

Fulfilling the mission

A review of 20 ITTO diagnostic missions finds flaws in the program and recommends improvements

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Community diagnosis: Greater involvement of local communities (like this one in Peru) was recommended by many missions.
Photo: INRENA

In November 2000 the International Tropical Timber Council (ITTC), under Decision 2(xxix), authorized ITTO's Executive Director "to render assistance to producer countries, on request, to identify, in each country, those factors which most severely limit progress towards achieving Objective 2000 and sustainable forest management and to formulate an action plan to overcome these constraints".

Objective 2000 is a commitment by ITTO member countries to move "as rapidly as possible towards achieving exports of tropical timber and timber products from sustainably managed sources". A review of progress towards this objective in 2000 (Poore and Thang, 2000) proposed "short diagnostic missions" to countries with a view to deciding "where assistance can be most effectively and economically targeted." Decision 2(xxix) provided the authority and financial resources for such missions to be carried out.

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In November 2006, the Council decided to review the effectiveness of the diagnostic missions (DMs) that had subsequently been conducted. Two international consultants¹, including the current author, and six national consultants² were appointed to undertake the review, and eleven additional local consultants were employed to assist the governmental agencies to complete country questionnaires. The review was carried out between August

2008 and May 2009 on the 20 diagnostic missions that had been completed by the end of 2007 (see table). This article synthesizes its results, which were presented to the ITTC at the end of 2009.

Wide ranging: Diagnostic missions, 2001–07

Region	Country	Mission date
Africa	Republic of Congo	October 2001
	Central African Republic	March 2002
	Gabon	January 2005
	Liberia	May 2005
	Nigeria	August 2007
Asia and the Pacific	Indonesia	September 2001
	Philippines	May 2003
	Cambodia	September 2004
	Fiji	October 2004
	Thailand	March 2006
	India	April 2006
	Papua New Guinea	February 2007
	Latin America and the Caribbean	Brazil
Guyana		October 2002
Trinidad and Tobago		December 2002
Peru		June 2003
Suriname		August 2003
Ecuador		April 2004
Panama		August 2004
Mexico		May 2005

¹ Marc J. Dourojeanni (Peru) and Willy Delvingt (Belgium).

² Georges Ngasse (Central African Republic), Angelique Loukondo (deceased during her assignment) and Basile Mpati (Congo), Hour Limchhun (Cambodia), Dody Sukadri (Indonesia), Cecilia do Prado (Brazil) and Dimas Arcia (Panama).

Methodology

The key terms of reference for each of the diagnostic missions were to:

- identify the factors that are most critical in preventing the attainment of sustainable forest management (SFM) in the country
- assemble those constraints in order of importance
- recommend a sequence of actions to remove the constraints, providing cost estimates whenever possible.

In reviewing the missions, the ITTO secretariat suggested the following basic methodology:

- the preparation of six country case studies, one by each of the six national consultants, and visits by the international consultants for direct consultations
- a structured questionnaire for the relevant forest authority in each country for which a diagnostic mission was conducted
- a questionnaire for all consultants participating in the diagnostic missions.

The countries selected as case studies were Brazil, Cambodia, Central African Republic, Congo, Indonesia and Panama.

The key issue for the review was the effectiveness of the diagnostic missions, and the main measure of this was taken to be the extent to which the recommendations of each mission had been implemented. All other aspects, such as the acceptance of recommendations and the quality or methodology of the reports, would become largely irrelevant if the recommendations had not been implemented.

Results

Forest authorities

The questionnaires sent to relevant forest authorities focused on the extent to which the recommendations of the diagnostic missions had been accepted and implemented. Overall, for those countries that responded to the questionnaire, 403 (84%) of the 482 recommendations were “fully accepted”, but only 73 (18%) of those fully accepted recommendations were declared to have been “fully implemented”. Six forest authorities declared that none of the recommendations of the relevant diagnostic missions had been fully implemented.

The results of the six case studies confirmed this overall finding. In total, forest authorities in the case-study countries claimed in questionnaires that 21% of the accepted recommendations had been “fully implemented”. However, further discussions with authorities and other stakeholders revealed that the actual figure was probably closer to 6%. Most recommendations were viewed as “being implemented”, a fair but not fully satisfactory answer given that the time that had elapsed since the undertaking of the missions (four to seven years, depending on the country) had been sufficiently long for the full implementation of most recommendations.

In responses to questionnaires and interviews conducted during the case studies, a number of forest authorities expressed “high satisfaction” with the usefulness of the diagnostic missions. However, only three of those forest authorities responded positively to the question “is the diagnostic mission report being used by governmental staff and other stakeholders for planning and future actions?”; two responded “no” and six “not quite”.

The case studies revealed that with, the exception of Indonesia, the diagnostic-mission reports were not known by current forest authorities or stakeholders (in Indonesia the report had been translated and made available as a booklet and on the internet). Responses from countries regarding the contributions of the diagnostic missions to the improvement of knowledge and innovation were not positive. However, most recommendations were considered realistic and applicable in their national contexts.

Team members

The questionnaire to team leaders and other team members revealed satisfaction with local arrangements for missions, access to forest authorities, the number of team members, the contributions of local consultants, and ITTO secretariat support, and there were no serious language difficulties. Nevertheless, some respondents favored longer missions to disseminate results and also brief preparatory missions. The satisfaction of team leaders and other team members was less evident with regard to the terms of reference of the missions, pre-mission communication, the availability of technical information and the selection of team members. Clear dissatisfaction was expressed with regard to access to non-forestry authorities and also to relevant non-government stakeholders.

In some cases there were significant differences between the responses of team leaders and those of other members of the team. This was especially the case regarding the terms of reference: these were considered to be “not fully realistic and viable” by 44% of team leaders but “realistic and viable” by 73% of other team members. More than half (56%) of team leaders regretted a lack of opportunity to participate in the selection of other members of the team. While 75% of team leaders considered that adequate time was allocated to the missions, 50% of other team members considered that it was insufficient.

To the question “In your opinion...did the Government really endorse the DM report?”, 50% of team leaders and 60% of other team members responded “no” or “not quite”. To the question “In your opinion...did the forestry sector have the political capacity to adopt DM’s policy proposals?”, 57% of team leaders responded “no” or “not quite”.

Quality of reports

A quantified analysis of the 20 diagnostic-mission reports suggested that few missions respected their terms of reference. Several reports discuss the meaning of the expression “factors that are most critical” and especially the

viability of identifying one or a few recommendations to tackle them. Most decided to take a “business-as-usual” approach, meaning they would cover all aspects of forestry.

This decision generally produced a wide range of identified constraints and resultant recommendations, a fact that was criticized by forest authorities during case studies. In total the 20 diagnostic missions produced 502 recommendations (an average of 25 per country) and as many as 633 if those embedded in other recommendations are taken into account. One diagnostic mission made only six recommendations but another made 52. About half (49%) of the recommendations were of a policy nature, 24% were technical and 27% constituted project proposals. In general the diagnostic missions avoided dealing with issues outside the forest sector, even though they recognized that many of the constraints to SFM—such as a lack of certainty around land tenure and socioeconomic/political factors—required change beyond the forest sector.

Each of the 20 diagnostic-mission reports adopted a unique format and structure, making comparisons difficult. Most reports were well-written but, in the opinion of the reviewers, nearly half (45%) were too long (over 100 pages plus attachments) and 55% had inadequate summaries. Recommendations were often undifferentiated from general comments or suggestions. A few reports (mostly from Africa) focused on a limited set of key issues but the majority applied a very broad approach. The reviewers rated the level of innovation in the recommendations as low but the level of realism or viability as high.

ITTO projects

Another indicator of the effectiveness of the diagnostic missions is the extent to which they induced more and better project submissions to ITTO. Of the 137 projects proposed by diagnostic missions, only 24 project proposals (18%) were submitted to ITTO and, of those, only ten (7%) were approved and executed. Those countries that received diagnostic missions subsequently submitted, in total, 71 project proposals not visibly connected with the missions. The project recommendations of the diagnostic missions were most effective in Africa, where 26% of projects proposed by missions were ultimately submitted to ITTO.

Interpretation of results

Undeniably, the combined result of the 20 diagnostic missions constitutes a unique piece of information on the situation of SFM in the tropics that is certainly helpful to those interested in the subject. By most parameters used in this assessment, however, the diagnostic exercise was unsuccessful because it did not achieve a reasonable level of implementation of the accepted recommendations, it was not particularly innovative, and it did not significantly add to knowledge, increase awareness, or allow for more and better ITTO projects. Nor were the diagnostic-mission reports adequately validated, disseminated or put to use in-country; they were often described by those who were aware of them as “lacking focus”.

Paradoxically, however, the diagnostic missions may have been very efficient in terms of their cost/benefit because the implementation of only one or a few recommendations in one or more countries could have rendered economic benefits many times greater than the small total amount invested by ITTO (about US\$2 million). From this point of view, the diagnostic missions may be qualified as very successful.

Another valid interpretation of the diagnostic missions is that, while they may not have yielded the best possible outcomes, they have been no less

successful than other similar, much more ambitious, time-consuming and costly exercises conducted in tropical countries since the launch of the Tropical Forest Action Plan in the 1980s. In conclusion, the diagnostic missions have probably been a valid undertaking and a worthwhile use of funds, but with differences in design they could have been considerably more effective.

The two major deficiencies of the diagnostic missions may be categorized as follows:

- The original idea of the diagnostic missions underwent progressive changes and, when applied in the field, the missions frequently became much larger and somehow unbalanced conventional forest planning exercises. Some suggestions in the terms of reference may have not been fully in line with the basic objective of “identifying the factors that are most critical”, unintentionally encouraging a dispersion of focus. Therefore, the key deficiency of most diagnostic missions may be summarized as a failure to provide a clear list of the main constraints and corresponding prioritized recommendations.
- Most countries paid little attention to the diagnostic-mission reports for a wide range of reasons, such as the above-mentioned weaknesses in the reports; frequent changes in policy, legislation, institutions and staff; a “lack of political priority for the forestry sector”; and the extra-sectoral nature of many of the constraints to SFM (and their solutions).

Recommendations for future diagnostic missions

The reviewers of the diagnostic missions made the following recommendations to the International Tropical Timber Council:

- Considering the results of this assessment, it is inadvisable to continue financing diagnostic missions in their current form.
- To continue the program of diagnostic missions there should be:
 - agreement on the importance to be given to the term “factors that are most critical in preventing the attainment of SFM”. Almost always such factors will include what is generally referred to as “a lack of political will”, which will require actions that involve government levels and sectors beyond the national forest sector or that touch on sensitive socio-economic policies and situations. If a country is not ready to accept recommendations that deal with these aspects it may be inadvisable to send a diagnostic mission to that country
 - a review of the objectives and terms of reference of diagnostic missions to clarify them and, especially, to differentiate them from those of other, more

- conventional forest planning exercises financed by international and bilateral agencies
- inclusion, in the terms of reference, of the obligation to present a clear sequence of actions to implement each recommendation, with cost estimates
 - adoption of a common standard for the approach, methodology and reporting of diagnostic missions, and for the presentation of recommendations
 - consideration of the need to invite representatives of other donors to participate in the diagnostic missions, given that solutions to most of the critical constraints to SFM can be very complex and costly.
- The preparation of future diagnostic missions should take into account the following:
 - The approval of new diagnostic missions must be based on an official request that expresses a willingness to use the findings of the mission and is responding to a real national need and a clear opportunity.
 - The planning of such missions must be done carefully, with the full participation of the country's relevant authority and of a consensually selected team leader. The three parties (the country, ITTO and the team leader) must have the opportunity to discuss the timing and duration of the mission, the expertise required in the team, and the selection of team members, among other aspects of the mission.
 - In addition to their suitable professional qualifications and experience, team leaders should be selected according to their political experience, ability and (if possible) local influence.
 - The selected team leader and an ITTO official should undertake a short preparatory mission to refine the program, collect information, organize relevant meetings and visits, and inform stakeholders about the objectives of the forthcoming mission.
 - Considering the extra-sectoral nature of many of the critical factors constraining SFM, comprehensive discussions with authorities in other relevant sectors must be planned and undertaken.
 - The team leader and ITTO must ensure that appointed consultants receive all pertinent information on the country well in advance of the beginning of the mission.
 - The execution of future diagnostic missions should take into account the following:
 - In small and mid-sized countries, two full weeks is sufficient time for in-country missions. Large countries may require missions of up to three weeks in duration. To a large extent the success of any given mission depends on the quality and relevance of programmed meetings.
- It is essential that team leaders enforce the obligation of every member of the mission to stay focused on the mission's objective, avoiding the temptation to include issues or recommendations that relate to his/her expertise but which are of marginal relevance to the most critical constraints to SFM.
- The validation, dissemination and implementation of recommendations should take into account the following:
 - When the final report is approved by the International Tropical Timber Council the team leader should spend an additional week in the country to assist the government to validate and disseminate the results. To increase the profile of the report it is recommended that a high-level ITTO official also be present to help promote the report at higher governmental levels.
 - Budgets of diagnostic missions must allow for the translation (if necessary) and publication (in both hard copy and via the internet) of the report, and its distribution in the country.
 - should expedite the processing of projects recommended by diagnostic missions and, where possible and necessary, assist countries to obtain financial and technical assistance from other multilateral or bilateral sources.
 - Where a country shows genuine interest in implementing the results of a diagnostic mission, ITTO should, on request, organize one or more short ad-hoc missions to assist governments to refine recommendations or provide specific help, such as in the preparation of project proposals.

ITTO is now in the process of reviewing and reformulating the terms of reference for any future diagnostic missions, taking into account the findings and recommendations of this review.

Reference

Poore, D. and Thang, H.C. 2000. *Review of progress towards the Year 2000 Objective*. Report presented at the 28th International Tropical Timber Council Session, 24–30 May 2000, Lima, Peru, revised November 2000. Available at www.itto.int.

The complete report of the evaluation of the ITTO diagnostic missions and the revised TOR for future missions are available at www.itto.int or on request from the ITTO Secretariat (oed@itto.int).