance sets in. Strict adherence to the criteria of the ongoing village electrification programme, for instance, has reduced requests for departures from the criteria to a trickle.

Difficulties will, however, remain in controlling political input into the everyday functions of departmental personnel. The most common problem relates to personnel posting. Considerable pressure is brought to bear on deploying personnel in relatively attractive locations so that facilities in the more remote areas are either not manned or absenteeism is common. Strict application of supervisory or disciplinary authority is not uncommonly blunted through protection of delinquents. Table 5 illustrates the problem by showing the rapid turnover of LHVs in the more attractive posting regions of a Division in the Punjab.

**Table-5**  
**Turnover of Lady Health Visitors in one of the**  
Administrative Divisions of the Punjab

Total strength	Number of postings In the last 2 years	Frequency of postings	
		Number	Turn over rate
349	70(20%)	2	4
		13	3
		21	2
		34	1

Here again, the approaches under consideration are those that reduce opportunity for such pressure. Reducing the operational area of a service cadre by confining it to smaller units, for example, will perforce restrict movement of service personnel to defined area. To the extent that arrangement of this nature can be worked out, the operational level of the SAP can become more effective and efficient. 4.4

#### Physical Expansion

The direction of funds disbursement in the annual development plans points to the heavy bias towards physical works in Punjab's annual planning.

Resultantly as Table 6 shows the Punjab is now reasonably endowed with physical facilities in the health sector and has provided for increasing education and water supply facilities every year.

**Tablet 12**  
**Number of RHCs. BHUs Water Supply Schemes in the Punjab**

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	1988-89	1989-90	1990-91	1991-92	1992-93
Rural Health centres.	241	269	280	283	287
Basic Health Units.	1544	1825	2065	2174	2216
Water Supply Schemes.	885	1025	1201	1371	1775

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The expansion in service delivery is, however, far below the expansion level of physical facilities<sup>^</sup> Apart from construction works, staff and equipment, there has been very little initiative for investment on systems and activities that promise to contribute to enhanced efficiency in the planning and delivery systems of social(or even economic) services. Resultantly, the implementation capacity of the government still stands at a low level despite the landscape of the Punjab being dotted with structures meant to serve as outlets for social services. The staff and equipment is equally underutilised owing to lack of attention on the developments of systems within which their use would be optimised.

^A major reason for this has been the propensity of both the bureaucrat and the politician to focus more on the inputs of the development process with only a vague concern with the outputs<sup>^</sup>.

Within the input effort, the emphasis has again been on the tangible as opposed to its intangible components. And even in the case of physical targets, scrutiny of progress has largely been restricted to assessments of the allocated amounts spent rather than on the quality of the work. This narrow fixation on the part of the bureaucrat stems from his inclination to reduce a complex process to readily identifiable targets to facilitate demonstration of achievement. Physical inputs then become targets in themselves to the exclusion of performance indicators /

For the politician, physical structures are clear and immediate manifestations of political commitment. They reflect tangible fulfillment of promises. Delivery problems are less important than the more prominent and readily observable aspect of facility creation.

(SAP hopes to bring about a modification in the expansionist approach by, first, emphasising on the consolidation of existing facilities through the filling in of the missing deficiencies in the existing structures to equip them for better service. Such deficiencies would include, for example, the provision of water, electricity, boundary walls, latrines etc. to basic health and primary education units. |Secondly, there is considerable emphasis on rehabilitation such as in the case of water supply schemes functioning at sub-optimal levels or education and health units in a state of major disrepair. Thirdly, the investment programme caters substantially to supplies and critical consumables, especially in the health sector without which

physical facilities are incapable of providing the necessary services. To be able to eventually provide for this kind of recurrent expenditure on a sustainable basis, the allocations for supplies in the investment programme will have to be on a declining basis during the SAP period of 5 years, which means that transfer of funds to the SAP subsectors from within the regular recurrent budget will have to make up the gap on an increasing basis^ Only if resources can be freed from tertiary levels of health and education by increasing user charges and effecting economies can such a shift take place. Again, an important element involved in a decision of this nature is that of political will. ^Lastly, we are stressing a great deal on putting into place arrangements conducive to better operations through the existing physical facilities. In the health and population welfare sectors, the plan is to integrate the existing facilities through a referral linkage and to provide a —better supervisory framework through decentralization. In education, teacher availability and reduced absenteeism are areas of focus and are sought to be achieved through a combination of local level supervision and incentives. In water supply & sanitation, systems for preventive maintenance, better collection and reduction of per capita cost through service extension are part of the operational plan

#### 4.5 The Recurrent Budget

A difficult area in SAP, we concede, is the present and future inadequacy of the non-development budget to sustain the level of increased investment proposed to be made in the social

sectors To the extent that ^there remain deficiencies in such availability, better implementation prospects of the programme will suffer. With the expansionist tradition having paid limited dividends, SAP envisages consolidation and enhanced effectiveness of the existing system by, interalia, exploring avenues of increased financial support in the non-development sphere.

'1In fact the shift in resources is envisaged at three levels: from the non-SAP to the SAP sectors; from the development to the recurrent budgets; from the tertiary to the primary level. While the first shift is clearly the most major, it will be most easily achieved owing to the broad nature of sectoral funding. In fact such a shift is a part of the 8th Five Year Plan. The shift of resources from development to non-development presents greater difficulties as trimming down the former does not mean a correspondingly higher availability in the other owing to the quite different sources of funding for the two in the provincial budgets Development funds emanate basically as development loans from the Federal Government to the provinces and cannot to be used as budgetary support measures for recurrent expenditures. ^Shifts within the recurrent budget, therefore, carry the only prospect of providing sustainable support from within the government system. And to provide more for the starved primary levels of the social sectors, it means raising resources from the tertiary levels that carry a higher potential for resource generation and that presently reflect a heavy subsidy pattern

A shift from the tertiary to the **primary** level offers the biggest challenge in view of the fact that the process involves either withdrawing subsidy on an existing component of a service (such as the decision that indoor hospital patients will arrange for their own food) or increasing charges for services earlier provided free or at low charge. The challenge comes first in the taking of the decision and secondly in ensuring that it is implemented efficiently. The former in view of its unpopular aspect, again requires political will. The latter requires an improved system of collection.

It is evident that increased availability of recurrent funding in the SAP sector will depend mainly on changes brought about for resource mobilisation in the other sectors. The important point here is that SAP cannot be planned effectively within the SAP sectors alone.

In recognition of the narrow potential of generating adequate resources from the tertiary levels, there has been much talk about inducting the private sector, NGOs and the community itself into local development efforts. The lack of profit possibilities in social sector services in our rural areas has kept the private sector away from investing in areas where both the demand and the capacity to pay is lower than in the urban areas. Urban based NGOs have also generally been shy to operate in remote rural areas while hardly any rural NGOs exist. Ultimately, it appears, much will depend on the degree to which the community can be involved in the local development process but this option again

presents a major challenge which we will now discuss.

#### 6. THE QUESTION OF COMMUNITY PARTICIPATION

Community participation presupposes community organisation and it is in the organisational process that the challenge lies. There is now considerable emphasis by the potential donors on the implementation of SAP through community based systems, especially in the area of water supply and drainage. The Planning Division has joined in this refrain and the 8th Plan now envisages water supply operations as being run on a full cost recovery basis by the community.

While there is little doubt that community managed operations in water supply would be both economical and efficient, it is the very first step of organising the community that is the stumbling block.

First, social services have never been an attractive proposition for community organisation as they promise no immediate and material return. Secondly, the reluctance on the part of the community to -organise and manage social services becomes even more pronounced when the services are being provided either free or at low cost by the government. Thirdly, government departments have neither the capacity nor the inclination to engage in the community organisation exercise (In fact, the authority syndrome militates as much against this kind of decentralisation as it does against the prospect of departmental decentralisation).Fourthly, communities have little incentive to manage facilities where the personnel

concerned are<sup>^</sup> not under their control and form part of the government administrative structure.

Careful thought has to be paid to these aspects of community participation; mere harping on the theme will not do. In our opinion the expectation that departments will be able to dovetail their implementation proposals within a community organisation framework is unreal .f Community organisation is as much a specialised function as the specialised areas of departmental activity. It cannot be envisaged as an ancillary option that can be put into place by those concerned with the technical delivery mechanism of SAP.

The community participation approach will have to incorporate two important elements. First, a separate investment programme with organisation as the core objective will need to be put into place. Secondly, a clear, definite and unambiguous transition programme for government withdrawal from certain services, such as water supply, will have to be decided upon and designed in a phased manner.

The National Rural Support Programme (NRSP) is a step in the direction of investment in organisation. Its operations towards this objective will focus on attracting the community to organise itself around activities that are closest to their material needs, which are most likely to be income generating in nature. The expectation is that once a community assumes the shape of an organised entity, it will easier to move an existing organisation into social services development and management. Attempting to

organise a community around pre-determined project amounts to approaching the issue from the wrong end/ It is the nature of the project that is going to determine community organisation. It follows that it has to be one of the community's own choosing. Furthermore, the organisation process requires input from a body of experienced or trained personnel functioning in pursuit of the sole objective of organisation. The NRSP approach is clearly on sound lines. This approach can be made a part of SAP but will require investment exclusively devoted to community organisation which may not in the short run necessarily include any activity with a direct relationship to the SAP subsectors.

Communities will continue to remain wary of taking over social sector facilities as long as they can get the service either free or at low cost from the public sector. [Two steps would need to be taken to make communities think seriously about self-management. User charges need to be introduced or raised and a time frame needs to be set within which the government will withdraw from the management of certain services such as water supply. A higher level of user charges and their strict and efficient collection will reduce the attraction of insisting on a government managed system that charges too low and allows delinquency. Setting up a phased transition plan will give little choice to the communities but to organise themselves to ensure continuity of services

7. CONCLUSIONS

^Success in SAP's implementation will be influenced by a number of factors which constitute the set circumstances in which it will begin its five year phase as a part of the 8th Plan. Prominent amongst these are low professional capacity of Government organisation, limited decentralisation, inadequate recurrent funding and the lack of involvement of extra-governmental institutions, especially the community. These set of factors contribute to a non-supportive environment for effective implementation of SAP. Most of them are not susceptible to short term solutions. In fact, effort at reform, change and improvement in the case of some of them lies outside the focused area of SAP activities. Yet they impinge strongly upon the quality of SAP

operations./The efforts for improving our social indicators, then,

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call for an effort to bring about qualitative change in the overall context of SAP operations.

pur approach is to take steps towards whatever changes can be brought about in the short run and to plan for change in the more difficult areas over a period of time. Decentralisation within the administrative system is a measure that can be undertaken in the short term and this will form part of the operational plan's component for the first year of SAP. We plan to give more powers to the health and education personnel serving at the local level. Ensuring effective use of decentralised powers, however, cannot be achieved as easily and, as discussed earlier, measures are proposed to be taken to minimise discretionary areas o, interference.

Moving from an expansionist to a consolidation approach will form an immediate step in all sectors of SAP. But adding quality enhancement elements for better service delivery would involve additional measures such as better supervision, training, accountability and increased availability of operational funds.

For enhanced recurrent expenditure, short term measures include making up past neglect through provision in the investment programme albeit on a diminishing basis to allow a gradual resource transfer to the primary sector on a more sustainable basis. The latter would mainly involve mobilisation of resources from the non-SAP sectors and would mean taking policy decisions on charging for tertiary level services.

/SAP holds a weak attraction for the private sector and NGOs in view of its rural bias. Institutionally, funding is available to NGOs through the Punjab Education Foundation and to private entrepreneurs through the Punjab Health Foundation to set up education and health facilities. While the Health Foundation is just taking off, experience shows that there has not been much of a response for the setting up of primary level education facilities through the Education Foundation, especially in the rural areas.

Community participation as an additional alternative in the non-government realm has already been discussed. While the setting up of community organisations is a long term process, attempts to induct community level workers into SAP operations will be made for more efficient provision of services. For instance, a programme is being designed to recruit village based personnel,

male and female, train them in the areas of family welfare as well as basic medication, provide them basic equipment and let them function as community health workers under a supervisory linkage with the BHUs. In the water supply sector, selected areas where the -elected representatives show interest are proposed to be taken up to introduce community management under an incentive scheme. For the long term, however, an NRSP type approach seems inescapable which is under consideration.

It is expected that with the initiation of some of the steps, the implementation prospects for SAP will improve. While a five year time span may not be enough to bring about a complete transformation in the delivery process, it is a period that can be constructively utilised to give a sound grounding and direction for the planning and implementation of social sector efforts as we move into the next century.;