Unblocking Results:

A case study of HelpAge International in Tanzania

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Acknowledgements

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Abbreviations

AcT	Accountability Tanzania
CCM	Chama Cha Mapinduzi (Party of the Revolution)
CSO	Civil Society Organization
DfID	UK Department for International Development
HAI	HelpAge International
MKUKUTA	National Strategy for Growth and Poverty Reduction
REPOA	Policy Research for Development
PADI	Tanzania Mission to the Poor and Disabled
THAT	Tandabui Health Access Tanzania

Executive summary

This case study is part of the Unblocking Results case study series,[1] an ODI research project on aid and governance constraints. Unblocking Results seeks to gather evidence on whether, and how well, aid can help to resolve or mitigate governance problems that often hinder the delivery of broad-based public services in developing countries. HelpAge International in Tanzania (referred to as 'HelpAge' in this report), which is a partner organization of Accountability Tanzania (AcT), was selected as a case study for the Unblocking Results initiative due to its innovative approaches and successes in addressing common governance constraints.

HelpAge's mission is to 'to ensure older people in Tanzania have equal access to resources and services as provided in the various policies and legislative frameworks by seeking the mainstreaming of ageing issues into the development agenda of the country thereby alleviating intergenerational poverty that affects older people and their dependants' (HelpAge Country Strategy 2010). HelpAge's goals have been shaped by research showing that older people in Tanzania are likely to be poorer, less informed, more susceptible to chronic illness and disability, and more likely to suffer from discrimination and social exclusion than other segments of society. HelpAge and its partner organizations have applied several innovative strategies towards achieving progress on issues affecting older people – particularly in the areas of income security and health services. Its experiences also point to some lessons about the limitations and challenges faced within the context of a difficult enabling environment.

HelpAge is a partner organization of AcT, a governance initiative supported by the UK Department for International Development (DfID) which seeks to achieve 'increased responsiveness and accountability of government through a strengthened civil society' in Tanzania (outcome mapping brief). With a portfolio of GBP 31 million over the period 2009-2015, AcT provides budget support grants to large- and medium-sized civil society organizations (CSOs) that have demonstrated, or that have the potential to demonstrate, positive results in strengthening accountability. AcT's model incorporates several features that aim to improve the ability of its CSO partners to address some of the constraints inherent in the complex governance environment they are working in. For example, AcT's funding and evaluation strategies are designed to empower its partners with the flexibility to design and adapt their programming strategies in response to changing governance dynamics that they may encounter.

Several aspects of the political economy landscape of Tanzania are relevant to understanding the environment in which HelpAge and other partner organizations of AcT operate. These include low levels of policy and institutional coherence, weak systems of top-down and bottom-up accountability, and some dynamics that limit the potential for effective local problem-solving and collective action. While Tanzania has several legal frameworks and policies in place that support the protection of older people's rights, including access to medical services and income security, detailed plans to implement these policies have been inconsistent, resulting in high degrees of policy incoherence and implementation gaps. In addition, older people in Tanzania have historically had limited understanding about concepts such as social rights and healthcare rights; they often have a weak voice in politics and are not always well-represented in decision-making processes at local and national levels. All these factors are constraints to accountability. Finally, the overall governance environment, as well as some factors specific to older people and the issues they face, have often put older people in a disadvantaged position to take individual or collective action to demand more accountable public services.

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[1] *Unblocking Results: using aid to address governance constraints in public service delivery* (ODI, May 2013). Heidi Tavakoli, Rebecca Simson and Helen Tilley with David Booth.

HelpAge's approach to addressing these governance constraints has involved supporting evidence-based research on the situation of older people as well as on policy options to improve their well-being; and engaging older people in advocating for reforms such as the establishment of a universal social pension and improvements to health services for older people. Given the potential for achieving policy change at the national level, much of the focus of advocacy efforts has been on lobbying key actors in the central government to support reforms. However, engaging with communities and local governments has been a critical complementary strategy to build a broader movement and bring attention directly to policy-makers about older citizens' priorities and innovative local strategies for addressing their concerns.

Overall, our analysis suggests that HelpAge appears to be effective in working with the central government to address specific challenges relating to policy incoherence. The strategy to achieve this has involved partnering with the government to identify clear and timely policy reform options that are evidence-based in addition to being politically feasible, while also helping to develop strategies to support the implementation of these policies. Given the top-down nature of policy-making in Tanzania, the strategy recognizes that high-level support within government for reforms is important to achieving change. At the same time, given the political environment of weak accountability, decision-makers sometimes lack incentives to focus on the needs of older people. Grassroots advocacy efforts at local levels to engage older people in collective action have therefore been important for holding leaders accountable for their policy commitments.

Alongside its progress, HelpAge has also faced some challenges that illustrate gaps between its goals and its ability to address some of the governance constraints encountered. In particular, the pace of national reform processes and the progress in addressing policy incoherence and implementation gaps has remained slow, which has been exacerbated by human resource shortages and budget constraints. Other challenges include identifying windows of opportunity for traction in achieving policy change, maintaining a balance between working collaboratively with the government while avoiding political influence over the agenda, and ensuring that HelpAge's advocacy strategy gives balanced representation to the interests of different subgroups within the population of older people, especially women, the poor, and other marginalized groups.

To conclude, some key lessons learned from HelpAge's model, and from AcT's model of supporting HelpAge can be summarized as follows:

- **Building on existing policies and legal frameworks.** HelpAge's mission is framed explicitly in terms of helping to support the implementation of existing policies and frameworks relevant to older people's rights, as there is wide recognition that gaps often exist between policy design and progress in implementation. When working to initiate several new policy initiatives, such as pension reform and the upgrading of geriatric health services, an important element of HelpAge's strategy has been efforts to build on previous progress. This has involved addressing policy incoherence, with the focus on strengthening policy implementation rather than concentrating solely on policy content.
- **Identifying and seizing windows of opportunity for advocacy activities.** HelpAge has encouraged its partners and stakeholders to keep a close eye on policy developments relevant to older people at both local and national levels, in order to take advantage of key opportunities to hold leaders accountable. The approach of connecting lobbying activities at the central level with a wider movement that engaged older people in advocacy at local levels, has helped to strengthen links that are often missing between top-down and bottom-up accountability mechanisms. The potential benefits in terms of the potential policy influence achieved through this advocacy model have important implications for AcT and its partners.
- **Facilitating platforms for older people to coordinate and lead a collective agenda.** Recognizing the existing barriers to collective action barriers, HelpAge's training and coaching to educate older people about their rights and entitlements, and to build their capacity to engage in advocacy, has focused on improving their ability to coordinate a collective agenda and action plan. Ensuring that older people – rather than HelpAge – are at the centre of the movement has increased political incentives for leaders to respond, and stepping back to allow local stakeholders to take ownership and credit for progress achieved has been important. Older people are well respected in society, and this has made politicians receptive to their agenda and helped their voices to be heard.

- **Using adaptive approaches to programme evaluation in response to changing governance dynamics and constraints.** An important feature of AcT's model involves empowering its partners with sufficient flexibility for programming strategies and targets to be adjusted as needed in response to learning as well as to shifts in the governance environment. HelpAge has benefited from this flexibility, given that several of its core advocacy goals such as achieving universal pension reform involve an inherently high level of uncertainty. Its ability to demonstrate some near-term achievements has helped to allow the organization to continue receiving funding while longer-term goals are still in process.

1 Introduction

This case study is part of the Unblocking Results series, an ODI research project on aid and governance constraints. Unblocking Results seeks to gather evidence on whether, and how well, aid can help to resolve or mitigate governance problems that often hinder the delivery of broad-based public services in developing countries. While the development community has long recognized that weak governance and incentive problems hinder the delivery of broad-based public services in developing countries (Keefer and Khemani, 2003; World Bank 2004; Collier 2007), the last decade has seen a growth in research that seeks to identify and understand the nature of these governance problems. In particular, this research builds on earlier ODI research by Booth (2010) and Wild et al. (2012) that categorizes typical constraints and incentive problems to service delivery, and shows that a number of common constraints underlie much of the variation in service delivery performance in developing countries.

However, there is little evidence on whether, and how well, aid can help to resolve or mitigate these governance problems. Research that does exist tends to focus on the impact of specific types of accountability structures on service delivery, rather than the design and delivery features of aid programmes necessary to address such constraints. This research project begins to address this gap in literature by studying the interaction between constraints and aid packages in particular country contexts. The research is exploratory and the findings should be treated as preliminary. It does not aim to evaluate the programmes against their stated objectives, nor measure their impact. Rather, it examines the types of aid-funded activities that seem most relevant to addressing governance constraints, making some speculative conclusions about their ability to do so as well as about the elements of the design and implementation approach that have facilitated the execution of these activities.

HelpAge, a partner organization of AcT, was selected for the Unblocking Results initiative due to its innovative approaches and successes in addressing common governance constraints. A separate linked case study focuses on another of AcT's partner organizations, Tandabui Health Access Tanzania (THAT).

The section below provides some brief background information on both HelpAge and AcT. Section 2 provides a broad overview of the situation faced by older people and the political context of HelpAge and AcT's programming, focusing on the three key governance constraints that are emphasized in the Unblocking Results framework: the degree of policy incoherence, mechanisms for top-down performance discipline and bottom-up accountability, and the environment for collective action and locally anchored problem-solving.[2] Section 3 makes up the main part of the report, which identifies some of the key strategies and innovative aspects that HelpAge's model has used to address the governance constraints described in Section 2. A discussion of some of the challenges faced is presented in Section 4, and Section 5 presents a summary of lessons learned and recommendations based on the application of the Unblocking Results framework to identify some of the key enabling factors.

1.1 Background on HelpAge

HelpAge established its presence in Tanzania in 1992 as part of the HelpAge network existing in over 70 countries, and the organization began receiving funding from AcT in the year in October 2011. HelpAge's mission in Tanzania is 'to ensure older people in Tanzania have equal access to resources and services as provided in the various policies and legislative frameworks by seeking the mainstreaming of ageing issues in to the development agenda of the country thereby alleviating intergenerational poverty that affects older people and their dependants.' HelpAge engages with a number of smaller CSO partner organizations to achieve this mission

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[2] Accountability can be top down and/or bottom up, such that 'In principle, performance disciplines that are not enforced bureaucratically, from the top down, may be strengthened as a result of pressures arising from the bottom up, from service users or their representatives (Tavakoli et al 2013: 29).

through a broad range of diverse activities. Two of the main streams of work that are the focus of this report include: advocacy efforts for universal pension reform at the national level; and mobilizing older people to support access to equitable, affordable healthcare.

The programme has wide geographical coverage throughout the country, concentrated on strategic regions in Tanzania mainland and Zanzibar, particularly Morogoro, Ruvuma, Kagera, Dodoma, Dar es Salaam, Mwanza, Tanga, Arusha, Lindi, Pemba, and Unguja. HelpAge's total budget as forecast in its 2010 Country Strategy ranged from 1.5 -1.7 million GBP annually for the budget years 2012-2013 and 2013-2014. AcT has provided 18-21% of HelpAge's total funding in these years.

1.2 Background on AcT

AcT is a governance initiative supported by DfID which seeks to achieve 'increased responsiveness and accountability of government through a strengthened civil society' in Tanzania (outcome mapping brief). With a portfolio of GBP 31 million over the period 2009-2015, AcT provides grants to large- and medium-sized CSOs that have demonstrated and/or have the potential to demonstrate positive results in strengthening accountability. Within the complex governance environment of Tanzania, AcT represents a unique model for donor support to CSOs addressing challenging governance goals such as improving transparency and strengthening citizens' voice in society in order to embed sustainable changes within communities. It is hoped that this case study can help to build knowledge on some of the challenges encountered and strategies used to successfully achieve progress in these areas.

To date, AcT has funded 27 CSOs, whose work cuts across a diverse range of sectors (including health, agriculture, natural resources and climate change) but is united by a shared focus on strengthening accountability in Tanzania. AcT's approach recognizes that it would not make sense to advocate a single theory or model for strengthening civil society, given the diversity inherent in the goals of its partners. Thus, one of the defining characteristics of the model is the provision of funding to support the strategic goals of its partners (budget support) rather than specific project-based funding.[3] The model also recognizes the capacity limitations of some of its partner organizations and particularly the constraints they face within the governance environment in which they operate. A flexible, tailored approach to working with its grantees (referred to as 'partner organizations') is a central component of AcT's strategy for confronting these realities. Another notable feature of AcT's model, which is critically examined in this report, is the use of outcome mapping tools[4] to evaluate the achievements of its partner organizations, rather than standard logical frameworks. More details on AcT are provided in Annex 1.

Applying the Unblocking Results methodology, which is summarized in Annex 2, this case study is based on a desk review of relevant literature combined with a five-day period of fieldwork involving interviews in Dar es Salaam and in the municipality of Songea, where Tanzania Mission to the Poor and Disabled (PADI), one of HelpAge's partner organizations, operates. Interview respondents based in Dar es Salaam included the AcT team, staff from HelpAge, and representatives from the Ministry of Labour, Employment and Youth Development and the Ministry of Health who have been actively working with HelpAge. Respondents in Songea included staff from PADI, several local government officials, staff from two health facilities (a public dispensary and a private dispensary), a focus group with older people at one of the health facilities, and a focus group of community elders involved in advocacy on older person issues.

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[3] One observation from our visit to one of HelpAge's partner organizations, PADI, however is that this model may not always get replicated downstream (i.e. the aid given by HelpAge to PADI was project-based support). As PADI receives multiple sources of funding from different donors, each with their own reporting requirements, the organization usually tries to projectize funding. It therefore channels funds from each donor to separate projects or geographical areas in order to simplify the reporting process.

4 Outcome mapping is an approach to evaluation designed by the International Development Research Center (IDRC). See Outcome Mapping: Building Learning and Reflection into Development Programs (Earl et al, 2001).

2 The political context

2.1 The situation of older people in Tanzania

According to the 2012 census, Tanzania's 2.5 million older people (defined as those aged 60 and above) represent 5.6% of the total population. The need for HelpAge's presence in Tanzania was initially identified on the strength of an analysis of the situation of older people in the country that used a range of data sources (Poverty and Human Development Report 2007; Mboghoina et al. 2010). The analysis indicated that older people are likely to be poorer, more susceptible to chronic illness and disability, and more likely to suffer from discrimination and social exclusion. Compared to other segments of society, older people tend to be the last to be informed of their rights and entitlements, in part due to their higher levels of illiteracy and poverty and their lower access to communications media such as radio (HelpAge Country Strategy 2010).

Overall, perhaps the most striking evidence that puts the situation of older people in Tanzania in comparative perspective is the Global AgeWatch Index[5] developed by HelpAge with the United Nations Population Fund (UNFPA) and the University of Sussex. Of the 91 countries ranked in terms of their provision of income security and health protection for older people, Tanzania occupied the 90th position. This vulnerability means that in times of economic stress or crisis, the poverty levels of older people can increase dramatically.

Focusing first on issues of income security, although the Constitution of the United Republic of Tanzania declares that all citizens have the right to social security in old age, currently only 4% of older people have access to pensions (Pension Feasibility Study 2010). While several social protection initiatives exist in Tanzania, including cash transfer programmes for women and children, HelpAge's initial consultations with a range of stakeholders suggested that many of the poorest households, and particularly households headed by older people, were not benefiting from these schemes. In spite of the vulnerabilities older people face, and the fact that many older people carry the burden of household domestic care, particularly for orphans, it has often been easier to rally resources for causes affecting other groups like women and children. HelpAge's country strategy notes that other groups that are considered to be marginalized have received some attention at council and parliamentary levels, while older people's issues have often remained at the sidelines (HelpAge Country Strategy 2010).

Second, turning to some of the health service challenges that older people face, research suggests that only 10% of older people are receiving free health services from public facilities in accordance with national policy instructions (Poverty and Human Development Report 2007). Many citizens have turned to private facilities for treatment, due in part to severe shortages in human resources and drugs at public health facilities. (It has been estimated that 40% of Tanzanians get their medication from private and faith-based health facilities). However, private costs associated with accessing healthcare at these facilities, where the policy of free medication for older people has not yet been adopted, are a major barrier for older people (HelpAge Country Strategy 2010). Further, as health workers at local facilities often lack the skills or medicines required to adequately manage medical conditions affecting older people, older people are often referred to health facilities at the district level, which typically incurs greater costs for services and transport.

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[5] The Global AgeWatch Index is the first global index that ranks countries according to the social and economic well-being of older people.

2.2 The political landscape and governance constraints

There are a number of broader features of the governance environment as well as some issues specific to older people that impact on the quality of service provision to older people and other population groups. These contextual factors are covered in the following section.

Several aspects of the broad political economy landscape of Tanzania are relevant to understanding the context in which HelpAge and other partner organizations of AcT operate, as they shape both the opportunities and constraints presented by the enabling environment. As one of the largest countries in East Africa, with a population of over 45 million, Tanzania has high levels of religious and ethnic diversity, as well as generally high levels of political stability and national unity (Hoffman 2013). Tanzania's political landscape is dominated by the CCM (Chama cha Mapinduzi) party, which has ruled the country since independence from British colonial rule in 1961. While multi-party elections were introduced in 1992 and opposition parties have captured some seats in Parliament, the CCM has maintained control as the ruling party throughout this period.

Historically, the CCM has maintained its power and legitimacy largely based on its ability to provide public goods with mass appeal and to give its representatives access to resources that can be channelled to citizens (OPM-REPOA-CMI 2005, Hoffman 2013; Hyden 2005; Hussman and Mmuya 2007; Tilley 2013). Evidence suggests that CCM has recently come under increasing pressure, however. In the last presidential elections in 2010, the party won its lowest vote share ever (61% compared to 81% in 2005) and survey data shows declining public confidence in the government's performance. The World Bank's World Governance Indicators point to significant deterioration in public perceptions of how well the government has controlled corruption, with a drop from the 50th percentile in 2006 to below the 40th percentile in 2011, for instance (Hoffman 2013).

The increasing pressures faced by CCM seem to have contributed to its showing more interest in making visible commitments to improve accountability through the Open Government Partnership and the Big Results Now initiative, which targets public service delivery in selected sectors. However, there is some scepticism about what can realistically be expected from these drives (Tanzania Governance Review 2011-2012).

Similarly, the levels at which leaders are accountable to citizens in Tanzania seem to be generally low. HelpAge's country strategy highlights the historically low levels of knowledge and awareness among both citizens and leaders about older people's rights and entitlements (HelpAge Country Report). This has led to more policy incoherence and lower levels of accountability on older person issues. Although there is a relatively vibrant media sector in Tanzania, there are many challenges that limit the media's effectiveness in making leaders more accountable to citizens, particularly on older person issues, for instance. In addition to there being some limits on media freedom, specialized knowledge is often lacking and in-depth investigative coverage on a wide variety of social issues is relatively scarce. This includes reporting on issues affecting older people.

The Unblocking Results research methodology has identified a set of potential constraints to effective governance that are common to many country and project contexts (Wild et al. 2012). The constraints are: the degree of policy and institutional coherence, the extent of top-down performance disciplines or bottom-up accountability mechanisms, and the enabling environment for locally anchored problem-solving and collective action. Previous work on the Unblocking Results initiatives has found that these governance constraints are a common and important factor in explaining service delivery performance in developing countries. The constraints have been discussed in depth and with specific application to the Tanzanian context in Tilley's (2013) Unblocking Results case study of the civil society organization SNV's activities in the water sector.[6] The section below reviews these governance constraints and their cross-cutting nature, and illustrates how they shape the broad governance environment in which HelpAge and AcT's programmes operate.

2.2.1 Policy and institutional coherence

Tanzania's overall governance environment, which shapes the context of policies affecting older people, can be characterized as having a high degree of policy incoherence, as illustrated by frequent mismatches between official policy guidelines, which are often issued by the central government, and their actual implementation at

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[6] See Unblocking Results case study: *Rural water in Tanzania* (Helen Tilley, ODI 2013) for a summary of Tanzania's political economy context and *Stock outs of essential medicines in Tanzania* (Wales et al, ODI 2014) for a discussion of political economy issues specific to the health sector.

local levels. This is apparent in two focal areas of HelpAge's programming: income security and health services for older people.

The central government has made several commitments to protecting older people's rights, including ensuring their access to universal social pensions and free health services,[7] but in practice the implementation of these national and international agreements has been slow and incomplete. This demonstrates significant policy incoherence. For instance, the passing of the National Ageing Policy has not been accompanied by a supporting legal framework to enforce its implementation and hold the government accountable for protecting older people's rights. Although the National Ageing Policy requires the formation of Older Person Forums at the community level to serve the function of bringing older people's issues to the attention of local government, in practice these forums have not been functioning in most areas. Similarly, the implementation of the policy of free medical services and the provision of resources to support it have been inconsistent. This is part of a general trend in Tanzania, where the delivery and implementation of legislative frameworks have been weak, indicating that policy formulation does not always lead to policy action.

While there is a relatively clear delegation of responsibility across government institutions over income security and healthcare issues for older people, a lack of coordination between these institutions and between central and local levels of government has been a challenge to strengthening the cohesiveness of the older person agenda. The Social Security Regulatory Authority is mandated to advise the Ministry of Labour, Employment and Youth Development on all policy and operational matters relating to social security. This includes designing the social pension scheme and monitoring its implementation. The Ministry of Health and Social Welfare oversees the formulation and implementation of policies relevant to older people's health, including the National Ageing Policy. Meanwhile, the Ministry of Finance is also a relevant player in decision-making about resource allocations for older people, such as the universal social pension and older people livelihood programmes. One of the main institutional challenges previously faced was the lack of a key point person responsible for older person issues within the Ministry of Health and Social Welfare, but recent efforts to create such a position have helped to address this issue, as discussed in Section 3.

Finally, a related obstacle to the design and implementation of coherent social policies friendly to older people has been a lack of data and information on this group. Limited research and data availability on older people has been a key obstacle for both policy-makers and citizens interested in advocating for policies that support this population group. While some national socio-economic and health surveys collect information on older people, data has not always been analysed and presented in age-disaggregated formats that are easily accessible to policy-makers. In addition, data on older populations is not collected from certain data sources such as the national HIV/AIDS survey, which focuses on the age range of 15 to 49 years. The availability of the 2007 Views of the People Survey that included a module on older people presented a key opportunity for HelpAge to bring some statistics on older people to the attention of policy-makers, however.

2.2.2 Top-down performance disciplines and bottom-up accountability mechanisms

The challenges discussed above are also reinforced by patterns of accountability. Public service delivery in Tanzania has remained largely top-down, with centrally defined budget allocations and regulations limiting the influence of local government, related to the limited decentralization that the government has undertaken. The central government has often been reluctant to delegate power to lower level authorities, and the Prime Minister's Office for Regional Administration and Local Government, the agency leading the decentralization

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[7] Some of these commitments are:

- The National Ageing Policy of 2003 provides a framework outlining the rights and entitlements of older people in areas including health and income security.
- Article 11(1) of the Constitution of the United Republic of Tanzania declares that all citizens have the right to social security in old age, and the universal social pension.
- MKUKUTA 1 (2005-2010) set the clear target, '100% of eligible older people provided with free medical services and attended to by specialized medical personnel by 2010'.
- The government committed to include the universal social pension agenda as a key target in MKUKUTA 2 (2010-2015).
- Tanzania has ratified several international treaties relevant to protecting the health and well-being of older people. These include the International Convention on Civil and Political Rights (1966), the Convention on the Elimination of all forms of Discrimination Against Women (1979), and the International Covenant on Economic, Social and Cultural Rights (1966) (HelpAge Country Strategy 2010).

process, has insufficient capacity to fully perform its role (Tilley 2013). Inadequate capacity and limited own-source financing in turn limits the effectiveness of local governments in overseeing the different sectoral priorities under their management, including meeting the service delivery needs of older people. Although efforts to build the capacity of local governments have shown some positive results, there is also recent evidence of the misuse of development grants at local levels and public confidence in local councils' spending behaviour is quite low. For instance, only 20% of respondents in the Views of the People survey reported that they thought local councils 'make good use of money' while 51% thought that they 'misuse money' (Tanzania Governance Review 2012). These issues have been explored in greater depth by other scholars (Tanzania Governance Review 2012).

Moreover, a key constraint to effective accountability mechanisms is that older people in Tanzania are not always well represented in decision-making processes at local and national levels. Although the Vice President has instructed that all councils need to designate a local coordinator for older person issues, many councils have not yet managed to do this. This is due in part to a limited budget as well as inadequate staff to allocate a person to this role. Again, this is not unique to older people, as there is a general lack of representation from communities in decision-making, and weak feedback loops between citizens, service providers and policy-makers.

Regarding bottom-up accountability, citizens' limited knowledge about their healthcare entitlements means that health facilities are often able to collect user fees from older people and other vulnerable groups that are supposed to be exempt from such costs. Data from the 2007 Views of the People survey revealed that 48% of older people aged 60 and above were not aware of their entitlement to free medical services in public health facilities. Further, 18% of these respondents reported being refused treatment at a government facility as they could not afford the cost of medical services, even though these services are supposed to be free (HelpAge Country Strategy 2010 citing Mboghoina et al. 2010). This reflects some general challenges with information and levels of awareness of populations.

Meanwhile, ineffective systems of monitoring and supervision further enable misconduct, such as overcharging for health services. One challenge is the limited funding available for district management teams to conduct supervision visits to health facilities, which means the visits often occur less frequently than required by official guidelines. Moreover, incentives to report on irregular practices or problems detected are often lacking as there is a culture among civil servants of avoiding conflict and protecting jobs. One representative from the Ministry of Health and Social Welfare interviewed for this research explained that the Ministry relies on reports submitted by local governments in order to get information about the situation on the ground, while the reports submitted sometimes have a positive bias and need to be supplemented with field visits for verification.

2.2.3 The enabling environment for locally anchored problem-solving and collective action

The discussion above sets out some general features of the governance environment. Yet there are also a number of issues and dynamics that are specific to older people. These relate to their relative lack of visibility, weakened capacity for collective action, and some of the inherent politics around pension reform. Older people in Tanzania – known as *wazee* in Swahili – are generally accorded high levels of respect in society. They can be perceived as able to speak effectively and candidly to leaders when given the chance to share their issues. However, they can also face significant vulnerabilities. For instance, older people being killed due to allegations of witchcraft is common in some areas and older women are particularly at risk. One key challenge is a lack of visibility – older people may be more confined to the home or there may be little understanding of their complex needs.

Given that they are more likely to experience difficulties with mobility and transport (Voice of the People 2007), which can make them prone to social isolation, older people are in a particularly weak position to organize collectively. Although the National Ageing Policy mandates the creation of Older Person Forums as structures for older people to unite and demand their rights in every village, as noted earlier, in practice these forums are often inactive due to a lack of awareness and leadership to activate them. Another challenge in relying on voluntary structures is the assumption that groups will have time and interest to attend participatory forums.

In the health sector in particular, efforts to act collectively can be undermined by the personal nature of health problems, and the fact that citizens usually interact with health providers as individuals rather than as groups. Moreover, citizens may feel dependent on health workers and the government and therefore not be motivated to

come together to demand better services. This may be the case even when they are charged fees for services that are supposed to be free, or when health facilities are out of stock of essential medicines (USAID 2011:30). Among civil servants, on the other hand, job protection tends to be a priority, and more generally, there are strong social norms in Tanzania against reporting on problems or challenging authority. In part, this may be related to the risks associated with raising complaints given the interconnectedness between individuals due to overlapping and complex social networks, as well as cultural norms arising from Tanzania's socialist history. While surveys on Tanzania carried out by Afrobarometer show increasingly critical attitudes towards both central and local government performance over the period 2008-2012, citizens still report surprisingly high levels of approval of officials (Afrobarometer 2012). Over time, citizens have become accustomed to poor quality and availability of public services such that there is often a culture of acceptance rather than an interest to try to take collective action to effect change. A lack of connection between different vulnerable groups (such as women and the disabled) is also a challenge for collective action, as effective problem-solving at the local level may involve bringing these groups together.

Finally, there are some specific issues around the 'politics' of pension reform. In most countries, there are ongoing political debates on the provision of welfare and pensions. In countries like the UK, there has been a strong constituency for pension provision, because older people are politically active, have voted in significant numbers and will have had a history of paying tax and hence higher expectations for pensions. These kinds of pressures and expectations among old people are much less evident in Tanzania, where tax levels remain relatively low and where older people may not be more politically active. There are also far fewer old people in Tanzania's population pyramid because life expectancy is so low, making them a politically marginal group compared to most wealthier countries. Much of the current discourse is framed in terms of 'social rights', which does not yet seem to have much traction with communities in Tanzania. As such, the idea of a universal pension for all citizens, rather than only for civil servants, is a relatively new concept for most Tanzanians, even though there have been long-standing legal and policy commitments on this issue. This suggests that the drivers or incentives to implement these policies and commitments are relatively weak, and may reflect the level of political importance – of perceived political returns – from this area.

Table 1 summarizes the blockages identified in this section. The next section explores the strategies used by HelpAge to address the governance constraints described above in order to achieve improvements in accountability and service delivery, and analyses some of the features of AcT's model which have enabled this progress.

Table 1: Blockages identified in HelpAge's intervention framework

Area of blockage	Example of constraint identified
Policy and institutional coherence	• Mismatch between national policy frameworks and realities of local implementation on issues affecting older people (e.g. income security, health service provision) • Coordination challenges within and across organisations responsible for addressing older person issues at central and local levels due to the cross cutting nature of the challenge
Top-down and bottom-up accountability mechanisms	• Weak bottom-up pressures due to lack of awareness about older person rights to income security and healthcare services • Ineffective top-down systems of monitoring and oversight (various organisations involved)
Potential for local problem-solving through collective action	• Limited understanding about concepts such as universal social rights among older people • Older people are in a disadvantaged position to mobilize and demand their rights as a group

3 The intervention design

This section begins with a descriptive overview of HelpAge's intervention model and theory of change in Section 3.1, followed by an analysis in Section 3.2 that explores how the organization has navigated the governance constraints described in the previous section. This is done in the context of the broader features of the Tanzanian political economy and the specific governance constraints that affect policies and services for older people. Section 3.3 analyses the implementation approach used while applying the lens of the Unblocking Results framework to draw out some of the enabling factors supporting the strategy.

3.1 Activities and theory of change

The global mission of HelpAge envisages 'a world in which all older people fulfil their potential to lead dignified, active, healthy and secure lives'. HelpAge's goal to ensure the protection of the rights and entitlements of older people in Tanzania, is aligned with this.

HelpAge's strategy to achieve this goal is largely based on two main areas of activity[8]:

- advocacy efforts focused on universal pension reform
- mobilizing older people to facilitate access to equitable, affordable healthcare.

In each case, the strategy used to advocate for change has involved a parallel combination of efforts to achieve national-level policy reforms by working with the central government, along with efforts to achieve change at the local level by engaging local governments and communities of older people. Reforms at the central level have tended to focus more on addressing policy coherence, while local level advocacy strategies have tended to focus more on accountability and collective action constraints. However, the cross-cutting nature of the strategies used has contributed to mutually enforcing solutions that address each of these constraints.

In the first area – **advocacy efforts focused on universal pension reform** – HelpAge and its partners have contributed to a movement advocating for the creation of a universal pension at both central and local levels. At the central level, this began with a review of existing policies and a feasibility study exploring the potential benefits of pension reform in partnership with the Ministry of Labour, Employment, and Youth Development. This was followed up with support for the development of national-level policy reforms. Meanwhile, through its partner organizations and Older Person Forums at local levels, HelpAge has also trained peer educators on issues of concern to older people so that they can put these issues onto the agenda of the councils in their localities. Strategies have included signing petitions at grassroots levels in support of pension reform and organizing groups of older people to bring their concerns directly to Members of Parliament and officials in the Ministry of Labour, Employment and Youth Development. Although the long-term goal of establishing a universal social pension system has not yet been realized, there are clear indications of some progress, as discussed later.

In the second area – **mobilizing older people to facilitate access to equitable, affordable healthcare –** HelpAge has supported an agenda of inclusive, affordable healthcare for older people and their dependants through a similar combination of national-level and local-level advocacy efforts. At the national level, HelpAge has worked with the Ministry of Health and Social Welfare to clarify and expand upon existing policies related

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[8] HelpAge also has a considerable focus on campaigning against the murder of older people due to allegations of witchcraft, which is a major social issue in some parts of the country. However, our study focuses on income security and healthcare aspects of HelpAge's work.

to the provision of healthcare for older people. This has included supporting the creation of a desk focused on geriatric care at the Ministry of Health and Social Welfare and the updating of the curriculum on geriatric care for health workers. At local levels, HelpAge's partner organizations and networks of older person advocates have worked to spread awareness on policies such as the healthcare cost exemptions that older people are entitled to in order to mobilize older people to demand access to entitled health services.

HelpAge's theory of change places older people at the centre of advocacy activities. The underlying assumption of this theory is that if older people formulate their own agenda, demand their own rights, and directly contribute to debates and policy formation on issues affecting their own well-being, their potential to influence policy change could increase. Through helping to train groups of older people to serve as 'change agents' by familiarizing them with the existing legal frameworks and policies related to older people's income security and healthcare rights, the goal has been to build the capacity of older people to advocate for their own rights. In fact, in some cases HelpAge has deliberately adopted a behind-the-scenes role. This is partly because the government ministries and politicians driving relevant policies tend to be more responsive to issues brought to them directly from citizens – which aligns with their political and career incentives – compared to addressing issues that are seen as part of NGOs' agendas. There are several examples of cases where ordinary older people have paid surprise visits to government offices and shocked leaders with the challenging and articulate questions they have posed. In turn, by helping to organize voters into groups advocating common agendas, these activities have also helped to build the capacity of the government to be more responsive to its constituencies, strengthening the links between bottom-up and top-down accountability mechanisms (see Box 1).

In summary, HelpAge aims both to bring local issues to the attention of national policy-makers and also to keep local advocacy groups informed about the latest policy developments at the national level. The focus of advocacy efforts has been not only on applying pressures on government to raise older person issues as a priority on the agenda, but also on helping to build the government's awareness and understanding about these issues.

Alongside this brief description of HelpAge's activities, Box 1 provides an overview of PADI, HelpAge's partner organization in Songea.

Box 1: Overview of PADI

The Tanzania Mission to the Poor and Disabled (PADI), one of HelpAge's partner organizations in Songea, was established and registered as an NGO in 1999 with its head office based in Songea Municipality. The organization's vision is 'a community where marginalized groups including older people, the disabled and other categories of the poor are sustainably supported and empowered' (PADI project summary). PADI has been an affiliate of HelpAge since October 2011 although the organization began receiving funding from HelpAge several years earlier. PADI's activities include a combination of direct support (e.g. providing funding for microfinance, revolving animal schemes, medical services, and medical equipment) and advocacy-oriented work (e.g. providing training). Some of PADI's activities supported by HelpAge include engaging with older people on health, income, and advocacy issues.

During a focus group discussion with older person leaders working with PADI, the group noted that some of the issues facing older people in their community included feelings of a lack of respect from the community, poverty and health problems. The leaders noted, however, that they have seen some improvement in recent years as there has been a wakening from *wazee* (older people) and the government. They also claimed that training received from PADI and HelpAge has helped them to understand their rights and engage in advocacy activities. One member explained, 'before we were blinded, we didn't know our rights. But now we are aware of ourselves…now it is we (older people) who demand our rights instead of waiting for government officials.' An older person who had been part of a delegation visiting Dodoma a few years ago expressed surprise that a Member of Parliament he met with was not aware of the National Ageing Policy and explained how this made him realize the need for greater awareness, not only among citizens but also within the government: 'If our leaders are not aware, how do you expect them to fight for our rights?'

Below we analyse each of HelpAge's strategies in relation to the governance constraints identified in Section 2, in order to assess the extent to which the strategies used by HelpAge have been useful in addressing the existing governance constraints and blockages to policy reform and other changes needed to improve the lives of older people in Tanzania.

3.2 How the engagement worked

This section considers specific examples of how HelpAge's interventions have addressed the three governance constraints identified in Section 2: low levels of policy and institutional coherence, weak top-down and bottom-up accountability mechanisms and a difficult enabling environment for locally anchored problem-solving and collective action. Both of the key policy areas – income security and health services – are discussed in turn below. In both areas, the strategies have involved a similar combination of advocacy strategies at both the national and local levels, where the three governance constraints have been addressed. Several examples that illustrate specific local efforts to unblock results are woven in throughout this section based on a case study of HelpAge's partner in Songea, PADI.

In summary, while working to build support for universal pension reform and health reforms through advocacy efforts targeting the central government – addressing the policy incoherence constraint – HelpAge has simultaneously supported a broader movement to raise awareness of older person issues among local governments and communities. Educating older person advocates and community members about their entitlements according to national policies has been a particularly important strategy for establishing platforms for collective action. Overall, this combination of top-down and bottom-up strategies appears to be helping to strengthen levels of accountability relating to older person issues, the caveats discussed above notwithstanding.

3.2.1 Advocacy efforts for universal pension reform at the national level

HelpAge's advocacy efforts for universal pension reform have been aimed particularly at addressing the governance constraint of policy incoherence. To this end, the organization has helped to translate some of the existing policy frameworks in support of a universal pension into a more detailed action plan and created awareness about these policies. The second governance constraint – weak accountability mechanisms – is perhaps not as relevant as the others in the case of pension reform, as the issue is largely about advocating for a new policy, rather than holding leaders accountable for implementing an existing policy. However, bottom-up pressures for accountability have still played an important role in reminding leaders to be accountable by fulfilling their promises on pension reform. There also seems to be a connection between accountability mechanisms and collective action, as collective action is a strategy often used to achieve accountability, so in the report these two constraints are regarded as being related rather than completely distinct.

Addressing policy incoherence

HelpAge's engagement in Tanzania began with background research to review the current state of service delivery to older people and the current set of policy frameworks outlining older people's rights. HelpAge collected some information on its own in a small sample of areas, while explicit efforts were made to complement these data with other reliable, independent data sources that the government and others would be able to trust. (This included analyses from Policy Research for Development (REPOA,) which showed that older people were clearly among the very poor.[9]) By revealing the gaps existing between the vision expressed in these policy frameworks and the actual situation of older people in the country, this approach directly identified and aimed to address policy incoherence, the first governance constraint described in Section 2.

HelpAge approached the Ministry of Finance and the Ministry of Labour, Employment and Youth Development with the data from different sources and evidence of policy incoherence, and encouraged the Ministry of Labour to undertake a study on the feasibility of introducing a universal pension in the country. An important element of the strategy from the start was that the government would own and manage the research, rather than HelpAge. The study found that the proposed provision by the government of a social pension of TZS 16,500 to older people was expected to translate into 1.5 million people being lifted out of poverty and that this would be possible without putting strain on the government's fiscal situation (Feasibility Study 2010). In order to help build further knowledge to support reform efforts, HelpAge in partnership with IrishAid also supported a study trip for a delegation of senior-level officials in government to gain exposure to the pension model used in Mauritius. The representative from the Ministry of Labour, Employment and Youth Development interviewed for our research explained that prior to the feasibility study, and the study tours and meetings with stakeholders that occurred in its aftermath, 'many people didn't know about the importance of universal pensions – even some decision-makers didn't know'. Thus, raising awareness within the government about existing policies and options was an important step in addressing this particular aspect of policy incoherence.

To summarize, the first step in HelpAge's approach was to engage with key actors in central government in order to build their knowledge and capacity about older person issues and policy options, recognizing that there were both policy gaps and policy incoherence. Before focusing on increasing bottom-up pressures in support of reforms, building this capacity at the highest levels of government was an important first step that would in turn strengthen the government's ability to respond to the concerns of older citizens.

Facilitating platforms for collective action

HelpAge's efforts to build awareness about pension issues at the level of local government and communities, through the provision of training to older person community leaders and the activation of local groups such as Older Person Forums, have helped to support the national movement. By helping to connect local advocacy efforts with a larger coordinated agenda of issues at the national level, these strategies have addressed the third governance constraint related to collective action noted in Section 2. In order to facilitate collective action, HelpAge recognized that having older people advocate directly for their own rights would be a more powerful way to achieve a response from the government than if the organization was seen as pushing an externally driven agenda. Instead of vocally pushing its own agenda, HelpAge's role has been to facilitate opportunities for

older people to meet with Members of Parliament at the central level in Dodoma, and in their own constituencies, and to organize sessions with parliamentary committees specifically focused on older person issues.

HelpAge's approach recognizes that older people could be in a very vulnerable position if they tried to confront the police or other power holders directly to demand their rights as individuals, as this could pose risks that might make them suffer rather than benefit. Recognizing this, HelpAge strategically approached a number of eminent older persons (*wazee ufunguo*), mostly retired politicians who still commanded public respect, to promote the agenda. The approach has recognized the importance of using collective action to hold the government accountable, with national-level advocacy efforts accompanying local-level reform efforts. Rather than acting alone, HelpAge has sought the support of other like-minded organizations such as the Tanzanian Social Protection Network in order to achieve a stronger, collective advocacy movement. HelpAge has also engaged some leaders from younger generations to help build its advocacy strategy as a lack of intergenerational trust has often been a challenge to collective action. Box 2 illustrates some of PADI's progress and strategies in this area.

> **Box 2: Unblocking constraints to collective action on income security issues: PADI's experience**
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> Although much of the focus of HelpAge's involvement with income security issues for older people has focused on the national-level reforms to establish a universal social pension system, collective action efforts at the local level have helped to achieve some smaller-scale gains while larger reforms are in progress. One example is the activism of older people connected to PADI in Songea, where the local government has increasingly been sensitized to the needs of its older citizens and has shown a willingness to prioritize these issues. For instance, local councillors in Songea agreed to secure property tax exemptions for older people after this issue was brought to their attention by older people. Further, while the local government previously had not set aside funds for income-generating activities for older people, recently councils in Songea municipality and Njombe decided to set aside some funds to provide older people with micro-finance.

In summary, HelpAge's work on income security has dealt most explicitly with the policy incoherence constraint, while also working to build collective action and bottom-up pressures to hold the government to account on its promises for reform. Although universal pension reform has not yet been achieved, there are some promising signs that the work of HelpAge and its wide range of partners, particularly older people themselves, has helped to increase the political attention given to the issue. The government has now declared its agreement with pension reform in principle, and the main challenge remaining is working out a financing strategy. Signs of progress include both CCM and opposition party members in the last parliamentary session voicing concerns about the slow progress of pension reform, and the Social Services Parliamentary Committee presenting a plan on how to push the reform forward. The Prime Minister publicly committed to having a universal pension in place within two years and the government has commissioned the Social Security Regulatory Authority to design a detailed plan to ensure stable funding. The representative from the Ministry of Labour, Employment and Youth Development interviewed for our research confirmed that the level of political support for the reforms is high and that the current challenge is finding a financing plan for the funding costs of the pension, estimated to be 2-3% of GDP. While the financing challenge may prove to be a significant obstacle and the future is uncertain, what is clear is that the issue has at least become a salient political issue.

In addition to these indications of progress at high levels, multiple interview respondents during our research reported that there has been a clear increase in awareness in society as a whole about the right to universal pensions as provided in the Constitution. AcT's approach to evaluating the progress of its partner organizations has enabled all of these intermediate progress markers to be captured and valued as positive benchmarks even though the main long-term goal of achieving pension reform has yet to be achieved.

3.2.2 Mobilizing older people to demand their healthcare rights

In order to address the governance constraints in the enabling environment HelpAge has applied many of the same types of strategies used in its advocacy on income security toward efforts to mobilize older people to

demand healthcare rights. Similar to its involvement with pension issues, HelpAge's engagement with the health sector began by engaging at the central levels with the Ministry of Health and Social Welfare to review existing evidence on policies related to older people's healthcare entitlements, followed by efforts to improve the coherence of these policies. However, accountability constraints – in particular due to lack of awareness among older people about their entitlements to free health services – have played a more prominent role here compared to the case of pension reform. This is mainly due to a lack of awareness among older people about their entitlements to free health services. In addition to addressing the bottom-up side of accountability constraints by building older people's ability to demand their healthcare rights, both individually and collectively, HelpAge has also made some efforts to support the top-down side of accountability by building the Ministry's capacity to address older person health issues.

Addressing policy coherence

HelpAge's strategy began with a focus on baseline research findings from discussions with groups of older people in different parts of the country that revealed policy incoherence and gaps in the implementation of existing policy frameworks underlying health service provision to older people. HelpAge's engagement with the Ministry helped to clarify a couple of key priority areas, including ensuring that all older people have free access to medical services in public facilities and improving the quality of health services specifically for older people.

One of the initial challenges related to policy incoherence that was encountered was a lack of clarity on whether a national policy of providing free healthcare to all older people was actually feasible. The Ministry of Health and Social Welfare's initial position was that free access to medical services should only be given to vulnerable older people. HelpAge helped to challenge this view by working with some champion district leaders who were able to share with the Ministry their experiences in order to inform what policies might be possible at the national level, and the government eventually accepted the universal vision as articulated in the policy targets for the National Strategy for Growth and Poverty Reduction (MKUKUTA 2). In other words, by facilitating platforms for communication and knowledge-sharing this approach helped to lead to a more coherent policy agenda, addressing the governance constraint of policy incoherence described in Section 2.

Improving accountability through building awareness and collective action

Along with the efforts described above to improve the coherence of the policy framework about older people's entitlement to health services, building awareness among older people about these rights has been a critical step in achieving improved implementation of national policies, thereby addressing the accountability constraint discussed in Section 2. As noted earlier, the environment of low awareness and low accountability has often meant that health facilities are able to continue extracting user fees from older patients in spite of the national policy that entitles older people to free services. Further, even though national policies require the provision of a number of health services specific to older people's needs (such as separate rooms/windows for older people or specific medicines), in practice these requirements are often unmet by local governments and health facilities responsible for their implementation.

The training and advocacy activities of HelpAge's partners and its network of older people have aimed to address this constraint through building awareness about these health entitlements in order to strengthen older people's ability to demand their rights, both individually and collectively. Working through Older Person Forums, older person advocates have in some cases been able to bring the concerns of older people in their communities directly to the attention of health facilities and the local government. HelpAge and its partners report many examples where collective action efforts have led to improved health service delivery for older people, including getting support from local governments to print clinical cards for older people and to more carefully monitor the availability of medicines for older people. PADI's experience provides an interesting example of the dynamics of collective action (see Box 3). However, it is difficult to assess the extent to which these efforts are being mainstreamed on a national scale, particularly in areas with less active older person groups.

Of course, this is not to imply that the problems discussed in this section have been completely solved, as much work certainly remains to be done. Many older people continue to have to pay for services that should be free or find that medicines they need are unavailable at public facilities. The persistence of some of these challenges in part reflects some of the limits of bottom-up approaches to accountability, in combination with challenges related to resource constraints, as discussed in Section 4.

Addressing top-down accountability through engagement and support at central levels

Importantly, local efforts to build bottom-up pressures for accountability in the provision of health services to older people have been accompanied by efforts to improve oversight capacity at the central level, addressing the top-down side of the accountability constraint. In particular, HelpAge has worked closely with the Ministry of Health and Social Welfare to establish a new geriatrics desk and focal person under the department of curative health services at the Ministry, as previously there was no dedicated position responsible for coordinating the provision of health services for older people. This had created gaps when decisions were agreed at high levels as there was no one to take follow-up action on instructions and it also meant that there was limited capacity to respond to the demands of older citizens on health issues. In order to ensure sustainability and government ownership HelpAge insisted that the position be funded through the government budget rather than with donor funds. There were also efforts to ensure that the position was filled by a relatively senior, experienced person with the ability to influence high-level decision-making. The desk is currently focusing on several issues, including the upgrading of the curriculum for health workers on geriatric care and its establishment is expected to help build the government's capacity to supervise the provision of health services for older people.

In another case, HelpAge's engagements at the central level have helped to spread awareness about innovative practices used by the District Medical Officer in the Magu district, who designed a creative scheme to reorganize the staffing plan at the district hospital in order to allow one staff member to focus on geriatric care. HelpAge facilitated a meeting with the Ministry of Health which resulted in all District Medical Officers and Regional Medical Officers being instructed to reorganize their medical personnel to enable more specialized attention for older person healthcare. Although the inconsistent availability of funds to provide an allowance for

the older person focal person at the council level has been a challenge, these examples helped to point out that a shortage of funds is not always a strong justification for poor attention to and oversight over older person issues.

In summary, HelpAge's efforts related to older people's health issues have aimed to address all three of the Unblocking Results governance constraints: policy incoherence, weak accountability mechanisms and a challenging environment for collective action to solve local problems. The approach of first reviewing existing policies at the national level and working towards addressing policy incoherence alongside carefully coordinated, well-timed efforts to build accountability through advocacy efforts and collective action led by older people themselves, has been particularly effective.

3.3 The implementation approach and enabling factors

As described above, HelpAge's overall approach to its programming in Tanzania began with a review of existing research and evidence on the situation and challenges confronted by older people in Tanzanian society, which was followed up by exploring feasible policy options in partnership with the relevant government ministries. Advocacy efforts have focused initially on achieving buy-in for reforms at the highest levels of government to address policy incoherence, and this has been accompanied by the engagement of older people in local-level advocacy efforts to build bottom-up pressures for accountability through a coordinated national movement.

This section provides a few specific examples that show how the implementation approach applied some of the key features, enabling the unblocking of the governance constraints in line with the Unblocking Results framework. The following enabling factors, summarized in Table 2, have been identified:

- building on existing policies and legal frameworks
- identifying and seizing windows of opportunity for advocacy activities
- facilitating platforms for older people to coordinate and lead a collective agenda
- using adaptive approaches to programme design and evaluation in response to changing governance dynamics and constraints.

Table 2: Enabling factors from the Unblocking Results framework

Enabling factor	Example of HelpAge's strategy
Building on what's there	- Building on existing legal and policy frameworks related to older people's income security and healthcare rights as a starting point (e.g. National Ageing Policy, MKUKUTA 1 and 2) - Focusing on strengthening the implementation of existing policies supporting older people
Windows of opportunity	- Taking advantage of opportune moments for advocacy and media coverage on older person issues (e.g. National Older Persons Day, MKUKUTA and the constitutional review process) - Maintaining close relationships with government partners to help identify good opportunities for policy traction
Acting as facilitators	- Supporting platforms for knowledge-sharing on innovative practices (e.g. staffing arrangements in Magu to support geriatric care) - Facilitating collective action by bearing the transaction costs (e.g. funding travel of older person advocates to visit government offices)
Adaptive approaches to programme evaluation	- Developing an evaluation strategy that recognizes the uncertainty inherent in doing advocacy work in the governance environment, so that HelpAge is not penalized for failing to achieve pre-specified targets due to factors beyond its control

Each of these enabling factors is discussed in more detail below with some examples to illustrate their role in unblocking results.

Building on existing policies and legal frameworks

HelpAge's mission is framed explicitly in terms of helping to support the implementation of existing policies and frameworks that support older people's rights, directly addressing the governance constraint of policy coherence. Its emphasis on strengthening the implementation of existing policies – in recognition that there is often a gap between policy design and progress in implementation – has been helpful for building support from the government and other actors for older person issues as part of a common shared agenda. The effective presentation of core findings from existing research and data, including efforts to involve the government directly in research activities, has played an important role in building a coalition in support of evidence-based policy change.

Identifying and seizing windows of opportunity for advocacy activities

Identifying windows of opportunities for reform has been an important element of the strategy for working politically, cutting across all of the governance constraints, and this enabling factor has been particularly useful in addressing the accountability constraint. One example was when HelpAge exploited the timing of National Older Persons Day by supporting a group of older people to directly confront the Prime Minister and secure his commitment to pass universal pension reform; the representative we interviewed from the Ministry of Labour, Employment and Youth Development noted that this high-level commitment has been putting pressure on the Ministry to deliver results on pension reform sooner than planned. HelpAge, along with some older person advocates, was also recently able to seize an opportunity to present their views to the constitutional commission in order to ensure that older people's views are represented in the constitutional review process currently being undertaken. Another example is the efforts to help ensure that older person issues were included as part of the initial MKUKUTA process. An example of PADI's success in seizing windows of opportunity has allowed it to participate in budget sessions, which have been enabled by its close relationships with government. HelpAge and PADI's use of the media at key moments to strengthen advocacy efforts provides a further illustration of seizing windows of opportunity to build pressures for accountability (see Box 4).

The flexibility of AcT's funding model – where its partner organizations are provided with budget support rather than support for specific projects – has enabled HelpAge to have the agility to seize such opportunities which may not always be foreseen or included in pre-specified project activity plans. The extent to which the flexibility of AcT's model has trickled down to the level of the 'partners of its partners' is unclear, however, as much of the aid PADI receives from HelpAge is for projects rather than budget support; PADI needs to meet different reporting requirements from multiple donors and thus often channels each donor's funds separately to specific projects or geographic areas.

> **Box 4: Seizing opportunities to use the media to build pressures for accountability**
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> HelpAge has worked closely with the media to create awareness of older person issues and, perhaps more uniquely, the media has also been used as a tool to monitor progress of the government on its commitments to helping older people. Rather than just sending off one-time stories for the media to publish, which is perhaps a more typical strategy used by CSOs and NGOs, HelpAge has worked with specific journalists repeatedly over time who have developed specialized knowledge of older person issues and who can monitor progress on these issues. Some of the media coverage that is reported to have gained the most attention includes a few documentaries produced on issues including the provision of free medical services for older people, and murders of older people due to witchcraft-related allegations. HelpAge's use of live media has been limited, however in a couple of key instances live coverage helped to capture its advocacy in action, such as when older people asked questions directly to the Prime Minister during the celebration of National Older Persons Day.
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> PADI has also demonstrated some innovative uses of local media to address accountability constraints. Working closely with a group of journalists at different media outlets, the media has helped to spread awareness on PADI's work and the agenda of older people in the region. In particular, the media recently helped to heighten awareness of the universal pension agenda by broadcasting perspectives from the

government and from older people directly. When older people went to present the signed petition advocating for universal pension rights described above, for instance, media coverage of the event helped to increase awareness.

Facilitating platforms for older people to coordinate and lead a collective agenda

A key enabling factor noted throughout the case study is HelpAge's emphasis on serving as a facilitator for change with older people at the centre of the movement. Recognizing the barriers that exist to collective action, an important role for organizations such as AcT and HelpAge has been to strengthen the political voice of older people and improve their ability to coordinate a collective agenda and action plan. Through helping to bear some of the transaction costs of coordinating a collective movement, such as the funding of training and travel, HelpAge's role has helped to support platforms for collective action. Box 5 includes some examples of PADI's role in facilitating change and supporting platforms for collective action.

Box 5: PADI's strategy of facilitating change and supporting platforms for collective action

Several of the strategies that PADI has used to navigate the governance environment align with enabling factors emphasized in the Unblocking Results series, including its role in acting as a facilitator for change by building platforms for collective action and local problem-solving.

PADI's role as a facilitator can be seen in its work to activate Older Person Forums at the village level that are responsible for advocacy on older person issues. Although these structures are mandated in the National Ageing Policy, as noted earlier in this report, in practice they have often not been active. PADI initiated the formation of these structures in collaboration with the government. Initially PADI representatives used to chair these meetings, however, since 2008, Older Person Forums have been working independently under the leadership of older community members, with PADI only playing a supportive role in helping to build their capacity for advocacy. This facilitating role in supporting platforms for improved communication and coordination among older people, who are at the centre of the movement, aligns with HelpAge's approach.

Another example of PADI's strategy of facilitating platforms for discussion and collective action can be seen in its efforts to support the nationwide pension reform lobbying process, by training older person advocates and helping to support their advocacy efforts. While there has been clear progress at the central level with the recent commitments from the Prime Minster about pension reform, PADI's approach aims to engage a wider network of older people with the issue throughout the country to apply continued pressures on the government to make the budgetary commitments needed to fulfil its promises. One such initiative, in collaboration with the Tanzanian Social Protection Network, involved leading a delegation of older person leaders from Songea to present their views on pension reform and other issues to Members of Parliament in Dodoma and to the head of CCM. Another example is that Older Person Forums recently visited the District Commissioner and Regional Commissioner to present over 60,000 signatures collected from a petition in support of a universal social pension.

Using adaptive approaches to programme evaluation in response to changing governance dynamics and constraints

HelpAge's monitoring and evaluation strategy combines a performance monitoring matrix with outcome mapping and a logical framework as well as annual operational plans, reflecting the requirements of different funders. HelpAge's use of qualitative narrative reports to document intermediate achievements has been quite helpful as a supplement to its reporting using a logical framework, which focuses more on quantitative indicators of progress. This is particularly as many of the key goals such as achieving universal pension reform and other legal and institutional changes are long-term goals with high levels of uncertainty attached. AcT's approach to evaluation, including the use of outcome mapping, has been useful given the programme's goals and the inherently dynamic nature of the types of challenges being addressed. The evaluation approach reflects a recognition emphasized by AcT that many of the governance-related goals of organizations such as HelpAge inherently depend on factors that often lie beyond the boundaries of what the organization can directly control,

particularly given the dynamics of the governance environment. The strategy avoids punishing HelpAge by withdrawing funds in such cases as long as reasonable efforts can be demonstrated.

AcT's expectation that outcome mapping should help to reduce and simplify the reporting burdens of its partners does not appear to have been achieved in the case of HelpAge, however. Rather than replacing the use of traditional logical frameworks, outcome mapping has become a required reporting format in addition to other reporting formats required by other donors. Further, since the information required for outcome mapping typically has to come from the levels of the organization closest to the ground, the added administrative burdens have fallen in part on the shoulders of HelpAge's local partner organizations in the field. And their resources and capacity available for monitoring is typically weak, relative to the headquarters office.

4 Challenges

This section discusses some of the challenges HelpAge has faced, many of which are related to the complex governance environment in which the organization operates.

HelpAge's advocacy efforts have been hindered by the slow pace of national-level reform processes due to policy incoherence and resource shortages. In spite of the progress achieved in reducing policy incoherence related to older people's income security and healthcare rights, the realization of the government's commitments in these areas has faced ongoing delays and coordination obstacles. Lack of financing has exacerbated the challenge of policy incoherence. For instance, in the area of income security, advocacy from HelpAge and older people has helped lead to high-level commitments from the government to follow up on existing policy frameworks by creating a detailed plan for implementing and financing a universal social pension, but progress has remained slow. Similarly, in the health sector, resource shortages have slowed the implementation of policy reforms benefiting older people, particularly human resource constraints such as the lack of expertise to lead trainings and curricular changes related to geriatric issues. Some districts have managed to overcome finance constraints through innovative models to use existing resources more efficiently, as in the case of the Magu district realignment of staff to heighten the focus on geriatric care. In some cases, however, it has been impossible for national policies to be implemented with current levels of resources – for instance, the official requirement that every government health facility should have a separate window or room for older people is impossible in practice, given that many dispensaries only have one room.

Maintaining the right balance between working collaboratively with the government while retaining the ability to use more confrontational strategies if needed. The close relationships HelpAge and its partners have developed with relevant officials in local and national government seem to be leading to greater receptivity to policy advice and ultimately better chances of getting action from the government than might be possible without such links. At the same time, ensuring that the agenda of older people is not taken over by political interests concerned with mobilizing the vote remains a challenge particularly for HelpAge's partners and Older Person Forums at local levels. It was noted that some of the *wazee* leaders and Older Person Forums have been approached by different political parties hoping to use these platforms to mobilize voters, –therefore maintaining political neutrality can be challenging.

Identifying key windows of opportunity for action. Although there have been some clear cases where windows have been effectively identified and acted upon, there has been at least one case where a window was missed. In some cases, HelpAge and the networks of older person advocates throughout the country have been very effective in identifying timely opportunities to hold the government accountable to its older citizens, such as through efforts to help ensure that older person issues were included as part of the initial MKUKUTA process. Another example was when HelpAge exploited the timing of National Older Persons Day by supporting a group of older people to directly confront the Prime Minister and achieve his commitment to pass universal pension reform. In another case, however, a key window of opportunity was missed when a file delivered by HelpAge with information to inform the universal pension plan sat on the minister's desk during the pre-budget session and thus was not included, in spite of stated support. Maintaining close relationships with partners in government is critical to stay updated on the latest developments and avoid missing future windows of opportunity.

The representativeness of HelpAge's agenda for older person issues. HelpAge emphasizes that the advocacy efforts of its partner organizations are driven by the agenda of older people rather than representing a singular agenda initiated by HelpAge. However, some criticisms have been raised as to whether this agenda adequately represents the interests of all old people, including the needs of vulnerable groups such as women, the disabled, and the poor. In particular, one issue identified is the need for greater attention to specific issues affecting older

women; at the time of writing, a gender consultant had been hired to provide support in this area. Also, some of the older people who have been trained as advocates for HelpAge and its partner organizations appear to be relatively well-educated and better off socio-economically; many of the older person advocates involved with PADI's work who were interviewed for the research were retired government officials, for instance. While this certainly does not imply that the agenda is not in line with the interests of the poorest segments of society – and in some ways their knowledge of how the government works may put them in a stronger position as advocates – it emphasizes the need for HelpAge to continually evaluate the impacts of its programming on the most vulnerable groups and to try to ensure their participation in collective activities. Building wider coalitions with other vulnerable groups that share common interests is also expected to help strengthen the movement.

5 Lessons and conclusions

This report has highlighted how HelpAge and AcT have designed and implemented their programming strategies and objectives in ways that explicitly consider and can flexibly adapt to the complex dynamics of the surrounding governance environment. As noted in Section 2, some of the relevant characteristics of the enabling environment include low levels of policy and institutional coherence, weak top-down and bottom-up accountability mechanisms, and a difficult enabling environment for locally anchored problem-solving and collective action. Working in the context of these governance challenges, HelpAge has been able to contribute to notable progress in elevating the political prioritization of pension reform and improved provision of health services for older people. The strategy has aimed to address policy incoherence at high levels while also complementing these efforts with collective action and advocacy activities to build accountability. Essentially, smart advocacy techniques reflecting a solid understanding of how the system works have been key to HelpAge's effectiveness in addressing the governance constraints it has faced.

Overall, our analysis finds that HelpAge has been particularly effective in working with the central government to address challenges relating to policy incoherence. The strategy to achieve this has involved partnering with the government to identify clear and timely policy reform options that are evidence-based in addition to being politically feasible, while also helping to develop strategies to support the implementation of these policies. Given the top-down nature of policy-making in Tanzania, the strategy recognizes that high-level support within government for reforms is important to achieving change. At the same time, given the political environment of weak accountability where decision-makers sometimes lack incentives to focus on the needs of older people, grassroots advocacy efforts at local levels to engage older people in collective action have been quite important to hold leaders accountable for their policy commitments.

Many of HelpAge's advocacy efforts have targeted the central government, recognizing that high-level support for reform is a critical enabler of change at lower levels. At the same time, an important strategy has also been to involve local governments and communities in building awareness about older people's entitlements according to national policies, so that they are better equipped to ensure these entitlements are provided. In turn, this has been complemented with efforts to capture and share innovative policy developments from local levels with central policy-makers in order to help inform nationwide policies. The benefits in terms of the potential policy impact resulting from HelpAge's advocacy model – with its significant emphasis on lobbying at the level of the central government, complemented by these linked local-level strategies – have important implications for AcT and its partners, who reportedly have tended to focus slightly more on local-level advocacy approaches overall. The potentially huge nationwide impacts that could be achieved from pension reform also imply potentially high value for money from HelpAge's activities.

A key point overall is that Tanzania faces a wide number of governance constraints and resource constraints, which lead to hard policy choices. In addition to this there are specific issues for older people, in terms of their own activism and visibility and the politics of pension/welfare reform. As such, 'business as usual' approaches are likely to be ineffective and different ways of working are needed.

To conclude, some lessons learned from AcT and HelpAge's strategies to address these governance constraints, which may be relevant to other CSOs and aid organizations working to strengthen governance and accountability, can be summarized as follows:

- **Building on existing policies and legal frameworks.** HelpAge's mission is framed explicitly in terms of helping to support the implementation of existing policies and frameworks that support older people's rights. Its emphasis on strengthening the implementation of existing policies recognizes that there is often a gap between policy design and progress in implementation. When

working to initiate several new policy initiatives, such as pension reform and the upgrading of geriatric health services, an important element of the strategy has been efforts to build on previous progress with an eye toward addressing policy incoherence, and the focus has been on strengthening policy implementation rather than solely focusing on policy content.

- **Identifying and seizing windows of opportunity for advocacy activities.** HelpAge has encouraged its partners and stakeholders to keep a close eye on policy developments relevant to older people at both local and national levels in order to take advantage of key opportunities to hold leaders accountable. The approach of connecting lobbying activities at the central level with a wider movement engaging older people in advocacy at local levels, has helped to strengthen links that are often missing between top-down and bottom-up accountability mechanisms.

- **Facilitating platforms for older people to coordinate and lead a collective agenda.** HelpAge's provision of training on the rights and entitlements of older people according to national policies and legal frameworks – as well as providing training in effective advocacy techniques – has been a key strategy to improve collective action. Ensuring that older people are at the centre of the movement and stepping back when needed to allow local stakeholders to take credit and ownership for the achievements has also been important.

- **Using adaptive approaches to programme evaluation in response to changing governance dynamics and constraints.** An important feature of AcT's model involves empowering its partners with sufficient flexibility for programming strategies and targets to be adjusted as needed in response to learning and/or shifts in the governance environment. This has been particularly beneficial for HelpAge given that several of its core advocacy goals such as achieving universal pension reform involve an inherently high level of uncertainty surrounding the expected timeline and attribution for outcomes achieved is difficult. At the same time, a continuing challenge entails enabling the benefits of this flexible approach and the minimized reporting burdens to trickle down to the 'partners of AcT's partners' level (for example, organizations like PADI), particularly within an environment like Tanzania where so many different donors are operating.

Taking the lessons from this report a step further, there is room to reflect on the overall implications to the donor community of AcT's approach to aid in a governance environment such as Tanzania. In response to growing frustration with corruption and poor governance in Tanzania that has been a key constraint to aid effectiveness, the recent response of some donors has been to shift from giving budget support back to project-based aid models that emphasize tighter conditions and monitoring. AcT's model suggests there is potential within such environments for an alternative approach. The approach invests energies up-front to rigorously select partner organizations with effective leaders committed to their causes, while providing support to strengthen core capacities early on and on an ongoing basis as needed. In the case of HelpAge, which is one of the larger and more established organizations funded by AcT, AcT has been able to apply a 'lighter touch' approach to monitoring and technical assistance, as HelpAge has had strong internal capacity to design and evaluate its programming. AcT initially had more frequent interactions with HelpAge during the planning phases when the programme started while the current levels of interaction are typically concentrated around reporting times every six months.

In other words, rather than responding to the risky governance environment by attaching greater constraints to aid packages, the approach has empowered AcT's partner organizations with the flexibility needed to effectively respond and adapt to the changing dynamics of the governance environment. In doing so, perhaps somewhat surprisingly, this more flexible approach at the same time seems to have potential to reduce the risks that are of concern to donors. HelpAge's position as a relatively established organization already demonstrating success may be a caveat to the potential for this type of model to achieve similar results in other contexts, however, as the potential risks of using such a model might be greater with less established CSOs.

References

Accountability Tanzania (AcT) *Mid-Term Review* (2012). Department for International Development.

Afrobarometer-REPOA (2012). 'Progress on Mkukuta: Results from the Afrobarometer Round 5 Survey in Tanzania.' http://www.afrobarometer.org/files/documents/media_briefing/tan_r5_presentation1_21nov12.pdf

Booth, D. (2012). 'Development as a Collective Action Problem.' Available at http://institutions-africa.org.

Chambers, V. , Harris, D., King, and Wild, L. (2012). 'Common constraints and incentive problems in public service delivery.' London: Overseas Development Institute.

Dyer, K. (2012). 'Theory of Change, Outcome Mapping and AcT's Logical Framework'. AcT Programme think piece.

Dyer, K. (2012). 'Making "Evidence" the Plural of "Anecdote": A work in progress using Outcome Mapping and the Logframe in governance and accountability programming in Tanzania'. OM Ideas Brief No. 6 (November 2012).

Earl, S., Carden, F. and Smutylo, T. (2001). 'Outcome Mapping: Building Learning and Reflection into Development Programs.' International Development Research Center.

Fjeldstad, O., Katera, L. and Ngalewa, E. and (2010). 'Planning in Local Government Authorities in Tanzania: Bottom-up Meets Top-down'. REPOA Brief No.18.

Foresti, M. and Wild, L. (2013). 'Working with the Politics: how to improve public services for the poor.' London: Overseas Development Institute.
HelpAge Country Report (2010-2015).

Global AgeWatch Index (2013). HelpAge, UNFPA, and Sussex University.

Government of Tanzania/DANIDA (2009). 'Health Sector Programme Support HSPS IV (2009 – 2014). Annex 1: Support to the health sector in Mainland.'

Harris, D. (2013). 'Applied Political Economy Analysis: A Problem-Driven Framework'. London: Overseas Development Institute.

Health Sector Performance Profile (HSPP) 2011-2012. Ministry of Health and Social Welfare, Tanzania Mainland.

Hearn, S. and Mapunda, K. (2012). 'Strengthening Civil Society in Tanzania: Is outcome mapping helping the AcT programme and its partners influence change?' London: Overseas Development Institute.

HelpAge Country Strategy: 2010-2015. HelpAge International in Tanzania. Internal document.

HelpAge International (2013). Accountability in Tanzania (AcT) Programme Annual Operational Report: July 2012 – March 2013.

HelpAge International (2013). Accountability in Tanzania (AcT) Programme Annual Operational Report: April 2013 – September 2013.

Hoffman, B. (2013). 'Political Economy of Tanzania'. Center for Democracy and Civil Society, Georgetown University.

Hoffman, B. and Robinson, L. (2009). 'Tanzania's Missing Opposition', *Journal of Democracy*, Volume 20, Number 4, October, pp.123-136.

Hussmann, K. and Mmuya, M. (2007). 'Anti-corruption policy making in practice: Tanzania – A Country Case Study.' U4 REPORT 1:2007 PART 2E.

Hyden, G. (2005). 'Why Do Things Happen The Way They Do? A Power Analysis of Tanzania.'

Ifakara Health Institute (2013). 'Tanzania Service Availability and Readiness Assessment (SARA) 2012 – Final Report.'

Mangalila, E., Swai, J., Tomias, J., Wales, J; and Wild, L. (2014). 'Stock outs of Essential Medicines in Tanzania'. London: Overseas Development Institute.

Mboghoina, T. and Osberg, L (2010). 'Social Protection of the Elderly in Tanzania: Current Status and Future Possibilities.' Research on Poverty Alleviation (REPOA) Special Paper 10/5.

Ministry of Health and Social Welfare, Tanzania (2008). 'Human Resources for Health Strategic Plan 2008-2013'.

Ministry of Health and Social Welfare, Tanzania (2013). 'Mid Term Review of the Health Sector Strategic Plan III 2009-2015 Health Services'.

Ministry of Labour Employment and Youth Development & HelpAge International (2010). 'A Study into the Feasibility of a Universal Social Pension'.

National Strategy for Growth and Poverty Reduction (MKUKUTA 2) (2010-2015), Government of Tanzania.

OPM-REPOA- Chr. Michelsen Institute (2005a). 'Understanding patterns of accountability in Tanzania - Component 3: Analysis of values, incentives and power relations in the budget allocation process'.

OPM-REPOA- Chr. Michelsen Institute (2005b). 'Understanding patterns of accountability in Tanzania -Component 2: The bottom-up perspective'.

Poverty and Human Development Report (PHDR 2007). MKUKUTA Sekretariat and Research on Poverty Alleviation (REPOA).

'Tanzania Governance Review 2011-2012: Transparency with Impunity?' Tanzania Policy Forum.

Tavakoli, H,. Simson, R. and Tilley, H. with Booth, D. (2013). 'Unblocking Results: using aid to address governance constraints in public service delivery.' London: Overseas Development Institute.

Tilley, H. (2013). 'Unblocking Results case study: Rural water in Tanzania.' London: Overseas Development Institute.

USAID (2011). 'Tanzania Health System Assessment 2010'.

USAID (2013). 'Tanzania: Strategic Review of the National Supply Chain for Health Commodities'.

Views of the People Survey (2007). Commissioned by MKUKUTA Monitoring Sekretariat to REPOA.

Annex 1: Features of AcT's model

AcT's theory of change articulates this vision: 'If civil society grantees are carefully selected and respond to individual support tailored to their programming and internal systems, they will be able to develop targeted strategic interventions which are sensitive to changes over time and in the broader political economy, as well as their geographic location, their sector, institutional mandate, and values…' (outcome mapping brief). The rigorous, competitive process of selecting its partners allows AcT to work more intensively with its CSO partners initially and then take a more hands-off approach when the capacity of its partners improves. The AcT programme is managed and implemented by an intermediary fund manager, KPMG, as they have been considered better able to provide the type of tailored support needed for its partners than a larger organization such as DfID would be positioned to give itself, particularly given the relatively small size of grants yet large number of grantees. Since building capacity of CSOs is a goal itself, AcT can use a more supportive approach than some donors and therefore avoid cutting off partners for reasons related to limited capacity. The theory of change also emphasizes AcT's openness to allowing its partners to design their own programming strategies with a view that these organizations are better equipped to understand the governance context they are working in and to apply this knowledge toward shaping their sectoral and governance goals.

AcT's approach to evaluation includes a substantial focus on intermediate, short-term achievements in addition to long-term outcomes, aims to enable AcT's partners to learn and adapt their programming strategies as needed over time rather than rigidly committing them to a set of pre-determined targets in advance. The evaluation process, which involves the use of Outcome Mapping tools, considers the wide range of factors that can affect its partners' success in achieving their goals, and aims to assess progress of its partners on the basis of reasonable efforts made rather than solely on impacts achieved. In theory, this approach makes sense for evaluating governance projects in a complex, multi-stakeholder environment such as Tanzania where outcomes such as the effects of lobbying or advocacy are inherently uncertain, results are unlikely to be achieved in a predictable or linear fashion, and attribution is difficult. HelpAge's use of outcome mapping seems to have had some positive influence on the organization's ability to flexibly adapt its programming strategy in response to the latest developments and windows of opportunities that have emerged. One challenge, however, is that AcT is only one of several organizations funding HelpAge, and in turn HelpAge's partner organizations also typically receive funds from multiple donors, who have not all been willing to accept a similar reporting format. In practice, this means that outcome mapping has imposed an additional administrative burden on HelpAge and its partners.

Annex 2: Unblocking Results methodology

This case study is part of a series of case studies that comprise the second phase of a research project that studies the interaction between constraints and aid packages in particular country contexts and explores how the design and delivery features of aid programmes address such constraints. It builds on earlier ODI research by Booth (2010) and Wild et al. (2012) that categorises typical constraints and incentive problems to service delivery, and shows that a number of common constraints underlie much of the variation in service delivery performance in developing countries, Table 1.[10]

Table 1: Governance constraints and effects

Governance constraint	Explanation	Common effects
Policy and institutional incoherence	Unclear and duplicated mandates Policy and resource frameworks in conflict	Incentives for staff to either refrain from implementing policies, or simultaneously pursue several conflicting policies at once
Poor top-down performance disciplines and bottom-up accountability mechanisms	Weak top-down and bottom-up accountability mechanisms	Rules not developed or enforced, instructions are not followed and functions are not carried out
Limited scope for problem-solving and local collective action solutions	Groups are not acting together to produce solutions that are appropriate and in the collective interest.	Result in the under or over-utilisation of services, and are associated with a longstanding disrepair of shared goods

This research does not aim to evaluate the programmes against their stated objectives, nor measure their impact. Rather it examines the types of aid-funded activities that seem most relevant to improving governance constraints, making some speculative conclusions about their ability to do so as well as about the elements of the design and implementation approach that have facilitated the execution of these activities. This will aim to increase our understanding of what aid can do to best feed into domestic change processes in-country.

The research questions are presented in Box 1.

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[10] While the development community has long recognised that weak governance and incentive problems hinder the delivery of broad-based public services in developing countries (Keefer and Khemani, 2003; World Bank, 2004; Collier, 2007), the last decade has seen a growth in research that seeks to understand and diagnose the nature of these governance problems.

The prevalence of the governance constraints were analysed ex ante and ex post, considering the indicators in Table 2, where they were relevant to the specific case study. The research explored the extent to which observed gaps in service delivery are bridged by the intervention. Institutional arrangements such as a poor policy process or system for making decisions may negatively impact on service delivery, as may a lack of capacity, insufficient staff with the required knowledge and skills. These are both relatively tractable, types of problems that aid can help solve. However, if the problems reside in deeper problems of political economy and incentives, it may be more difficult for aid intervention to have any impact.

Table 2: Assessment of situation before and after the intervention

Governance constraints	Indicators
Degree of a coherent vision	• Well-defined mandates • No-overlapping jurisdictions among all or some of the organisations involved in providing public services • Absence of perverse incentives confronting actors within particular organisations. Perverse incentives are often as a result of incomplete implementation of a new policy and/or the simultaneous pursuit of several policies for which practical purposes are in conflict • Disparity between stated public policy and revealed policy (as apparent from policy implementation)
Extent of effective top-down performance disciplines and bottom-up accountability mechanism	• Site visits by supervising authorities, particularly senior political leaders or officials • Resistance to interference by minor politicians outside the chain of command • A palpable sense of being monitored in terms of inputs, outputs or outcomes • Actual examples of staff or higher officials being rewarded or punished for their performance • Monitoring by direct (or indirect users) and the existence of feedback mechanisms • Users (direct or indirect) involved in setting the standards of provision • Monitoring mechanisms that build on traditional institutions or norms (such as honour and shame) • The degree of exit/opting out from the users
Availability of 'locally	Institutions enabling collective action: • are problem–solving in the relevant context i.e. Institutions of collective action are

anchored' solutions (not necessarily just at the front line)	ones that have been arrived at locally and which specifically address the obstacles that have arisen locally • make use of institutional elements inherited in the past i.e. draw on previous experience or make use of institutional elements that have been employed in the past

Phase 1 found that there are six 'enabling factors' that appear to have allowed the aid-funded activities to obtain traction and nudge forward institutional change that is conducive to the improved delivery of results. These provide clear implications for the design and implementation of aid packages that seek to address service delivery blockages (Table 3). This study explored the extent to which these were relevant to the intervention, along with any other emerging features.

Table 3: Enabling factors

ENABLING FACTOR	CURRENT PRACTICE (STYLIZED)	PROPOSED PRACTICE
Windows of opportunity	Country strategies based on needs assessments	Weigh need against opportunity to affect change
Tangible political payoffs	Reluctance to have projects associated with political platforms/agendas	Accept that aid is inherently political and work with the political incentive structure
Building on what's there	Tendency to want to start afresh with a revised legal, policy or regulatory framework	Get existing framework implemented, however imperfectly, and then adjust
Moving beyond policy advice	Technical Assistance (TA) engaged to advise on the content of policies	TA engaged to support implementation of policies
Acting as facilitators	External agents provide sound technocratic advice for governments to 'take or leave'	External agents help to facilitate and mediate a local dialogue about problems and solutions
Adaptive and responsive to lessons learnt	Pre-defined logical frameworks that lock donors and implementers into a set of activities	Flexible frameworks that judge performance on the basis of a sensible effort, rather than pre-defined targets

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