
BASELINE ASSESSMENT

The Analytical Unit of The Ministry of Internally Displaced Persons from the Occupied Territories, Labor, Health and Social Affairs of Georgia (MoIDPOTLHSA)



October 2019

Final Report

DISCLAIMER

This document is written by Giorgi Vashakidze with the assistance of Nino Dolidze and is submitted to the United Nations Children's Fund (UNICEF). The authors' views expressed in this baseline assessment do not necessarily reflect the views of UNICEF. This report contains sensitive but unclassified information and should not be shared with third parties without acquiring prior consent from the Ministry of Internally Displaced Persons from the Occupied Territories, Labor, Health and Social Affairs of Georgia.

Table of Contents

Acknowledgements

Abbreviations

Executive Summary	6
1. Introduction	9
2. Methodology for the Baseline Assessment	11
2.1. Limitations and Bias in the Process of Baseline Assessment	11
3. Existing Context for Analytical Unit at the Ministry	13
4. Current Structure of the Ministry and State of the Analytical Capacities	15
5. Functions of the Analytical Division as Defined by Law Today	17
6. Current State of the Analytical Division	19
7. Analytical Capacity from IDPs, Eco-Migrants and Reintegration Perspective	22
8. External Impression on Analytical Capacity of IDP and Reintegration Policy	25
9. Analytical Capacity from the Labour and Employment Department Perspective	27
10. Challenges in Labour and Employment Analytics	30
11. Analytical Capacity from the Health Department Perspective	32
11.1. Information Flow between the Health Department and Sub-Agencies	36
12. Challenges in Health Policy and Healthcare as Seen by Actors	38
12.1. Further Challenges in Hospital Monitoring	41
12.2. Lack of Analytics in Drug and Pharmacy Policy	42
12.3. Analytical Strengths at ERCC	45
13. Analytical Capacity from the Social Department Perspective	47
13.1. Further Challenges in Data Coordination and Verification	49
13.2. SSA's Approach to Analytical Capacity	51
13.3. Analytical Capacity at A-TIP Fund	52
14. Synthesis for Discussion of Analytical Capacity	55

15. Recommendations.....	60
Annex I – Conceptual Framework for Program and Project Design and Management	
Annex II - Proposed Technical Software and Instruments	
Bibliography	

Acknowledgements

This baseline assessment was commissioned by the United Nations Children's Fund in cooperation with the Ministry of Internally Displaced Persons from the Occupied Territories, Labor, Health and Social Affairs of Georgia. It describes the state of analytical capacity at the ministry and sub-agencies and is the outcome of several months of research and analysis.

Many individuals have helped to develop the baseline assessment and the assessment team is grateful to all of them. The assessment team is particularly grateful to the Deputy Minister Ms. Tamar Barkalaia and the Head of the Analytical, Human Resources Management and International Relations Department Ms. Sophie Belkania who generously supported the assessment throughout several months.

Sincere appreciation is extended to the Head of the Analytical Division Mr. David Peikrishvili for his tireless support to the assessment team and for his instant availability and reliability. The assessment team wishes to extend gratitude to those respondents who kindly contributed to the assessment by generously responding to interview questions and providing materials.

The assessment team would like to extend special gratitude to Minister Ms. Ekaterine Tikaradze and the Head of UNICEF office in Georgia Mr. Ghassan Khalil for expressing interests in the assessment process and for meeting the assessment team for information sharing and discussion.

This baseline assessment would not have been written without the support from UNICEF and the assessment team extends gratitude to the UNICEF office in Georgia. Particularly, the team wishes to thank Social and Economic Policy Specialist, Ms. Tinatin Baum and Program Associate, Ms. Nino Dzotsenidze for initiating and coordinating the process. The team is deeply grateful to them for their work and cooperation.

Abbreviations

ARA	Autonomous Republic of Adjara
ANRS	Agency of Nuclear and Radiation Safety
ATIP FUND	State Fund for Protection and Assistance of (Statutory) Victims of Human Trafficking
BDD	Basis Data and Directions
BPG	Border Police of Georgia
CAF	Common Assessment Framework
CISID	Infectious Disease Information System
CwD	Children with Disabilities
DA	Drug Agency
DRC	Danish Refugee Council
ERCC	Emergency Response and Coordination Center
EIDSS	Electronic Integrated Disease Surveillance System
GoG	Government of Georgia
GiZ	German Development Agency
GIS	Geographic Information System
HMIS	Health Management Information System
HRW	Human Rights Watch
IDP	Internally Displaced Person
IOSH	Institution of Occupational Health and Safety
IHR	International Medical and Sanitary Regulations
ITA	Information Technology and Analytics Department
KPI	Key Performance Indicators
LA	Livelihood Agency
LEPL	Legal entities of public law
LMIS	Labour Market Information System
MoIDPOTLHSA	Ministry of Internally Displaced Persons from the Occupied Territories, Labor, Health and Social Affairs of Georgia
MIDPOTAR	Ministry of Internally Displaced Persons from the Occupied Territories, Accommodation and Refugees

MoLHSA	Ministry of Labor, Health and Social Affairs
MoIA	Ministry of Internal Affairs
MoD	Ministry of Defense
MoJ	Ministry of Justice
MoFA	Ministry of Foreign Affairs
MoES	Ministry of Education and Science of Georgia
MoESD	Ministry of Economy and Sustainable Development
MEPA	Ministry of Environmental Protection and Agriculture
MoF	Ministry of Finance
NAPR	National Agency of Public Registry
NHA	National Health Account
NHR	National Healthcare Report
NCDC	National Center for Disease Control and Public Health
NFA	National Food Agency
PSDA	Public Service Development Agency
PSDD	Public Service Design and Delivery policy
PoG	Parliament of Georgia
RAMA	State Regulation Agency for Medical Activities
RS	Revenue Service
SA	Service Agency under MoIA
SSA	Social Service Agency
SWA	Social Workers Association
SQL	Structured Query Language
TEG	Temporary Expert Groups
TSA	Targeted Social Assistance
WB	World Bank
WHO	World Health Organization

Executive Summary

The Government of Georgia (GoG) strives to transform the country's existing welfare system, to improve basic healthcare services, to strengthen labor rights and to guarantee a sustainable livelihood for IDPs. This requires the design and implementation of well-thought, forward looking and transformational policies and programs. GoG recognizes the complexity of the process and acknowledges the necessity of developing effective and integrated policy analysis, planning and implementation systems in the Ministry of Internally Displaced Persons from the Occupied Territories, Labor, Health and Social Affairs of Georgia (MoIDPOTLHSA). Designing an integrated system capable of producing robust and reliable data and improving its decision-making structures is a critical enabler for focused, effective and targeted policies and programs.

The analytical culture in the public administration and management system in Georgia is often viewed as a world of chaotic processes and procedures with low human and institutional capacity, full of low-quality databases and unstructured information flows. However, the analysis presented in this report shows that it is much more nuanced and complex than is generally considered from the outside.

This baseline assessment was commissioned by UNICEF to set the stage for the ministry to holistically approach the establishment of an analytical department. Therefore, it focuses on issues and challenges of today's analytical capacities at the ministry. While the assessment report underlines the positive achievements made by the ministry's separate departments or units, it more closely focuses on detecting and structuring the remaining shortcomings that are pertinent to the ministry's analytical capacity and prevent it from fully maturing.

The assessment report concentrates on six elements of the analytical capacity:

1. Management structure;
2. Financial management system;
3. Administrative and procedural aspects of the operational capacity;
4. Human resources;
5. ICT aspects in the design and production of products; and
6. Performance management sustainability and their compliance with strategic management.

The assessment observed challenges in all six areas, and that the inability of the ministry to address those issues prevents the analytical capacity from fully maturing.

The **management structure** in the analytical division as well as in the thematic departments cannot cater to the needs of the ministry considering the vast amount of analysis required. It also lacks the necessary thematic or strategic knowledge to produce analysis. For the time being, analysis is limited to IDP issues in the analytical division.

The analytical capacity in the thematic departments is largely limited to routinely processing the statistical information provided by sub agencies. A random exception is the health department, which can draw on the strong analytical capacity of its subordinate agencies. Sub-agencies like the National Center for Disease Control and Public Health (NCDC) and the Emergency Response and Coordination Center (ERCC) have a relatively strong analytical capacity in terms

of data processing, information analysis, trend observation and reporting thanks to their dedicated analytical units, relatively well-structured databases and the necessary ICT instruments.

There does not seem to be a sustainable and predictable **financial management system** for the analytical capacity to thrive in the ministry. The budget of the analytical division is limited to staff costs only. Apart from the occasional small budget to conduct telephone surveys, the division does not have the financial means to operationalize its functions.

The situation is even more dramatic when it comes to research and evaluation at the thematic departments. Some departments claim that they annually anticipate and predict possible evaluation needs and try to include financial means in the budget to outsource this service, but this could not be verified. Rather the assessment found that complicated legal procedures prevent the departments from outsourcing the evaluation needs. Subordinate agencies, on the other hand, are more flexible and effective in responding to research or evaluation needs. Yet, the assessment did not find evidence that suggests that this is common practice.

One of the reasons for the lack of predictable finances for research and evaluation purposes is the absence of preliminary planning. There is no **administrative and procedural** framework at the Ministry that provides guidance for at what stage the analytical division or thematic departments have an obligation to intervene in the policy design and program implementation, how to plan for continuous data collection or to perform an evaluation if required. This lack of firmly established procedures hinders both the division and the departments from anticipating analytical needs in the budgeting process.

Human resources are one of the most critical challenges to strengthening analytical capacity. Competitive salaries will be equally important in attracting and retaining qualified personnel with analytical skills, as are the prospects for professional growth and an adequate distribution of functions among personnel.

The **ICT aspects** in analytical capacities are relatively strong at sub-agencies level and almost non-existent at the analytical division level. Although, personnel at the analytical division operates a variety of statistical software that require certain ICT knowledge to process data, the division does not have the knowledge and expert capacity to make improvements to the data management system.

The biggest challenge for ICT infrastructure is the structural dimension of the databases within the subordinate agencies. It seems that the database architecture is not standardized across the ministry. Hence, it is difficult or almost impossible for databases to interact with each other automatically. The challenges with databases directly reflect on the work of personnel who are tasked to process and prepare data and analytical materials. The time and effort these people spend daily on data processing could be improved significantly by launching a system interoperability capacity building process.

The assessment noted that not only the database structure but also data maintenance seems to be an issue in the ministry. There is not enough server capacity to retain and maintain the massive amount of information that the system generates daily. It has been observed that certain agencies

keep paper-based archives. Should these archives be digitized they can be used for better policy planning and analysis. Today, these data are used rarely to avoid an ineffective use of human and time resources.

Performance management sustainability and their compliance with strategic management is linked with the division's capacity to identify and to satisfy expectations of external stakeholders, in line with the organization's mission and vision. However, the assessment found that there are no performance parameters or written strategies at the ministerial levels to which analytical division could align its purpose and capacity.

The assessment further identified a number of crosscutting issues that hinder the development of analytical capacity:

- No systematically articulated definition of what constitutes analytical service;
- Scattered, irregular and non-structured analytical product design and monitoring frameworks;
- Lack of mixed research models for producing robust analytical products;
- Lack of a common approach in designing databases;
- Absence of a strong and effective research and development culture;
- Chaotic costing and unclear pricing methodology for services delivered.

The recommendations in the end of the assessment report recognize the recent changes introduced at the ministerial structures and, with this transformation in mind, propose ways and practical instruments to strengthen the analytical capacity by establishing predictable, reliable and robust data collection and analysis mechanisms to achieve high quality analytical and management standards at the ministry.

Georgian citizens positively assess the services delivered by service delivery agencies under the Ministry of Justice, the Ministry of Finance and the Ministry of Internal Affairs. The driving force for this achievement was a strong, transitional leadership coupled with knowledgeable expertise and strong analytical capacity. The core processes were supported by uninterrupted financial and human resources. MoIDPOTLHSA should embark on a similar path for an impactful institutional transformation. The improvement of analytical capacity would be one strong step towards optimizing policy design and program management as well as information flow systems to effectively monitor and evaluate the impact that these programs have on society. This will also help the ministry to introduce basic standards of quality management across its massive organisational structure and to change citizens' perception about the services they regularly receive.

1. Introduction

The strategies and initiatives launched by the Government of Georgia (GoG) to develop and modernize the country place a greater emphasis on health, social affairs and labor rights as a central objective of development and as a way to enhance other welfare outcomes. The increase in budget expenditure on healthcare and social programs as well as the vast support given to the programs to allocate housing benefits for IDPs have shown GoG's commitment to establish and further strengthen the existing social protection scheme. GoG recognizes these as an essential element for the developing human capabilities to reduce poverty and to increase economic and social development. From an economic and development point of view, adequate health and social protection link to economic growth at the national level, likewise, poor health has been connected to household poverty and social distress (Bloom and Canning, 2000; Yuanli et al. 2003). GoG's effort to transform the country's existing welfare system, improve basic healthcare services, strengthen labor rights and guarantee a sustainable livelihood for IDPs requires the design and implementation of well-thought, forward looking and transformational policies and programs.

Recent Government policies, plans and strategies have focused on the necessity to further advance health, social protection and labour rights in the country. The Government Program 2019-2020¹, The Basic Data and Directions (BDD) 2018 -2021² and the 2019 – 2022³ strategy, the Freedom, Rapid Development and Prosperity Government Program 2016-2020⁴, A Digital Georgia: e-Georgia Strategy and Action Plan 2014-2018⁵ and the State Strategy on Development of Public Service Delivery⁶ aim to strengthen the existing universal healthcare services as well as disease prevention and control, to increase access to quality medications and to modernize relevant services via strengthening e-Health and Health Management Information System⁷ (HMIS) in an effort to better support patients and doctors in diagnosis, treatments and evaluations. In addition, GoG intends to make the social protection scheme for socially vulnerable groups more effective by ensuring that the social scoring allocation system is more reliable and unbiased, as well as define which modality of child benefits (cash and food vouchers) work best for children and the basic pension scheme is strengthened by adding a recently introduced pension saving scheme to increase long-term social and economic stability in the society.

¹ The Government Program 2019 – 2020 retrieved from https://cdn2.ipn.ge/media/documents/07-2.388_.pdf

² Government of Georgia (2017), Basic Data and Direction 2018-2021, Retrieved from <https://mof.ge/images/File/BDD/2018-2021/saboloo/BDD-2018-2021-29.01.2018-saboloo.pdf>

³ Adopted by the Government of Georgia (GoG) in 2017 and in 2018 respectively. Government of Georgia (2017), Basic Data and Direction 2019-2022, Retrieved from <https://mof.ge/5177>

⁴ Adopted by the Government in 2016. Government of Georgia (2016), Government Program 2016-2020, Retrieved from http://gov.ge/files/68_58446_288262_programa.pdf

⁵ Krabina, B., Liu, P., Meyerhoff-Nielsen, M., Millard, J., Reichstädter, P., Wimmer, M. (2014), A Digital Georgia: e-Georgia Strategy and Action Plan 2014-2018, the Data Exchange Agency under the Ministry of Justice of Georgia, Retrieved from <http://www.dea.gov.ge/uploads/eGeorgia%20Strategy.pdf>

⁶ Developed in 2018, the strategy is pending government approval to become an obligatory document for all state agencies to align the delivered public services to a certain standard.

⁷ Krabina, B., Liu, P., Meyerhoff-Nielsen, M., Millard, J., Reichstädter, P., Wimmer, M. (2014), A Digital Georgia: e-Georgia Strategy and Action Plan 2014-2018, the Data Exchange Agency under the Ministry of Justice of Georgia, pg. 34

However, addressing the urgent health, social and labour challenges that now are the focus of national concern will require effective and integrated policy analysis, planning and implementation systems that do not yet exist or are at a very nascent stage in the Ministry of Internally Displaced Persons from the Occupied Territories, Labor, Health and Social Affairs of Georgia (MoIDPOTLHSA). An integrated system capable of producing robust and reliable data is needed to enable the ministry's decision-making structures to produce focused, effective and targeted policies and programs.

Although data has a vital role to play, information alone cannot reconcile conflicting positions based on genuine value differences. Scientific understanding can help the ministry in defining options and clarifying consequences. Robust data collection, evaluation and analysis can help concentrate discussions and debates to a more consensual understanding of the choices available nationwide. For that reason, it is believed that the establishment of a strong and effective analytical department in the ministry would help the political process understand what is at stake in health, social protection and labour rights. Moreover, an analytical department would generate more quality-oriented policy making by benchmarking Georgian systems against best international practice of health, social protection and labour rights with the purpose of introducing more effective, efficient and citizen-oriented services.

This baseline assessment report intends to set the stage for the ministry to holistically approach the establishment of an analytical department and the reform process. Therefore, the assessment focuses on issues and challenges of today's analytical capacities. While the assessment report underlines positive achievements made by the ministry's separate departments or units, it focuses on detecting and structuring remaining shortcomings that are pertinent to the ministry's analytical capacity and prevent it from fully maturing.

The first few chapters of the baseline assessment are dedicated to the methodology of the study and highlight the limitations that the assessment team encountered. Chapter three and four briefly present the existing context of the analytical state and organizational structure at the ministry. Chapters five and six focus on functions of the analytical division as articulated in regulations and explore the current state of the analytical division. Chapters seven and eight look at the analytical capacity from an IDP, an eco-migration and a reintegration perspective. Chapters nine and ten discuss the state of analytical capacity from a labour and employment perspective. Chapters eleven and twelve offer a perspective of the healthcare sector on analytics at the ministry. Chapter thirteen is dedicated to discussing the analytical capacity from a social perspective. Chapter fourteen presents observations and conclusions. Finally, chapter fifteen provides recommendations for further actions to be taken by the ministry.

2. Methodology for the Baseline Assessment

Upon the request of the Ministry of Internally Displaced Persons from the Occupied Territories, Labor, Health and Social Affairs of Georgia (MoIDPOTLHSA), the UNICEF office in Georgia hired an international and a local expert to assist the analytical division in developing the framework for an analytical information support and monitoring capacity that is intended to strengthen MoIDPOTLHSA's ability for strategic evidence-based policy making and program planning.

The baseline assessment aims to complete two inter-connected tasks: (1) conducting a baseline assessment for the analytical division of MoIDPOTLHSA and the identification of gaps, challenges and best practices of the division in producing robust, evaluation and evidence-based analysis; and (2) the development of recommendations to address the major barriers to the consolidation of analytical capacity of the division.

During the baseline assessment the experts intend to critically analyze and define the core issue(s) of the division, identify actors and institutions that could support or resist improvement, and consider MoIDPOTLHSA's position to improve the division's approach to program design and development as well as program implementation, monitoring and evaluation.

The experts devised a methodology that divided the process into four steps. Step one included desk review, step two field work, step three desk review and field work data analysis and step four data synthesizing. The methodology and assessment instruments (questionnaires) were designed to serve as analytical tools for developing strategies that address the core analytical capacity problem(s) in the ministry, make recommendations, and guide resources to those analytical improvement areas where they would have the most impact.

The initial phase of the assessment started in the end of June by engaging with UNICEF and MoIDPOTLHSA to agree the scope of work for the entire project, including the baseline assessment methodology. Phase two started in the second half of July and lasted till the end of August, 2019. During this phase, the experts engaged with the head of the analytical division of the ministry to plan the assessment and to share information on upcoming processes and engagements within the ministry. The experts clarified expectations and emphasized the necessity of close coordination to achieve the objective of the project. The experts asked for assistance in coordinating and organizing meetings to conduct semi-structured interviews with relevant departments and units, and to provide documentation upon the request.

Overall, the experts met up to 40 respondents in the ministry, including deputy ministers, heads and deputy heads of various departments, and conducted interviews with respective respondents in the subordinated agencies. Moreover, the experts benefited from a courtesy meeting with the Minister and from a debriefing with the head of the UNICEF office in Georgia.

2.1. Limitations and Bias in the Process of Baseline Assessment

Prior to conducting the fieldwork, the experts requested from the ministry a set of available documents, guidelines and reports to analyze six elements of analytical unit as outlined in the

methodology framework. These elements encompass: the management and legal structure of the division; the financial management system; the administrative and procedural aspects of the operational capacity of the division; human resources and ICT aspects of the design and production of products of the division; performance management sustainability and their compliance with strategic management. However, in some cases this proved difficult as not all aspects were sufficiently documented by the ministry.

The biggest challenge, however, was the time limitation as vast amounts of information had to be gathered, analyzed and processed in a very short period of time.

To reduce bias in the assessment process and to maintain a robust analytical approach to data processing and analysis, the experts divided the data gathering into five steps. Initially, the experts worked jointly to design the scope of work and to develop a set of questions for respective respondents. The questionnaires were then tested with respondents and appropriate adjustments were made. The data gathering process was then separated from the analytical process to allow the local expert to continue conducting interviews with remote supervision from the international expert, while the international expert started to process and analyze the data in parallel.

3. Existing Context for the Analytical Unit at the Ministry

In 2018, GoG initiated structural reforms⁸ across the ministries. The Ministry of Internally Displaced Persons from the Occupied Territories, Accommodation and Refugees (MIDPOTAR) was abolished, and its functions were distributed among three other institutions. The Ministry of Regional Development and Infrastructure absorbed the refugee accommodation function, the Ministry of Interior took the migration component and the Ministry of Labor, Health and Social Affairs (MoLHSA) became responsible for regulating issues related to IDPs and eco-migrants.

To reflect the structural changes and its expanded functions the Ministry of Labor, Health and Social Affairs was renamed as the Ministry of Internally Displaced Persons from the Occupied Territories, Labor, Health and Social Affairs of Georgia (MoIDPOTLHSA).⁹

This report is particularly interested in exploring the management and administrative modalities of the newly created analytical division in the ministry, and how the merger has influenced it.

Prior to the merger, the analytical capacities in each ministry were designed differently: the analytical capacity at MIDPOTAR was housed in an analytical division with a clearly identified mandate. The division had a distinguished organizational function and played the role of a supporter vis-à-vis other departments or subordinated agencies. It was responsible for conducting research, managing IDP related databases and providing on demand assistance to other departments to strengthen their policy and programing capacities. The analytical capacities under MoLHSA, on the other hand, were largely absorbed by personnel at the thematic departments. For instance, the health department had staff to work on analytical aspects within the department, cooperate with subordinate agencies to gather data and produce analytical products. The same model applied to the social department as well as to the labour and employment department.

An illustrative example¹⁰ will help form a more robust understanding of the operational capacities of the analytical functions in the ministries: For instance, the analytical division of

⁸ The new structure of government to include 10 ministries and 1 officer of state minister; retrieved from http://www.gov.ge/index.php?lang_id=ENG&sec_id=497&info_id=66743

⁹ The ordinance of GoG N 473, retrieved from <https://matsne.gov.ge/ka/document/view/4325651?publication=0>

¹⁰ Another example worth mentioning is related to the division's work with private research companies to better understand the needs of beneficiaries. Inquiring about the extent to which IDPs were aware of the ministry's programs, they learnt that 43% of IDPs knew about at least one program implemented by MIDPOTAR. This data has been used by the analytical division as the baseline to measure results at a later stage of policy planning.

The analytical division used several types of questionnaires while conducting research. Moreover, the division analyzed the information by using two types of hot-lines. One hot-line was passive to allow customers to pose their demands whereas the second hot-line was pro-active to allow the ministry to seek information from beneficiaries.

The analysis of information sharing channels showed that the best way to communicate with IDPs was via SMS service. Hence, the division recommended focusing on messaging while decreasing the use of more expensive channels of communication. Furthermore, a cost-benefit analysis showed that the renovation of old and dilapidated infrastructure intended to be handed to IDPs for residential purposes was not cost-efficient. It was too expensive to maintain and easily depreciable. Building new residences for IDPs proved more cost efficient. The ministry has taken into consideration the findings of the research and reflected it in its accommodation policy planning (interviews, 2019).

MIDPOTAR assisted the IDP Livelihood Agency (LA) in developing an assistance program based on a needs assessment among IDPs. The needs assessment showed that beneficiaries who underwent vocational education programs needed auxiliary equipment such as drilling devices or beauty parlor equipment etc. in order to use their newly acquired skills to make a living. Based on this finding, the agency initiated a program to assist IDPs in obtaining the needed technical equipment. In parallel, the agency started monitoring how well beneficiaries utilized the technical support provided by the agency. In addition, the findings revealed that IDPs have a tendency of not revealing and reporting their income honestly for fear of being taxed and losing the financial assistance if their revenue increases (Interview, 2019).

The example shows that the analytical services at MIDPOTAR had an institutionally cross cutting character: the analytical division provided its services to other departments upon request. The analytical services at MoLHSA had more bottom-up character in that the thematic departments relied heavily and completely on data and analysis provided by subordinated agencies.

The merger of these two thematically distinct ministries has created a new challenge for analytical capacities at MoIDPOTLHSA. Today, the main objective of the ministry is to merge cross institutional and bottom-up approaches in a way that strengthens the analytical capacities of the ministry to be effective, efficient, quality oriented and evidence-based.

4. Current Structure of the Ministry and State of the Analytical Capacities

MoIDPOTLHSA clearly distinguishes between policy design and policy implementation. The ministry is focused on policy design while subordinated agencies are responsible for policy implementation. According to the statute # 473 adopted by GoG in September 2018, the ministry is tasked to “develop, implement and coordinate state policies on labor, health and social protection of the population, as well as develop and implement state policy in the social protection and resettlement of displaced persons (hereinafter referred to as eco-migrants)”¹¹. The ministry has four main policy directions:

- IDPs, eco-migrants and reintegration policy direction. It regulates IDPs and eco-migrants issues bearing in mind the existing political, socio-economic and demographic situation of the country; tracks and registers eco-migratory flows caused by emergencies (natural disasters, epidemics, etc.); and is responsible for supporting the reintegration of Georgian citizens who have returned to Georgia as well as persons with stateless statuses;
- Health care policy direction. The ministry is responsible for the delivery of individual medical services; Ensuring public health protection, and relating medical and pharmaceutical activities in the country;
- Social protection of the population. It is required to deliver targeted social assistance to the population; provide the defined social assistance and allocations to the socially vulnerable groups as defined by the legislation in a timely manner; allocate pensions, deliver childcare and its related services; and develop and implement policies to combat domestic violence and to protect victims of domestic violence;
- Labor and employment policy direction. The ministry supports the promotion of labor relations and social partnership; ensures that labor migration is regulated; supports employment as well as coordinates the recruitment aspects of a non-military, alternative labor market; ensures that institutions have labor security mechanisms in place and that the labor discrimination is eliminated; and as stipulated in the Law on Labor Security of Georgia, ensures that organizations have in place norms to protect labor and implement labor safety standards, particularly, in high-risk, heavy, harmful and dangerous working environments as well as assume all other duties as defined by the law to uphold its mandate.

While departments at the ministry level are tasked to define policies, the implementation of those policies stands on the shoulders of subordinate agencies. The Ministry has 12 departments out of which the Department of Analytics, Human Resources Management and International Relations; Internal Audit Department; Department of Media and Public Relations; Legal Department; and Information Technology Department fall under direct subordination of the minister and are tasked to carry out crosscutting activities encompassing all other departments like the Department of Healthcare, Department of Social Security, Department of Labour and Employment Policy and Department of IDPs and Eco-migrants Policy. These thematic departments are subordinated by the respective deputy ministries. The Economic Department and the Administrative Department, however, are more crosscutting departments by function.

¹¹ The statute 473 from September 14, 2018 retrieved from <https://matsne.gov.ge/ka/document/view/4325651?publication=0>

Nonetheless, they also fall under the subordination of a deputy minister like the thematic departments.

In addition to the ministerial level structure, there are eight semi-independent agencies (LEPL – legal entities of public law) subordinated by the ministry. Social Service Agency¹², State Regulation Agency for Medical Activities¹³, National Center for Decease Control and Public Health¹⁴, State Fund for Protection and Assistance of (Statutory) Victims of Human Trafficking¹⁵, Emergency Response and Coordination Center, Livelihood Agency¹⁶, Drug Agency¹⁷ and Akhlagori Orphanage have their own organizational structures, but are expected to closely work with the ministry to implement policies, collect data and monitor programs or projects activities.

In some cases, there are analytical units at LEPLs, in other cases, analytical capacity may be shared by several units or does not exist at all. These agencies play a crucial role in providing reliable information to the ministry. Hence, setting up channels of effective, fast and easy data exchange as well as standardizing frameworks for policy planning, implementation and reporting are vital in strengthening the analytical capacity at the ministerial level.

¹² Social Service Agency - <http://ssa.gov.ge/>

¹³ State Regulation Agency for Medical Activities - <http://rama.moh.gov.ge/>

¹⁴ National Center for Decease Control and Public Health - <http://www.ncdc.ge/default.aspx?language=ka-GE>

¹⁵ State Fund for Protection and Assistance of (Statutory) Victims of Human Trafficking - <http://atipfund.gov.ge/eng>

¹⁶ Livelihood Agency - <http://livelihood.gov.ge/ge/>

¹⁷ Drug Agency - <http://drugagency.moh.gov.ge/>

5. Functions of the Analytical Division¹⁸ as Defined by Law Today

The statute # 473¹⁹ defines the organizational structure and functions of the analytical division. The division falls under the Department of Analytics, Human Resources Management and International Relations and is responsible²⁰ for:

- Collecting data related to the activities of the Ministry from open and closed sources, various structural units of the Ministry, legal entities of public law under the control of the Ministry, various agencies and organizations;
- Analyzing and processing statistical information and data and systematizing it;
- Designing questionnaires, relevant sampling, organizing and conducting surveys;
- Planning and conducting research to meet the interests of the Ministry;
- Developing research reports, drawing up analytical briefs and organizing discussions with the purpose of sharing findings with stakeholders;
- Supporting and participating in those researches organized by international and local organizations that fall under the interest of the Ministry;
- Studying challenges and risks the ministry encounters and provide forecast risk analysis and reporting, including recommendation to remedy;
- Strengthening and improving the performance of the analytical division by conducting comparative analysis and benchmarking;
- Participating in the analysis of the business processes of the Ministry and legal entities of public law under the ministry;
- Participating in the monitoring and evaluation processes of projects implemented by the Ministry and legal entities of public law;
- In coordination with respective departments participating in the development of strategic-policy documents;
- In coordination with respective department participating in the development of action plans with the purpose of strengthening the organizational system of the Ministry;
- Collaborating with relevant international, local non-governmental organizations as well as with academic circles;

The analytical division is expected to perform research, analysis, data processing, database management, cross institutional support as well as program and project quality control and evaluation functions. This requires having a robust organizational status within the hierarchical order of the ministry, sustainable financial resources, effective human and knowledge management capacity and a strong will of other thematic departments and subordinate agencies to take part in the initiatives of the analytical division and to cooperate effectively and timely. To

¹⁸ At the time of report writing, the ministry has introduced organizational changes in the system. The ministry changed internal organizational structure substantially. For instance, today, there is an Information Technology and Analytics Department instead of the above-described analytical division. Functions of the department largely remain similar or are further extended. Likewise, there are no more thematic departments like health department, social department, labour and employment department, IDP and eco-migrant department, instead, the ministry established the Policy Department and turned the thematic department into thematic divisions under the newly established Policy Department.

¹⁹ The statute 473 from September 14, 2018 retrieved from <https://matsne.gov.ge/ka/document/view/4325651?publication=0>

²⁰ A list of tasks provided by the ministry during the baseline assessment, July 2019

make this complicated and complex interaction viable it would be necessary to ingrain appropriate instruments of program, project and organizational quality management as well as increase the ICT capacity in the functions of the analytical division.

6. Current State of the Analytical Division

The existing human and institutional capacity of the analytical division is extremely limited. By the time of the baseline assessment, there were only three employees in the division, including the head of the division, a statistic specialist and an analyst. The division has been carrying the legacy of the previous ministry and their access to databases and information as well as knowledge is largely concentrated on the theme of IDPs and refugees.

Among the various challenges, it is important to highlight an exceptionally high staff turnover and a lack of sustainable knowledge management. Most importantly, however, the lack in expertise in the newly integrated policy directions of the ministry, is an obstacle to providing support to other thematic departments and performing its function as instructed by law.

Even with extremely limited resources, the analytical division provides information upon request to other departments. For instance, it is capable of regularly providing data on the number, gender, age, geographic location of IDPs who receive social assistance, the number of IDPs and/or eco-migrants who receive housing services in a given period of time, the number of IDPs in a particular geographic location or their residence. Moreover, the analytical division cooperates with other ministries such as the Ministry of Internal Affairs (MoIA) and the Ministry of Defense (MoD) to exchange information about housing allocation for eco-migrants to avoid duplication of the service provided. Likewise, to reduce the risk of housing service duplication the analytical division cooperates with the National Agency of Public Registry (NAPR) under the Ministry of Justice (MoJ) to cross check property registration of beneficiaries and their family members.

The information flow rarely has an automatic character and is largely demand based. For instance, to control IDPs financial benefit allocations, the ministry demands that the Border Police of Georgia (BPG) provides data on IDPs border crossings, likewise, the ministry cooperates with the Revenue Service of the Ministry of Finance to control IDP income. If an IDP left the country without returning back to Georgia within two months, or an IDP has a monthly income of more than GEL 1250, the ministry has a legal obligation to stop providing financial benefits. The analytical division receives data and upon processing provides appropriate information to a respective department to take actions. The ministry does not have the capacity of controlling the income that is not declared by IDPs. To keep the IDP database up-to-date, the ministry regularly exchanges data with Public Service Development Agency (PSDA) of MoJ to reflect changes in the database. If a new member is born in an IDP status family or there is information on the death of a person with IDP status, then the division reflects this information in the IDP database to use it for relevant program planning.

Law largely regulates data exchange. However, sometimes the ministry signs memoranda with other state or non-state institutions to ensure that the analytical division has relevant data. The division regularly receives the data about those IDPs who have registered for vocational education programs. The division compares the personal ID number provided by a vocational education institution with its own IDP database and if a match is found, the IDP who tries to improve skills and acquire knowledge is likely to benefit from an IDP small business

development program run by the Livelihood Agency. Based on the data, the division advises the agency to reach out to prospective beneficiaries to offer a respective service.

To forecast the social or political risks of migration flow the analytical division under the intergovernmental commission cooperates with MoIA and the Ministry of Foreign Affairs (MoFA). The purpose of this cooperation is to identify the potential influence of an increase in tourism on the increase of illegal migration. Likewise, the increase in foreign students coming to Georgia for education purposes may have an effect on the increase of asylum requests.

Based on data and statistical instruments, the division produces various predictions upon request of the respective departments. As an example, IDPs are scored according to certain criteria to receive housing services. The division predicts what would happen if the IDPs scoring system changes. Would IDPs who are eligible today remain in the program or would new or different IDP categories become eligible for housing? Statistical modeling simulations usually answer all these questions, provided that appropriate data, information and expert knowledge are available.

In terms of reporting, the division produces in depth reports if required or analytical briefs upon request. Often it is asked to provide relevant charts and diagrams to assist thematic departments in developing reports and presentations. For the time being, this kind of work is largely IDP related.

Access to databases across the ministries is limited for the analytical division. It currently manages an IDP database and holds the database for eco-migrants. The division uses Structured Query Language (SQL) to manage these databases as well as an application to provide access to relevant users. The division attempted to gain access to other databases such as Social Service Agency (SSA) databases. However, due to limited human capacity as well as cyber security concerns, it is unlikely that the division will be granted unlimited access to other existing databases at the ministry and subordinated agencies. Moreover, there is an issue of interoperability of databases. In many cases, the information flow and database communication is not easily and user-friendly available for the analytical division to extract the necessary data and information. In fact, there is no internal interlinked system at the ministry to provide easy access to existing information to produce cross-thematic, quick and effective reporting based on the available data.

The existing channels of communication between the thematic departments and analytical units of subordinated agencies largely process information directly without involving the analytical division. The thematic departments request the necessary analytics from respective subordinated agency and receive responses directly. As a consequence, the analytical division does not have sufficiently consistent visibility of the information flow to make robust judgements and to develop relevant recommendations for improving the policy planning process.

The research capacity of the analytical division is rather concentrated on IDP related issues and is sporadic by nature thanks to the limited human and financial resources. For instance, in 2017 the division conducted research on internal communication flows to identify what prevents information flow from one department to the other. Moreover, it recently started organizing a survey on personnel satisfaction to identify staff motivation or demotivation aspects as well as to

have the possibility to compare findings with international experience. Often, the division lacks a clearly identified budget for research purposes, or the budget is so limited that the division can only conduct telephone survey with its own resources in the best-case scenario. And yet, the division actively participates in planning of research conducted by international actors. For instance, the division cooperated with the World Bank (WB), the Danish Refugee Council (DRC) and GiZ to conduct research on domestic violence within the IDP community. Another issue is related to the lack of written instruction on how to plan or conduct research, and what steps to take at each stage of research to ensure data validity and reliability.

Lack of resources prevents the analytical division from designing an education and knowledge management process in the division. The division does not have a set of specific trainings for existing or new personnel to understand the functional capacity of the division and to learn the characteristics of the analytical process at the ministry. The division cannot afford sending its personnel to international or national research courses to improve the analytical capacity at the ministry. There is no effective and predictable knowledge development planning at the division to give personnel guidance and to ensure relative stability in the division.

The ministry entertains commissions and working groups for effectively and timely communicating with third parties. Commissions usually plan strategies while Temporary Expert Groups (TEG) discuss technical aspects of the respective policies and directions. The analytical division participates in these meetings. At the time of the assessment, the division was active in the Housing Strategy and Action Planning Commission and TEG, as well as the State Commission on Migration and respective TEG.

It is evident that the merger of two large ministries has created new challenges for the analytical division. It also brought new opportunities to expand and become a more strategically important player in the ministry. In order to better understand the challenges of the analytical division it is salient to analyze how potential users of analytical services perceive the existing state of the analytical capacity. Therefore, understanding perceptions and expectations of thematic departments, subordinate agencies and third parties is critical for targetly designing the analytical capacity at the ministry and to identify the services it may design and deliver.

7. Analytical Capacity from IDPs, Eco-Migrants and Reintegration Perspective

An effective and well-functional analytical division plays a crucial role in defining short, medium and long-term results for the IDP and eco-migrants housing allocation policy. In cooperation with the analytical division the IDP and eco-migration policy department recently completed a policy document that defined the future strategy of the department. The analytical division has played a crucial role in providing necessary analytics to make policy document holistic and comprehensive. However, the work also revealed that the analytical division does not have enough human capacity to respond to all potential demands at the ministry.

There are several thematic departments that would also benefit from the engagement and cooperation with the analytical division. Today, however, the division is limited and cannot meet this existing demand. The division is so understaffed that it does not have the capacity to ensure that there is a certain standardized way for program and project data gathering and monitoring. Access to databases is another limitation for the division. It has only access to the IDP and eco-migrants database. While the result is satisfactory when the simple analytics on these particular themes is requested, the lack of structured and timely access to other databases prevents the division from generating more complex analytics in a faster and easy manner and restrains it fulfilling larger mandate effectively.

The division plays an important role in TEG meetings. Upon consultation with TEG, the IDP and eco-migrant policy department decided to launch an IDP veteran support program to allow respective beneficiaries to acquire housing. In parallel, there is another pilot program to help comparatively better off IDPs with financial support to purchase property. This program identifies IDPs that can afford half the price of property and co-matches government finances. Concretely, the ministry allocates USD 350 per square meter and expects IDPs to contribute another USD 300 when purchasing a property. This new pilot program will need to be carefully assessed in the future to measure effectiveness and efficiency. The department expects the analytical division to conduct an assessment and evaluation for the program. However, with the existing human capacity it will be extremely difficult to meet the expectations.

The department engages with the analytical division and asks for support in developing reports. Usually, the outputs the division provides help the department to strengthen relationships with international organizations and partners. And yet, the department realizes that the division is not continuously able to follow the “heartbeat” of the ministry to timely respond to existing demands. If not strengthened, the division may lag behind even more to effectively meet the fast-changing nature of the ministry.

The IDP and eco-migrant policy department acknowledges that usually subordinated agencies such as SSA or other LEPLs have difficulties in providing requested information and analytics in a timely and precise manner. They believe that the analytical division should be the one that facilitates the information access and analysis. Ideally, the division should be playing a role of a mediator between ministerial departments and subordinated agencies as well as be able to assist departments directly upon request.

Similar to the IDP and eco-migrant department, IDP Livelihood Agency (LA) realizes that the main challenge for the analytical division remains the lack of human capacity. In spite of limited resources, the agency presents a successful cooperation example with the division. LA itself is very small in terms of human capacity and cannot afford an independent analytical unit. Therefore, it relies on the work of the analytical division completely.

To initiate a new program or a project LA usually reaches out to the analytical division to conduct a needs assessment. The division presents a draft questionnaire to discuss and make amendments, it adjusts questionnaires upon request of the agency and conducts the assessment mainly via telephone surveys. As soon as data is processed it presents findings and potential target groups for a project to be implemented. Based on the information provided by the division, LA develops a priority list of actions, designs actions and implements them.

As a follow-up activity LA expects the division to conduct customer surveys on an annual basis to help adjust projects and make them more targeted. Whenever possible the division provides this service to LA. This cooperation led the agency to introduce changes in the IDP vocational education program for instance.

Usually, the state covers the vocational educational costs for IDPs while LA provides assistance to cover the transportation costs to reach the vocational education center from their place of residence. In the past, only socially vulnerable IDPs participated in this program. However, the survey conducted by the analytical division revealed that the program would be more effective and would achieve more impact should LA provided transportation benefit not only to socially vulnerable IDPs but also to those IDPs who do not fall under socially vulnerability criteria. The agency introduced the changes and today, the program covers costs for transportation notwithstanding IDPs social statues. However, it remains to be seen whether this change really had an impact on the success of the program. This is where the division fails to design and conduct follow-up activities to really evaluate the impact of the programs.

The other example of cooperation between LA and the division is related to an auxiliary equipment grant program fund increase. In cooperation with the Education Quality Management Center under the Ministry of Education and Science of Georgia (MoES) and the vocational education centers, LA identified more than 100 self-employment professions (tooth technician at a dentist office, tailor, welder etc.) to be eligible for a small grant program. If an IDP acquires a respective qualification, the person can apply for a grant to purchase the necessary auxiliary equipment to start working more effectively. The survey revealed that the initial grant of GEL 1600 was not enough for purchasing decent equipment and the amount was subsequently increased to GEL 2000 to meet IDP and market demand. Limited financial resources, however, prevent LA from providing more than 50 grants annually despite high interest from IDPs.

In 2019, the agency and the division worked together to identify the needs of IDPs who benefited from the “House in Village” program. There are approximately 2000 beneficiaries and the agency was interested in increasing their integration further by allowing them to identify what would allow them to improve their livelihood in their village of residence. The survey conducted by the analytical division among 400 beneficiaries revealed that IDPs were interested in

agriculture and grocery processing productivity increase. On a more practical note, IDPs were in need of having mini tractors, cultivator machines for small land/parcel processing and perennial plants such as hazelnut, persimmon or kiwi to increase their productivity and income in the villages. The survey showed that the program required expansion and additional complementary components to achieve better economic well-being and high integration of IDPs in their respective communities.

In spite of productive and successful cooperation, the IDP and eco-migrant department as well as LA believe that the division lacks human and knowledge capacity as well as financial resources. With only telephone surveys the division will not be able to meet the growing demand on its services and most likely will fail from substantially engaging with thematic departments across the ministry to conduct in-depth research and analysis.

8. External Impression on Analytical Capacity of IDP and Reintegration Policy

The perceptions of external actors on the ministry's analytical capacity does not differ substantially from the internal assessment of the situation. External actors do appreciate that the analytical division under the old ministerial structure engaged with the Livelihood Agency to launch several programs to improve the lives of IDPs. External actors do appreciate of having programs to assist IDPs to improve their education or financial means, including the coverage for IDPs transportation and accommodation costs to provide better access to vocational education possibilities, and the grant program for IDPs to acquire auxiliary materials to establish a micro business. However, it is believed that these programs are rarely analyzed to understand what impact they have on the IDP community and those communities they are living in. It is evident that the analytical division fails to conduct in-depth research and evaluation to understand program impact and to propose changes to strengthen programs and to make them more effective.

One of the latest challenges that the analytical division encountered relates to the abolition of a monthly financial assistance of GEL 45 to IDPs who are no longer in need of financial assistance. The division conducted a brief evaluation to caliber the financial assistance program more targetly. Based on the analysis, the analytical division proposed to reform the program to exclude IDP families that were no longer dependent on assistance. However, this decision has backfired. The division made this conclusion based on their largely statistical analysis and did not engage the IDP community to substantially grasp the scale of the issue.

The report was well-scrutinized by external actors such as a non-governmental coalition as well as international donors. During the discussions, it has been observed that for the evaluation purposes the analytical division did not take into consideration internationally recognized criteria for establishing vulnerability of target groups. The evaluation was extremely non-structured and chaotic in terms of visual and content and did not include criteria such as level of education, revenue, possession of a property, social connections and participation of target groups in social and political life of the country. The evaluation did not propose robust arguments and did not convince actors in the necessity of removing the financial assistance. It left the impression of being a rather rapidly prepared document that aimed at serving a political purpose more than the interest of IDP community. Eventually, the ministry abandoned the attempted reform and left the assistance untouched.

The analytical division can play a positive role in evaluating the housing allocation program for IDPs. It is observed that the program lacks coherence and that the approach favors ghetto type settlements for IDPs, which creates more complex challenges for the government when it is not well planned and implemented. It is evident that the program requires to be enriched by massive skills improvement and integration programs to achieve its objectives. To make the division more effective, it should be ready to conduct a more comprehensive study and not rely only a minor assistance programs that barely have impact on 300 000 IDPs in the country.

Today, the ministry's approach to analytics can be described as patchy, sporadic and not comprehensive. Dishing out support to IDPs without a clear understanding of needs/ vulnerability criteria risks fueling social envy in country that further hampers integration.

9. Analytical Capacity from the Labour and Employment Department Perspective

The labour and employment department has successfully cooperated with the analytical division recently. The analytical division expressed willingness to participate in the elaboration of a Labour and Employment Strategy document development.

It has been observed that in spite of the division's limited subject matter expertise, the cooperation between the department and the division turned out to be positive. The department has been able to gather various statistical data to be used for the strategy document and identified precise and measurable short, medium and long-term indicators while the division assisted in strategy design and development, log-frame elaboration and in identifying respective key performance indicators (KPI) for the strategy. This cooperation proved that there are many avenues for the division to make substantial contributions across ministerial departments.

This cooperation has also shown that there is a serious lack of program monitoring and evaluation capacity in the departments, and that the analytical division would be well placed to help monitor identified indicators and organize and conduct evaluations if required. The department has various programs and those programs are implemented through a grant mechanism. While the department and subordinated agencies can monitor program implementation, this monitoring does not have an analytical character.

The ability to analyze and understand the impact of cross cutting programs conducted by subordinated agencies remains one more challenge for the department. There are programs that are interconnected by nature but implemented by different LEPLs. The programs may have different titles but in essence, they serve the same goal. The analytical division should be capable of identifying this kind of operational aspects and assist departments and sub-agencies to more targetly design and implement programs to make them more effective for beneficiaries.

Alongside with various statistical data, the department relies on the SSA's WorkNet database to plan employment policy. This database is crosscutting in nature as it contains data on various groups. The database contains data on up to 300K potential jobseekers and can potentially have a great value for the analytical division to conduct research and analysis. However, the database's filtering system is weak and unstructured, and the registration procedure for employers is complex and cumbersome. This keeps potential job offerors away from the system. A lack of information about the availability of the portal is another challenge; employers are not aware about the existence and functions of the portal. The analytical division can theoretically help to improve the system to conduct in depth analyses with the existing data as well as advise on making it more robust and useful for the department.

In 2015, the department had a labour market analysis division with the task to develop an information system that would compile all research and statistical data under one place. However, in 2017 it was decided to move this system under the management of the Ministry of Economy and Sustainable Development (MoESD). Today, the Labour Market Information System²¹ (LMIS) serves "as a One-Stop-Shop integrated public web portal and provides updated

²¹ Labour Market Information System (LMIS) retrieved from www.lmis.gov.ge

information on labour market trends, career guidance and occupational profiles for different stakeholders (pupils, students, jobseekers, research institutions, governmental bodies, private sector and etc)". The web-portal is an "information bank gathering labour market indicators which are visualized and easily understandable for users" (LMIS, 2019). However, LMIS cannot respond to dynamic nature of a labour market in the country. This system gives a sporadic and irregular snapshot of different aspects of the labour market. It is neither continuous nor enough to make robust policy for a more effective and result oriented labour market.

The services produced by the analytical division can be used for increasing social awareness among social agents²² such as private sector and labour unions to align their expectations with the labour market policies planned by the ministry. Currently, the division is not participating in the meetings organized by the department and social agents where many sensitive issues of labour market policy are presented and discussed, however, in the future their analysis can have a positive impact on the process if timely and effectively delivered.

There is substantial organizational restructuring expected at the ministry. The employment department under SSA will either be joining the Livelihood Agency or will be established as LEPL to strengthen and to make employment policy more streamlined and predictable. The analytical division can have a role in improving the operational capacity of the agency by providing them with mechanisms on data monitoring and by planning in advance the evaluation of potential programs implemented by the agency.

The department cooperates with third parties when necessary and uses the data gathered by non-state actors for policy design and development. However, when it comes to producing their own analysis, the department is lagging behind.

As observed by non-state actors, it is difficult to assess the quality of analysis produced by the department. Even though, the government has taken many obligations under the EU association agreement to produce all sorts of data on labour market and employment, the department fails to do so. The existence of a robust analytical division could be a positive step towards producing analysis and providing reliable data on working conditions in various institutions or private enterprises. In particular, this would help clarify the extent to which there are violations in working conditions, and what enables or causes bad or good conditions. Today, the ministry does not have this analysis and cannot design respective policies to respond to existing challenges.

Similarly, the department has failed to produce data on mediation at the workplace; another major direction of the department. The department produces no analysis whether the existing mechanisms of mediation work or not. There is no clarity as to what kind of disputes are being mediated, how they are solved, how many disputes are mediated and how many of them help prevent social dissatisfaction nor how this pattern is distributed across sectors.

²² In this context Social Agents are organizations, institutions, formal or informal formations that can play important and crucial role in defining labour and employment policy. They are the main stakeholder and their opinion is usually considered by the state in designing and implementing respective policy.

The ministry does not have information about which sectors are more prone towards strikes and what could be the reason for dissatisfaction. Sometimes this kind of brief is prepared by international actors to serve their narrow interests. Sadly, the department does not have the capacity to deliver a holistic analysis continuously and reliably. A strong analytical division capable of tracking and producing proper analysis can help the ministry as well as non-state actors to react and effectively respond to challenges in the labour market and employment.

10. Challenges in Labour and Employment Analytics

The employment department at SSA is the main player in employment program implementation nationwide. Customers receive employment services by approaching SSA regional bureaus nationwide. The services include registration in a job seekers database, education related services, subsidy services for youth with disabilities or internship services for youth, etc. SSA collects and produces data and keeps them in the WorkNet database.

The database has large number of job seekers registered, including socially vulnerable beneficiaries. When a potential beneficiary approaches SSA to receive a score for social assistance, this person is asked to be registered in the WorkNet database. Today, there are up to 300K registers in the database. Registration can be made directly at SSA bureaus or online. When the registration is made, an operator creates a customer profile to include demographic data, education, qualification, language level etc.

The department promotes this database among recruiters, including small and large enterprises registered in the country. As observed, the database is more actively used by large enterprises such as large supermarkets or retailers rather than small ones. When there is a need for a retailer to hire large number of employees then they use the service offered by the department for free. The department organizes job fairs in Tbilisi and regions to create opportunity for beneficiaries, however, it completely lacks the capacity to analyze its impact.

The department is understaffed and cannot produce any type of labour or employment related research. It does not have a holistic and in-depth knowledge on employment trends, job market requirements or other important parameters to propose respective programs or changes in employment policy.

What is most challenging is the inability of the WorkNet database to produce statistics. The database contains a good number of entries but faces technical shortcomings in producing statistical data. This severely impacts the department's capacity to produce statistical analysis and to further advance the database. Moreover, the department does not usually receive feedback from job seekers who found a job via support of SSA, nor do employers provide feedback whether the offered jobseeker received the job or not.

Ideally, the combination of LMIS and WorkNet data can be a great source for the department to produce analysis and to observe trends in the labour and employment market, however, the patchy character of LMIS, the inflexibility of WorkNet coupled with an understaffed department do not help SSA in producing highly important, requested and necessary analysis.

The analysis of safety at the workplace is yet another thorny issue for SSA. The government has been criticized for not being able to guarantee safety standards at the workplace. A recent report by Human Rights Watch (HRW) highlights that “the lives and health of workers in Georgia’s mines are at serious risk due to insufficient government regulation and weak labor protections.” The report blames “years of deregulation” as the main reason for poor workers’ safety.²³ The

²³ HRW report 2019, retrieved from <https://civil.ge/archives/317570>

regulation to address safety at the workplace has been introduced in September 2019 by GoG and the SSA's labour inspection department was tasked to implement and monitor the regulation.

SSA took the responsibility to ensure that labour inspectors are ready to work with public institutions and private enterprises to implement the safety standards. The department works with international actors such as RRC International²⁴ and local training centers to acquire knowledge and expertise in labour safety. The department maintains a labour safety inspector register to have information on certified labour inspectors and to be able to use them upon request.

It is believed that there is a serious lack of basic knowledge of safety standards at SSA and elsewhere. Basic knowledge to differentiate threats from risks, to make risk calculations or identify principles of hierarchy of risks control, etc. are missing among experts. Should they not be able to adequately acquire respective education in safety standards, low quality safety standards may spread nationwide.

Safety needs to be communicated adequately to raise awareness among public and private institutions so that standards are respected and employees better protected. Implementation of international safety standards such as ISO 45001 or Institution of Occupational Health and Safety (IOSH) training certification does not automatically guarantee that safety at the workplace is ensured, the commitment of top management, the allocation of respective finances as well as an understanding of the importance of quality safety standards play important roles in making public or private institution safe to the work force and organization itself.

Expert hail the successful launch of the application on "safety at building sites" by the SSA's inspection department. The application is available for android and IOS users and provides useful information on safety standards free of charge. It helped a lot of enterprises to better grasp the scale of threat and reflect on existing conditions at their respective workplace. However, it is not clear whether SSA has an analytical capacity to gather and analyze information derived from the usage of the application, including number of downloads or how many enterprises used the information provided by the application and improved safety standards for instance.

Organizations in Georgia perceive the implementation of safety standards as an organizational costs that must be avoided if possible, without realizing the short- and long-term positive consequences safety standards usually have on organizations. The analytical division could play an important role in analyzing international experience of cost-benefits of safety standards and share this data with organizations nationwide to help them understand the issue. Plus, it would enable the division to create a baseline for data collection and build upon as time passes to observe the positive or negative impact of safety standard implementation across agencies or enterprises. Likewise, the division could advise the ministry to design a program for raising awareness on safety standards in schools or universities so that citizens understand the complexity of the issue more comprehensively and do not resist when it is enforced.

²⁴ RRC International, trainings in labour safety, www.rrc.com.ge

11. Analytical Capacity from the Health Department Perspective

The ministry has four major thematic directions under one political management. Having the analytical division capable of effectively, timely and reliably responding to all demands is a challenging task. The analysis in the health sector, like in any other sector, requires specific knowledge and expertise. It would be extremely difficult to find knowledgeable personnel with a robust health background to work at the analytical division.

Analysis requires continued monitoring, data gathering and evaluation, but the personnel at the health department have limited capacity to reliably monitor programs and projects. Whenever an external assessment is required the department works with the procurement department to ensure that a respective external resource is available to conduct an assessment or evaluation. “The department should remain as an engine for health policy planning; this is a place where all data is collected and analyzed by the respective personnel” (Interview, 2019).

The health department consists of four divisions: a policy division, a division for health and public health programs, a regulation division and an organizational division. The organizational division is created by governmental decree to serve as a secretariat for an individual referral program, i.e. it receives requests on specific cases from a specific group of beneficiaries. These beneficiaries do not usually fall in conventional health programs and require a specific approach from the state. The best example to describe the work of the organizational division would be the help provided to residents of Abkhazia or Tskhinvali autonomous region (South Ossetia) to receive health benefits in the country.

The regulation division is tasked to produce normative acts to regulate medical activities, public health and pharmaceutical activities. This includes issuing licensing for medical or pharmaceutical activities and work force regulation, development of technical norms in public health i.e. quality of water and air, noise, development of blood safety regulation, transplantation. These norms and regulations are mandatory for all private or public hospitals, health or non-health related institutions or organizations.

The health and public health division designs and develops programs such as the universal healthcare program (largest program of its kind for the department) and the C hepatitis elimination program. It also has so called vertical programs like a program for epidemic surveillance, safe blood, screening and early prevention of disease. Similarly, there are programs such as fighting AIDS, tuberculosis, mother and child healthcare, diabetes, liver transplantation and dialyses program, psychological support and drug addiction programs. A village doctor and urgent medical assistant programs are part of the division. The division receives program reporting and analysis from respective subordinated agencies and reporting has a specific cycle. There is quarterly, semi-annual and annual reporting to monitor the implementation of the programs. The division tracks data and should there be necessity to make amendments in the program, the division cooperates with other agencies to introduce changes in the respective programs.

The policy division should regularly develop two types of policy reports: the National Healthcare Account (NHA) and the National Health Reporting (NHR). These reports contain data from

subordinated agencies, the statistics department as well as the donor community, and it takes time to design and develop the reports. NHA focuses mainly on accounting for financial flows within the health sector while NHR is more contextual and contains also data on human capacity, main healthcare parameters, and impact on the environment or population, etc.

The latest NHA²⁵ from 2017 is a combination of four two-dimensional tables that show the financial flows in the healthcare system, the sources of funds mobilized in the country, their accumulation according to public or private sector, the fund disposition according to institutions and healthcare providers and the fund distribution according to the types of services. For example, 32% of the overall 2017 healthcare budget of GEL 2.9 billion were allocated to the Social Service Agency (SSA) to fund healthcare services in hospitals with a general profile, specialized hospitals, ambulatory services, doctor clinics as well as hospitals with psycho-neurological profiles, diagnostic centers and laboratories, emergency stations, etc. SSA's funding helped hospitals and ambulatories to serve citizens and provide services like surgery, therapy, gynecology, oncology, treatment of tuberculosis and infectious diseases (AIDS, STD, etc.). SSA funded ambulatory services for citizens to receive basic medical and diagnostic services as well as transportation services in emergency situations.

NHA points out that in 2017 non-state allocations were used in parallel to state funding. Non-state funding was allocated to hospitals and ambulatories to provide services. However, in contrast to state funds the large majority of private funds were allocated to procure medical products, medical devices and equipment. Out of GEL 1.75 billion allocated by private sector for healthcare purposes, 40% were invested in medical equipment and devices. The data²⁶ from 2012 to 2017 shows that the healthcare expenditure via-a-vis GDP in average stands on 8,3% and therefore has a substantial influence on macroeconomic parameters in the country. Given the exiting data it is clear that in order to produce robust analytics the analytical division should be capable of analyzing the impact that the healthcare budget has on the country's economy.

In parallel to NHA, the healthcare department is tasked to produce NHR. NHR is much denser and covers important aspects of health care such as key health problems, touches upon behavioral determinants, health status as well as service delivery, human resources, pharmaceutical market, health care financing, etc. NHR acknowledges that healthcare is crosscutting in nature and therefore, also focuses on variables that fall outside the health system like food, environment, social and other determinants, quality of physical and mental health and social well-being.

The latest NHR 2016-2017 report²⁷ identifies improvements in the health of the population, the protection of the population from financial risks, equal distribution of financial burden, efficient use of available resource and responding to the health needs as the main objectives for the health

²⁵ National Healthcare Account (NHA) from 2017, retrieved from <https://www.moh.gov.ge/uploads/files/2019/Failebi/02.05.19-2017-NHA-geo.pdf>

²⁶ National Healthcare Account, 2012 – 2017 results, retrieved from <https://www.moh.gov.ge/uploads/files/2019/Failebi/02.05.19-2012-2017-geo.pdf>

²⁷ National Health Report 2016-2017, retrieved from <https://www.moh.gov.ge/uploads/files/2019/Failebi/16.08.2019.pdf>

system. The report echoes WHO recommendations that for establishing an effective health system it is salient to ensure high quality healthcare service delivery, highly qualified healthcare personnel, quality treatment means i.e. vaccines and technology, healthcare financial system, leadership and management (NHR, 2016 - 2017). Undoubtedly, this is a comprehensive healthcare quality framework that the Georgian healthcare system should be striving for. However, in order to achieve quality healthcare, it is vital to be able to evaluate and assess those programs and services that are designed and delivered nationwide by the ministry and subordinated agencies. Today, program evaluation in healthcare remains a challenge for the department.

The report rightly points out the shortage of nurses in the system and the excessive number of doctors and compares the data with European standards. It focuses on financial structure of the healthcare system and states that the private sector plays tremendously important role in providing healthcare services. Only the Netherlands have a similar high number of private actors in healthcare service delivery. The report underlines the increase in the budget expenditure in healthcare and correlates it with the steady decrease in out of pocket expenditures that the citizens used to pay for healthcare services prior to the introduction of the universal healthcare system (NHR, 2016-2017). However, out-of-pocket expenditure data is contradictory as claimed by third-parties.

Interestingly, NHR points out that since 2015, the share of public funding in hospital services has ranged between 60-70% and exceeded out-of-pocket payments by citizens. NHR claims that “as another major success of the universal health care program and a significant benefit to the limited consumer basket” (NHR, 2016-2017). And yet, third-party assessment on the same subject indicates the 70% increase in out-of-pocket expenditures among families and points out the expenditures in drugs and medicaments as the main cause for the increase. The natural reaction should be to conduct analysis and engage in this process Drug Agency (DA) and Geostat to better understand and analyze drug price characteristics and trends as well as the economic and social state of households nationwide. However, today the health department would not be able to do so because of the limited human and financial capacity as well as the very weak institutional state of DA without an analytical unit to produce this kind of analysis nor reliable data on drug pricing in the country.

Generally to produce this kind of reporting, the health department needs to gather the data from subordinated agencies like NCDC, RAMA, SSA, DA, Geostat as well as refer to WHO, IHME, WB, UNICEF etc. Even though the healthcare department develops rather comprehensive reporting, it has difficulties in evaluating what kind of impact the delivered programs have on the society.

These reports are extremely important, however, to design robust policies and to respond the challenges identified in the reports it is vital to have evaluation capacity and be able to continuously and reliably gather data throughout. The sole evaluation report²⁸ that the assessment team encountered is the intermediate evaluation report on National Strategy for the

²⁸ National Strategy for the Elimination of Hepatitis C 2016-2020, GGI, USAID, 2018

Elimination of Hepatitis C 2016-2020. The report evaluates the impact of the program in years 2016-2017 and is funded by USAID's Good Governance Initiative (GGI) project (USAID, GGI, 2018).

The health department has produced NHA and NHR and cooperates with subordinated agencies to collect data and to have reporting in place. However, the same reports clearly point out that the health department lacks the capacity in producing in-depth or multimethod analysis. For instance, NHR does not include statistical regression analysis to understand in depth the correlation between dependent and independent variables in health-related programs. This is a serious lack of capacity that prevents the department from establishing potential causal links between identified indicators in programs and their results. The task of the analytical division is to close this gap and to scientifically strengthen the level of analysis the health department produces.

Looking at the upcoming analytical division as a potential think-tank within the ministry, parallels come to mind to the earlier National Center for Health Management established in early 2000. The center aimed at working with the ministry to produce analytical products and to have a think-tank function. In 2006 the center stopped functioning for political reasons mostly and the ministry tried to absorb its personnel in the health policy unit of the ministry. However, it proved too difficult for the ministry to retain highly qualified personnel. Generally, it would be extremely difficult for the existing analytical division to hire qualified personnel as these experts usually work internationally and the ministry and bureaucracy cannot pay competitive remuneration as well as ensure flexibility in their worktime (Interview, 2019).

It is believed that having a standalone analytical division that can overlap with the analytical functions of the health department could be risky should not it be able to understand for instance, epidemiology or the economy of the health sector specifically. Likewise, the division should be able to have expertise in the regulatory environment in order to holistically understand and analyze the health sector (Interview, 2019).

Healthcare is in essence a crosscutting sector as it touches upon many aspects of social life. Any reform, therefore, also needs to look at the sector holistically. With the available limited financial resources, it would be extremely difficult to have the variety of expertise that sound health sector analyses require. It has been observed that perhaps, having a small unit under the direct subordination of the minister to advise and conduct rapid assessments may be more productive and beneficial for the ministry. Or likewise, having a strong analytical unit or division at LEPLs can be beneficial because LEPLs have usually flexible mechanisms in place to hire short or long-term subject matter expertise (Interview, 2019). However, bearing in mind the nature of the ministry where health and social affairs crosscut each other and where the health and social departments often work in cooperation to identify in which portfolio a particular program should fall, the analytical division should be able to understand internal crosscutting and complex processes and act according to the demands deriving from the respective departments.

New requirements imposed by the government such as the Regulatory Impact Assessment or Environmental Impact Assessments require specific expertise and knowledge that the department

does not have at the moment. Perhaps, the analytical division on the one hand should be a division that is capable of diplomatically approaching other departments while offering its existing services, and on the other hand, be able to bring new crosscutting expertise to respond to regulatory or environmental impact assessment aspects at the ministry.

11.1. Information Flow between the Health Department and Sub-Agencies

The health department largely receives information from two sub-agencies: National Center for Disease Control and Public Health (NCDC) and SSA. While the former provides strong analytical data and reporting, the latter provides mostly data to analyze and match with the requirements of the department. SSA does not usually provide analytical reporting. Moreover, the SSA database is not particularly user-friendly for producing easy reporting and analyses. Additionally, the issue of personal data protection must be considered by the department while demanding data from SSA. The department usually receives already filtered information as the SSA databases are massive and contain plenty of data that must not be accessible to everyone. To receive the data, the department had to sign an agreement with non-disclosure clauses (Interview, 2019).

NCDC usually provides dashboard style information and information exchange is fast and effective. The center has a strong statistical unit and a robust data management system. This combination helps the health department to acquire quality and reliable analysis timely and effectively. To say the same about SSA would be unfair (Interview, 2019).

Despite challenges in data collection and data processing across the ministry, the health sector benefits from the existence of an Electronic Integrated Disease Surveillance System²⁹ (EIDSS) run by NCDC. EIDSS main purpose is to strengthen and support the monitoring and prevention of human and animal diseases within the framework of the concept of "unified health" and to support the implementation of the International Medical and Sanitary Regulations (IHR). EIDSS consist of the following modules: human diseases cases module, veterinary diseases cases module, veterinary active supervision module, vector control module, laboratory module, administrative module, main databases supervision module, deviation analysis module and analytical module, the letter also includes Geographic Information System (GIS) capabilities.

This sophisticated data management system allows NCDC to manage disease-specific information by case, linking them with relevant laboratory data and presenting them in an aggregate manner. The system collects and disseminates data in near real-time on a secure and reliable format, providing access from desktop (installable version), web and mobile devices. The various levels of the National Disease Surveillance Network and ministries are connected nationwide. EIDSS provides data to the World Health Organization (WHO) Infectious Disease Information System (CISID) as well as to other authorized data exchange platforms. Using the open architecture module, EIDSS configuration can be customized to meet country requirements such as disease listings, official reports, disease-specific research forms, and more. Today,

²⁹ EIDSS - National Center for Disease and Control and Public Health retrieved form <http://www.ncdc.ge/Pages/User/LetterContent.aspx?ID=c624e6d5-f86f-4ae1-bc80-bc98937bc16b>

EIDSS network covers 190 facilities, 90 of which belong to MoIDPOTLHSA, 97 belong to the Ministry of Agriculture (MoA) and 3 facilities are shared by two ministries (NCDC, 2019).

The data and analysis produced by other subordinate agencies seems to be less reliable and weakly structured. This brings confusion and prevents effective policy planning. It is believed that nobody is able to say with confidence the exact number of hospitals as well as total number of beds in hospitals in the country. There are three or four different databases to look for this kind of data but all of them have different information (Interview, 2019). The quality management in the health sector is not systematic. There are several indicators such as number of beds, waiting time, hygiene, cost-efficiency etc. but there is no quality certification for instance and a comprehensive form of quality management does not exist in the system.

In terms of cooperation with local authorities, Tbilisi municipality has the largest healthcare program package, followed by the Autonomous Republic of Adjara and Abkhazia. The department demands information and reporting about their program and the exchange exists but it may not be as regular as one expects. Other municipalities largely provide on demand assistance whether helping a citizen in funding surgery or allocating supplementary finances for specific demands. Information from the regions comes from the Emergency Response and Coordination Center regional brigades as well as from SSA's regional branches, which helps in observing the health care indicators in the respective regions. Still, the main channel for the information about healthcare at local level remains NCDC as the center collects information from municipalities, the public healthcare centers representatives as well as from National Food Agency (NFA) under the Ministry of Environmental Protection and Agriculture (MEPA).

Since 2013, there is an effort not to increase prices in the health sector. But it is clear that with changes in the economy and ever-increasing inflation, it is unsustainable to navigate with the old price structure in the health sector. Even though rarely anyone admits that the healthcare service quality deteriorates it is evident that the quality in terms of hospital service or drug quality goes down (Interview, 2019). When hospitals rely on state funding while providing services and the service prices are fixed as required by the law, and when the inflation strikes, there should be a balance between public and private interest.

12. Challenges in Health Policy and Healthcare as Seen by Actors

A reliable, continuous and evidence-based analytical capacity would be a tremendous asset for the ministry. There are several ongoing processes to improve the analytical capacities in the health sector at the Parliament of Georgia (PoG) and the Ministry of Health of the Autonomous Republic of Adjara (ARA). PoG decided to establish a LEPL to increase its analytical capacity and this process of forming an institution is currently ongoing. While for ARA, evidence-based decision making remains the field to explore. ARA largely depends on priorities identified by the center and it rarely produces strategic assessments to identify its priorities for the region.

As concerns the analytical capacity of the health department at MoIDPOTLHSA, it is evident that the department has several sources for producing analytics, including NCDC, WHO standards and its own internal capacity. Each of them has limitations. NCDC is a very thematic agency, it has its specific directions and experts in immunization, epidemiology to discuss infections as well as chronic disease. NCDC produces relatively good reporting in the respective sectors. For instance, NCDC has expertise in immunization and epidemiology that can be effective in analyzing infectious disease while its capacity in chronic disease analyses may not be as effective. Overall, NCDC's capacity in analytics is limited as it uses largely its own data to make judgment and does not have the robust capacity to use international scientific data, mix it with own data and produce scientifically strong evidence-based analytics.

NCDC is a leading force behind e-health, it designs and develops apps to broaden the utilization of technology nationwide. Still, the usage of for instance the vaccination app to inform parents on the availability of vaccines for children is extremely limited. Only 2,7% of parents with newly born children downloaded the application nationwide (Interview, 2019). This figure shows a very low level of utilization, and it is not clear how many of those who downloaded the application have used it actually.

NCDC has several specific registers such as cancer or C-hepatitis database, etc. and they interact with the database of Public Service Development Agency (PSDA) under MoJ to track birth and death statistics of beneficiaries. For instance, UNICEF initiated several projects to better monitor mother and child healthcare parameters. To produce robust analysis, the organization helped NCDC to develop a mother and child module within the existing e-health system. It allows the ministry and subordinated agencies to track the parameters related to mother and child health as well as to have the possibility to produce reliable and sustainable analysis.

For that matter a birth register was integrated to the death-birth module in the e-health system to allow monitoring of various parameters in mother and child healthcare and to track data throughout pregnancy until the moment when mother and child leave the maternity ward. As an example: should a mother with a cesarean section return to the maternity ward within the first 42 days from leaving, the system can track whether this return is linked or not to the fact that she had a cesarean intervention while giving birth. By using ID numbers in the register, the system is capable of tracking individuals and linking them with other datasets when required (Interview, 2019).

Moreover, to further advance the mother and child healthcare monitoring system, a pilot project was initiated to develop a primary healthcare module and an ambulatory module. This allowed the system to monitor mother and child healthcare from leaving the maternity to starting school. This tracking stops here for the time being, however, this e-health system has a vast potential to expand and to add more modules to deepen the monitoring and to produce even more detailed analysis.

All these projects were initiated under the mother and child protection policy strategy development that showed that the main weakness of the system was related to a chaotic ICT structure. To make this efforts even more effective UNICEF engaged with a Norwegian university to work on database quality aspects and to receive guidance on how to improve data collection and data reliability. Since 2018, database reliability reached satisfactory levels. It was decided to allow the ICT department at the ministry to hold the database and NCDC to manage it.

NCDC established a register bureau to monitor the quality of data in the birth registry database. The database has various filters to reduce the possibility of false information supply. The responsible bureau engages on a daily basis with data suppliers like maternity houses or hospitals should they detect any anomalies in the database. This highly controlled and monitored data supply system helps to keep data reliability and data validity and hence, ensures the overall quality of the birth register/database.

The first results of this well-maintained and managed database emerged almost immediately. The data analyses conducted by NCDC revealed that the number of cesarean sections in the country had skyrocketed. This information triggered an analysis to find out whether women demand cesarean sections because it is allowed and not restricted or because of a particular pathology that would require cesarean intervention. Further in-depth analysis revealed that there was a 70% increase in babies being aligned horizontally in mothers' wombs. This pathology is not new, but it is unprecedented to have such a massive increase in any country. Comparison of this data with the data derived from ultrasonography showed that fetuses usually showed no anomalies at 35 weeks of gestation. This cross comparison clearly pointed to the fact that doctors at maternity houses had the tendency to manipulate data to pave the way for cesarean intervention procedures even though they knew that this is not a recommended way to proceed with cesarean surgery. This analysis showed that instead of fighting pathology, lowering the number of cesarean sections would require working with doctors, maternity houses and mothers and fathers to raise awareness of the negative side of cesarean intervention in the absence of a medical indication.

In the past this kind of monitoring and analysis were organized and hosted by the mother and child department at the ministry. Since 2007 there is no specialized department that looks at this issue specifically. Today, NCDC oversees mother and child healthcare issues and there is no specific department or division responsible for mother and child healthcare policy design, monitoring and evaluation at the ministerial level. Even though the analytics produced by NCDC is good and reliable for respective directions, it is not enough for complex systemic reform and transformation of the health sector.

The health department at the ministry is extremely limited in human resources, and this reflects on its capacity to produce analytical reporting. As an example, if the department focuses on reproductive health reform, it uses its own data and compares it with the WHO standards and produces the respective output. It rarely has the possibility to benchmark and look at international experience to make a robust judgement. Moreover, to produce mother and child healthcare analytics the health department completely relies on the voluntary work of a secretary at the mother and child advisory council. This person reaches out to NCDC and SSA outside her regular duties to gather the data and then produces the analytics that is further presented and discussed at the council. Should the secretary decide to leave the position for whatever reason, or the ministry decides to abolish an advisory council, the health department will have a serious challenge to develop the analytics discussed above. It is so limited in human resources that one person should be simultaneously responsible for reform in psychiatry and tuberculosis while also having expertise in health economics and child and mother healthcare. This is not a sustainable approach and leads to high stress and low quality of policy making (Interview, 2019).

There are plenty of vertical programs implemented by the ministry and subordinated agencies. Each program has evaluation criteria, indicators, etc. However, the assessment could not verify that anyone has ever conducted an evaluation, with what results and if the evaluated outputs and outcomes were integrated in the healthcare policy design and implementation. For example, a village doctor program underwent several substantial changes, but there is not a single evaluation report that shows the reasons for the changes, whether the program achieved its objectives or if the current setting is good enough for the program to respond to citizen demand. Asked about program analysis, the ministry usually affirms that analysis is being produced. However, the written analysis does not usually go beyond basic data gathering like the number of patients the village doctor met, the number of houses the doctor visited, etc. This information is captured by the doctor in Excel files and is sent to SSA, and yet, there is no mechanism in place to ensure that the information provided is really reliable and valid. This is not the right way to produce analytics to understand healthcare trends in villages nationwide.

Instead of being an interlocutor among the ministry, external subject matter experts, academia and the donor community to plan health policy effectively and to be able to foresee the potential risks of certain decisions, personnel is overwhelmed with tasks and remain in a reactive mode. The department cannot be oriented on short-term policy planning and should rather have long-term goals and a vision to advance the health sector. Limited human resources are not the only challenge for the department. Another issue is the effective allocation of tasks among the limited number of personnel to produce an output. Some of them are producing more and they usually are the main contact figures for outside actors while the others are not visible to external actors and their work output in terms of quality is limited.

Heavy dependence on the donor community in terms of policy planning is another challenge. Donors usually fund programs such as AIDS and tuberculosis, but they do not fund mental healthcare or universal healthcare programs. This is where it is important for the department to produce robust and evidence-based analysis to raise funds for those programs that may have larger and direct impact on society to make them more effective.

There is a serious lack of analysis for healthcare regulatory environment, pharmaceutical procurement analysis, organized supply for hospitals, organized and well-planned service delivery. To bring an example, hospitals are one of the largest receivers of the ministry budget³⁰. Still, the ministry does not have effective and standardized means of monitoring and evaluating quality of services delivered by hospitals. Whether it is a quality of physical service in term of infrastructure or quality of interaction between medical staff and citizens, there is no continuous analysis produced on these matters to make judgement and to prompt relevant changes in a respective policy.

12.1. Further Challenges in Hospital Monitoring

Analyzing and understanding the well-being of medical personnel is another challenge. Private hospitals are usually funded through specific funding schemes attached to a particular service. The ministry has a defined amount to allocate from the universal healthcare budget for each service. This model of fund allocation encourages private hospitals to prioritize personnel whose work is highly demanded as well as highly funded from the universal healthcare budget. For instance, services of reanimation or anesthesia doctors are more valued by hospitals than let's say the work of nurses for two main reason: firstly, there is scarcity of highly qualified personnel in the respective field, and secondly, the health care budget allocates higher funding to these services.

Likewise, there is a huge imbalance³¹ when looking at the ration of doctors vis-à-vis nurses in the country. Doctors outnumber nurses, and even in areas where work of qualified nurses is highly demanded, their profession is unfairly undervalued in the system. There is no planned or effective approached in place to tackle this painful issue nationwide (Interviews, 2019). The analytical division can take a lead in introducing changes to respond to the identified challenges.

Usually, subordinate agencies monitor the standards at hospitals nationwide. The standard related to medical personnel and the quality of their work is monitored by the State Regulation Agency for Medical Activities (RAMA). The agency keeps a nationwide register and monitors the professionalism of the medical personnel. It is also tasked to look into continuous education options and to design and implement a respective educational program. It holds doctors accountable for mistakes and keeps a database (type of profession, age, region, type of a mistake, etc) for those deviations. While SSA is tasked to monitor compliance of the allocated funding to services provided by hospitals. SSA looks at the technical side of the medical process and whether hospitals comply with the standards. In addition, the ministry's health department performs monitoring to track whether respective hospitals or ambulatories comply with the standards identified in legal acts. If a hospital has a reanimation ward, then it must have a computer tomographic apparatus to deliver the respective service etc. In addition, the Agency of Nuclear and Radiation Safety (ANRS) under MEPA monitors compliance of hospitals to the

³⁰ National Healthcare Account, 2017, retrieved from <https://www.moh.gov.ge/uploads/files/2019/Failebi/02.05.19-2017-NHA-geo.pdf>

³¹ National Health Report, 2016 -2017, pgs. 16 – 19, retrieved from <https://www.moh.gov.ge/uploads/files/2019/Failebi/16.08.2019.pdf>

defined radiological standards. If a hospital has an X-ray machine, ANRS assesses whether a hospital has adequate safety standards for the machine to operate.

Sub-agencies monitor hospitals according to the standards defined in legal acts. However, there is not a holistic and interlinked system of monitoring and evaluation in the country. Moreover, hospitals do not have any obligation to share information with the ministry or sub-agencies on their management and technical operations to allow the respective institution to perform continuous analyses for instance. The only occasion when hospitals exchange information with the ministry regularly is related to the blood bank. This is a recently established channel of data exchange and allows the ministry to have a more or less clear picture where and what kind of blood is available nationwide (Interview, 2019).

Easy accessibility to the database is another insurmountable challenge for health analytics. With the modern ICT, it is possible to design and structure databases in a manner that allows the respective department to easily access data for analysis. The databases that some subordinated agencies hold are very often unstructured. It takes unreasonable time to extract simple information. For instance, a database may not be able to reliably generate the number of men and women for a respective parameter, or it is not clear why the date indication format varies from hospital to hospital. Simple parameters such as the format of birthdates are not standardized in databases, which creates tremendous challenges for data exchange and system interoperability. It takes an unreasonably long time for database managers to extract information from the database and to send it to respective department. A standardized database structure across sub-agencies would significantly reduce the time needed for generating information and would allow respective ministerial level personnel to easily access information rather than spend time of other colleagues for such simple tasks (Interview, 2019).

12.2. Lack of Analytics in Drug and Pharmacy Policy

There seem to be well established procedures developed by the Drug Agency (DA) for registering drugs to import and distribute in the country and in some cases the regulation is rather liberal. There are three major regimes to register a drug: the national regime, the recognition regime and the parallel regime. DA applies the national regime for drugs that are not reliably recognized internationally, and thus need to be scrutinized administratively as well as scientifically. The agency requests all sorts of evidence prior to giving the permission to sell it in the country.

Second is the recognition regime that allows DA to analyze whether a particular drug is recognized by respective drug agencies in preliminarily determined 37 countries of West and East Europe. The third, parallel regime is more of a simplified procedure to allow importers to distribute identical drugs but with non-identical packaging.

Even though DA produces statistics for its own purposes to understand what kind of drug is on the market, it still lacks robust analytical processing of all the data that it encounters. In contrast to other agencies, DA does not have an analytical division or a unit to easily track how many drugs fall under each regime. DA makes decisions, scrutinizes drugs, holds information, and yet, this information does not seem to be easily available for further processing and analysis. DA

cannot produce for instance drug market analyses development of which usually requires linking drug regimes to drug types that the agency gave permission to distribute.

Several documents need to be presented when an importer approaches DA to request permission to distribute a product. These documents include a special form to seek permission for a particular drug or an attestation of special control etc. All these documents are produced within the agency or in the agencies under the ministry, but there is no reliable or interconnected register for those documents to allow for easy processing or to establish an e-chain for drug processing³².

Most surprising among all is the law³³ that guides the permission to import drugs. DA has certain timeframes to respond to an importer's request as defined by law. However, should DA fail for whatever reason to respond to an importer's request in a given timeframe, the importer has the right to import the drug without further delay even in the absence of DA permission. In essence, the law grants an automatic permission to import drugs and thus effectively prioritizes economic interest over drug safety.

In addition to drug import monitoring, DA is responsible for issuing permits to open a pharmacy. It seems that DA holds a rather sophisticated database about the type and operational capacity of pharmacies nationwide and publishes this data online. The agency successfully cooperates with the Customs Department of the Ministry of Finance (MoF) to share information on drug import in the country. The agency receives information about importing products instantly as it has access to the drug import database. If the DA had the capacity to link the pharmacy database to the drug import database for analytical purposes, it would be able to monitor certain trends in drug consumption by identifying for instance what kind of drug is sold most in which region. Today, this does not seem to be the case.

DA also monitors the import of narcotics, psychotropic medicaments and precursors. The latter is a group of substances (sulfuric acid, hydrochloric acid, potassium permanganate, etc.) usually used to produce narcotics and psychotropic medicaments legally or illegally. DA has an obligation to notify the UN's respective agency quarterly and annually and share data on the import of these drugs. In parallel, the agency is tasked to define annual quotas for these drugs to import. Usually, DA develops the quotas based on the data of three previous years it holds in the system. However, this contradicts standards developed internationally for quota identification.

International standard usually matches the data of the previous three years with the number of patients who received the drugs and their morbidity. DA fails to use these last two parameters to

³² Other challenges relate to stomatology materials and test systems, systems for diagnoses etc. Traditionally, these products do not fall under the pharmaceutical category and DA does not have enough expertise to respond to requests related to these products. DA often demands assistance from the stomatology association to acquire the necessary expertise, and often such requests are dependent on personal relationships rather than an institutionally established cooperation practice (Interview, 2019).

³³ Law of Georgia on Medicines and Pharmaceutical Activities, PoG, document 659, article 11, 2009, retrieved from <https://matsne.gov.ge/document/view/29836?publication=25>

understand and produce robust analyses of the scale of challenges on the local market. While DA can produce analysis on how many narcotics and psychotropic medicaments are given to authorized institutions, the chain of controls stops there as it does not receive further data on how many patients receive the drugs and for what kind of disease.

DA inspectors usually conduct monitoring in authorized pharmacies to track whether the quantity of drugs given matches the number indicated in prescriptions. Often there are some discrepancies, but the reasons for this kind of mismatch is rarely analyzed.

Moreover, DA data on these particular drugs remains largely Excel based without modern ICT based support to make the process more effective. Personnel usually complete the Excel form manually and the likelihood of making mistakes seems rather high. An e-prescription system for these kinds of drugs would help DA in producing more targeted, effective and better evidence-based analysis.

Furthermore, there are more than 4000 pharmacies³⁴ operating nationwide and approximately 10% of those pharmacies sell highly controlled medicaments. All pharmacies submit quarterly reports on drug turnover alongside a vast amount of documentation, and DA personnel has to enter this immense amount of information by hand to track, monitor and control the process. There is no ICT based system that helps the agency to monitor movement of drugs from one company to another. If for instance company A gives to company B these highly controlled drugs for whatever reason and declares that it gave 1000 packages in a given time and submits this data to DA, then DA is obliged to check the reliability of the data and make judgement and analysis on movement and turnover of drugs. This kind of transactions happen regularly, and the amount of data is simply so high that DA has serious difficulties in tracking the data to understand the reality on the market. Should DA have the human and financial capacity to develop ICT based system, it would give the agency the possibility to provide these numbers to the health department automatically, reliably and easily.

Thanks to the need for manual data entry the reliability of existing data is extremely low. DA uses a server at the ministry that does not have the capacity to process such vast amounts of data. Therefore, DA is forced to minimize the data input on drugs in e-format to be able to use the server. The data that does not end up on the server is usually kept in paper format. This creates a serious challenge as DA cannot operate effectively without access to data. The situation is similar with regard to the data archive. The agency holds the archive, but the archive is largely paper based, not digitized and cannot be used timely and effectively.

DA also holds a large drug register database. While it has been in use for the last several years, its user-friendliness is highly questionable. The database contains data on approximately 13000 drugs, but it is almost impossible to identify how many of them contain active substances for instance. Even for a rough estimation, the data needs to be transferred into an Excel format and counted manually. The result is usually low quality as opposed to exact information.

³⁴ National Health Report 2016 – 2017, pg.28, retrieved from <https://www.moh.gov.ge/uploads/files/2019/Failebi/16.08.2019.pdf>

There is a serious lack of personnel at the agency. DA is understaffed and cannot process the drug registration in a quality manner. For example, a drug importer is obliged to present a technical-scientific dossier to the agency to register a drug. Usually, these dossiers contain up to 3000 pages that need to be read and analyzed to recommend whether to allow a particular drug to be distributed on the markets. In any given year, DA receives up to 600 such dossiers. The average time an officer is expected to spend on a single dossier in much of Eastern Europe is 120 hours. In Georgia an officer is given 2,5 hours to develop more or less the same type of analysis (Interview, 2019).

WHO has worked with DA using its quality management tool to look at the licensing system, clinical trials, drug registration and permission to the market, pharmacy supervision, market inspection, drug inspection, drug production inspection, continuous education, etc. However, limited staff and lack of finance is holding the agency back in improving its institutional capacity to become effective, agile and efficient. Low fees for drug registration as well as an inability to retain whatever income they generate does not help either to further advance or strengthen the institution.

12.3. Analytical Strengths at ERCC

Established in 2013, the Emergency Response and Coordination Center (ERCC) is yet another LEPL under the ministry. ERCC serves citizens in emergency situations and operates nationwide. The center has a rather advanced system to track information and to channel it strategically so that it has easy and timely access to the data it produces daily. ERCC has a robust data management system in place to analyze a request from various angles, including the regional distribution of calls, the type of demands, the response and waiting time, accessibility challenges to villages, deviations in response to optimize and improve, the number of medical teams per region or zone, etc. Furthermore, the system allows the center to track the number of drugs and equipment per medical team in 65 regional bureaus, as well as develop and process data in medical cards developed per patient.

ERCC uses the DevExpress³⁵ platform to manage core as well as support processes in the center. The system can build processes by modules and allows for creating an interconnected system to make cross comparisons and cross modular updates. It comprises a logistical module and an HR module (including salary and time sheets for 3000 personnel). The system also allows for tracking the GPS location of each medical team by regions and to see which team performs what task: red color indicates that a team responds to an emergency call while yellow shows that a team performs hospitalization services, etc. This highly interconnected system is developed thanks to coordinated communication of analysts, statisticians, software developers, network developers and management and requires continuous operational and strategic cooperation to maintain, improve and strengthen.

ERCC's education center offers various non-mandatory courses, including a first aid course to external state or non-state institutions, including especially places of mass gatherings such as airports, Justice Houses of MoJ or generally enterprises for the purpose of maintaining labour

³⁵ DevExpress platform - <https://www.devexpress.com/aboutus/>

security. Likewise, it offers well-structured and sophisticated courses for paramedics to respond the challenge of aging medical staff that especially affects the regional bureaus nationwide.

The analytics produced in the health sector are of varying quality: sometimes impressive and sometimes patchy and chaotic. The assessment observes that there are leading agencies that manage data and information effectively and timely, they cooperate with each other and external actors to produce robust analysis. And yet, there are agencies that struggle in managing institutional as well as data management capacities and are severely lagging behind in their analytical capacity. To achieve high standards on producing analysis and ensuring high service quality, the ministry has to invest in closing the existing capacity gaps across the system.

13. Analytical Capacity from the Social Department Perspective

The social department subordinates three divisions: the division for pension and social assistance is responsible for providing assistance related to cash transfers, program division designs services and develops criteria for service delivery and monitoring division is tasked to monitor compliance of delivered services to preliminarily identified criteria. The ministry delivers social services largely via SSA and NGOs that are registered and licensed by the ministry.

The department actively cooperates with professional associations such as the Social Workers Association (SWA) to explore challenges and possibilities in the existing social assistance system. For instance, the department in cooperation with UNICEF and SWA launched a pilot project in Adjara region that aims at moving from the existing medical assessment model for persons with disabilities to a more holistic assessment model. The reform would help in better understanding the psychosocial needs and requirements of beneficiaries and to reduce reliance on making conclusions based only on medical parameters. The project attempts to explore and estimate the human and financial costs the reform may require with the main purpose of moving towards more quality-oriented services.

To increase the quality of the social services provided, it would seem necessary to increase the qualification of social workers³⁶ nationwide and consider granting local municipalities rights to have qualified social workers in place.

The department and SSA realize that there is a serious lack of qualified social workers and of upgrading the qualification of those already operating. As of 2021, the law will not allow unqualified social workers to engage with beneficiaries and the system should be ready by the time this restriction enters into force. To respond the upcoming challenge, the department reached out UNICEF and asked for a technical assistance in helping to develop a professional supervision system for social workers to increase their qualification and to make their work more reliable and effective.

And yet, the problems³⁷ that social workers face are more complex and multifaceted, including their working conditions, lack of technical equipment in regional offices and decent remuneration etc. (EMC, 2017). Importantly, the low number of social workers reflects in the high number of cases to be managed per worker. Therefore, the ministry should be looking and analyzing the state of social workers from multiple angles and making respective changes in the policy. A strong analytical capacity would be a great relief for the ministry to targetly identify burning issues affecting social workers and respond to them in a timely and effective manner.

The ministry runs several programs and sub-programs including the social rehabilitation and child care state program and its sub-programs to assist families with children in crisis situations

³⁶ It is important to make a clear distinction between a social worker and a social agent. Social worker is a profession and requires a specialized education. Social workers are expected to be highly skilled professionals responsible for working with vulnerable and sensitive groups. Becoming a social agent on the other hand requires only a brief training. A social agent is only tasked to help families to fill in specially designed forms to further process a case.

³⁷ The Human Rights Education and Monitoring Center (EMC), Working Conditions and Challenges of Social Workers at SSA, report, 2017

(food vouchers and some household items); an early intervention program teaches families with children from zero to seven years with developmental disabilities how to help and assist children to develop; habilitation/rehabilitation program for children under 18 with cerebral palsy and children with disabilities (CwD) is set to support further physical development of CwD. There is a program of daycare centers for children and a program to provide auxiliary equipment to children, including wheelchairs, both mechanical and automatic and crutches. These are evolving programs implemented by SSA and their budgetary allocations varies annually to respond the changing needs and requirements of beneficiaries. Similar programs work for elderly, for instance, a program to provide help in acquiring crutches for the elderly; smartphones for mutes and deaf beneficiaries; eye prostheses for blinds; prostheses for hand, foot and cochlear implants. The other programs include foster care service for children, small family homes for children who require state care and for underprivileged children. Community services program for persons with disabilities above 18 and for the elderly to assist them to in daily household, help them to eat, feed and so on.

The main data provider for the department is SSA. The agency implements all programs, including cash transfer, registration or de-registration of beneficiaries in respective programs. The department relies on SSA completely. SSA usually has demographic data available segregated by regions, however, if there is a specific data requested, SSA may take time to generate and deliver it to the department. Interestingly, in the past UNICEF supported SSA in developing an electronic data management system to better monitor the programs. In particular, this system was meant to generate data on children benefiting from these programs, to identify dynamics, financial dimensions, etc. However, SSA and the department have not yet explored the full potential of this electronic system to produce robust analysis.

SSA is also responsible for the Targeted Social Assistance (TSA) scoring system. This is the only system in the country that allows social agents to allocate scoring based on a specially designed formula. There are several parameters to use for the score calculation, including the education of beneficiaries, their age, sex, place of residence (city, village, etc.), revenue, expenses, health conditions, etc. Each criterion has a statistical weight for the program to calculate the score that determines whether a person is eligible for benefits or not. The families receive cash transfers as well as child benefits.

Although SSA holds and manages huge information databases, the agency mainly produces basic data analytics. The agency has the potential to go beyond basic analytics, and it does it sometimes upon specific request by the department. It seems that there is no structured approach to at which stage of a program implementation the agency is expected to provide basic analytics, and at which stage in-depth analysis, conduct simulations and program assessments to identify the effects of the potential changes in the TSA scoring system on potential beneficiaries for instance. It would be tremendously beneficial for the ministerial departments to work with the analytical division and SSA to identify and establish a perpetual data analytics cycle. The vast amount of data that the agency generates should be analyzed in-depth routinely and regularly to identify trends and effects. Basic statistical data analysis is undoubtedly important. Still, its value would multiply if it were strengthened with in-depth analysis to make policy planning more effective.

The department, alongside SSA, is currently engaged with UNICEF to conduct an impact assessment for TSA and child supplement programs nationwide. The program covers 12% of the population and spends approximately GEL 300 mln. annually with tremendous social and economic impact on the society. UNICEF is leading this complicated and complex process and the ministry assists to run it smoothly. It gives access to datasets and provides supplementary information. TSA program has been running since 2006. Until now, however, no assessment has been conducted to understand the impact of the program. Having the analytical division accompany UNICEF to learn each stage of the process and to be able to use this knowledge and skills to conduct similar assessments independently would have been an invaluable asset. However, this is not the case today. There seems to be a general lack of capacity of the analytical division to find its place within the system as well as in the policy design and implementation cycle.

13.1. Further Challenges in Data Coordination and Verification

Problems arise when it comes to cross-checking the data available at national or local levels due to a disconnect in the processing of information. When a beneficiary approaches the service provider at the central level and asks for certain benefits, he or she may have already benefited from the service at the local service center. A lack of coordination between the central and local service providers creates benefit duplication risk and increases the possibility of overlapping in services.

Another weakness in cross-institutional coordination and cooperation is revealed when looking at the low reporting in violence against children. The statute # 437³⁸ on referral mechanism to protect children against violence adopted by GoG in 2016 obliges state and non-state institutions to observe, detect and react to cases of violence. Whether at kindergarten, school, medical institution, local authority or social workers, all are obliged to report should they observe signs of violence against children. However, the reality is different, and the mechanism does not seem to function effectively. The work of analytical division can be used to identify issues and develop adequate response to the problem.

Coordination, data exchange and data analysis are vital for the social department to predict which citizens are at risk from falling in the social benefit trap. For this, the department is dependent on coordination with the health and labour departments for cross cutting analysis capabilities. If a citizen does not work or suffers from health issues, it is highly likely that this person becomes socially vulnerable and starts requesting social assistance. The ministry tries to establish linkages to track potential risks by guiding the socially vulnerable to register in the job seeker database for instance. Registration in WorkNet helps beneficiaries to receive job announcements by SMS and increase their chances of finding a job. Citizens may be given the possibilities to receive information about potential jobs, but it is up to them to make use of this possibility. Some may act to find employment, others may not for fear of being excluded from

³⁸ GoG statute 437 on referral mechanism to protect children from violence retrieved from <https://matsne.gov.ge/ka/document/view/3394478?publication=0>

the social benefit scheme (Interview, 2019), including preferential treatment in paying less communal fees for instance.

To respond to this risk, the ministry based on preliminary findings of UNICEF's TSA impact assessment, introduced a new approach to encourage beneficiaries to move away from social benefits. Gradually rather than immediately removing benefits allows beneficiaries to keep their social benefits for a year in parallel to their income. After a year, SSA reassesses the state of the beneficiary. Even if the social benefit is removed, SSA will keep the beneficiary's allocated social score on record. If the beneficiary then loses again income, he or she can use the already allocated score to re-demand the social benefit. Whether this approach is impactful remains to be seen and analyzed.

This is where the work of the analytical division can be extremely useful. For instance, last year the fee on electricity increased, which could have had an influence on social scoring. However, it is difficult to judge without simulating the change in the social assistance scoring system. Being able to perform simulations in the scoring system to what would happen if the statistical weighting of a given aspect were to be changed, would increase the value of the analytical division immensely.

The division is expected to be able to produce deep analyses and to go beyond what the ministry already knows and is capable of. Therefore, the division should not play the role of a mediator between the department and subordinated agency. Rather, it should add value to the departments in making analysis more sophisticated, professional, visually and contextually rich and reliable. For instance, the department is really struggling in identifying what impact, positive or negative, the implemented programs have on beneficiaries. Perhaps, the immediate impact is easier to monitor, while medium and long-term impact of those programs is less clear.

To bring a brief example, there is a program to provide daycare for children with disabilities. The existing monitoring practice allows the department to see whether a child uses the services offered by a daycare center. Knowing whether a child is present or absent from the center is crucial to identify if a voucher issued by the state is well used or not. The program uses a standard approach to provide inclusive occupational therapy, physiotherapy logopedic service etc. However, what is lacking in this and other programs is the ability to identify what kind of impact these services have on children with disabilities, whether it is positive, neutral or negative and what is the unit cost in the program. These kinds of programs have been running for years already and it is difficult to judge with clear and reliable evidence whether they are successful, should be amended or additional services and finances added to make them more effective and beneficiary focused. For instance, the department and SSA did not have the possibility to calculate the unit cost of the services in the past. Therefore, the on-going disputes between the ministry, SSA and service providers about the lack of financing may never be resolved fairly. The analytical division can also look at introducing service pricing and costing methodologies and instruments to help to solve disputes related to service costs.

Moreover, similarly to the health department social department believes that the analytical division should have the capacity of familiarizing the departments with upcoming changes to the

system. For instance, the government plans to introduce new instruments in program design and planning, like financial impact analysis, regulatory impact assessment (RIA) or environmental impact assessment. These are absolutely new and unknown directions to the department and it would be useful to have a division capable of explaining the upcoming innovations and facilitating their implementation across the departments.

13.2. SSA's Approach to Analytical Capacity

SSA is the main implementing agency for programs on social, childcare, healthcare, cash transfer and employment policies. Each of these five policy directions has sub-programs that SSA implements from 69 territorial bureaus.³⁹ The agency generates an immense amount of data and information and produces the respective statistical reporting.⁴⁰

SSA established cross-checking channels with other state agencies to better monitor the social state of beneficiaries. Cooperation with the Border Police of Georgia and the Service Agency (SA) of MoIA or the Revenue Service (RS) of MoF helps SSA to identify beneficiaries who may not be eligible anymore to be retained in the social assistance database. If a beneficiary registers a car or crosses the state border and does not return within six months, then SSA has the obligation to double check the status of the beneficiary. Likewise, if a beneficiary starts receiving income and this income is reflected in the RS database, SSA has an obligation to take respective measures and make the appropriate changes in the social assistance database (Interview, 2019).

SSA management seems to be rather confident in having enough operational capacity to satisfy the need of the ministry to produce statistical analyses. It has enough personnel especially in ICT to gather, process and respond to requests from the various departments at the ministry. SSA does not consider an additional layer necessary that could produce analysis at the ministerial level and does not seem comfortable sharing access to its data with third parties in the ministry.

However, the user experience seems to contradict this assessment by the SSA management. The research showed that the social department or labour and employment department would welcome more in-depth analysis to design their respective policies. In particular, they would like to be able to analyze the impact of SSA implemented programs on beneficiaries. It is evident that this would require an in-depth analysis based on comprehensive research that is missing in the system. Indeed, SSA does not claim that it produces in depth analysis. It is very explicit about producing statistical analysis that needs to be coupled with in-depth research to make robust judgements.

Interestingly, UNICEF assisted the ministry to create an electronic database at SSA to effectively manage data on children care related programs. The data includes type of program, type of services children receive and information about program dynamics in terms of how and when children move from service to service or leave the program altogether. The data can also be linked to financial allocations. This should be a tremendous source for the social department to produce in-depth analytics. However, it seems that the social department has difficulties in

³⁹ SSA's territorial offices retrieved from http://ssa.gov.ge/index.php?lang_id=GEO&sec_id=18

⁴⁰ SSA's statistic reporting retrieved from http://ssa.gov.ge/index.php?lang_id=GEO&sec_id=610

developing policies and programs based on this data. SSA can deliver data when requested, but it seems that SSA personnel struggles to extract relevant data timely and easily. Another challenge is related to the lack of instruments that can link data to produce in-depth and multiangle analysis.

A similar picture occurs when looking at the database on violence against children. SSA and A-TIP Fund is said to hold information on the type of violence, the response and percentage of cases that are ranked as violence against children, etc. But again, when it comes to generating this data for analytical purposes, SSA seems to have difficulties. Usually, data is provided in simple, non-technical formats like a word file that is difficult to manipulate further and there is no system within SSA or A-TIP Fund that could generate data according to parameters identified in advance. The lack of instruments in data generation and analysis thus also hinders this area of activity. Nonetheless, although in some cases SSA's databases require improvement and better structuring, they are a major source for any department to analyze cross institutional trends, to implement better program evaluation approaches and to identify strategic directions of the ministry.

Surprisingly, even though the SSA ICT unit holds massive data, it does not have direct access to the data produced by SSA's front office which shows a number of services that are immediately processed between front office and citizens. When a potential beneficiary approaches the SSA front office, the data of a beneficiary request is registered in the electronic document turnover program; the so called e-Doc (DESI in Georgian). This is a universal e-Doc program nationwide for all service providers and it is technically supported by NAPR under MoJ. Hence, NAPR has instant data nationwide on how many requests come from citizens from various service delivery points. SSA's ICT can theoretically sort out the data by identifying a respective theme if requested, however, it may struggle in having instant data immediately available on how many citizens were served hourly, daily or weekly.

SSA's database does not seem to have a robust analytical capacity for two main reasons. Firstly, there is a lack of indicators. Without clear indicators identified by the respective departments the data produced by SSA amounts to mere statistical data that would require further processing. Secondly, there is a lack of analytical instruments. An analytical instrument would link data to indicators across the thematic fields and eventually allow a department to see trends and directions in a thematic field. For instance, the DevExpress analytical instruments used by ERCC could be one of the tools for SSA to look at.

13.3. Analytical Capacity at A-TIP Fund

The ATIP Fund is yet another major player in generating data on victims of trafficking, victims of domestic violence, victims of sexual violence as well as provides data on elderly care, persons with disabilities and children with disabilities or without care. The fund operates several shelters for trafficking victims and victims of domestic violence, boarding houses for the elderly and PwD. It also offers housing services to beneficiaries.

ATIP functions and responsibilities are defined by the 2014 statute # 146⁴¹ to provide various services to an extremely vulnerable and sensitive group of beneficiaries. The fund offers a myriad of services, including legal services like protection of legitimate interests for victims of trafficking and for victims of domestic or non-domestic violence, victims of sexual violence. It also provides psycho-social rehabilitation and medical services, and helps victims reintegrate in the society. Shelter services for beneficiaries include temporary or long-term housing, food, basic hygiene, translation, healthcare etc.

The fund is tasked to create conditions that are close to a family environment for the elderly, PwDs and for deprived children, and to ensure that the beneficiaries have day care services, nutrition, primary healthcare services, rehabilitation, etc. To provide these services the fund relies on the capacity of its personnel who are experts in social integration, psychological assistance, medical support and legal assistance, or cooperates with other agencies under the ministry to implement the services. The fund closely cooperates with SSA in terms of operational management as well as in terms of regular data exchange. SSA's social workers play a crucial role in the initial identification of potential victims and referring them to the ATIP fund shelters or houses. Likewise, the fund closely interacts with MoIA to exchange information on potential victims and availability of places in shelters.

To monitor the quality of services and whether they meet the standards identified by the ministry, the monitoring and evaluation division within the fund regularly visits the respective institutions and assesses the various services. At least twice a year, if not more, the division sends inspectors and reports the findings. The monitoring reports allow the fund to track the overall state of services.

In addition to this routine monitoring reporting, more specific reports are developed. For instance, there are specific reports on PwD conditions, on conditions in shelters, etc. These specific or thematic reports help the fund management to identify specific issues and to engage with the social department at the ministry to design new services if required. In 2018, the fund identified that juveniles had the tendency to end up in shelters frequently. One year later, in 2019, the fund observed that the numbers of beneficiaries with psychological issues approaching institutions had risen. The assessment team identified various statistical data produced by the fund that shows the number of citizens reaching the fund for specific services, like trafficking victim shelters⁴², boarding houses for PwD children⁴³, etc. However, no reports with analytical insights were found.

Moreover, when discussing the information exchange and analytical work with SSA or with the analytical division at the ministry, it was revealed that the data is usually in excel format. The ATIP fund makes updates in the database by hand and there is no interlinked system in place that

⁴¹ ATIP Fund, statute 146, 2014, retrieved from http://atipfund.gov.ge/res/docs/fondis_debuleba_2017.pdf

⁴² ATIP Fund, statistics on trafficking victim requests at shelters, 2010-2019, retrieved from <http://atipfund.gov.ge/res/docs/trefikingis-statistika-2019-IIIkv.pdf>

⁴³ ATIP Fund, statistics on boarding houses for PwD children, 2011 – 2018, retrieved from <http://atipfund.gov.ge/res/docs/shshmp-pansionatebis-statistika-2018.pdf>

would allow to track data in an automatic or online regime. Likewise, the ATIP fund management has not had substantial interactions with the analytical division in the past.

Although, the ATIP fund produces general monitoring reports as well as individual reports to track the needs of individual beneficiaries, its engagement in policy making remains rather unstructured. The assessment has not been able to identify any institutionally accepted program design framework that would help the ATIP Fund to position itself in the policy and program planning process. When an issue is identified, the planning process to solve the issue seems to have an ad-hoc character and largely depends on personalities, rather than on an established institutionally standardized process.

In contrast to other agencies, the ATIP Fund has an ongoing institutional capacity strengthening process in place. This helped the fund to identify a list of actions⁴⁴ to better realize and think through the challenges in anti-trafficking programs in 2019 – 2020 and to respond to them in an institutionally structured manner. The fund works with the USAID HICD2020 project to develop an organizational quality framework and to identify key performance indicators to build future programing with the organizational performance in mind.

⁴⁴ ATIP Fund, anti-trafficking action plan 2019-2020, retrieved from http://atipfund.gov.ge/res/docs/trefikingi_samoqmedo_gegma_2019-2020.pdf

14. Synthesis for Discussion of Analytical Capacity

The analytical culture in the public administration and management system in Georgia is often viewed as a world of chaotic processes and procedures with low human and institutional capacity, full of low-quality databases and unstructured information flows. The above analysis of key actors and institutions shows that it is much more nuanced and complex than is generally considered from the outside. On the one hand, GoG has had very real reform achievements, and these reforms are positively perceived by citizens. On the other hand, there are agencies which directly interact with citizens and deliver highly sensitive public services that citizens are less satisfied with.

The Georgian experience shows that citizens positively assess the services delivered by service delivery agencies under MoJ, MoF and MoIA. This achievement was possible thanks to a strong and transitional leadership coupled with knowledgeable expertise and strong analytical capacity as the main driving force for these reforms. The main processes were supported by uninterrupted financial and human resources to make the process sustainable and functional. MoIDPOTLHSA should embark on a similar path for an impactful institutional transformation. The improvement of an analytical capacity would be one strong step towards optimizing program and project management as well as information flow systems to effectively monitor and evaluate the impact that these programs have on society. This will also help the ministry to introduce basic standards of quality management across its massive organisational structure and to change citizens' perception about the services they regularly receive.

The assessment looked at various actors and institutions and observed that often there are substantial positive developments in terms of willingness to strengthen and improve analytical capacity both at agency as well as ministerial levels. Simultaneously, there are concerns expressed by actors and institutions not to create a layer that could hamper the existing process flow and become an additional burden for the thematic departments or subordinated agencies. All of them agree that an analytical department, division or unit in support of improving existing processes would be beneficial not only for the ministry but also for political actors.

The assessment framework structures analysis around six elements of analytical capacity:

- **Management and legal structure of the division;**
- **Financial management system;**
- **Administrative and procedural aspects of the operational capacity of the division;**
- **Human resources;**
- **ICT aspects in the design and production of products of the division;**
- **Performance management sustainability and their compliance with strategic management.**

There are many general and specific aspects of the analytical system that should be improved, or where change is in some ways derivative of other changes.

In terms of **management and legal structure** of the division, the assessment first considers how the analytical capacity is structured from a management perspective. The analytical capacity is

embedded in the Analysis, Human Resources and International Relations department as well as in the thematic departments, like, health, social and labour and employment departments. There is rarely a standalone division responsible for producing analytics in respective thematic area. Instead, analytical capacity in the thematic departments is part of a general departmental management structure. Usually, there are one or two staff members in each thematic department responsible for posting requests to subordinate agencies to provide statistical data and analysis. The information provided is largely directly processed without further scrutiny.

The analytical capacity in the thematic departments is largely limited to routinely processing the information provided by sub agencies. A random exception is the health department as it is tasked to produce NHA and NHR. These reports require data from various sources that needs to be scrutinized additionally by the department. The health department also benefits from the strong analytical capacity of its subordinate agencies compared to other thematic departments. Sub-agencies like NCDC and ERCC have a strong analytical capacity in terms of data processing, information analysis, trend observations and reporting. They have dedicated analytical units, well-structured databases and the necessary ICT instruments to timely and effectively supply analytical products to the health department. Yet, their capacity is still limited as they can only supply analytics for their respective fields and cannot cover the large gamut of programs that the health department designs.

In the Analysis, Human Resources and International Relations department, the analytical capacity is presented in the form of a division that comprises a head of division and two specialists. This management structure is too simple and straightforward in terms of management capacity and operational capability to respond to the scale of analysis the ministry requires.

The analytical division largely has expertise in IDP related programs, though even in this field its capacity is limited. It cannot engage in in-depth research due to financial and human limitations and only performs surveys when requested. The division has unlimited access to the IDP database and it uses this data in conjunction with survey data to produce analysis. It has no access to any other database in the ministry or in subordinate agencies. Even if access were to be granted, the limited management and human capacity would make it unlikely that it will be able to effectively operate and produce better results.

Legal modalities define the responsibilities and functions of the analytical division at the ministry. It is tasked to collect data related to the activities of the entire ministry, analyze and process statistical data and systematize, design and conduct all types of research, develop research reports, draw analytical briefs, participate in the analysis of the business processes of the ministry and sub-agencies, and participate in the monitoring and evaluation processes of projects, etc. The law grants a broad mandate to the analytical division to do not only analytical reporting but also to be active in strengthening the organizational capacity of the entire ministerial system. The reality, however, differs from what is stipulated by law. After the merger of the two ministries, the analytical division has not even had the possibility to organize curtesy meetings in the ministry or sub agencies, nor was it able to continuously engage with colleagues on substantial matters.

In terms of **finance management system**, there does not seem to be a sustainable and predictable financial system at the analytical division in the ministry. The budget is limited to staff costs only and there is no standalone budgetary line for analytical work to allow the analytical division to plan interventions as requires by law. Hence, the division does not have financial means to operationalize its functions.

While the assessment revealed that sometimes a very small budget is granted to conduct telephone surveys for instance, the division has no financial means to hire an external research consultant or otherwise outsource activities to a third party. The donor community usually conducts this type of work, and the division eagerly participates in their research as it lacks the capacity to launch substantial research of its own. Therefore, the operational capacity of the analytical division is reactionary rather than pre-planned on an annual or semi-annual basis.

The situation is not very different at the thematic departments. Only exception may be the health department. For instance, the assessment observed that the health department tries to plan analytical work in cooperation with the logistical department of the ministry. The department tries to annually anticipate and predict possible program evaluation needs and attempts to include financial means in the budget. Still, the departments are less effective in outsourcing the research and evaluation needs vis-à-vis subordinate agencies. The law does not give the departments the flexibility to rapidly launch research as required even it is planned preliminarily. Hence, whenever the analytical research is expected to be outsourced, sub-agencies respond more effectively to the need if at all.

Overall, the assessment noted that one of the reasons for not being able to have predictable finances for research and evaluation purposes is a lack of established and institutionalized procedures and processes for planning.

The assessment observed that there is hardly a standardized **administrative and procedural** framework at the analytical division to know at what stage the division has an obligation to intervene in the policy design and program implementation for instance, to plan for continuous data collection and to perform an evaluation if required. There does not seem to be a standardized program and project planning roadmap/framework to distinguish policy design from policy, program and project implementation levels and to show at which stage the analytical division is expected to acquire administrative support and plan an intervention in the process. A cycle of quality management that would allow the division to realize its functional strength within the ministry seems to be missing. The lack of firmly established procedures hinders both the division and the department to anticipate analytical needs and to link them to financial means.

One of the most painful challenges for the analytical capacity is **human resources**. The analytical capacity both at division as well as at department level suffers from a severe lack of human capacity. The issue is multifaceted and does not include only the financial dimension. Even though paying competitive salary is extremely important, it is not the only reason for the high turnover of personnel with analytical skills. An adequate distribution of functions among personnel as well as the perception that they can grow as professionals at the analytical division is salient for strengthening the analytical capacity.

The assessment observed that those subordinate agencies that offer competitive salary schemes to their personnel are less likely to have high turnover of their personnel in analytical units or divisions. It has been observed as well that those agencies focus on recruiting young researchers who have capacity to grow in the system. It has been revealed that some agencies encourage their analytical staff to seek for better education opportunities. They are offered continuous education possibilities nationally as well as internationally. Should they receive a grant for international courses, they have the obligation to return back after graduation and continue working in the organization. The analytical division may possibly explore HR approaches at NCDC and ERCC and replicate them should they be considered sustainable and effective.

ICT aspects in analytical capacities are relatively strong at sub-agencies level and almost non-existent at the analytical division level. Although, personnel at the analytical division operates a variety of statistical software that require certain ICT knowledge to process data, the division does not have the knowledge and expert capacity to offer improvement in data management system.

The biggest challenge for ICT infrastructure is the structural dimension of the database within subordinate agencies. It seems that the database architecture is not standardized across the ministry. Hence, it is difficult or almost impossible for databases to interact with each other automatically. Although, NCDC, ERCC and SSA databases operability are in better shape, still, SSA's WorkNet and TSA databases cannot interact automatically with each other if they decide to do so. Likewise, the IDP and eco-migrant database cannot interact with other databases in the system. Similarly, it has been observed that DA's database is not structured in a manner to allow automatic data processing and analysis. The challenges with databases directly reflect on the work of personnel who are tasked to process and prepare data and analytical materials. The time and effort these people spend daily on data processing could be improved significantly by launching a system interoperability capacity building process.

The assessment observed that not only the database structure but also data maintenance seems to be an issue in the ministry. There is not enough server capacity to retain and maintain the massive amount of information that system generates daily. The ministry appears to respond to this issue by updating the existing infrastructure and by creating back-up infrastructure to make the information flow more secure and reliable.

Still, it has been observed that certain agencies keep paper-based archives. Should these archives be digitized they can be used for better policy planning and analysis. Today, these data are used rarely to avoid an ineffective use of human and time resources.

Performance management sustainability and their compliance with strategic management is linked with the institution's capacity to identify its core strategic directions, align them with the organization's mission and vision and to satisfy expectations of external stakeholders. However, it appears that the ministry does not have a document that would help the analytical division for instance to align its work with the ministry's strategic objective or with the strategic objectives of thematic departments.

The law grants the analytical division the right to conduct the required in-depth research and to develop interdisciplinary analysis at the ministerial as well as sub-agency level to know the “heartbeat” of the system. However, today the analytical division cannot afford engaging in this type of in-depth analysis. It has neither human nor financial or knowledge capacity.

15. Recommendations

The recommendations presented below intend to build on the strengths described in the report and redress the weaknesses of the system. They also take into consideration the fact that the ministry recently reorganized the institutional structure and established an Information Technology and Analytics (ITA) Department.

Each of the suggestions presented is the result of a review of the documents provided and data analysis acquired independently by the experts through semi-structured interviews. As such they are subject to further discussion. Ultimately, the choices for strengthening the analytical capacity must be made by senior management, including operations and procedures in the ministry. The experts are happy to help clarify or further elaborate the justification for these recommendations at any time.

The Information Technology and Analytics Department should play a major role in helping the ministry understand the big, strategic picture of the system and produce analytics based on the information flow and knowledge derived from thematic division under the Policy Department. Nonetheless, it is still important for the thematic divisions to maintain a thematic or program specific analytical function to effectively and targetly implement policies and programs. Harmonious cooperation between ITA and other departments and sub-agencies would be crucial to produce evidence based analytical products effectively as well as to design and implement program evaluation activities.

The recommendations for the Information Technology and Analytics Department are developed around five parameters: **leadership, strategy and planning, personnel, partnerships and resources, and processes**. The criteria for each of these parameters aim at setting a robust and sustainable structure for the department to perform its interdisciplinary function within the ministry.

- **Leadership** ensures that the department has a clear mission, vision and core values beyond the legally elaborated mandate to provide direction and purpose for the Information Technology and Analytics Department. Leadership ascertains that the department has its own values that shows its behavior vis-à-vis other departments within the ministerial eco-system and helps to guarantee its long-term success.

To manage ITA's organization, performance and continuous improvement, the leadership ensures an appropriate organizational structure with clear responsibilities for all levels of staff. It also defines management, support and core processes that guarantee the efficient realization of the department's strategy for outputs and outcomes.

The performance management of ITA should be based on defined measurable targets reflecting outputs and outcomes of the department's activities. ITA's integrated performance management system should match outputs and outcomes with resources to enable guidance based on rational evidence. For instance, the leadership should define measurable output and outcome targets for all levels and areas of the department in order to balance the needs and expectations of different stakeholders; be they other departments or external actors.

The leadership is responsible for improving the performance of the department and to prepare for the future by adapting to changes in order to deliver ITA's mission. They need to set the ground for continuous improvement by ensuring an open culture for innovation and learning at ITA. For instance, the leadership is committed to continuous organizational improvement and innovation by promoting a culture that encourages feedback from employees and transparently communicates the reasons for change initiatives and their expected effects to employees and relevant stakeholders.

The leadership should develop a stakeholder analysis, define current and future priority needs and share these findings within the ministry to manage effective relationships with the political authority and other departments. They need to work with political authority in defining the public policies in cooperation with thematic divisions under the Policy Department.

The ITA leadership should assist the respective department in identifying and incorporating the public policies relevant to the ministry and ensure that objectives and goals on output and outcome are aligned with the public policies and political decisions. Moreover, ITA should work with the thematic divisions under the Policy Department to conclude agreements with the political authority on the related resources required. ITA's leadership should develop products and services that focus on other departments and thematic divisions and build and raise the awareness, reputation and recognition of the department and its services.

The leadership may want to consider adding several divisions to the department, including a division for statistics and data management, a division for research and analysis focused on thematic areas and program evaluation, a division for economic analysis (or adding a thematic knowledge personnel to the Financial-Economic Department to assist ITA in performing economic analysis), a division for quality management and a division for ICT management. These divisions would be expected to work in close cooperation with each other and have knowledge of the thematic directions of the ministry

- In order to design robust **strategy and planning** capacity, ITA should start gathering reliable information on the present and future needs of thematic divisions under the Policy Department, on outputs and outcomes and developments in the external environment. This information is indispensable to support ITA's strategic and operational planning process. It is also fundamental to steer planned improvements in ITA's performance.

To gather information on present and future needs of the thematic divisions, ITA is expected to conduct regular reviews jointly with the thematic divisions to monitor their changing needs and their satisfaction. The quality of this information and systematic analysis of feedback from divisions is a prerequisite for the quality of the intended results. For instance, it should regularly gather, analyze and review relevant information

about important political, socio-cultural, economic, technological variables in IDP and ecomigrants, health, social, labour and employment policies and developments.

To develop ITA's strategy and planning capacity taking into account the gathered information, ITA is expected to define strategic objectives for the department that are aligned with the respective policies, the needs of the thematic divisions and the vision of the leaders, including the available management information as well as information on developments in the external environment.

For effective planning ITA is expected to methodically guide its divisions at all levels to achieve the strategic goals. The setting of goals and identifying of conditions that must be fulfilled to achieve strategic goals play a crucial part in ensuring effective implementation and follow up. Indicators and result-monitoring systems used in the subsequent execution phase should be defined during the planning.

- Talented **personnel** and reliable and continuous talent management are a prerequisite for the department to become an effective player in the ministerial eco-system, to develop robust strategy and planning capacity and to have the impact on changes in policies. Personnel would be the department's biggest investment. Therefore, effective human resource management and leadership would allow ITA to accomplish its strategic objectives by fully leveraging the strengths of personnel.

To plan, manage and improve human resources with regards to strategy and planning, it is important for ITA to align its strategic objectives with its human resources so that they are identified, developed, deployed and improved transparently and taken into account to achieve optimum success. The department needs to attract and retain people capable of producing and delivering services and products in accordance with the objectives established by its strategies and action plans taking into account other departments' needs and expectations.

To identify, develop and effectively use the competencies of personnel, ITA is advised to consider developing a personnel management framework that allows people continually develop their own competencies, assume greater responsibility and take more initiative. ITA is expected to identify the current requirements for recruiting competent people and to develop individual plans for knowledge and skills development and systematically compare them with the needs of the department. Discussing, establishing and communicating a strategy for developing competencies includes a training plan based on current and future institutional and individual competency needs.

The leadership may take into consideration the more specific suggestions below to strengthen ITA's strategy and planning and realign it with the overall strategic vision of the ministry. The divisions under the tentative organizational structure of the department presented above can be strengthened through recruiting the following personnel:

The statistics and data management division consists of one head and three specialists capable of designing data management approaches and collection methodologies,

developing statistical modeling and operating statistical software and understanding the meaning of the results received through statistical processing. They are capable of processing data in various regression methodologies, including least square regression, partial least squares-structural equation modeling, methods for distributional modeling, etc.

The research and analysis division consists of one head and three specialists. The specialists have specific knowledge in thematic areas, including health, social, labour and employment as well as IDP and eco-migration. The latter is a crosscutting theme that equally touches upon the other three areas. The specialists in the respective thematic areas are tasked to coordinate their research and evaluation with the statisticians and economists to produce in-depth analysis of programs and projects in their areas of responsibility. The specialists are expected to supplement statistical work with qualitative research and program evaluations to produce mixed-methodology analysis and to be able to track the long-term impact of the selected programs and projects. They are capable of planning and conducting case studies, comparative research and research with a relatively small sample size as well as evaluating programs. Specialists should be familiar and be able to use qualitative software like Atlas⁴⁵ or Nvivo⁴⁶, etc.

The economic analysis division consists of one head and three specialists. The specialist are experts in health economics, economics of labor and employment market and are capable of performing productivity, cost effectiveness or defectiveness analysis planning and implementation. They must be able to easily use statistical software to track and conduct an institutional or program budget performance analysis. Another model for this structure would be to strengthen the Financial-Economic Department by hiring specialized personnel or incorporating these functions under the thematic divisions of the Policy Department. (Just like the social policy division may have a welfare economist, the health division may have a health economist and the labor and employment division may recruit a specialized economist). However, it should be clearly defined that they must have a supporting role for ITA to perform its functions effectively.

The quality management division consists of one head and five specialists. Two specialists are public management experts, two specialists are lawyers and one specialist focuses on environmental impact assessment component.

Public management specialist are guiding the ministry in improving quality management and are tasked to focus on introducing the total quality instrument at the ministry as well as at sub-agency levels whenever required. They are capable of designing and implementing organizational or departmental assessments, guiding customer satisfaction surveys and developing and streamlining a customer feedback collection mechanism. They can initiate staff satisfaction surveys in cooperation with HR as well as help the ministry in identifying Key Performance Indicators for the ministry.

⁴⁵ Atlasti is a qualitative data analysis software - <https://atlasti.com/>

⁴⁶ NVivo is a qualitative and mixed-methods data analysis software - <https://www.qsrinternational.com/nvivo/home>

They can perform an administrative burden reduction analysis, identify actors and beneficiaries, identify potential risks, advise on program planning and implementation and data collection and indicator identification to thematic divisions. The specialist should be capable of operating a process simulation software like Simul8⁴⁷, Arenasimulation⁴⁸, etc. to predict for instance citizen flow in service delivery point of the ministry or simulate social agent and social workers interaction intensity with citizens. This will help the department to anticipate potential challenges that various programs may face in the implementation process and help to better analyze the effectiveness in the system.

Lawyers should be able to perform RIA and be able to produce comparative analysis derived from international experience of particular programs. The specialist responsible for an environmental impact assessment is responsible for working with other department to raise awareness on environmental risk assessments, producing specially designed forms for other thematic departments to be able to fill in environmental related risks prior to launching program implementation and upon necessity to perform environmental impact assessment for a program and produces respective recommendations.

The ICT division has one head, four IT specialists and a data visualization expert. Two specialists are software developers and two are database managers. They closely work with the quality management division and statisticians at ministerial as well as at sub-agency level to improve system interoperability by streamlining database structure and management as well as designing internal software to allow easy access and automatic processing of data for better and clear analysis. The data visualization specialist works with the data and helps the thematic department to deliver products in a simple and clearly understandable format to the respective audience. The specialist is familiar with data visualization methodologies and software like Vosviewer⁴⁹, Tableau⁵⁰, Sci2⁵¹, etc.

ITA is advised to invest in continuous education for its own personnel and to also introduce short and medium-term courses for personnel at thematic divisions. The department may work with HR and other thematic divisions to develop a standardized training course package for its own department as well as to facilitate the establishment of a channel for continuous education for thematic divisions. For instance, the department can work with ISET to have an econometrics or statistical analysis course developed for the ministry. Likewise, the department can create a database for international courses in thematic areas and share this knowledge with thematic divisions to allow their personnel to participate.

⁴⁷ Simul8 is an intuitive visual simulation software to analyze processes - <https://www.simul8.com/>

⁴⁸ Arenasimulation is a process simulation instrument - <https://www.arenasimulation.com/>

⁴⁹ VOSviewer is a software tool for constructing and visualizing bibliometric networks - <https://www.vosviewer.com/>

⁵⁰ Tableau is a visualization and business analytics software - <https://www.tableau.com/>

⁵¹ Science of Science (Sci2) Tool is a modular toolset specifically designed for supporting the temporal, geospatial, topical, and network analysis and visualization of scholarly datasets at the micro (individual), meso (local), and macro (global) levels - <https://sci2.cns.iu.edu/user/index.php>

Heads of division at the department should be able to present their research findings and results at national and international conferences to share the success of the health, social or labour programs internationally and bring back new instruments and methodologies to further advance and mature the system.

- In order to effectively achieve its strategic objectives and operate continuously ITA needs to identify **partnerships and resources** of different kinds. Partnerships stimulate the external as well as internal focus of the department and bring in necessary expertise. They can be of a material and immaterial nature, but they all have to be managed carefully. While traditional resources like finances, knowledge, technology, facilities assure ITA's effective functioning. To succeed in public policy analysis in a specific thematic domain, the collaboration between departments within the ministry but also between ITA and other units in different institutions could be crucial. ITA should define the sector networks or policy chain it belongs to and the role it plays to assure the success of the whole network.

ITA is expected to identify private, civil society and public key partners, and the nature of the relationship (e.g. purchaser - provider, supplier, co-production, etc.) and to develop and manage appropriate partnership agreements taking into account the different aspects of responsibility and impact of the delivered products and services. ITA can also stimulate and organize task-specific partnerships and develop and implement joint projects with other public sector organizations belonging to the same policy sector and to different institutional levels. It also should regularly monitor and evaluate the implementation and results of partnerships.

The scale of operation of each thematic division is so large and complex that ITA should have a partnership database of subject matter experts as well as be able to recruit them for short-term assignments on demand. For instance, when the state discussed a reform in psychiatry, a clearly overlapping theme that encompasses health and social aspects equally cannot be implemented without having an expertise from the field of psychology. Likewise, when looking at reform in homelessness nationwide, one inevitably touches social, urban and human rights issues equally. The department will not be able to have expertise in all and therefore there should be the possibility to navigate in this complex network of interest and operational challenges by involving external expertise when required.

In parallel, the department should attempt to reach out to international experts in health, social and labour policy who have a Georgian background. Today, there are a number of Georgians working in international universities or scientific institutions that are capable of providing help to the ministry to design and implement policy and programs. ITA can establish partnership channels of formal communication and seek for advice prior to launching a program or project. The ministry will only benefit from this kind of cooperation as it will acquire important knowledge and expertise as well as increase the confidence in policy and program design. Likewise, they will serve as ambassadors of the

ministry on the international scene and help to keep track of international trends and directions.

To develop partnerships with citizens/customers, ITA may consider working with respective departments at the ministry as well as with the departments at subordinated agencies to identify partnership channels and instruments to adjust to the varying roles citizens/customers have vis-à-vis the ministry. The involvement of citizens/customers is increasingly seen as a necessary lever for improving the efficiency and effectiveness of public organizations. Their feedback by way of complaints, ideas and suggestions is regarded as important input towards improving services and products the department and the ministry delivers. For example, ITA may initiate a process to define the framework to actively seek ideas, suggestions and complaints of citizens/customers, collecting them by appropriate means (e.g. surveys, consultation groups, questionnaires, complaints boxes, opinion polls, etc.) and establish mechanism to analyze and exploit this information, and to disseminate the results.

The ability of ITA to generate additional financial resources may be limited as may be its freedom to allocate or reallocate its funds to the services it wishes to deliver. Although departments often have little say in resource allocation, carefully preparing the budgets, preferably together with the Finance-Economic Department and the Policy Department, is the first step in cost effective, sustainable and accountable financial management. ITA should have its own operational budget to operate and to implement its mandate. Usually, staff remuneration aside, this type of department needs a budget to initiate assistance to other departments, conduct research and outsource evaluation services when considered necessary. The scale of the ministry is so large and complex that a single department will not be able to respond to existing demands without an operational budget beyond staff costs – even with superbly powerful personnel and skills. Hence, it is important to have an annual budget dedicated to the activities of the department. Experience shows that depending on the size and scale of the organization it is recommended for the department to allocate on average from 0,5 to 3% from the total annual budget of the organization to operate smoothly and effectively.

ITA should identify its own information and knowledge requirements for reaching the strategic goals and preparing for the future. This necessary knowledge and information should enter the department in a systematic way, be shared with all the staff who need it and remain in the department when people leave. Employees should have prompt access to the appropriate information and knowledge they need to do their job effectively. ITA should also ensure that it shares critical information and knowledge with thematic divisions according to their needs.

ITA should ensure that ICT and other technological approaches support the strategic and operational goals of the department in a sustainable way. When managed strategically they can be important levers for the improvement of the performance of the department itself and other thematic divisions. To make sure that key processes are improved in the ministry, ITA should work with other departments and sub-agencies to introduce the appropriate technologies in an appropriate manner. In service provision, e-services can

render services more accessible for the customers and considerably lessen their administrative burden. Within the ministerial eco-system smart ICT solutions similar to allowing smooth interaction among various databases may allow for more efficient use of resources and information.

For ITA to produce analytics robustly and easily, it may consider launching an interoperability capacity assessment in the ministry's eco-system to identify what prevents the databases from interacting with each other. ITA may focus on the Georgian Interoperability Framework⁵² commissioned by Data Exchange Agency (DEA) under MoJ in 2017, and based on this document conduct an interoperability check of the system to strengthen e-governance in the ministry.

To manage facilities ITA is advised to evaluate at regular intervals the state of the infrastructure and instruments it has at the disposal. The infrastructure and instruments available need to be managed in an efficient, cost effective and sustainable way so that they serve the needs of the thematic divisions and support the working conditions of the staff. For instance, ITA should ensure that the staff has a proper daily infrastructure in place as well as the legal analytical software/tools to work with and operate uninterrupted.

- In order for ITA to operate effectively and efficiently, it is necessary to develop **processes** within the department. Each process should be an organized set of inter-related activities that transform resources or inputs in an efficient way into services, i.e. outputs and impact on the ministry and society outcomes.

ITA is expected to develop three types of processes that have high quality interaction with each other and have the following distinctive characteristics: core processes help ITA to realize the mission and strategy of the department and thus are critical to the delivery of products or services; management processes support ITA in steering the department; and support processes ensure the delivery of the necessary resources.

The assessment revealed that there is an issue in designing policy, programs and projects processes in a standardized manner across thematic divisions and at sub-agency level. It is difficult to find a logically created roadmap that would allow the ministry to easily track each step of the policy, program and project planning, implementation, monitoring and evaluation. Moreover, there is an issue of assigning objectively verifiable indicators to various levels of the project implementation.

ITA should work to streamline this process to make it more predictable and manageable. Standardization of all stages of policy and program design and program implementation prevent the ministry from having uncertainties while performing monitoring and evaluation. Annex I of this document serves as a conceptual roadmap (annex I) for the ministry to consider and analyze the proposed system and to try to create its own based on the existing management structure. The conceptual roadmap is a starting point and

⁵² Georgian Interoperability Framework, Twinning project: GE/21, "support to strengthening of E-governance in Georgia II", 2017

shows what documents or actions should be taken to identify financial obligations, risk assessment, indicator elaboration, scope of work elaboration and proposes data collection stages and evaluation stage, etc. The roadmap is a guiding instrument to link policy design with policy implementation, data collection and analysis.

To conclude, it is important for the Information Technology and Analytics Department to realize that the main objective for improving the analytical capacity is to strengthen quality management in the entire system of the ministry. There are at least two sub-agencies that have managed to concentrate and embed quality management in their organizational system. The assessment observed that the operational capacity of NCDC and ERCC is far more advanced compared to other agencies or to the ministry itself. They managed to achieve this by introducing quality standards in organizational management, data management and processes planning.

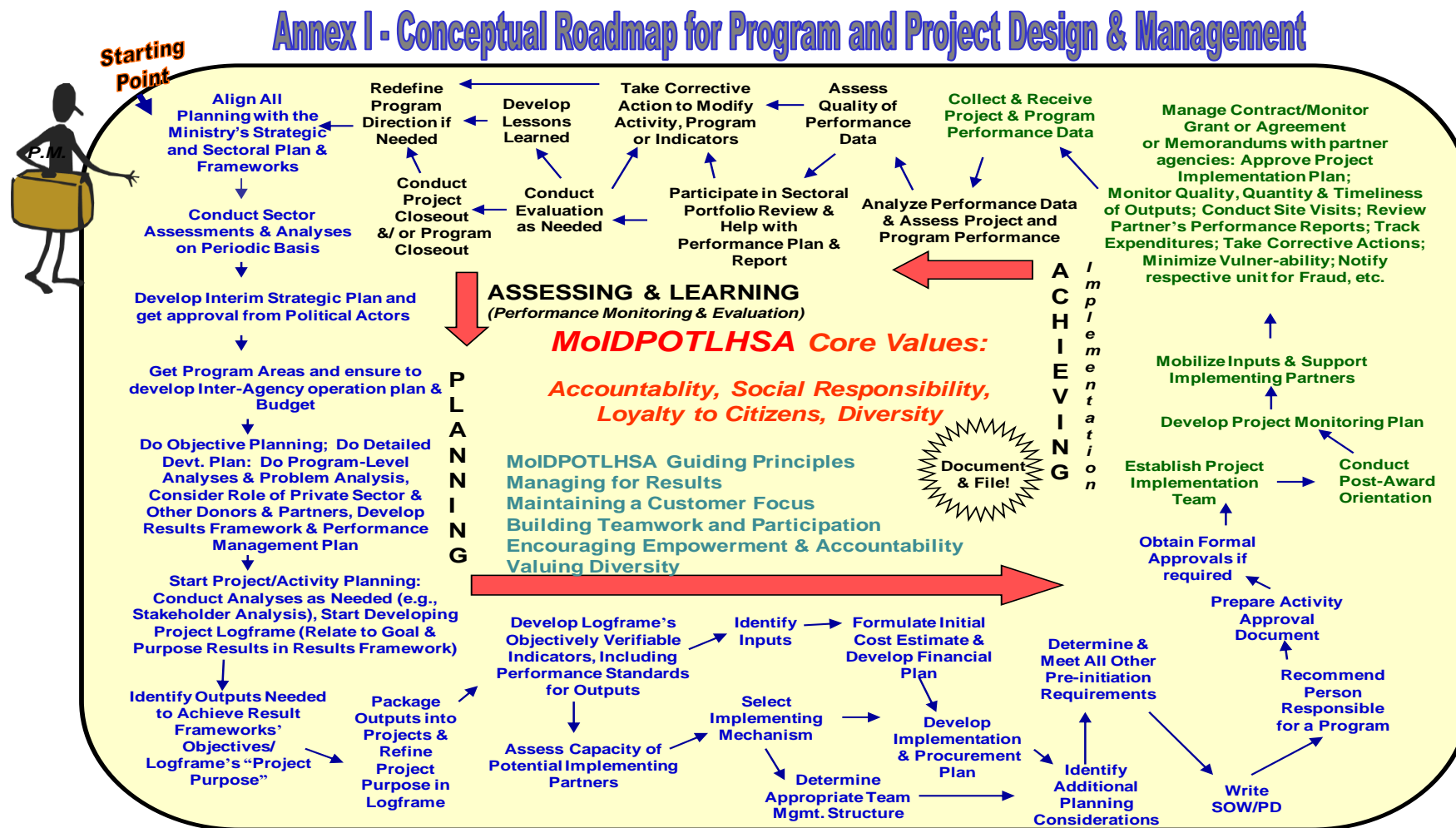
The department should initiate and start broadening quality management and program evaluation standards in health and social areas. Particular focus should be given to hospitals and ambulatories as well as to SSA programs and regional bureaus. A large number of citizens interact with the system via these entry points and their perception about the system may not be as favorable when compared to other ministries.

Exploring the Spital Benchmark⁵³ as a quality instrument for public or private hospitals, rehabilitation, psychiatry, retirement or care facilities would be a good start. The instrument allows systematic comparison of costs, documents and communicates the effectiveness, efficiency and quality management. It can also be used as an exchange platform among professionals to share views on current issues, solutions and experiences in international context.

Likewise, to improve the customer side of SSA regional bureaus, the department may look at the experience of Justice House of MoJ and model service delivery system accordingly. Clearly distinguishing back office operations and functions from those ones of front office can help the ministry to streamline front office capacity to become more citizen oriented. Similarly, it would be beneficial to raise the customer service side of social workers and social agents with clear mind that their need to concentrate more on the empathetic side of relationship with citizens and express constant readiness to serve their interest.

⁵³ Spital Benchmark is a quality management instrument for hospitals, rehabilitation centers, psychiatry etc. used in Switzerland, retrieved from <https://www.it-benchmark.ch/index.html>

Annex I – Conceptual Roadmap for Policy, Program and Project Design and Management



Annex II - Proposed Technical Software and Instruments

Atlasti is a qualitative data analysis software - <https://atlasti.com/>

NVivo is a qualitative and mixed-methods data analysis software - <https://www.qsrinternational.com/nvivo/home>

Simul8 is an intuitive visual simulation software to analyze processes - <https://www.simul8.com/>

Arenasimulation is a process simulation instrument - <https://www.arenasimulation.com/>

VOSviewer is a software tool for constructing and visualizing bibliometric networks - <https://www.vosviewer.com/>

Tableau is a visualization and business analytics software - <https://www.tableau.com/>

Science of Science (Sci2) Tool is a modular toolset specifically designed for supporting the temporal, geospatial, topical, and network analysis and visualization of scholarly datasets at the micro (individual), meso (local), and macro (global) levels - <https://sci2.cns.iu.edu/user/index.php>

DevExpress platform - <https://www.devexpress.com/aboutus/>

Bibliography

ATIP Fund, statute 146, 2014, retrieved from

http://atipfund.gov.ge/res/docs/fondis_debuleba_2017.pdf

ATIP Fund, statistics on trafficking victim requests at shelters, 2010-2019, retrieved from

<http://atipfund.gov.ge/res/docs/trefikingis-statistika-2019-IIIkv.pdf>

ATIP Fund, statistics on boarding houses for PwD children, 2011 – 2018, retrieved from

<http://atipfund.gov.ge/res/docs/shshmp-pansionatebis-statistika-2018.pdf>

ATIP Fund, anti-trafficking action plan 2019-2020, retrieved from

http://atipfund.gov.ge/res/docs/trefikingi_samoqmedo_gegma_2019-2020.pdf

Basic Data and Direction 2018-2021, GoG, 2018, retrieved from

<https://mof.ge/images/File/BDD/2018-2021/saboloo/BDD-2018-2021-29.01.2018-saboloo.pdf>

Basic Data and Direction 2019-2022, GoG, 2018, retrieved from <https://mof.ge/5177>

Bloom, D. and Canning, D., The Health and Wealth of Nations, Science 287, 1207 – 1209, 2000

Government Program 2019 – 2020, GoG, 2019, retrieved from

https://cdn2.ipn.ge/media/documents/07-2.388_.pdf

Government Program 2016-2020, GoG, 2016, retrieved from

http://gov.ge/files/68_58446_288262_programa.pdf

Georgian Interoperability Framework, Twinning project: GE/21, “support to strengthening of E-governance in Georgia II”, MoJ, DEA, EU, 2017

Government of Georgia, ordinance N 473, 2018, retrieved from

<https://matsne.gov.ge/ka/document/view/4325651?publication=0>

Government of Georgia, statute 437 on referral mechanism to protect children from violence, 2016, retrieved from <https://matsne.gov.ge/ka/document/view/3394478?publication=0>

HRW report 2019, retrieved from <https://civil.ge/archives/317570>

Krabina, B., Liu, P., Meyerhoff-Nielsen, M., Millard, J., Reichstädter, P., Wimmer, M., A Digital Georgia: e-Georgia Strategy and Action Plan 2014-2018, the Data Exchange Agency under the Ministry of Justice of Georgia, 2014, pg. 34

Labour Market Information System (LMIS), MoESD, 2019, retrieved from www.lmis.gov.ge

Law of Georgia on Medicines and Pharmaceutical Activities, PoG, document 659, article 11, 2009, retrieved from <https://matsne.gov.ge/document/view/29836?publication=25>

National Center for Disease and Control and Public Health, EIDSS, retrieved from

<http://www.ncdc.ge/Pages/User/LetterContent.aspx?ID=c624e6d5-f86f-4ae1-bc80-bc98937bc16b>

National Healthcare Account (NHA) from 2017, retrieved from
<https://www.moh.gov.ge/uploads/files/2019/Failebi/02.05.19-2017-NHA-geo.pdf>

National Health Report 2016-2017, retrieved from
<https://www.moh.gov.ge/uploads/files/2019/Failebi/16.08.2019.pdf>

National Strategy for the Elimination of Hepatitis C 2016-2020, GGI, USAID, 2018

Office of the State Minister, GoG, the new structure of government, 2019, retrieved from
http://www.gov.ge/index.php?lang_id=ENG&sec_id=497&info_id=66743

Public Service Design and Delivery policy, MoJ, 2018.

Statue 473, GoG, September 14, 2018 retrieved from
<https://matsne.gov.ge/ka/document/view/4325651?publication=0>

Statistic reporting, SSA, 2019, retrieved from
http://ssa.gov.ge/index.php?lang_id=GEO&sec_id=610

Spital Benchmark, quality management instrument for hospitals, rehabilitation centers, psychiatry etc. used in Switzerland, retrieved from <https://www.it-benchmark.ch/index.html>

Yuanli, L., Hsiao, W., Rao. K., Medical Spending and Rural Impoverishment in China, Health Policy and Planning, 2003

Working Conditions and Challenges of Social Workers at SSA, Human Rights Education and Monitoring Center (EMC), report, 2017